**Region 6 Behavioral Healthcare**

Recovery Support

For

Sarpy County Wellness Court

Request for Proposal Guidelines

September 2021

# Section I-Introduction

## **Region 6 Behavioral Healthcare**

Region 6 Behavioral Healthcare (Region 6), a political subdivision of the State of Nebraska, has the statutory responsibility for organizing and supervising comprehensive mental health and substance use services in the Region 6 service area which includes Cass, Dodge, Douglas, Sarpy and Washington counties in eastern Nebraska.

Region 6, one of six mental health regions in Nebraska, along with the state’s regional centers, make up the state’s public mental health and substance abuse system, also known as the Nebraska Behavioral Health System (NBHS). Region 6 is governed by a board of county commissioners, who are elected officials from each of the counties represented in the Regional geographic area. The Regional Governing Board (RGB) is under contract with the Nebraska Department of Health and Human Services System (DHHS), the designated authority for administration of mental health and substance use programs for the state.

Each RGB appoints a Regional Administrator (RA) to be the chief executive officer responsible to the RGB. The RGB also appoints an advisory committee for the purpose of advising the Board regarding the provision of coordinated and comprehensive behavioral health services within the Region to best meet the needs of the general public. In Region 6, the Behavioral Health Advisory Committee (BHAC) is comprised of 10 members including consumers, concerned citizens, and representatives from other community systems in the Region.

The purpose of Region 6 Behavioral Healthcare is to provide coordination, program planning, financial and contract management and evaluation of mental health and substance use services funded through a network of providers.

## **Responsibility of RGB**

Each Regional Governing Board is responsible for determining which services would best meet the needs identified in the planning process. The RGB is also responsible for issuing a Request for Proposals (RFP) consistent with DHHS guidelines, state regulations and other applicable requirements.

## **Current Region 6 Provider Network**

Region 6 is responsible for the development and management of a provider network that serves the behavioral health needs of eastern Nebraska. Currently, Region 6 has 20 providers in its network to deliver a variety of behavioral health services.

## **Region 6 Population Served**

Region 6, as a payer of last resort, primarily serves financially eligible adults and youth with, or at-risk of, serious mental illness and/or substance use. Region 6’s geographical area includes Cass, Dodge, Douglas, Sarpy and Washington Counties in eastern Nebraska.

For the purposes of this proposal, the population served will be adults (19+) participating in the Sarpy County Wellness Court.

# Section II-Request for Proposals

## **Purpose/Summary of RFP Requested**

The purpose of this Request for Proposal (RFP) is to seek qualified, interested providers to engage in negotiations regarding the development and provision of Recovery Support that will work specifically with the Sarpy County Wellness Court in Sarpy County, Nebraska. The RFP process is designed to be competitive selection process, where cost is not required to be the sole determining factor.

## **RFP Service**

The service Region 6 wants to develop through this RFP process is Recovery Support that would provide supportive services to individuals going through the Sarpy County Wellness Court. See Attachment A for **Recovery Support** service definition.

The Sarpy County Wellness Court is a pilot project which began in March 2021 and serves individuals who have a severe mental illness.  The defendant has to enter a plea to a charge and if successful in completing the program, they are able to withdraw their plea and the case is dismissed.  When this happens, the defendant ends up with no conviction.  In order to participate in the Wellness Court, an individual must be willing to voluntarily participate, be diagnosed with a severe mental illness and be charged in Sarpy County. Note: The participant can live in another county, the charges have to be in Sarpy County.

The goal of the Wellness Court is to give people who experience a serious mental illness a way out of the justice system.  The goal of Sarpy County’s Wellness Court is to decriminalize mental health issues. They hope to get qualifying individuals into the Wellness Court, get them stabilized in treatment and build a support team around them so they can be successful when they leave the program.  Treatment plans involve regular meetings with the judge, prosecutor, defense attorney, treatment providers, probation officers and law enforcement officers.  The focus is on finding participants stable housing, avoiding drugs and alcohol and finding community-based treatment and services to refer them to for support.

Participants of the Wellness Court may live in Sarpy County or one of the surrounding counties such as Douglas or Cass Counties. As of September 2021, there are approximately 10 participants in the Wellness Court with an expected maximum capacity of 24 participants. Participants average length of stay in the Wellness Court is approximately 12 months.

