

STATE OF ALABAMA
DEPARTMENT OF MENTAL HEALTH

RSA UNION BUILDING
100 N. UNION STREET
POST OFFICE BOX 301410
MONTGOMERY, ALABAMA 36130-1410

www.mh.alabama.gov

February 28, 2018

RFP #2018-35

Dear Vendor:

The Alabama Department of Mental Health (ADMH) is soliciting proposals to provide substance use disorder treatment services for **pregnant women and women with dependent children**. The proposals seek to expand **residential treatment services, outpatient treatment services, and ambulatory withdrawal management services**. **If you already receive funding to provide services for pregnant women or women with dependent children you need not apply, unless you are wanting to change the level of care you are currently providing.** Proposals will be accepted until **Friday, March 30, 2018 at 2:00 pm**.

The submission of a proposal does not guarantee the award of a contract. Any contract resulting from the proposal is not effective until it has received all required governmental approvals and signatures. In addition, the selected vendor shall not begin performing work under this contract until notified to do so by the departmental contracting agent.

When submitting a proposal, please read the entire request for proposal document and return your proposal in the requested format. All proposals should be submitted in ink or typed and contain an original signature. Submissions should be delivered to:

AL Department of Mental Health
Office of Contracts & Purchasing
100 North Union Street, Suite 570
Montgomery, AL 36104

MAILING NOTE: Proposals may be sent via Regular US Postal Service (USPS) Mail, Express/Overnight USPS Mail, commercial delivery service such as FedEx or UPS, or hand delivered by the closing date and time. Emailed or faxed responses are **not** accepted. Also, please note: All US Postal mail, including express/overnight mail that is dispatched to any State agency is processed thru the State mail facility before it is forwarded to the appropriate State agency, thus delaying its arrival to the department. **By using the USPS, you assume the risk of delay that may result in your proposal being received late and therefore being determined to be untimely and will not be reviewed.** Postmarks of the date mailed are insufficient; the proposal must actually be received at the listed office by the date and time specified regardless of the delivery service used.

Sincerely,

Joey Kreuter

Joey Kreuter, Director
Office of Contracts & Purchasing

Organization: ALABAMA DEPARTMENT OF MENTAL HEALTH (ADMH)

RFP Closing Date & Time: **Friday, March 30, 2018 at 2:00 pm.**
Review the mailing note.

RFP Contact Info: Leola Rogers
ADMH
Office of Contracts & Purchasing
RSA Union Building
100 North Union Street, Suite 570
Montgomery, AL 36104
Telephone Number (334) 353-7440
Email: leola.rogers@mh.alabama.gov

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ADDITIONAL INFORMATION

1. Who **may not** respond to this RFP? Staffing Agencies, Employees of ADMH, and current state employees.
2. In order to do business in the State of Alabama all businesses domestic and foreign must be registered with the Alabama Secretary of State Office.
*Domestic means within the State of Alabama. **Foreign means out-of-state.
3. If contracted with the State of Alabama, all vendors must:
*Enroll in E-Verify System thru Homeland Security.
*Register with STAARS Vendor Self Service at
<https://procurement.staars.alabama.gov/webapp/PRDVSS1X1/AltSelfService>
4. The Department of Mental Health reserves the right to reject any and all proposals if RFP instructions are not adhered to, such as: received after deadline (see mailing note), requested # of submissions not received.

**REQUEST FOR PROPOSALS (RFP) 2018-35
RESIDENTIAL TREATMENT SERVICES, OUTPATIENT TREATMENT SERVICES, AND
AMBULATORY WITHDRAWAL MANAGEMENT SERVICES FOR
PREGNANT WOMEN AND WOMEN WITH DEPENDENT CHILDREN**

Proposals must be clearly labeled:

“RESIDENTIAL SUBSTANCE USE DISORDER TREATMENT PROGRAMS FOR PREGNANT
WOMEN AND WOMEN WITH DEPENDENT CHILDREN”

OR

“OUTPATIENT SUBSTANCE USE DISORDER TREATMENT PROGRAMS FOR PREGNANT
WOMEN AND WOMEN WITH DEPENDENT CHILDREN”

OR

“AMBULATORY WITHDRAWAL MANAGEMENT PROGRAMS FOR PREGNANT WOMEN
AND WOMEN WITH DEPENDENT CHILDREN”

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A. TARGET POPULATION AND PROGRAM GOALS

Leading Alabama's efforts to enhance the health and wellbeing of individuals, families, and communities impacted by mental illness, developmental disabilities, substance use disorders, the Alabama Department of Mental Health (ADMH) is seeking qualified entities to provide gender responsive residential, outpatient, ambulatory withdrawal management, and recovery support services for the following target populations:

1. Women who are at least nineteen (19) years old; and
 - (a) Have moderate to severe substance use disorders, or co-occurring substance use and mental disorders; and
 - (b) Are pregnant; and/or
 - (c) Have custody of dependent children; and/or
 - (d) Are seeking to regain custody of dependent children; and
 - (e) Meet the ADMH modified American Society for Addiction Medicine (ASAM) for residential or outpatient treatment services; and
2. Dependent children, up to age twelve (12), of mothers receiving substance use disorder treatment.

