

Request for Expression of Interest (REOI)

BHA REOI No. 2021-002

Adolescent Hospital Overstay Program

Issued by:

Maryland Department of Health
Behavioral Health Administration

Dix Building

Spring Grove Hospital Center

55 Wade Avenue

Catonsville, MD 21228

Deadline for Submission: March 23, 2021

1.0 Program Overview

1.1 Purpose

The Maryland Department of Health (MDH) invites expression of interest by residential treatment facilities to provide enhanced patient care services to reduce and eliminate barriers affecting the placement of adolescents experiencing extended hospital stays.

MDH wishes to leverage a Behavioral Health Administration (BHA) grant program to provide enhanced funding in support of bridging short-term residential treatment for patients experiencing extended hospital stays.

The purpose of this REQUEST FOR EXPRESSION OF INTEREST (REOI) is to solicit proposals from Providers who wish to provide enhanced services for adolescent patients that have historically been difficult to place in appropriate residential treatment facilities due to acuity levels and insufficient reimbursement rates for their care.

1.2 Goals and Objectives

The goal is to identify Providers who are interested in supporting the Department's goals of eliminating barriers to placement through the award of grant funding for enhanced services supporting hospital overstay population patients. Based on the responses from the REOI, Providers may be asked to respond to a more detailed grant application for their regions of interest and service interests. Providers are only required to provide information on regions or sections where they are interested in providing service. Providers may also indicate other areas of services.

MDH may work with Providers willing to accept patients who are difficult to place and support the enhancement of services for patient care.

1.3 Identified Challenges

The major challenge to placement for the adolescent hospital overstay population has been the ability of providers to meet the diagnostic, therapeutic treatment, staffing, length of stay, and patient environment of care requirements within the current reimbursement for services model.

Population:

1. Based on the analysis of available data, MDH projects an initial need for 18 beds to admit and treat adolescents waiting in hospitals for placement. The number of beds is tied to the broad age range and diagnoses of identified patients.
2. Populations to be served include those youth who need a therapeutic residential setting, but are currently not able to get their needs met within one of the existing in-state Psychiatric Residential Treatment Facility programs (PRTFs.)
3. Current estimates suggest that there is a need to treat approximately 25 patients annually, but these projections may vary based on the inclusion of patients who are in the process of providing all required supporting documentation for PRTF services.

Diagnoses, Therapeutic and Patient Care Environment Considerations:

1. Diagnostic and psychosocial/behavioral categories to be served include, but are not limited to, youth with multiple developmental, psychiatric and behavioral challenges including lower cognitive capacity, autism spectrum, severe aggression/assaults, history of significant neglect and trauma, reactive attachment disorders, fetal alcohol effects, serious fire setting behaviors, serious co-occurring substance-use disorders, sexually reactive behaviors, sexually trafficked youth and others with increased flight (AWOL) risk, and youth in agency custody or with agency involvement who are over age 18.
2. Therapeutic requirements including clinical programs targeting specific subpopulations noted above, and increased staffing training and support (including increased staff to patient ratios) for those programs, and therapeutic environmental augmentation needed to manage these specialized youth.
3. Patient Care Environment Considerations often include increased levels of security, durable material finishes, and ligature resistant environments.

Educational Considerations:

1. Education support is an integral component of residential treatment programs. Individual patients require specialized educational services designed to meet the individualized needs of patients in accordance with Maryland State Department of Education (MSDE) rules and regulations.
2. Increased funding to support enhanced educational program requirements is envisioned as part of the grant program/

1.4 Responsibilities

The Provider shall agree to the following:

To provide short-term bridging residential treatment services for adolescent patients experiencing extended hospital stays within established residential treatment facilities as a condition of the award of grant funding supporting the development of enhanced services. Providers must accept patients that align with enhanced services models developed as a condition of grant award.

To provide all components of care within the residential treatment center guidelines including therapeutic treatment and all required educational services in accordance with MSDE rules and regulations.

MDH anticipates the total need for beds will be supported by multiple providers. There is no requirement to provide the total number of anticipated beds. Providers are encouraged to respond with interest to support patients that align with treatment services expertise in place, or areas of service that a provider may be interested in developing.

To work actively with MDH for long-term placement of patients as required.

1.5 Areas of Responsibility

MDH is exploring the development of a grant initiative, but has made no promises nor is it legally bound by the expressed intention.