Recovery Support will be one of the supports offered to a participant while they are involved with the Wellness Court. The Recovery Support staff would be expected to assist with activities such as:

1. Attending court hearings with the participant
2. A weekly minimum face to face meeting with the participant
3. Participate in team meetings, with probation, etc. as needed
4. Assist the participant in identifying ways of getting to treatment appointments
5. Assist the participant in building/improving coping skills, self-management skills, reduce isolation, improve social networks, improve communication skills, etc.
6. Assist the participant in developing a support system including treatment providers, supportive family, friends, support groups, etc.
7. Model a recovery lifestyle
8. Assist the participant in finding and utilizing community resources
9. Assist the participant as they work through struggles, (i.e., if participant is socially isolated, help participant locate healthy social settings)
10. Recovery Support and/or agency representative attends weekly court staffing
11. Communicates regularly with the supervision officer to give updates on progress of the participant
12. Complete online problem-solving court training to have a better understanding of how problem-solving court is different than traditional court and the roles and responsibilities of different members

The service definition for Recovery Support (see Attachment A) is a guide for the service. The caseload identified in the service definition is to serve as a maximum size, as the Recovery Support worker can have a smaller caseload in order to meet the above requirements. The service definition also states a minimum requirement of 1 face-to-face visit per month, however, for this service the above expectation goal is for a minimum of weekly face-to face visits. Note: Participants will have to meet Region 6 eligibility requirements.

While the Service Definition states that the Recovery Support worker can have a variety of backgrounds, for the purpose of this program, the expectation is for the Recovery Support worker to be a person who has lived behavioral health experience.

# Section III-Eligibility Criteria

**The applicant:**

1. May be a state, county, or community-based not-for-profit agency.
2. Must be a legal entity already established and functioning with paid personnel and demonstrable experience in working with the identified target population as evidenced by the following:
3. Must be able to agree to items in the ‘Minimum Standards for Enrollment’ in Region 6 Behavioral Healthcare Provider Network document.
4. Must hold national accreditation in the provision of behavioral health services or in the process of applying for national accreditation. Accreditation must be with one of the following: 1) The Joint Commission, 2) the Commission on Accreditation of Rehabilitation Facilities (CARF), or the Council on Accreditation (COA). Any other accreditation body must go through an approval process.
5. Must have a licensed clinician able to provide direct supervision.
6. Must possess appropriate state licensure and credentialing by appropriate State of Nebraska Departments, Divisions, or Boards, as approved by NE DHHS or have a plan in place to achieve such licensure/credentialing before the Agreement is awarded.
7. Must be experienced in working collaboratively with community agencies, courts, and other key stakeholders.
8. Must demonstrate a sound financial position based on audited financial statements from the past year.
9. Must be able to provide services within the Region’s geographical area.

**H.** Must agree to provide data to Region 6.

# Section IV-Funding Criteria

The Regional Governing Board (RGB) will conduct a fair and comprehensive evaluation of all proposals in accordance with the criteria set forth in this document.

Applicants must comply with all instructions and conditions and meet all the requirements included in this document to be eligible for funding. Proposals that do not conform to the items provided in this document will not be considered.

# Section V-Use of Funds

## **Allocation of Funds**

The service in this RFP proposal will be funded on a Non-Fee for Service (NFFS) meaning reimbursement will be based upon actual monthly expenditures up to the designated amount specified in the contract.

Region 6 will not fund:

1. Legal Fees
2. Financial contributions to individuals
3. Fund-raising events
4. Lobbying
5. Abortion
6. Laboratory or clinical research
7. Projects which do not serve the Region 6 geographical area
8. Purchase or improvement of land, purchase or permanently improve any building or other facility or purchase major medical equipment
9. Cash payments to intended recipients of health service

## **Non-Transfer of Funding Award**

The contract awarded to the successful applicant may not be transferred or assigned by the applicant/contractor to any other organization or individual.

# Section VI-RFP Changes or Terminations

If anticipated funds for the programs/services described in this RFP are not available or are not approved by DHHS, Region 6 Behavioral Healthcare may add to, limit, reduce, or withdraw any part(s) in this RFP.

# Section VII-Application Process

This RFP is designed to solicit proposals from qualified applicants who will be responsible for the development and provision of Recovery Support services at competitive and reasonable cost. Region 6 is hoping for a Recovery Support start-up to occur shortly after the award is given.