ADMH desires to contract with experienced, well-qualified organizations that can assist the agency in meeting the following goals relative to the target population:

1. Improve access to care;
2. Decrease the harmful use and related consequences of prescription and illicit drugs, alcohol, and nicotine;
3. Increase safe and healthy pregnancies, improve birth outcomes, and reduce perinatal and environmentally related effects of maternal and/or paternal drug use on infants and children;
4. Improve mental and physical health;
5. Decrease the risk of mental, emotional, and behavioral disorders;
6. Improve parenting skills, family functioning, economic stability, and quality of life; and
7. Decrease involvement in and exposure to crime, violence, neglect, and physical, emotional, and sexual abuse.

B. FUNDING

Approximately \$700,000.00 is expected to be available to fund residential, outpatient, and ambulatory withdrawal management programs developed and operated to reflect the unique needs of women who have substance use disorders and their children. Awards for this initiative include federal funding from the U.S. Department of Human Services Substance Abuse Prevention and Treatment Block Grant (Catalog of Federal Domestic Assistance Number 93.959) and is subject to Subpart II & III, Part B, Title XIX, of the Public Health Services Act and the administrative regulations found in the Code of Federal Regulations, 45 CFR Part 96.

ADMH will also provide state funds required to match Federal Medical Assistance Percentage (FMAP) payments made for eligible Medicaid Rehabilitation Services provided by the selected Contractors. FMAP is provided by the U.S. Department of Health and Human Services Medical Assistance Program (Catalog of Federal Assistance Number 93.778) and is subject to Title XIX of the Social Security Act of 1965 and the administrative regulations found in the Code of Federal Regulations, 42 CFR Part 430 to End.

Payments to Contractors selected to provide the services proposed in this RFP shall be made on a reimbursement, fee for service basis, as according to prevailing rates delineated in the most recent edition of the ADMH Contract Billing Manual.

Contract renewals are contingent on satisfactory performance, the availability of funding, and the continued need for the service.

C. GENERAL REQUIREMENTS FOR PARTICIPATION

1. Applicants shall be public or private organizations.
2. Applicants shall have a minimum of two years' experience providing substance use disorder treatment services.
3. Applicants shall be certified, in good standing, by ADMH to provide substance use disorder treatment, pursuant to ADMH regulations published in the Alabama Administrative Code, Chapters 580-9-44 or shall submit an application to ADMH to obtain certification no later than the submission deadline for responses to this RFP and have the capability for obtaining certification status within one hundred twenty (120) days afterward.
4. Applicant's financial operations shall be in line with federal and state audit requirements and in line with contractual requirements.
5. Applicants applying to offer residential services shall have full access to an appropriate facility in which to house the residential program. Prior to ADMH finalizing a contract for provision of the specified services, selected Contractors must demonstrate that the proposed residential facility complies with all applicable city, county, state, and federal building, fire, safety, health, and accessibility regulations, codes, etc. In addition, the facility must be inspected by ADMH Life Safety staff and ADMH Women's Services Coordinator and determined to be suitable for housing the planned residential treatment program.
6. The facility housing the program, as well as the surrounding grounds, shall provide adequate space to appropriately accommodate each woman, as well as, her dependent children. The facility must also

meet the Minimum Standards for Physical Facilities pursuant to ADMH regulations published in the Alabama Administrative Code, Chapter 580-3-22.

7. For residential services, only proposals specifying the ability to accommodate women plus minor custodial children, up to age twelve (12), will be given consideration for funding.
8. The program's capacity for admission of children shall depend upon the facility's space and configuration. The selected Contractors must strive to honor all requests for admission of minor custodial children, to the extent possible. At a minimum, however, space must be available in the facility to appropriately accommodate at least two (2) children for each approved bed for women.
9. When minor children cannot be admitted into treatment with their mothers due to space limitations or other circumstances, and the current living arrangement for these children is not safe or otherwise in their best interest, the selected Contractors will assist in locating alternative, safe, and appropriate accommodations.
10. Children residing off-campus shall have access to all required services, interventions, and supports identified in **Section D** of this RFP as available to children admitted to treatment with their mothers.
11. The selected Contractors will be required to enroll as a Medicaid provider, if eligible, and bill Medicaid for all eligible services provided for Medicaid recipients.
12. All aspects of service delivery shall be responsive to the culture, language, and age of the program's participants.
13. To facilitate timely admission to the program and access to all related services, language assistance shall be provided for individuals who have limited English proficiency and/or other communication needs at no cost to them. This includes:
 - (a) Clearly informing all individuals of the availability of language assistance services in their preferred language, verbally and in writing;
 - (b) Ensuring the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided; and
 - (c) Providing easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.
14. Medication assisted treatment for substance use disorders, including Methadone Maintenance, is recognized as a best practice clinical intervention. Therefore, the selected Contractors will be expected to provide the program's residents with access to medication assisted therapies as an essential component of care.
15. Each woman shall be screened for nicotine dependence. For those with positive screening results, an appropriate assessment shall follow. Basic treatment options shall also be provided and incorporated into the client's service plan.
16. Smoking shall not be permitted within the residential treatment facility. Reasonable outside boundaries shall be established in order to assure a tobacco-free environment for the women and children enrolled in the program, as well as, staff and visitors.

