

# **Request for Applications**

## **Behavioral Health Care Collaboratives**

Program Innovation and Fiscal Sustainability

Research Foundation for Mental Hygiene, Inc.

150 Broadway

Menands, New York 12204

In Partnership with:

New York State Office of Alcoholism and Substance Abuse Services

1450 Western Avenue

Albany, New York 12203

Please be aware that any expenses your agency incurs in the preparation and submission of the application(s) will not be reimbursed by NYS OASAS or RFMH

<http://www.oasas.ny.gov>

<http://www.rfmh.org>

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## **I. INTRODUCTION**

### **A. Overview and Goal:**

The New York State Office of Alcoholism and Substance Abuse Services (OASAS), through its fiscal agent, the Research Foundation for Mental Hygiene, Inc. (RFMH), is a recipient of a State Opioid Response Grant (SOR) from the Substance Abuse and Mental Health Services Administration (SAMHSA). The grant aims to provide funding for provider networks to assess current clinical and program workflows and practices that impact access, engagement, retention, medication access and ongoing management to improve and adapt practices to improve performance. The funding will support Behavioral Health Care Collaboratives (BHCCs) in developing standards, implementing metric dashboards, analyzing performance to support continuous quality improvement and fiscal modeling to increase knowledge about cost of services, cost of episodes of care, shared cost for the coordination of care and services to support improvement in care.

As the state has developed better outreach and engagement, the current system needs to accommodate the new demands for immediate access and adherence to medications, individualized and more flexible treatment plans, and a business model that supports these changes. The funding will support programmatic restructuring, implementing best practices for the treatment of opioid use disorder and achieving fiscal sustainability through receipt of financial models, including episodic or bundled rates of payment, revenue maximization and efficiencies in workflow. The costs incurred by programs to allow staff to attend training and participate in agency meetings to review workflows and develop new practices will be offset with funding from the grant.

Funding is contingent on Behavioral Health Care Collaboratives (BHCCs) meeting agreed upon implementation metrics and outcome measures. The funding will invest in current workforce training, workforce milestone achievement, consultation on fiscal modeling and revenue enhancement strategies, implementation of continuous improvement processes and percentage improvement in outcome metrics.

Goals for OUD best practice implementation include facilitating same day appointment access, immediate initiation (within 48 hours) of medication assisted treatment, and continuity and retention in addiction treatment services, which will result in an increase in the number of clients served by each provider and retention in services. Networks should identify tracking for at least two system measures, initiation of medication for new OUD admissions and continuity of care from acute inpatient withdrawal management, inpatient rehabilitation or residential care to community-based substance use disorder treatment.

## **Required Activities:**

**Providers will be required to provide a narrative response that addresses how they will achieve the following activities:**

Behavioral Health Care Collaboratives (BHCCs)

All BHCCS receiving funds will be required to do the following:

### Months 1-3:

- Identification of a “Change Team” including existing clinical, billing, front end and management staff.
- Education for all program staff on MAT and implementation of rapid access to MAT:
  - Education will be provided on all FDA approved medications to treat opioid use disorder.
  - Buprenorphine induction will occur within 24 hours of patient contact.
  - Referral relationships will be established in advance of the award to facilitate referral and linkage with a program providing opioid full agonist medication if indicated for the patient.
- Review of current workflow from first contact and admission process through treatment and discharge for all network providers. Programs can identify specific providers, for example, a detox and/or inpatient rehabilitation program that will adopt a patient centered approach to discussing medication options and develop a pathway for induction including the full continuum of providers who will work to increase engagement and continue the medication protocol through transitions of care.
- Review of service mix and population need for the provider network.
- BHCC will identify expanded access to MAT within network and identify how partners will access resources across the network to increase the number of individuals initiated and continued on MAT.
- Provider networks will also be required to:
  - Include as part of the “Change Team” at least one senior staff member from a BHCC, inpatient and withdrawal management inpatient, outpatient and Opioid Treatment Program (OTP) service provider, and at least one Medicaid Managed Care Plan.
  - Develop innovation plan with workflows across individual providers with direct connection to performance measures.
  - Develop evaluation plan, including a detailed description of continuous quality improvement strategy.
  - Provide a workflow submission that describes process for discharge planning, warm handoff to community and linkage to treatment including continuous MAT.

### Months 4-6:

- Change team to implement Continuous quality improvement plan
  - Identify one or more measures outlined at the bottom of page three (3) and establish baseline data.
  - Identify one or more program practices that are aligned with metrics.
  - Establish plan to measure and evaluate results.