The RGB retains the right to seek additional proposals or not allocate funding if proposal submitted do not adequately meet the requirements set forth in this document.

Region 6 will post any additional information that we feel may be helpful on the Region 6 website: [www.regionsix.com](http://www.regionsix.com). **It will be the responsibility of the applicant to check the website to obtain additional information. Additional information may be added up to the date the RFP is due.**

## **Schedule of Events**

Release of RPF at Thursday, September 23, 2021

10:00 a.m. (CST)

RFP Proposals Due to Region 6 by 4:00 p.m. (CST) Wednesday, October 20, 2021

RFP Review Committee Meets Thursday, October 21, 2021 –

 Thursday, October 28, 2021

Review and Recommendations of Proposals Wednesday, November 3, 2021

By Behavioral Health Advisory Committee

Approval of Selected Proposals by Region 6 Wednesday, November 10, 2021

Governing Board

Written Allocation Announcements of Funding Friday, November 12, 2021

Disseminated by Regional Governing Board

and Contract Negotiations Begin

## **Limits on Communication**

After the September 23, 2021 release of the RFP, no verbal statements made by individual members of the RGB, Region 6 Behavioral Healthcare personnel, or members of the Review Committee or Sarpy County Wellness Court shall be binding by the RGB. Questions regarding this RFP must be presented in writing to be answered. Applicants may submit written questions to the Director of Network Services at tpetersen@regionsix.com. Responses to all written questions will be posted on the Region 6 website: [www.regionsix.com](http://www.regionsix.com).

All applicants are responsible for reviewing the questions and answers on the website.

NOTE: Posts can be made to the website up to the closing date/time.

With the exception of written communication as outlined above, prospective applicants are prohibited from contacting Region 6 Behavioral Healthcare personnel, DHHS personnel, BHAC members, RGB members regarding this RFP, or the Sarpy County Wellness Court, during the proposal evaluation period and until a determination is made and announced regarding the selection of a contractor.

If there are changes or important interpretations to be communicated to prospective applicants prior to the proposal due date, those will be communicated through the Region 6 website: [www.regionsix.com](http://www.regionsix.com).

**NOTE: Communication posts can be made to the website up to the closing date/time.**

## **Rejection of Proposals**

Prior to the evaluation of the proposals by the Review Committee, a specific review of each proposal will be completed to determine if the submission has followed the basic standards for the bid. Reasons for rejection at this stage include:

1. Proposal was not received by the deadline posted or at the location specified.
2. The proposal was not submitted on 8 ½” x 11” paper, was smaller than 10-point font, was not numbered consecutively, or not stapled or clipped in the upper left-hand corner.
3. One original and 10 copies, in the format specified, were not received.
4. The cover page was incomplete or the appropriate Region 6 form was not used.
5. All sections required in the Program Narrative were not addressed.
6. Program Narrative exceeded the 12-page limit.
7. BH-5 form(s) was not included.
8. All funds must be identified in the proposal and additional funds will not be made available after the award.
9. Budget forms, BH-Summary and BH c-g were incomplete.
10. Budget Justification Narratives were not included.
11. A copy of the applicant’s financial audit was not included. This only applies to agencies not currently in the Region 6 provider network.
12. A signed copy of the ‘Minimum Standards for Enrollment’ in Region 6 Behavioral Healthcare Provider Network was not included. This only applies to agencies not currently in the Region 6 provider network.

The Region 6 Governing Board retains the right to reject any and all proposals. The RGB shall provide written notice to the applicant whose proposal was rejected during this stage of review at the time of notification of funding allocation.

The RGB also reserves the right to void its intent if the applicant’s proposal is not approved by DHHS.

## **Cost Liability**

Region 6 Behavioral Healthcare assumes no responsibility or liability for costs by the Bidder, or any Bidder prior to the execution of an agreement between the organization and Region 6 Behavioral Healthcare.

## **Disclaimer**

All the information contained within this RFP and its attachments reflect the best and most accurate information available to Region 6 Behavioral Healthcare at the time of the RFP preparation. No inaccuracies in such information shall constitute a basis for legal recovery of damages, either real or punitive. If it becomes necessary to revise any part of this RFP, a supplement will be issued on the Region 6 website: [www.regionsix.com](http://www.regionsix.com).

