



Contra Costa County Behavioral Health Division
Alcohol and Other Drugs Services

Request for Proposals (RFP)

Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver

Substance Use Disorder Continuum of Care
ASAM Levels 1.0 (Outpatient) and/or 2.1 (Intensive Outpatient) for
Adolescent Substance Use Services AGES 12-17

September 2019

Contra Costa County Alcohol and Other Drugs Services (hereinafter “AODS”) is seeking proposals from suitably qualified community-based providers in becoming a subcontracted provider under the Drug Medi-Cal Organized Delivery System (DMC-ODS) Plan. Applicants responding to this Request for Proposals (RFP) will state which American Society of Addiction Medicine (ASAM) level(s) of care will be implemented as well as the plan on how the ASAM Criteria, Evidence-Based Programs (EBPs) and California Youth Treatment Guidelines will be integrated into the program’s clinical practices and reflective in the proposed budget. The County will fund the selected program through the DMC-ODS Waiver. Organizations selected under this RFP process will become providers in the Substance Use Disorder (SUD) treatment delivery network. Organizations selected are expected to bill Drug Medi-Cal for the reimbursement of the cost of service delivery via the Share Care billing system. Any contracts awarded under this process will be renewed on a year to year basis for up to 3 years beginning on July 1st of each year. Annual renewals will be made contingent upon the continued availability of funds, satisfactory achievement of program goals, and performance review outcomes. Future cost of living and/or other adjustments to contract funding are dependent upon the State allocation of funds to the County and the action of the Board of Supervisors.

Awards will be based upon the quality of the submissions, organizational capacity, DMC readiness of the applicants, and availability of funds. Non-billable costs associated with outpatient treatment services will be reimbursed utilizing other funding sources.

Contra Costa County AODS will enforce all policies and procedures amongst all providers, regardless tax code sectors or characteristic of the population served. AODS will not discriminate against youth who require high intensity interventions and/or specialized services.

A. Format, Delivery and Due Date

This RFP and all related forms and materials are available on-line at AODS’s website:

<http://cchealth.org/aod/>

All required documents will be located in the **Latest News** section on the right side of the web page.

Please provide one electronic copy on USB Flash Drive, a signed original document plus and additional five (5) hard copies of your Statement. Each hard copy must be clipped or stapled in the upper left corner (only) and clearly marked with the name and address of the lead agency. Additional specifications:

- ✓ Written in Times New Roman in size 12 font, double-spaced
- ✓ Margins 1” on all sides
- ✓ All pages consecutively numbered
- ✓ Statement follows the outline presented below
- ✓ Original and copies printed on three-hole punched paper
- ✓ 16-page text limit for Narrative.

All proposals should be delivered to the following:

AODS Program Chief
Contra Costa Alcohol and Other Drugs Services
1220 Morello Ave, Suite 101
Martinez, CA 94553

A single, packaged set of all proposals and electronic submissions are due at the above address by 5pm on **Friday, December 6, 2019**. Postmarks on this date will not be accepted. Late proposals will not be accepted and will not be reviewed. There will be no exceptions. No faxes or electronic submissions will be allowed.

In the order presented, submissions should include the following:

- 1) Cover Page (see attached)
- 2) A description of the overall philosophy of the program/provider along with a brief history of the provider’s experience working in the SUD field. (1-2 pages)
 - a. Resumes of Key Staff Positions
 - b. List of Board of Directors
 - c. Organizational Chart(Resumes,, list of Board of Directors and organizational chart not included in page count.)
- 3) A clinical program design that details the ASAM level of care and modality that is to render services under this agreement along with how the *ASAM Criteria* will be integrated into the Levels 1.0 and/or 2.1 program’s clinical practice, policies and procedures. Include the use of, at minimum, the two Evidence-Based Practices as outlined in the County’s Implementation Plan, Motivational Interviewing (MI) and Cognitive-Behavioral Therapy (CBT). Describe how youth will be served in the facility and how the treatment services will be tailored to meet individual and unique needs. (Include an approach to treatment for youth with co-occurring disorders and how the program will collaborate and coordinate with Mental Health Services, including Community Based Organizations.) (1-2 pages)

- 4) A description of how the program will integrate the California's *Youth Treatment Guidelines* 2002 into its program design. Please be specific. (1-2 pages)
- 5) An administrative work plan in narrative form that clearly states how the applicant will collect the following required data
 - Confirmation of a participant's Medi-Cal eligibility
 - Procedure for billing other health care insurance plans prior to billing DMC
 - Submission of invoice demands
 - Implementation and evaluation of the administrative work plan

If the applicant is an agency, please include a corporate profile which includes the designated staff responsible for the implementation and evaluation of the administrative work plan. If the applicant is partnering with sister agencies, please include their corporate profiles and staff resume(s) as well. (1-2 pages)
- 6) A budget outlining the expected cost of the project, broken down by major cost categories (utilizing worksheets available at <http://cchealth.org/aod/> in the Latest News section). The budget should include a justification and should be linked to the program design and administrative work plan narrative. (1 page)
- 7) A sustainability plan describing how the provider will sustain the program/model throughout the duration of the contract. (1 page)
- 8) Memorandum of Understanding (MOU) of partners and local key stakeholders committed to help you establish the program and provide referrals.