17. Peers shall be employed and understood to be a mandatory and meaningful component of the agency's workforce.
18. A clinical/service record must be maintained for each woman and child enrolled in the program.
19. Length of stay in the treatment program shall be based upon the needs of each woman and her children, as established through ongoing assessment, treatment planning, and progress monitoring.
20. The selected Contractors will maintain a data collection and reporting process that functions to:
 - (a) Produce data required for reporting of the National Outcome Measures (NOMS) as defined by SAMHSA;
 - (b) Provide a mechanism for monitoring the efficiency and effectiveness of the services provided in response to this RFP; and
 - (c) Provide measures for ADMH's evaluation of progress toward the goals established for this initiative.

In addition to those required by the NOMS, data collection and reporting will also encompass the following domains:

- (a) Access to care for pregnant and parenting women;
 - (b) Mental/emotional health of the participating mothers and children;
 - (c) Physical health of the participating mothers and children;
 - (d) Family functioning; and
 - (e) Involvement in disease prevention/mental health promotion activities.
22. As according to procedures established by ADMH, data collection and reporting by the selected Contractors shall begin with initial client contact and continue for a period of twelve (12) months post transfer or discharge from residential treatment.
 23. The selected Contractors will be expected to promptly assist program participants in applying for Medicaid, Health Insurance, and other public assistance programs provided by Federal, State, or local governments, as well as child support, if applicable.
 24. Neither the Applicant nor its principles shall presently be debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receipt of Federal, state, or local government funding.
 25. No program fees may be charged by the selected Contractors to women whose family income is equal to or less than 133% of the Federal Poverty Level.
 26. Service implementation shall begin within ninety (90) days after the date of full execution of the ADMH Contract.
 27. Only one proposal may be submitted by each Applicant Organization.

28. Submission of the proposal establishes the Applicant's agreement for ADMH to make any contacts it deems necessary to confirm the organization's experience and ability to perform the work specified in this RFP.
29. The issuance of this RFP neither commits the ADMH, its officers, employees, or agents to award a contract, to pay any costs incurred in the preparation of a proposal or subsequent negotiations, nor to procure a contract for the proposed services. ADMH reserves the right to reject or accept any or all proposals or any portion, thereof, to cancel in part or in its entirety this RFP, or to delay implementation of any contract which may result, as may be necessary to meet the Department's funding limitations or processing constraints.

D. SCOPE OF WORK

The work list below identifies the minimum responsibilities and/or services that the Applicant must agree to assume and implement under any contract awarded as a result of this RFP. In addition to fulfilling the General Requirements for Participation specified in **Section C** of this RFP, Selected Contractors will be expected to:

1. Provide a supervised, drug-free, non-institutional, therapeutic environment that fosters safety, respect, and dignity for each woman and child enrolled in the program.
2. Provide a therapeutic service regimen that has been designed and organized in such a manner to provide structure and consistency for the women and children in the treatment program.
3. Ensure access for the clients to an adequate number of appropriately trained and credentialed staff.
4. Ensure that pregnant women who inject drugs and other pregnant women receive first and second priority for admission to treatment, respectively, and publicize this fact in a manner that is accessible to these priority populations.
5. Treat the family as a unit and, therefore, admit both women and their children into treatment services, if appropriate, as established by admission criteria that are responsive to the needs of this population.
6. Provide timely, seamless transfer from one level of care to another based upon ongoing evaluation of the needs of each woman and her family in relation to the program's continued stay, transfer, and discharge criteria.
7. Directly provide or ensure access to structured, gender responsive treatment and recovery support services at the appropriate dosage and duration that conforms to the assessed needs of each woman. At a minimum these services must consist of, reflect, or otherwise incorporate the following elements:
 - (a) Evidence-based practices and approaches to care;
 - (b) Strength-based approaches to care;
 - (c) Cultural responsiveness;
 - (d) Interventions and activities that address:

- Recovery from substance use disorders, including addiction to nicotine;
 - Relapse prevention;
 - Empowerment;
 - Social stigma;
 - Trauma;
 - Domestic violence, sexual abuse, and physical abuse;
 - Mental health wellness, treatment, and symptom management;
 - Relationships;
 - Sexuality;
 - Parenting skills development/family reunification;
 - Family dynamics;
 - Spirituality;
 - Life skills;
 - Educational/vocational skills;
 - Legal issues and
 - Physical/reproductive health disease prevention, symptom management, and wellness.
- (e) Medication assisted treatment including access to Opiate Replacement Treatment (including Methadone);
- (f) Primary medical care, including prenatal care;
- (g) Recreation and leisure-time skills training; and
- (h) Access to education, employment and training programs.
8. Directly provide or ensure access to structured gender, age, and developmentally appropriate therapeutic interventions and other services for the minor custodial children of the women in treatment. At a minimum these activities must consist of, reflect, or otherwise incorporate the following elements:
- (a) Evidence-based practices and approaches to care;
- (b) Strength-based approaches to care;
- (c) Cultural responsiveness;
- (d) Screenings and developmental diagnostic assessments regarding the social, emotional, cognitive, and physical status of infants at birth and at each developmental milestone up to age twelve (12);
- (e) Interventions to address:
- Developmental needs;
 - Issues in relationship to sexual abuse, physical abuse, and neglect;
 - Mental health;
 - Social-emotional skill building and
 - Parental bonding and other family dynamics issues from the perspective of the child.
- (f) Substance use disorder prevention and intervention services;
- (g) Therapeutic child care, Headstart, and other early childhood education programs;