## **Evaluation of Proposals**

Each proposal will be independently evaluated by members of the Review Committee, established by the RGB. This committee may include, but is not limited to: consumers, representatives of the BHAC, the RGB, DHHS, Sarpy Co. Wellness Court, Region 6 staff and other interested stakeholders. Review Committee names and any working documents, including applicant’s proposal scores, will not become public information nor will be released to individual applicants. Recommendations from the Review Committee will be forwarded to the RGB for final determination.

## **Oral Interviews**

Oral interviews may be required for this RFP. If the Review Committee has additional questions or needs further clarification, an interview may be requested of the organization(s). If an interview is necessary, applicants will be contacted and specific times arranged for their organizations interview. Interviews will involve whomever the applicant wishes to include to represent their organization. Only representatives of the RGB, Review Committee, designated Region 6 personnel and the applicant and their designees, will be permitted to attend the interviews.

The intent of the interviews is to ask any clarifying questions the review committee has and/or to respond to any questions the applying agency may have, etc.

Once the review is completed, the RGB reserves the right to make a final determination without any further discussion with the applicant regarding the proposal received.

Any cost incidental to the interviews shall be borne entirely by the applicant and will not be compensated by Region 6 Behavioral Healthcare or the RGB.

## **Announcement of Funding Allocations**

Applicants will be notified of the final funding decisions. All decisions regarding funding allocations will be made on November 10, 2021, by the Regional Governing Board.

Opportunities for appeal should be made after the recommendation phase at the Region 6 Behavioral Health Advisory Committee meeting by contacting Taren Petersen prior to the Regional Governing Board meeting where the award is made. Contacts to Ms. Petersen must be in writing through e-mail at tpetersen@regionsix.com. Appeals must be received no later than November 5, 2021 (4:00 p.m. CST). Region 6 will address all appeals within 2 business days from the November 5, 2021 deadline.

## **Withdrawal of Application**

The applicant may withdraw its proposal, with written notification, at any time during the process. In such an instance, a typewritten letter of withdrawal with an original signature by an authorized officer/executive must be received at

**Region 6 Behavioral Healthcare,**

**4715 S 132nd St., Omaha, NE 68137**

**Attention: Taren Petersen**

either by hand delivery or by certified mail. Region 6 Behavioral Healthcare will not accept a verbal communication, e-mail or a faxed letter of withdrawal.

## **Indemnification**

The applicant shall assume all risk of loss in the performance of the contract and shall indemnify and hold harmless Region 6 Behavioral Healthcare, its Governing Board, Advisory Committee members, Sarpy County Wellness Court and employees from all liabilities, demands, claims, suits, losses, damages, causes of action, fines or judgments and all expenses incident thereto, for injuries to persons and for loss of, damage to, or destruction of property caused by the negligent or intentional acts or omissions of the applicant, its officers, employees or agents; for any losses caused by failure of the applicant to comply with the terms and conditions of the contract; and for any losses caused by other parties which have entered into agreements with the applicant in connection with the performance of the contract.

# Section VIII-General Instructions on Submission of Proposals

All instructions, conditions, and requirements included in this document are considered mandatory unless otherwise stated. Proposals that do not conform to the items provided in this document will not be considered.

All applicants must adhere to the following guidelines for submission of proposals.

1. The due date for receipt of proposals is October 20, 2021. All proposals must be received in Region 6 Behavioral Healthcare’s office by 4:00 p.m. (CST).

**Proposals must be sent OR delivered in person to:**

**Region 6 Behavioral Healthcare**

**4715 S 132nd St**

**Omaha, NE 68137**

**Attention: Taren Petersen**

**2.** Applicants shall not be allowed to alter or amend their proposals

**3.** FAX or e-mailed copies will not be accepted.

**4.** No requests for extensions of the due date will be approved.

**5.** The RGB accepts no responsibility for mislabeled/missent mail.

**6.** Proposals received late will not be accepted and will be returned to the sender unopened.

**7.** Applicants must submit one (1) original and ten (10) copies of each proposal.

**8.** Proposals must be typed in 10-point font or larger, submitted on standard 8 ½” by 11” paper, numbered consecutively on the bottom right-hand corner of each page, starting with the “Cover Page” through the last document, including required appendices and attachments. **NOTE: Cover Page is not considered part of Program Narrative.**

**9.** Originals and each copy must be stapled or clipped at the upper left-hand corner. Do not use covers or add unsolicited attachments to your proposal.