B. Applicants' Conference

All interested county and/or community-based providers must participate in a **MANDATORY** applicants' conference on **Tuesday, October 29, 2019 from 10:00 am to 12:00 pm**. Those planning to participate in the conference should RSVP no later than 5 pm the day prior to the conference to **Maria Ramos (Maria.Ramos@cchealth.org)**. The Applicant's Conference will be at Central County Children's Mental Health Services located at **1220 Morello Ave (2nd floor conference room), Martinez, CA.**

Please email any preliminary questions to the aforementioned email, which will be addressed at the conference prior to any other inquiries. AODS cannot guarantee that time will be available to respond to all questions posed at the applicants' conference. Please email these questions to **Maria Ramos (Maria.Ramos@cchealth.org)** Additional questions will be accepted after the applicants' conference at the same email address listed above no later than 5pm on **Friday, November 8, 2019**. Any questions that are not able to be answered during the conference as well as any additional questions that are posed by potential bidders post-conference shall be answered and disseminated to all attendees of the applicants' conference by 5pm on **Friday, November 15, 2019**.

D. Additional Information

All RFP submissions will be reviewed promptly and the goal of AODS is to announce all selections by 5:00 p.m. on **Tuesday, December 31, 2019.**

Non-selected applicants may appeal AODS' selection of awardee(s) within 5 days of notification. Appeals must be addressed to the Director of Behavioral Health. Appeals must be in writing and shall be limited to the following criteria:

- The county failed to follow the RFP procedures, which affected the submission scoring; and/or
- The RFP evaluation criteria were not appropriately applied to the submission.

The Director of Behavioral Health will respond to the appeal within seven days with a final decision will be final and not subjected to further review.

I. BACKGROUND

A. The Need

Substance Use among adolescents continues to be a major concern at the national and local level. At the national level, the National Institute on Drug Abuse (NIDA) Monitoring the Future Survey (MTF) in 2018 indicated that for the past three years, many substances have held steady at the lowest levels of use. In 2018, those substances included alcohol, cigarettes, heroin, prescription opioids, MDMA (Ecstasy or Molly), methamphetamine, amphetamines, sedatives, and ketamine. While the overall use of alcohol and tobacco is declining, the most striking finding of MTF is a substantial increase in vaping, including marijuana vaping. Although perceived harm findings were mixed, increased societal acceptance towards marijuana through legalization has increased accessibility and softened attitudes. This is concerning because there is growing scientific evidence that heavy, regular use of marijuana that begins during the teen years can interfere with aspects of functioning and well-being.

The California Healthy Kids Survey (CHKS) from 2015-2017 highlighted data obtained from a representative sample of 40,371 7th, 9th and 11th grade students throughout Contra Costa County. The table below shows the rates drug use amongst Contra Costa's youth.

	Grade 7	Grade 9	Grade 11
Sample size	13,358	14,793	12,220
Any drug use	3%	9%	18%
Heavy drug use	1%	5%	11%

Research suggests that the onset of alcohol, marijuana and other drugs often occurs during adolescence, increasing the risk for developing substance use disorders down the line. The alarming numbers suggest a need for more treatment services for youth in the County. Though rates of alcohol use have declined, binge drinking is the most commonly reported –and most dangerous way that adolescents consume alcohol (U.S. Department of Health and Human Services, Office of Populations Affairs), particularly for high school seniors.

Furthermore, according to the California Health Care Foundation, substance use and mental illness amongst California's youth continues to rise. Co-occurring disorders occur at a rate of 60% to 75% amongst adolescents with a substance use disorder. Unfortunately, dedicated resources for youth with mental health and SUD disorders are limited and as a result many youth do not receive treatment. Currently, Contra Costa AODS has limited SUD Treatment for adolescents who are at risk of, or have been diagnosed with a substance use disorder. It is the intent of this RFP to expand and geographically broaden a wider range of specialized treatment services for youth that meet their unique developmental and cultural needs.