- (h) School enrollment, attendance, tutoring, and other academic related services for school-age children;
 - (I) Primary pediatric care, including immunizations; and
 - (j) Recreational activities.
9. Incorporate appropriate, clinically indicated services and activities which promote healthy connections between women and children and their families, including father/child connections, interaction with extended family and significant others, and involvement with the community.
 10. Provide access to peer-to-peer recovery support activities.
 11. Provide access to self-help groups.
 12. Provide case management services commencing at treatment admission and continuing for a minimum of twelve (12) months post discharge. This service shall function to:
 - (a) Ensure that each woman and her children continue to receive needed services in a supportive, effective, efficient, timely, and cost effective manner after discharge from treatment;
 - (b) Assist with community resources including linking and facilitating access to needed services and resources;
 - (c) Monitor implementation of the client's plan of care and the extent to which:
 - Progress or lack of progress is occurring;
 - The current level of care and related services remain appropriate and
 - Service plan modifications are needed.
 - (d) Monitor the status of risk factors and special needs; and
 - (e) Promote active involvement in continuing care activities.
 13. Develop resources for connection to safe, stable, and affordable housing that can be sustained over time.
 14. Provide transportation services to ensure that the women and their children have access to, at a minimum, the services specified in **Sections 1-13** above.
 15. Establish Memoranda of Agreements (MOAs) with key agencies and organizations such as local public housing authorities (for permanent housing for families), mental health, primary health, child and family, family court, criminal justice, employment and education programs to facilitate referrals and enhance access to needed services by the program's participants.

E. SUBMISSION SPECIFICATIONS

1. Technical Formatting Requirements

Proposals shall be submitted in the following format to qualify for review:

- (a) Proposals shall be received by the established deadline.
- (b) Proposals shall be responsive to the guidance provided within this RFP and include sufficient information for review.
- (c) Proposal pages shall be typed on white 8.5" x 11" paper in black ink, single-spaced, using the Times New Roman twelve (12) point font. All margins (left, right, top, and bottom) shall be equal to one inch (1").
- (d) Each page of the proposal shall be sequentially numbered, beginning with the Cover Page and ending with the final page of Exhibit 11.
- (e) The proposal shall be assembled in the following order:

SECTION I.	Cover Page
SECTION II.	Assurance of Understanding of General Requirements for Participation
SECTION III.	Table of Contents
SECTION IV.	Profile of Applicant Organization
SECTION V.	Program Description
SECTION VI.	Personnel
SECTION VII.	References
SECTION VIII.	Clarification/Exceptions or Deviations
SECTION IX.	Funding Strategy and Request and Narrative Justification
SECTION X.	Exhibit 1: Current Organizational Chart
	Exhibit 2: Governing Body Listing and Details
	Exhibit 3: Management Team Listing and Details
	Exhibit 4: Facility Floor Plan
	Exhibit 5: Documentation of Facility Access
	Exhibit 6: Documentation of Facility Compliance with Regulations
	Exhibit 7: Program Implementation Plan
	Exhibit 8: MOA Listing
	Exhibit 9: Proposed Organizational Chart
	Exhibit 10: Funding Request

- (f) The proposal shall not exceed thirty (30) pages for **Sections I - VIII.**

2. SECTION I - Cover Page

The Proposal Cover Page must include the following information:

- (a) Title of proposal: **Residential** Substance Use Disorder Treatment Program for Pregnant Women and Women with Dependent Children **or** **Outpatient** Substance Use Disorder Treatment Program for Pregnant Women and Women with Dependent Children **or** **Ambulatory Withdrawal Management Program** for Pregnant Women and Women with Dependent Children.

- (b) Legal name of Applicant Organization.
- (c) Applicant's legal business organizational structure.
- (d) Applicant's address, telephone and FAX numbers.
- (e) Applicant's website address.
- (f) Applicant's contact for the proposal: Name, Address, Telephone, FAX, Email Address.
- (g) Substate Region in which the proposed program will be located.
- (h) Signature of authorized member of the Applicant's governing body.
- (i) Date of submission.

3. **SECTION II - Assurance of Understanding of General Requirements for Participation**

An authorized member of the Applicant Organization's governing body must provide ADMH with written assurance that the Applicant Organization:

- (a) Understands the basic requirements to qualify to provide the proposed program, as specified in **Section C, Items 1-29** of this RFP; and
- (b) Has the experience and capacity to implement the program components specified in **Section E.6. (a) – (n)** of this RFP.

4. **SECTION III - Table of Contents**

The table of contents shall identify each proposal component in the order listed, as specified in **Section E.1. (e)**, and by sequential page number. Each specific Exhibit shall be identified in the table of contents by Exhibit number, name, and page number.

5. **SECTION IV - Profile of Applicant Organization**

The Applicant shall provide sufficient information for ADMH to determine that the company has the knowledge, skills, abilities, and resources to provide the services specified in this proposal. At a minimum, this information shall include:

- (a) The Applicant's legal business name and legal organizational structure.
- (b) A brief history of the organization, including:
 - Number of years in business under the present business name, and under other business names.
 - Services provided.
 - A summary of demographic and clinical profiles of individuals currently served, average length of time in treatment, and numbers served annually.