**10.** All information must be provided on the actual Region 6 Behavioral Healthcare forms (the attachments provided in this RFP). An electronic version of the forms will be available via the Region 6 website: [www.regionsix.com](http://www.regionsix.com). The forms may be retyped by the applicant; however, the form must look EXACTLY the same, including, but not limited to, headings, appendix number, required information categories, number of pages, and font size.

# SECTION IX – PROPOSAL FORMAT

Proposals must be organized in the following sections in the order listed below:

**1.** Cover Page (Attachment B)

Complete the entire “Cover Page” and obtain the signature of the Chief Executive Officer, Board Chairperson, or other individual with the authority to commit the applicant to a contract for the proposed program/service.

**2.** Capacity Development Plan

 **A.** Program Narrative

 The Program Narrative is a written plan that describes, in detail, the Recovery Support service to be funded. The narrative should include a response to the following requirements as they relate to the service definition. The Program Narrative shall cover the following points in a clear and concise manner, prepared in the following order using headings as listed below:

1. Organizational Capability: Describe the organization’s capability to provide the service, including:
* Brief organizational history
* Explanation of how provider is capable of providing Recovery Support to the participants of the Sarpy County Wellness Court – what is the providers experience in working with individuals who have a mental illness and possible substance use disorder, what is the provider’s knowledge of area resources
* Ability to collect demographic information
* Ability to collect and submit any and all program data and outcomes necessary including use of DBH’s Centralized Data System (CDS) System.
* Cultural/gender competency
* Identify the specific amount of time needed to develop the service. **NOTE: The target date for implementation of the Recovery Support service is shortly after the funding announcement is made.**
* Ability to meet eligibility criteria as listed in Section III of this RFP
* State willingness to work with Region 6 staff and the Sarpy County Wellness Court in developing the service and outcome development/monitoring
1. Purpose: Explain the purpose of the service in terms of the result expected to meet the needs of the consumers.
2. Target Population and Geographic Area:Describe the target population and geographic area to be served, including:
* Relevant information about the persons to be served in this section
* How applicant will market the program to consumers in the Sarpy Count Wellness Court
* How applicant will partner with the Sarpy County Wellness Court and become part of the team.
1. Goals:List and explain the goals of the program/service and process and outcome indicators that are measurable.

Goals must:

* Directly relate to the Recovery Support service
* Deal specifically with issues related to service delivered
* Address expected short-term and long-term benefits, both from a system perspective (Wellness Court) as well as an individual consumer perspective

Process indicators must:

* Measure the quality of service delivery
* Focus on the efforts expended rather than the results achieved
* Include measures of what service was delivered, to whom, by whom, for how long and how often
* Ensure that the service will be implemented as intended and in conjunction with the Wellness Court

Outcome indicators must:

* Measure the results achieved or the effectiveness of the service as related to the consumer and consistent with the Sarpy County Wellness Court goals
* Account for program effectiveness
* Identify what consumers are expected to achieve as a result of the service provided by Recovery Support
* Be expressed in terms of behavior, condition, or thing that are attainable by an individual consumer who is served by the service being evaluated
1. General Overview: Provide a general overview of how Recovery Support will be organized.
* Include information about how the applicant’s resources (facility space, personnel, equipment, etc.) and administrative structure are coordinated and will meet program staff’s needs.
* Include information about how the service will meet the needs of the consumers served
* Describe how the provider will take into consideration both mental health and substance use needs
* Describe how assessment and treatment will use trauma informed principles
1. Admission Criteria:
* Thoroughly describe procedures for consumers to access this service
1. Assessment Process:
* Describe the assessment procedures/tools that will be used in the service
1. **Specific Services:**
* List and include complete explanations of the specific services to be provided directly to the consumer
* Describe how individual treatment planning will be done with the consumer and what is included in this individual plan
* Describe how the services will be coordinated with the Sarpy County Wellness Court and other community providers.
* Describe discharge planning procedures, criteria, and follow-up
* Describe the projected average length of stay in the program for the consumer to successfully reach the desired results as specified in the goals
1. Consumer Involvement: Describe the procedures for direct consumer involvement in the program/service, including:
* How consumers will participate in treatment planning (individual level)
* How potential consumers will be informed about the program and consumer rights (individual level)
* How consumers will have input into the development of policy and procedures (program level)
1. Capacity: Discuss the capacity anticipated for the service, including:
* Program capacity – the total number of individual consumers considered “active” in the program at any given time
* Monthly census – the number of individual consumers who can be served on a monthly basis
* 12-month period – estimate the total number of consumers served during a normal 12-month period
1. Service Staffing:Discuss program/service staffing proposed, including:
* An explanation of the qualifications and supervision of the positions which will provide any services (direct and indirect) in the program
* Efforts to recruit, hire, and train Recovery Support workers, including efforts made to hire persons with lived experience for the Recovery Support positions.
1. Quality Improvement: Describe the quality assurance plan which will be used for this service, including:
* How information and data will be gathered to evaluate the service, how it will be used, and who will be involved in making this happen
* What quality indicators will be used, how it will be used, and who will be involved in making this happen
* Overview of the quality improvement functions the agency plans to use in this service
1. **Program Development and Implementation Schedule, BH-5 (Attachment C)**

