



DEPARTMENT OF HEALTH

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

Comprehensive Crisis Systems – Western Maryland

Request for Expressions of Interest (REOI)

OFMD REOI No. 2022-003

Issued: June 2, 2022

Submission Deadline: July 1, 2022, 5:00 PM

Office of Facilities Management and Development
Maryland Department of Health
201 W. Preston Street
Baltimore, Maryland 21201

<https://health.maryland.gov/bha/Pages/Index.aspx>

Electronic submission is required.

TABLE OF CONTENTS

I.	PROGRAM OVERVIEW	1
A.	Program Purpose	1
B.	Goal and Objective.....	1
II.	PROGRAM COMPONENTS	2
III.	REOI PROCESS AND SUBMISSION REQUIREMENTS.....	2
A.	Contact	2
B.	Summary of Key Dates	2
C.	Intent to Submit.....	3
D.	Questions about the REOI.....	3
E.	Submission Requirements.....	3
F.	Format/Content	3
IV.	CONFIDENTIAL INFORMATION.....	4

I. PROGRAM OVERVIEW

A. Program Purpose

The Maryland Department of Health (“MDH”) is committed to developing a framework for an integrated, comprehensive crisis system in Maryland. In furtherance of this commitment, MDH is working to establish a comprehensive network of providers to support and partner with MDH. MDH’s vision for the Maryland Behavioral Health Crisis System (“Crisis System”) is to develop standardization and best practices that will allow all Maryland residents to have 24/7 access to behavioral health crisis hotlines, urgent care/walk-in, mobile crisis response teams and crisis stabilization center services that provide care in the most effective, least restrictive, and person and family-focused manner.

The Crisis System is intended to provide stronger links to community-based behavioral health care for individuals who have not yet been engaged by the behavioral health system, diverting people in crisis in a safe and appropriate manner away from emergency departments and criminal justice systems. The Crisis System will create additional capacity for individuals with behavioral health-related disorders who engage in high-risk behaviors when in crisis and/or at risk of overdose or suicide by providing an alternate destination to accept people who have been emergency petitioned.

MDH recognizes that when crisis intervention is met with delay, detainment, and denial of services, it can create undue burden on the individual in crisis, law enforcement, emergency departments, and the justice system. The challenges include individuals struggling to access care; significant increase in overutilization of hospital systems, law enforcement and justice systems; and escalating cost of inpatient healthcare for individuals who are unable to access needed community-based services in a timely manner.

The purpose of this Request for Expression of Interest (“REOI”) is to invite expression of interest (“Expression of Interest”) from community providers, hospitals, local behavioral health authorities (“LBHAs”), core service agencies (“CSAs”) and local health departments (collectively referred to as “Providers”) to collaborate with MDH to identify the current crisis service needs in western Maryland (including Allegany, Frederick, Garrett, and Washington Counties), identify the challenges with currently available services, and identify Providers seeking to offer behavioral health crisis services in the western Maryland region.

B. Goal and Objective

The goal is to identify Providers interested in collaborating with MDH in the development of a comprehensive crisis services system for the western Maryland region supporting all persons experiencing mental health and/or substance use crisis. The Crisis System will be grounded in a public behavioral health framework; integrated into the acute behavioral health crisis care system; and connected to local social service providers. The objective is to maximize use of the existing public behavioral health system by serving as a new and critical access point for individuals.

Based on the responses from the REOI, MDH will work to develop request(s) for proposals that outline programmatic requirements to address current service needs, factoring in the challenges of currently available services, in order to create a system for comprehensive behavioral health crisis services in the western Maryland region.

II. PROGRAM COMPONENTS

Behavioral health crisis response services should interrupt and/or ameliorate a crisis including a preliminary assessment, immediate crisis resolution, de-escalation, and linkage to community resources by making crisis response services available 24/7. Direct crisis services assist with de-escalating the severity of a person's level of distress and/or need for urgent care associated with a mental health or substance use disorder and seek to stabilize the individual for referral to continuing care.

The planned crisis support services are for 24/7 operations/urgent care crisis services that will accept walk-in visits with no appointment required for immediate mental health and substance use support. Crisis service Providers shall be equipped to handle multiple behavioral health crises at one time, such as co-occurring crises and social determinants of health, and provide a welcoming and respectful environment for both individuals who are transported and those who walk in, without regard to age, insurance status, or ethnic, cultural or linguistic (such as use of language interpreting or certified ASL interpreter) preference.