- Programmatic restructuring:
  - Streamlining internal procedures to ensure maximum efficiency and use of staff time.
  - Implementing best practices for service provision.
- Fiscal sustainability:
  - Revising the current fiscal model to align with the new programmatic restructuring.
  - Maximizing revenue streams through efficient billing practices and strategies.
- Use of data to modify existing business practices for program success.
- Provider networks will also be required to:
  - Train staff and invest in workforce.
  - Identify fiscal modelling plan.

Months 7-9:

- Evaluate continuous quality improvement process
- Revise plan for CQI if needed
- Evaluate programmatic restructuring to include:
  - Workflow – have changes resulted in increased productive time for staff?
  - Workflow – increased efficiency and access to services for patients?
  - Change in service mix?
  - Improvement in patient retention?

Months 10-12:

- Full program implementation.
- Maximize revenue.
- Evaluation of the project.

BHCC Change Teams will be required to participate in Learning Collaborative and training activities as directed by OASAS. All BHCCs will be required to submit a workplan quarterly to track progress.

**Use of Grant Funds and Funding Restrictions:**

Funding will be provided on a quarterly basis after confirmation that each BHCC has achieved the milestones outlined above.

Funds are intended as an investment to increase the skill and efficiency of the existing workforce and to ensure that staff are trained and prepared to provide rapid OUD care, that program infrastructure is aligned to support OUD best practice treatment goals and services are sustainable through billing third party insurance. These funds should not be used to hire new or additional staff.

**B. Available Funding:**

OASAS, through its fiscal agent RFMH, will issue up to seven (7) awards with a maximum amount \$250,000 for each BHCC. The total amount of funding for this project is not to exceed

\$1,750,000. Funding for this project is made possible by SOR Grant through SAMHSA which ends on September 29, 2020.

**C. Eligible Applicants:**

Provider networks who are Behavioral Health Care Collaboratives.

**D. Reporting Requirements:**

The BHCC will report to OASAS quarterly on metrics and participate in learning collaboratives and training activities. Quarterly reporting clearly outlining completion of the goals and activities outlined under Required Activities is required to initiate payment. The total award amount will be distributed in four (4) quarterly payments throughout the grant year.

**II. APPLICATION PROPOSAL:**

**A. Statement of Need/Needs Assessment (10 points)**

- The applicant will describe the need for the service including volume of ED visits in 2017 and 2018 for opioid overdose, estimate of ED visits for other emergencies that are related to current opioid use disorder and an estimate of other visits where the patient had an opioid use disorder by history or through evaluation.
- Identify factors that play a significant role in the community in which services will be provided. Description of any events or any significant factors related to opioid abuse and/or the under-served population should be included.
- Identify the specific geographic area to be served by the program, including the community (city, town, village, neighborhood, or school district) to be served.

**B. Service Delivery (42 points)**

Applicants should use no more than four (4) pages to provide narrative for each of the following: (42 possible points)

1. Describe the organizational structure for the network, the name of the lead agency and the person responsible for overall direction and oversight of network collaboration. (5 points). An additional 2 points will be awarded for networks who have legal authority to enter into contracts
2. Describe the need for OUD services within the behavioral health care collaborative and how SUD, MH and physical health partners or affiliates currently communicate to identify, refer, outreach to and engage individuals with OUD. (5 points)
3. Identify a plan for improving practices within the network that will increase same day access, initiation of MAT and continuity of care from acute settings to community providers. (5 points)
4. Describe a successful project that the BHCC has implemented since organizing. (10 points)
5. Identify a plan for collecting data and tracking at least one of the above measures. (5points)

6. Identify a plan for incorporating the data into a continuous quality improvement plan. (10 points)

**C. Management and Staffing Plan (20 points)**

- Describe how the work of the BHCC will be organized around the goals of the project.
- Describe who will be responsible for deliverables on this initiative and how they will communicate with each other.
- Describe staff to be hired or consultants that will be engaged and their role in supporting the goals of the project. (provide job description for staff to be hired)

**D. Required Activities (28 points)**

- Applicants should use no more than five (5) pages to address how they will achieve the activities outlined under “Expectations” on pages 4-5. Response should be organized into sections addressing Months 1-3, Months 4-6, Months 7-9 and Months 10-12.