Several copies of the BH-5 form may be required to identify the goals and objectives necessary to develop and implement the service capacity. Complete a separate BH-5 for each service goal. Goals should address the following:

1. Development process/implementation schedule: Explain in detail a clear step-by-step plan of how the program/service will be developed over a given period of time. List reasonable and necessary goals and objectives needed to develop and implement the service capacity. Activities stated should be comprehensive, can be accomplished, and have clearly identified time frames, staff responsibility assigned, and outcome indicators.
2. How the applicant organization will complete a formal evaluation of the service, including steps in the process, and services provided.
3. For service start-up, capacity development goals should include, at a minimum, how the applicant will do the following:
* Develop administrative structures and personnel for service
* Develop a plan on building a relationship with the Sarpy County Wellness

 Court staff

* Develop program plan, program operating policies and procedures,

 operation plan, registration/referral system for service

* Develop reporting, financing, and quality improvement systems
* Develop an infectious disease policy and disaster plan/policy
* Indicate when the Recovery Support services will be operational

### **Budget and Budget Justification Narrative**

1. Budget Forms -BH-20 Summary and BH c-g (Attachment D) – Use forms BH-20 Summary and BH c-g to develop the detailed budget for the service. Two separate budgets must be submitted as a part of the proposal. The first budget must be based upon a 12-month contract term for FY23 (7/1/22 – 6/30/23) which shows operational expenses for a full year. The second budget should include a partial year’s funding for FY22 (covering the time period from the services start-up/implementation to 6/30/22) showing what expenses are anticipated for the remainder of the current fiscal year (FY22).

**2)**  Revenue Summary (BH-20 Summary)

 List the revenue requested from Region 6 under Section (C) STATE FUNDS,

 on the MH-general. List any other program/service revenue on the

 appropriate line.

**3)**  Expense Summary (BH-20 Summary)

This form is a re-cap of detailed budget forms, BH-20 c-g. The total from each detailed budget form should be transferred to the BH-20 Summary, Expense Summary, on the appropriate expense category line. List indirect administration expenses in column 1, if applicable. **Note:** No more than 15% of funds may be used for indirect expenses/costs unless applicant has a federally approved cost rate. A copy of the letter stating the federally approved cost rate must accompany the budget forms.

**4)** Detailed Budget Forms (BH-20 c-g)

In the column titled, “Total HHS/BH Funds Requested,” show the funds you are requesting from Region 6 through this RFP process. In the column titled, “Total Project Funds (includes HHS and other),” show the total cost of the line-item expense which may include revenue from another source.