Service Providers shall be capable of supporting individuals experiencing a behavioral health crisis who are at high risk of instability in the community, especially those who are in danger of harm to self or others and at risk of immediate referral to a hospital emergency room.

The Maryland Behavioral Health Crisis System will include the following components:

- Someone to Call - Crisis Call Center
- Someone to Respond - Mobile Crisis and Stabilization Response Teams
- Somewhere to Go - Crisis Hub, Safe Stations/Walk-In/Urgent Care/Stabilizations and Residential Crisis Beds

III. REOI PROCESS AND SUBMISSION REQUIREMENTS

A. Contact

Refer all questions, and send all materials to:

Attention: Mindy Kim-Woo
Maryland Department of Health
Office of Facilities Management and Development
201 W. Preston Street
Baltimore, MD 21201
Phone: (410) 767-6862
Email: mindy.kim-woo@maryland.gov

B. Summary of Key Dates

- Informational webinar: Thursday, June 9, 2022
- Intent to Submit deadline: Friday, June 10, 2022
- Final date to submit questions via email: Monday, June 13, 2022
- Answers to questions returned: Friday, June 17, 2022
- REOI submission deadline: Friday, July 1, 2022, 5:00p.m.

C. Intent to Submit

Interested Providers must submit the Intent to Submit notification by the date indicated in Section III.B. above. Providers must send an e-mail to the attention of the contact in Section III.A. above with the following information:

- Name of Provider's designated project contact for purposes of the submission;
- Contact information including organization name, email, address and phone number; and
- A statement indicating the Provider's Intent to Submit an Expression of Interest

D. Questions about the REOI

Providers with questions about the REOI should forward them via email to the contact from Section III.A by the deadline set forth in Section III.B. MDH will redact identifying marks from the email and forward the original question, with an answer, to all Providers who registered during the Intent to Submit process. MDH will not respond to questions by telephone or in person.

E. Submission Requirements

Providers must submit one electronic copy of their Expression of Interest by the date indicated in Section III.B. above to the attention of the contact in Section III.A.

An electronic copy is defined as an emailed version of the document in PDF file format. Other file formats will not be accepted.

F. Format/Content

For uniformity, all submissions should 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.

Content: Submission must include, at a minimum:

- 1) **Overview:** A detailed description of the problem in the jurisdiction, severity of the problem, partnerships formed to address the problem, gaps in services and previous interventions to address the problem, and a well defended intervention plan. Describe how the proposed crisis services will serve and/or be supported by neighboring jurisdictions (regional approach) and other human service agencies.
- 2) **Program/Service Description or Summary:** Submit a clear and concise narrative of what the program will deliver including a detailed description of how the proposed services will be integrated and coordinated with any existing or other newly funded crisis services within the service area. Describe how the proposed program will serve as an alternate destination to accept people who have been emergency petitioned and/or serve as a diversion from emergency departments.

- 3) **Timeline:** Provide a detailed proposed timeline, including projected dates for all activities and projects including, but not limited to planning, staff hiring, and operations.
- 4) **Provider Expertise:** Description of Provider expertise and organizational capacity to provide services to include:
 - A. Experience working with individuals who are Medicaid eligible and/or are uninsured;
 - B. Prior or current experience in providing behavioral health-related walk-in/urgent care/stabilization services, mobile crisis services or residential crisis beds;
 - C. Prior or current experience in operating behavioral health-related crisis beds, including copies of current certifications/licenses for mental health crisis beds;
 - D. Prior or current experience working with all populations including children, youth, families and adults; and
 - E. Partnerships with local behavioral health authorities, core service agencies, local addiction authorities, emergency medical services, behavioral health providers, neighboring hospital emergency departments, law enforcement, community outreach workers, and other community organizations.
- 5) **Outcomes:** Identification of performance and outcome indicators to be used in evaluating the proposed program's effectiveness, including a description of the expected schedule for measuring performance and outcomes.
- 6) **Fiscal/Budget:** Provide information as to historic and current funding obstacles that may limit the ability to provide and/or expand services.
- 7) **Official Signatures:** Include a letter from the Provider's signing authority approving the submission of the Expression of Interest and the content therein.

IV. CONFIDENTIAL INFORMATION

All materials submitted in response to the REOI become the property of the Maryland Department of Health. No submissions or supporting materials will be returned to Providers, nor will MDH reimburse Providers for expenses that Providers may incur in preparing submissions. All materials submitted will be kept confidential and only reviewed by MDH and coordinating State agency staff. Submission information will not be shared with other Providers.