Proposed Grant Initiative:

MDH will work to develop and administer a new grant program through BHA for support of enhanced patient services.

1. Grants shall be issued to one or multiple non-profit residential treatment centers.
2. Grants shall include the provision of providing increased rates for higher acuity patients.
 - a. Grants shall provide gap funding supporting enhanced provider services above normal reimbursement rates, and award shall be based on number of patients/patient days of service.
2. Grants shall be structured to ensure Providers meet licensure, environment of care, and level of care qualifications for identified patient population.
3. Grant awards shall be structured on a not-to-exceed basis up to the guaranteed FY 2022 funding level.
4. The grant award process shall be completed by July 1, 2021, to coincide with the FY 2022 funding allocation.
 - a. Patients could begin being placed into RTC beds as soon as the funding becomes available.

2.0 REOI Process and Provider Response Requirements

2.1 Contact and Response Information

Summary of Key Dates

Intention to Respond deadline February 26, 2021

Final date to submit questions via email March 10, 2021

Response to REOI deadline: March 23, 2021

2.1.1. Intention to Respond

Interested Providers should submit the Intention to Respond notification by the date indicated in Section 2.1. Providers must send an e-mail to the attention of the BHA Contact in Section 2.1.3 with the following information:

- Name of Provider's representative for the purposes of this REOI.
- Contact information.
- A statement indicating their Intention to Respond to REOI.

2.1.2. Questions about the REOI

Providers with questions about the REOI should forward them via email to the BHA Contact. Identifying marks will be removed from the email and the original question, with an answer, will be forwarded to all Providers who filed Intentions to Respond. BHA will not respond to questions by telephone or in person.

2.1.3. BHA Contact

Refer all questions, and send all Response Information to:
Attention: Ms. Siji Georgekutty, Procurement Supervisor
Maryland Department of Health
Behavioral Health Administration
Dix Building
Spring Grove Hospital Center
55 Wade Avenue
Catonsville, MD 21228
Phone: (410) 402-8433
Email: siji.georgekutty@maryland.gov

2.1.4. Response to REOI Requirements

Providers shall submit REOIs electronically via email to Ms. Siji Georgekutty, Procurement Supervisor at siji.georgekutty@maryland.gov. Submissions should be formatted to print at full size on standard letter size paper with margins no less than 1 inch. The size of type must be at least 12 points or 10 characters per inch. Providers shall submit a PDF of the full document.

3.0 Response to REOI Content

3.1 Format

Note: Failure to follow the Response to REOI Format may result in the disqualification.

In order to ensure that there is uniformity to the responses and to facilitate the comparison between Providers, all responses MUST contain the following content, organized according to the headings in this section.

General: The Provider's name must appear in the upper right-hand corner of each page and each page should be numbered consecutively.

Cover Page – Containing legal name, address and contact information for the Provider.

1. Executive Summary

- maximum 1 page.
- a short summary, regions of interest, costs, requested public assistance, and any value added the Provider will bring to the grant.

2. Provider Estimates

- Provide cost estimates based on patient populations of interest.
- Provide a justification for costs associated with patient care costs including diagnostic, therapeutic treatment, staffing, length of stay, and patient environment of care requirements beyond the current reimbursement for services model.
- Provide a brief description of proposed services.
- Provide additional information or notes outlining other programs and residential treatment service areas that would be complementary or other additional enhanced service the Provider would propose to provide in the patient population of interest.

3. Project Management

- Include the name and contact information for the Provider project management contact/s.

4.0 Official Signatures

Include a letter from the Provider's signing authority approving the submission of the Response to REOI and the content therein.

4.1 Next Steps

A properly completed Response to REOI will qualify the Provider to proceed to the grant application process. The data provided may be used by MDH to develop a Grant Program for enhanced residential treatment services.

It is expected that this information will be refined during the application process and then used for the final application for grant award.

5.0 Additional Matters

5.1 Ownership

All materials submitted in response to the REOI become the property of MDH. Responses and supporting materials will not be returned to Providers, nor will MDH consider any expenses that the Providers may incur in preparing these responses. All materials submitted will be kept confidential and only reviewed by MDH and coordinating State Agency staff. This information will not be shared with other Providers.

5.2 Rights to Reject

MDH reserves the right to reject any or all responses to the REOI.