- Current service locations, with the physical address and services offered at each site.
 - Number of years providing services for the target population specified in this RFP, and a description of the services provided for women and their children.
 - A copy of the Applicant's current organizational chart, indicating the number of FTEs per title (**Include as EXHIBIT 1**).
 - A list of all members of the Applicant's governing body, indicating terms of office and home or business address. Also indicate whether any members are officers, agents, or employees of the Applicant organization (**Include as EXHIBIT 2**).
 - A list of the organization's management team, including, at a minimum, the Executive Director, Clinical Director, Medical Director, and Departmental or Divisional Directors/ Coordinators; employment status (full-time, part-time, consultant, independent contractor, volunteer, etc.); and the length of time employed (**Include as EXHIBIT 3**).
- (c) A list and description of similar work, as that specified in this RFP, performed for other state agencies or related organizations, including the names of these entities.
- (d) Explanation of how ADMH will benefit if the Applicant is selected to perform the work specified in this RFP.
- (e) Identification and explanation of any past or current litigation, governmental, or regulatory action, including debarment, suspension, exclusion, or contract termination, involving the Applicant organization, its staff, and/or members of its governing body.

6. **SECTION V – Program Description**

- a) Describe why gender is important relative to substance use disorder treatment, and how it is incorporated into the Applicant Organization's mission, values, and current work.
- b) Describe your agency's philosophy of treatment to demonstrate the delivery of client centered treatment and implementation of recovery management principles. Give examples of specific policies or procedures in practice at your agency that demonstrate a recovery oriented, client centered philosophy. Include a detailed weekly and monthly schedule that demonstrates the frequency and types of services provided to meet the level of care service description requirements. Include a description of how individual and group counseling requirements, and other service requirements are met.
- c) Provide a detailed description of the evidence-based, gender specific substance use disorder treatment services for women with dependent children which your agency proposes to provide. Describe how the agency will implement these evidence-based programs to assure fidelity to the practice. Include training, ongoing supervision plans and any planning for staff turnover. Describe the specific types of gender specific treatment services that will be offered, including such details as the length and frequency of sessions. Describe how parenting/life skills training and self-help groups will be incorporated into the full treatment experience for women with dependent children and pregnant women.

- d) Describe the evidence based treatment model for trauma specific services practiced by the agency and how that model will be implemented throughout the treatment episode. Describe how your agency will assess and respond to the trauma needs of clients.
- e) Describe your agency's capacity to accommodate any and all clients who take legitimately prescribed medications, including medications for the treatment of opioid dependency. Include your policy (ies) as an Appendix.
- f) Describe how child care services, transportation, medical services and case management services will be provided. Detail the specific children's services that will be offered, including such details as referrals and examples of various age appropriate activities. Be explicit regarding any services that may be conducted off site. Attach any original referral agreements and affiliation agreements in an Appendix. Describe staff position(s) responsible for any in house services, who will supervise the delivery of these services, and any additional resources that your agency will be using.
- g) Describe how your agency will provide for discharge planning and a full continuum of care. Describe your plan to ensure step down care to services in the community upon discharge.
- h) Describe your agency's plan to work collaboratively with various social service agencies to provide a full continuum of care for women and their children.
- i) Identify the strategies to be used to identify and inform the target population of the services available and to facilitate admission into the proposed program.
- j) Describe the proposed program's admission criteria and process, and **how** it incorporates:
 - (a) Gender responsiveness;
 - (b) The ASAM diagnostic criteria for residential, outpatient, and ambulatory withdrawal management services and
 - (c) The ASAM dimensional criteria for residential, outpatient, and ambulatory withdrawal management services.
- k) Describe the proposed program's assessment process for women and children. At a minimum, identify time frames from assessment to admission, assessment instruments, and who will conduct the assessments.
- l) Describe the strategies to be utilized to ensure the program is, at all levels, responsive to the diverse cultural beliefs and practices of participants.
- m) Describe the policies, practices, and dedicated resources to be used to efficiently and effectively respond to those seeking admission to the program and to those enrolled in treatment who need linguistic assistance. This includes both women and children with limited English proficiency, who have low literacy skills or are not literate, who have disabilities, or those who are deaf or hard of hearing.
- n) Describe **how** the Applicant Organization will comply with the Scope of Work specified in **Section D**. Identify the specific service modalities, evidence-based strategies and interventions, and service providers to be utilized in implementation of the service requirements. **A thorough response shall be provided to each section (1-15), as well as to each subsection ((a), (b), (c), etc.) and bullet (▪) listed, thereafter. No item within the Scope of Work should be left unaddressed by the Applicant.** Gender, age, cultural, and linguistic responsiveness should be

evident throughout the Scope of Work details provided. Services to be provided onsite by the Applicant organization and those to be provided offsite by other entities should be clearly differentiated.