**III. PROPOSAL AND SUBMISSION:**

**A. Expected Timetable for Key Events:**

Release Date: Thursday, August 1, 2019

Bidders’ Questions Due: Friday, August 9, 2019

Responses to Bidders’ Questions: Friday, August 16, 2019

Applications Due: Friday, August 30, 2019

Anticipated Award: Friday, September 13, 2019

**B. Bidders’ Inquiries:**

Bidders’ questions are to be sent via email to: [SOR@oasas.ny.gov](mailto:SOR@oasas.ny.gov). All inquiries must include your name, organization, phone number, and email address. Reference the **SOR – RFA BHCC Innovation** in your message and subject line.

To the degree possible, each inquiry should cite the RFA section to which it refers; OASAS will not entertain inquiries via telephone or fax. The inquiries and answers to all inquiries will become part of this RFA and any contract. Inquiries will not be responded to on an individual basis. Written responses to all inquiries submitted by the deadline date will be posted to the OASAS website on or about Friday, August 16, 2019.

**C. Format of Proposal Instructions:**

Only one application from an applicant organization will be accepted. The proposal should be typed and double-spaced on both sides of 8 ½ x 11 paper utilizing Times New Roman, 12 pt. font. Pages should be numbered. Each side of a page will count as one page, and the application shall not to exceed twelve (12) pages. No staples are allowed.

**D. Instructions for Submissions:**

Proposals must be received by 5:00 p.m. EST on Friday, August 30, 2019. Proposals not received by 5:00 p.m. EST may be opened at the sole discretion of Research Foundation for Mental Hygiene and the Office of Alcoholism and Substance Abuse Services.

**ONE ORIGINAL and FOUR COPIES** of complete application in a sealed envelope(s) must be mailed, sent via delivery service or hand delivered by the organization or the organization’s representative to address below. The application should be addressed to:

Faith Schlesinger  
Division of Outcome Management and System Information  
New York State Office of Alcoholism and Substance Abuse Services  
Fourth Floor  
1450 Western Avenue  
Albany, NY 12203  
ATTN – State Opioid Response: BHCC Innovation

**IV. Administrative Information**

**A. Cancellation of Awards:**

The Research Foundation for Mental Hygiene and The New York State Office of Alcoholism and Substance Abuse Services reserve the right to cancel any tentative award where the applicant fails to meet contracting time frames, experiences significant contract execution issues related to vendor responsibility, or if any other issue impedes the timely implementation of services.

**B. Reserved Rights:**

NYS OASAS, through its fiscal agent, RFMH, reserves the right to

- Reject any or all proposals received in response to this RFA;
- Not make an award to any applicant who is not in good standing at the time of award;
- Withdraw the RFA at any time, at the agency’s sole discretion;
- Make an award under this RFA in whole or in part;
- Make awards based on geographical or regional consideration to best serve the interests of the State;
- Make awards in a culturally competent and ethnically diverse manner as determined necessary and appropriate in the sole discretion of OASAS to best serve the interest of the State.
- Make multiple awards within a geographic area;
- Negotiate with the successful applicant within the scope of the RFA in the best interests of NYS;

- Disqualify any applicant whose conduct and/or proposal fails to conform to the requirements of this RFA;
- Seek clarifications and revisions of applications;
- Use application information obtained through site visits, management interviews and the State's investigation of an applicant's qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the agency's request for clarifying information as it becomes available;
- Amend the RFA to correct errors or oversights, or to supply additional information as it becomes available;
- Direct bidders to submit proposal modifications addressing subsequent RFA amendments;
- Change any of the scheduled dates;
- Eliminate any mandatory, non-material specification that cannot be met by all the prospective bidders;
- Waive any requirement that is not material;
- Conduct contract negotiations with the next responsible bidder, should the agency be unsuccessful in negotiating with the selected bidder;
- Accept submissions after the due date, if OASAS through RFMH in its sole discretion, determines there is good cause shown for the delay in the submission(s)/letter(s);
- Utilize any and all ideas submitted in the applications received; and
- Require correction of simple arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of a bidder's application and/or to determine a bidder's compliance with the requirements of the solicitation.

**ATTACHMENT A  
Program Application**

**Applicant Information:**

1. Name of Applicant BHCC:	
2. Name of Applicant Lead Agency:	
3. Applicant's Street Address/P.O. Box:	
4. Applicant's City/Town/Village:	5. Postal Zip Code:
6. Name of Applicant Contact Person:	7. Title of Contact:
8. Contact Telephone #:	9. Contact Email:

**Narrative:**

<b>1. Statement of Need/Needs Assessment (1 page):</b>
<b>2. Service Delivery (4 pages):</b>
<b>3. Management and Staffing Plan (1 page):</b>
<b>4. Required Activities (5 pages):</b>
<b>5. Identify the potential plan partner (this may be subject to change):</b>