B. Contra Costa County: Behavioral Health Services

The Behavioral Health Services Division of Contra Costa Health Services combines Mental Health Services and Alcohol & Other Drugs Services into a single system of care. With increasing challenges in serving complex populations with multiple needs, this integration is a response to the growing desire to have improved consumer outcomes through a systems approach that emphasizes “any door is the right door,” and that provides enhanced coordination and collaboration when caring for the “whole” individual.

The mission of Contra Costa Behavioral Health, in partnership with consumers, families, staff and community-based agencies, is to provide integrated, accessible, client-centered services for SUD and mental health treatment. Furthermore, the department aims to promote wellness, recovery and resiliency while respecting the complexity and diversity of the people we serve.

1. Mental Health Services: Mental Health Services provides care to children, transition age youth, adults and older adults living in Contra Costa County. These services are provided through a system of care that includes county owned and operated clinics, community-based organizations and a network of private providers. Contra Costa's youth are served by a county-wide system of care that includes mental health staff working in partnership with family members, social service organizations, school districts, juvenile probation department, Psychiatric Emergency Services (PES), etc. Mental Health Services also include prevention programs that aim to prevent the progression and/or onset mental health issues. The Contra Costa Mental Health Plan is the mental health care provider for Medi-Cal beneficiaries and the uninsured.

2. Alcohol and Other Drugs Services: Alcohol and Other Drugs Services (AODS) “puts people first.” The mission of AODS is to advocate for alcohol and drug free communities by promoting individual and family responsibility leading to self-sufficiency. The AODS System of Care is a planned, comprehensive approach for providing alcohol and other drug prevention and treatment and services in Contra Costa County. The continuum of care benefits consumers and providers by combining administrative and clinical services in an integrated, coordinated system. The goal is to give consumers high-quality and cost effective care in a timely manner.

C. Drug Medi-Cal Organized Delivery System

The DMC-ODS is a voluntary pilot program that offers California counties the opportunity to expand access to high-quality care for Medi-Cal enrollees with SUDs. The goal of the DMC-

ODS is to demonstrate how organized SUD care improves beneficiary health outcomes, while decreasing system-wide health care costs. Counties that choose to participate in the DMC-ODS are required to provide access to a full continuum of SUD benefits modeled after the *ASAM Criteria*. This approach is expected to provide eligible youth with access to the care and services they need for a sustainable and successful recovery. Contra Costa County implemented the DMC-ODS Waiver on July 1, 2017.

The DMC-ODS improves access to quality care by:

- a. Expanding local networks of high quality providers through selective provider contracting
- b. Requiring the use evidence-based practices in SUD treatment
- c. Increasing coordination with other systems of care, including physical and mental health (requires coordination with managed care plans)
- d. Increasing local control and accountability with greater administrative oversight
- e. Creating quality assurance and utilization controls to promote efficient and effective use of resources.

II. PROGRAM CRITERIA

A. American Society of Addiction Medicine (ASAM) Levels of Care

The *ASAM Criteria* provides outcome-oriented and results-based care in the treatment of SUD. The Criteria was created to improve the quality of SUD treatment and provides a universal framework to guide assessment and treatment approaches. It is a single, common standard for assessing patient needs, optimizing placement, determining medical necessity and documenting the appropriateness for reimbursement. The principles and concepts of the *ASAM Criteria* promote good stewardship of resources in the SUD, mental health and general health care systems. In alignment of the terms and conditions of the DMC-ODS Waiver and the County Implementation Plan, Contra Costa County AODS will be subcontracting for the following modalities through this RFP.

- ASAM Level 1.0: Outpatient Services

Level 1.0 encompasses organized outpatient treatment services, which may be delivered in a wide variety of settings. Services are designed to treat individuals who present with the stability and ability to participate in low intensity professionally directed SUD treatment. Youth receive up to six hours of treatment per week consisting of individual and/or group counseling sessions. Treatment addresses lifestyles, attitudes and behaviors that have contributed to substance use and can ultimately prevent the achievement of treatment goals. Level 1.0 is also appropriate for beneficiaries who are ambivalent and not ready to commit to a more intensive program.

- ASAM Level 2.1: Intensive Outpatient Services

Level 2.1 generally provides 6-19 hours of structured programming consisting primarily of counseling and education about addiction-related and mental health problems. The patient's needs for psychiatric and medical services are addressed through consultation and referral arrangements. Treatment addresses multi-dimensional factors which impact major life domains that require high intensity, professionally structured treatment.