- o) Identify the specific building in which the residential program will be housed as follows:
 - The address of the proposed facility, the ADMH Region in which it is located, and a description of the surrounding community.
 - A description of the facility.
 - The program's proposed capacity. Specify the number of beds to be available for women and for children.
 - Specify the facility's proximity to public transportation, to schools, and to alcohol selling outlets.
 - Include a floor plan, as **EXHIBIT 4**, that clearly identifies each sleeping area for women and children, closet and storage space for women and children, meal preparation and eating areas, clinical and administrative areas, and leisure and recreational space both inside the building and outdoors. A professional floor plan drawn to scale is not required; however, the drawing submitted must be able to clearly illustrate the requested information.
- p) Documentation that the respondent already owns or has a commitment to purchase or lease the proposed facility (Include as **EXHIBIT 5**).
- q) Documentation that the proposed facility currently meets or has the potential to meet all applicable zoning, life-safety, licensure, certification, or other regulatory requirements to enable its occupancy and use as a Level 3.5, 3.3, and 3.1 residential treatment program for women and children (Include as **EXHIBIT 6**).

Provide a Program Implementation Plan that incorporates a phase-in timeline, with dates and corresponding descriptions of the activities that must take place prior to the facility's opening. Begin with the date of full execution of the contract and end with the date the facility is expected to be open for client intake (Include as **EXHIBIT 7**).

- Provide a list of MOA's to be established or already established with other entities to facilitate the Applicant's efforts to ensure access to services needed by the target population. Indicate if each identified MOA has already been executed or must be developed (Include as **EXHIBIT 8**).
- Fully explain any planned sub-contractual arrangements for assistance in the provision of the proposed services. Identify planned sub-contractors and the services to be provided.
- Identify any anticipated barriers, challenges, etc. relative to the proposal requirements and plans to address such.

7. **SECTION VI - Personnel**

- (a) Provide a summary of the knowledge and experience of the organization's leadership relative to the provision of evidence-based, gender responsive treatment for women and developmentally appropriate care for children whose parents have substance use disorders.
- (b) Submit an organizational chart for the proposed program along with a narrative explanation of the staffing plan. Clearly distinguish full-time, part-time, contract employees, and volunteers, as well

as existing staff and new hires required to accommodate the staffing needs of the proposed program. Using the form provided as **APPENDIX II**, provide a job description for each position listed on the organizational chart (Include the Organizational Chart and Job Descriptions as **EXHIBIT 9**).

- (c) If the proposed program will utilize any personnel that will be shared with, or co-assigned to other programs, describe this arrangement. Identify each position to be shared, along with the percentage of the staff's time assigned to the proposed program.
- (d) Describe the planned use of peers in delivery of the proposed services.
- (e) Given the need for twenty-four hours, seven days a week staffing for the residential program, describe the proposed provisions for on-call or back-up staffing.
- (f) Describe the planned use of volunteers in delivery of the proposed services.
- (g) Describe the Applicant's plans for:
 - Clinical supervision;
 - Staff development and training; and
 - Ongoing assessment of staff competency.

8. **SECTION VII - References**

The Applicant shall provide documentation of current and past relevant work experience in the form of three (3) references. Each reference shall include, at a minimum:

- 1. Name, address, phone, and email of organization for which the respondent provided services.
- 2. Contact person.
- 3. A brief description of the work performed.
- 4. Dates of work performed.

9. **SECTION VIII - Clarification, Exceptions or Deviations**

- (a) The Applicant shall provide a detailed explanation of any information submitted in its response for which there is a need for clarification, and/or for each exception or deviation from the requirements of the RFP. If the respondent proposes no clarification, exception, or deviation, a statement to that effect shall be entered in this section.
- (b) Acceptance of clarifications, exceptions and deviations is within the sole discretion of the Associate Commissioner for Mental Health/Substance Abuse Services.

10. **SECTION IX - Funding Strategy and Request**

- (a) The Applicant shall provide a written explanation of its plans to maximize available revenue streams to support the operations of the proposed program. Identify each potential source of funding and/or other resources, describe the strategies to be used to access these funds/resources, and specify the amount of funds or value of other resources expected to be generated on an annual basis.

- (b) Complete and attach the Funding Request found in **APPENDIX III** and attach to the proposal as **EXHIBIT 10**. Signature should be provided by an authorized representative of the Applicant's governing body. A detailed narrative justification of the funding request shall be included in **EXHIBIT 10**.

11. SECTION X – Exhibits

The Applicant shall clearly label each EXHIBIT, specifying the EXHIBIT number and name.

F. BASIS OF AWARD

1. ADMH intends to offer contracts to Applicants whose proposals best demonstrate the organizational capability to provide a quality program that meets the terms and conditions specified in this RFP.
2. ADMH reserves the right to reject any or all proposals in whole or in part, to advertise for new proposals; to abandon the need for such services; and to cancel this RFP, if any such actions are in the best interest of the State.
3. All proposals submitted in response to this RFP will be screened by the ADMH Office of Contracts and Purchasing to establish technical compliance and completion. Applications that are not in compliance with each screening criterion below will not be reviewed. Screening criteria to assess eligibility for formal review is as follows:
 - (a) The proposal has been properly formatted, as according to instructions provided in this RFP;
 - (b) All required Exhibits have been included;
 - (c) The Statement of Assurance has been properly executed by a member of the governing body;
 - (d) The Funding Request has been properly executed by a member of the governing body; and
 - (e) The proposal was received on or before the submission deadline.
4. Proposals remaining after completion of the screening process will be evaluated by a review team consisting of a minimum of three individuals who have expertise in the provision of substance use disorder treatment services for women and their families. Each proposal will be scored and ranked on the basis of the following criteria:
 - (a) Understanding of and responsiveness to the RFP;
 - (b) Organizational experience serving the target population;
 - (c) Quality, completeness, and responsiveness of the Service Description relative to the needs of the target population;
 - (d) Readiness to implement the proposed services;
 - (e) Quality and appropriateness of the staffing plan relative to the needs of the target population; and
 - (f) Appropriateness of funding request, fiscal controls, and accountability.