**Note: All funds must be identified in the proposal and additional funds will not be made available after the award.**

**D.**  T**he following outlines specific items to use within each expense category:**

1. Personnel Services (BH-20c)
* Direct personnel (includes all FTEs directly related to the provision of services, including direct supervision)
* Permanent salaries/wages
* Temporary salaries/wages
* Overtime pay
* Compensatory time paid
* Vacation leave expense
* Sick leave expense
* Holiday leave expense
* Military leave expense
* Civil leave expense
* Injury leave expense
* Administrative leave expense
* Retirement plans expense
* Social Security benefits expense
* Life/accident insurance
* Health insurance
* Unemployment compensation insurance
* Employee assistance program
* Management salaries/wages/fringe benefits
* Accounting support
* Personnel/human resources support
* Clerical Support
* Operations personnel support

**2)** Operations (BH-20d)

* Postage
* Communication (i.e., phone/voice mail)
* Data processing/computer hardware/software
* Publications/newsletters/printing
* Training booklets, pamphlets, curriculum, videos, etc.
* Copying
* Dues/subscriptions
* Conference/professional development
* Job applicant expense
* Utilities (i.e., electric/water/gas)
* Rental expenses (i.e., building/equipment/vehicle)
* Office supplies
* Office equipment
* Workshops/retreats/trainings/classes
* Program marketing advertising
* Equipment supplies
* Legal services expenses
* Educational services
* Accounting/auditing expenses
* Janitorial/security expenses
* Board meeting support
* Building/auto insurance
* Professional liability insurance
* Directors and officers insurance
* Medications
* Other operating expenses

**3)** Travel (BH-20e)

* Board and lodging
* Meals
* Personal vehicle mileage
* Miscellaneous travel expense

**4)** Capital Expense (BH-20f)

* Office equipment
* Equipment on purchase agreements
* Medical equipment
* Hardware (data processing)
* Software (data processing)
* Communications equipment
* Household/institution equipment
* Photo/media equipment
* Security system
* Other property/equipment

**5)** Other (BH-20g)

* Consultants
* Contracts for other service (i.e., accounting/auditing services)
* Indirect personnel costs – Region 6 can only approve indirect personnel costs up to 15%, unless a federally approved Indirect Cost Rate Document is included with the budget submission.
* Other

**6)** Budget Justification Narrative– A separate budget narrative is required for both budgets. These narratives will help explain the rationale behind the budgeted items, please justify costs clearly. These narratives should explain in detail:

* Why the costs listed on the budget itemization forms are necessary
* How those costs were calculated

 The following items should be addressed separately in the narrative:

* Ongoing staffing needs by position, number of full-time equivalents (FTEs), and their respective salary and fringe costs separately
* Explanation of how ongoing operational, travel, capital outlay, personnel, professional fees, and consultant needs and costs were determined

**7)**  Financial Audit

A copy of the most recent audit of its financial operation by certified public accountants, using generally accepted auditing techniques, principles, and standards. **NOTE: A copy of the applicant’s most recent financial audit must be included with the proposal(s) submission. This does not apply to applicants who are already in the Region 6 Provider Network (as we already have copies of this information).**

# Section X-Minimum Standards for Enrollment in Region 6 Behavioral Healthcare Provider Network

Any applicant, not a current member of Region 6 Behavioral Healthcare Provider Network, shall attest that they can meet the minimum requirement for Enrollment in Region 6 Behavioral Healthcare’s Provider Network by reading and signing the Minimum Standards for Enrollment Form. (Attachment E) Please include a signed copy of the form with your application packet.

# Section XI-RFP Evaluation

## **Selection Process**

The RGB shall conduct a fair and comprehensive evaluation of all applications received in accordance with criteria set forth below.

All complete proposals will be scored as part of the evaluation process. Each proposal will initially be reviewed to ensure it meets the basic standards for the bid as outlined in the RFP Guidelines.

Proposals that meet all the requirements of this initial review will be forwarded to the Review Committee for evaluation.

**Evaluation and Scoring**

The following point values will be given to each of the four areas listed:

1. Program Narrative – a total of 75 Points available
2. Program Development and Implementation Schedule (BH-5) – a total of 25 points available
3. 2 Budgets and Budget Narratives (BH 20 Summary and c-g) – a total of 50 points available

Additional Note: The Recovery Support Service will need to be registered through the state’s Centralized Data System (CDS) and Electronic Billing system (EBS).

# Attachments

Attachment A: Current Recovery Support Service Definition. Note: Service definition states that it is pending, however, the service definition will be finalized on October 1, 2021.

## Attachment B: Cover Sheet

## Attachment C: BH-5 Form

## Attachment D: Budget Forms -BH-20 Summary and BH c-g

## Attachment E: Minimum Standards for Enrollment Form