5. Proposals will be independently reviewed and scored by each member of the review team. Table 2 provides point values that may be assigned to each of the six (6) proposal evaluation criteria, along with key questions for consideration by the review team to aid in determining a point assignment. Proposal scores may range from 0 to 100 points.
6. An aggregate score for each proposal will be established by the ADMH Office of Contracts and Purchasing by adding the scores assigned by each member of the evaluation team. Proposals will then be ranked according to their numerical scores and submitted to the Associate Commissioner for Mental Health/Substance Abuse Services for further review and funding consideration.
7. The Associate Commissioner will review the rankings of the Review Committee and may select Applicants for reference checks. The Associate Commissioner may authorize contact with one or more of the references provided in the Applicant's proposal or with other entities which have knowledge of the Applicant's experience and ability to provide the services requested in this RFP. The Associate Commissioner is also authorized to:
 - (a) Conduct any investigation as necessary to verify the qualifications and performance history of an Applicant;
 - (b) Negotiate as to any aspect of the proposal with the Applicant, and negotiate with more than one Applicant Organization at a time;
 - (c) Waive or seek clarification on any information, irregularities, or inconsistencies in proposals received;
 - (d) Select the successful Applicant(s) for award;
 - (e) Reject any and all proposals received in response to this RFP;
 - (f) Award a contract to an Applicant submitting other than the lowest priced proposal; and
 - (g) Award multiple contracts, or not award a contract, as a result of this RFP.
8. When contract negotiations have been successfully concluded, each Applicant will receive written notification of the review and funding status of its proposal.

TABLE 2

Scoring Criteria and Evaluation Questions	Potential Points
<p>Understanding of and Responsiveness to the Request for Proposal</p> <ul style="list-style-type: none"> ▪ Does the proposal clearly articulate an understanding of the concept of a Residential, Outpatient, or Ambulatory Withdrawal Management Treatment Program for women and their children? ▪ Does the information provided in the proposal correspond to the information requested? ▪ Is the information provided in the proposal articulated in a clear and concise manner? ▪ What impact will any proposed deviations or exceptions have on the target population? 	0-15
<p>Organizational Experience Serving the Target Population</p> <ul style="list-style-type: none"> ▪ Has the Applicant documented experience in serving the target population? ▪ Are the proposed benefits to ADMH for the selection of this Applicant to provide the work realistic? ▪ Does the Applicant have adequate resources to perform the required work? ▪ Does the Applicant have a history of successfully performing the required work? 	0-15
<p>Quality, Completeness, and Responsiveness of the Program Description Relative to the Needs of the Target Population</p> <ul style="list-style-type: none"> ▪ Has the applicant conveyed the operation of a safe, therapeutic environment that enhances the self-esteem of program’s residents, and maximizes opportunities for recovery? ▪ Are plans for engagement of the target population reflective of the needs for women and their families? ▪ Are the services planned and organized in a manner to support attainment of the project’s goals? ▪ Are the specific evidence-based practices to be utilized clearly articulated in the proposal? ▪ Are best practices relative to the target population identifiable in the proposed services? ▪ Are the needs of women who have co-occurring disorders adequately addressed? ▪ Are the needs of children appropriately addressed? ▪ Is cultural competency clearly distinguishable throughout each aspect of the service description? ▪ Is linguistic competency clearly distinguishable throughout each aspect of the scope of work? ▪ Is there an adequate description of the program’s responsibilities after discharge from treatment? ▪ Does the proposal contain a realistic process to assure the availability of medication assisted treatment including Methadone? 	0-30
<p>Readiness to Implement Proposed Services</p> <ul style="list-style-type: none"> ▪ Does the applicant have access to a suitable facility in which to house the program? ▪ Does the implementation plan provide realistic targets in relation to the tasks to be performed? 	0-15
<p>Quality and Appropriateness of Staffing Plan</p> <ul style="list-style-type: none"> ▪ Does the proposed staffing pattern reflect the needs of the target population? 	0-15

<ul style="list-style-type: none"> ▪ Is there compatibility between the number of staff proposed and the projected number of women and children to be served? ▪ Are the plans for clinical supervision, training, and competency assessment adequate to assure quality service delivery? ▪ Do the job descriptions reflect the qualifications and duties needed in a residential/outpatient substance abuse treatment program for women and their children? ▪ Does the staffing plan reflect adequate staff to accomplish the program's data and reporting functions? ▪ Is the Applicant's proposal for the use of Peers compatible with best practices? ▪ Does the proposed medical/clinical staff configuration meet the requirements for the provision of Medicaid eligible services? 	
<p>Appropriateness of Funding Request</p> <ul style="list-style-type: none"> ▪ Is the funding request realistic in relation to the number of clients expected to be served? ▪ Does the budget justification reflect the realities of reimbursement on a fee-for-service basis? ▪ Is the funding request realistic in relation to the proposed services? ▪ Are the budget projections for other funds and resources realistic in relation to the number of clients projected? 	0-10
TOTAL POTENTIAL POINTS	0-100

DATES and DEADLINES

RFP # 2018-35

Item	Date	Delivery Method
RFP Release	February 28, 2018	USPS, ADMH Website, and STAARs website
Deadline to submit RFP questions and requests for clarification	March 9, 2018 by 2:00 pm CST	Email to leola.rogers@mh.alabama.gov
RFP Questions Posted	March 13, 2018	ADMH website www.mh.alabama.gov/adcp
RFP Submissions Due (1 original & 2 copies)	March 30, 2018 by 2:00 pm	USPS or FedEx or UPS (Review mailing note)
Notification of selection status	April 31, 2018 Approximately	USPS (In writing)
<p>Submit RFP Responses To: AL Department of Mental Health Office of Contracts & Purchasing RSA Union Building 100 N. Union Street, Suite 570 Montgomery, AL 36104</p> <p align="center">Note: Emailed or faxed responses are NOT ACCEPTED.</p> <p>All proposals received after the deadline will be deemed untimely and will not be reviewed.</p>		

APPENDIX I

**Alabama Department of Mental Health
Proposal to Provide
Substance Use Disorder Treatment Services for
Pregnant Women and Women with Dependent Children**

STATEMENT OF ASSURANCE OF UNDERSTANDING OF THE GENERAL REQUIREMENTS FOR PARTICIPATION

As a duly authorized member of the governing body of (Insert Legal Name of Applicant Organization), I certify that (Insert Legal Name of Applicant Organization):

1. Has carefully read all sections and Appendices of the Request for Proposal (RFP) entitled Substance Use Disorder Treatment Services for Pregnant Women and Women with Dependent Children issued by the Alabama Department of Mental Health in March 2018; and
2. Has fully informed itself as to all specifications, conditions, terms, and limitations, specified, therein; and
3. Understands the basic requirements to qualify to provide the Residential Substance Use Disorder Treatment Program for Pregnant Women and Women with Dependent Children, as specified in Section “C” of the RFP.

I, further, certify that (Insert Legal Name of Applicant Organization), has the experience and capacity to carry out the scope of work described in Section “D” of the above referenced RFP.

APPLICANT ORGANIZATION

PRINTED NAME OF AUTHORIZED CERTIFYING OFFICIAL

TITLE

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL

DATE SUBMITTED

APPENDIX II

**ALABAMA DEPARTMENT OF MENTAL HEALTH
Proposal to Provide
Substance Use Disorder Treatment Services for Pregnant Women and Women with Dependent Children**

JOB DESCRIPTION

Complete a Job Description for Each Position Listed on the Organizational Chart for the Proposed Program

APPENDIX III

ALABAMA DEPARTMENT OF MENTAL HEALTH

POSITION NAME:
% OF POSITION ASSIGNED TO THE PROPOSED PROGRAM:
SUPERVISOR (List Position):
POSITIONS SUPERVISED (List Positions):
New Position <input type="checkbox"/> Existing Position <input type="checkbox"/>
REQUIRED QUALIFICATIONS:
JOB RESPONSIBILITIES:

**Proposal to Provide
Substance Use Disorder Treatment Services for
Pregnant Women and Women with Dependent Children**

APPLICANT FUNDING REQUEST

**Please Provide the Information Requested Below on the Basis of a Twelve Month Operating Period
(Unless otherwise Indicated)**

Applicant Organization:	
Funding /Service Projections	Amount
1. Total Funds Requested from ADMH to Provide the Substance Use Disorder Treatment Services for Pregnant Women and Women with Dependent Children: (A DETAILED NARRATIVE JUSTIFICATION OF THE AMOUNT REQUESTED, BASED UPON THE PLANNED FEE FOR SERVICE REIMBURSEMENT METHODOLOGY, MUST BE INCLUDED AS PART OF EXHIBIT 10)	
2. Total Budget Projected for the Operation of the Program:	
3. Amount of Medicaid Revenue Projected for the Provision of Rehabilitation Services:	
4. Amount of Food Stamps Projected:	
5. Total Amount of Other Revenue Projected (Identify Sources and the Amount for Each Below):	
▪	
▪	
▪	
6. Maximum Program Capacity for Women (Total Number of Women the Program can Accommodate at One Time):	
7. Maximum Program Capacity for Children (Total Number of Children the Program can Accommodate at One Time):	
8. Total Number of Women to be Served (Unduplicated Count):	
▪ Number of Pregnant Women to be Served:	
▪ Number of Women with Dependent Children to be Served:	
▪ Number of Women Seeking to Regain Custody of their Children to be Served:	
9. Total Number of Children to be Served (Unduplicated Count):	
▪ Number of Children Served in Residence with their Mothers:	
▪ Number of Nonresidential Children to be Served:	
10. Total Number of Medicaid Eligible Recipients Projected to be Served:	
Funding request made on behalf of (Insert name of Applicant Organization) by:	
Printed Name of Authorized Member of the Governing Body	Title
Signature	Date