B. Youth Treatment Guidelines

All county-funded youth SUD treatment services must adhere to the State of California's *Youth Treatment Guidelines*. These reflect overarching principles of SUD treatment that characterize the most effective approaches and interventions, and the philosophy of care for youth that recognizes their developmental and multiple needs, family involvement and assures youth safety.

a. County and Program Outcomes

Expected County Outcomes

1. Assurance of treatment capacity for youth
2. Reduction of barriers to youth specific services
3. Provision of continuous quality improvement
4. Provision of a continuum of care for youth

Expected Program Outcomes

1. Reduction and/or elimination of substance use for youth
2. Improvement of major life functioning
3. Placement and safe treatment in the most appropriate, least restrictive settings.

C. Continuum of Care

A full continuum of care should be available to address the varying levels of services needed by youth, and allow for movement across levels as treatment progresses or regresses. In addition to formal treatment, the continuum of care for youth and their families should include pre-treatment options (mentoring, brief interventions, harm reduction, etc.), relapse prevention (before, during, or after formal treatment), and aftercare services.

D. Cultural Competency

- **Culturally and Linguistically Appropriate Services (CLAS):** All services shall meet the National CLAS standards. Providers are responsible to provide culturally and linguistically competent services, which are reflected in their policies and practices. The CLAS standards should be evident in their organizational structure, daily operations and service delivery.
- **Youth Treatment Guidelines:** SECTION VII. “Culture and Language”

E. Evidence Based Practices

Contra Costa County’s AODS and DMC-ODS implementation guidelines require that programs implement, at a minimum, both of the following evidence based practices: **Motivational Interviewing (MI)** and **Cognitive Behavioral Therapy (CBT)**. The practices are expected to be implemented with fidelity via the application of program curricula and/or other therapeutic approaches of treatment.

F. Critical Linkages

Per the Youth Treatment Guidelines, the program should develop strong linkages with existing primary health, mental health, social, educational, mentoring, and employment development programs that provide services to youth.

This includes the AOD services system as well, since AOD prevention programs and perinatal treatment programs provide opportunities for identification and referral of youth with AOD problems. The program should collaborate with other agencies providing services to youth as indicated by the client’s needs and in order to ensure a coordinated approach.

These may include, but should not be limited to Health, Employment and Human Services, Office of Education, Behavioral Health Services, Juvenile Probation, Children and Family Services, and other community based organizations providing services to youth.

III. TARGET POPULATION

Youth eligible for SUD treatment under the scope of this RFP are individuals ages 12 through 17 (inclusive) who have a diagnosis of SUD from the DSM 5, reside in Contra Costa County, be enrolled in Medi-Cal from Contra Costa and meet the ASAM definition of medical necessity. To serve youth 18-21 and under the age of 12, the program must document the clinical appropriateness for that age group.

IV. Other Requirements and Expectations for Grantees

A. Contract Terms and Conditions

The contractor shall be required to comply with Public Law 102-321 (1992) which enacted the Alcohol, Drug Abuse, and Mental Health Reorganization Act, 42 CFR Part 96; Division

10.5, California Health and Safety Code; Title 9, California Code of Regulations; Americans With Disabilities Act of 1990; HIPAA.

B. Administrative Guidelines

1. Contractors will be paid on a monthly basis, following the submission of an invoice to the Contra Costa County Department of Health Services for services performed to County's satisfaction. Specific instructions and invoice templates will be provided to grantees upon award of a contract. It is the responsibility of the contractor to track expenditures and any services provided by contractor and/or subcontractors and expenses that exceed the annual allocation will not be reimbursed.

2. Contractor shall maintain medical records required by the California Code of Regulations. Notwithstanding the foregoing, Contractor shall maintain beneficiary medical and/or clinical records for a period of seven (7) years, except that the records of persons under age eighteen (18) at the time of treatment shall be maintained: a) until one (1) year beyond the person's eighteenth (18th) birthday or b) for a period of seven (7) years beyond the date of discharge, whichever is later.

3. Contractor shall comply with applicable State and Federal statutes and regulations, and case law, including but not limited to the Federal Health Insurance Portability and Accountability Act (HIPAA), Title 42 of the Code of Federal Regulations, Title 9, California Administrative Code, hereinafter referred to as "Code", as well as all future changes or amendments to each of the preceding, and the State of California, Department of Mental Health, Cost Reporting/Data Collection System. Grantee will, in cooperation with County, comply with Sections 5718(a)(1) of California State Welfare and Institutions Code and obtain certification of patient's eligibility for mental health services under the California Medical Assistance Program. As required by Section 521 of the California Administrative Code, Title 9, the Local Mental Health Director or the Director's designee shall be permitted to supervise and specify the kind, quality, and amount of the services and criteria for determining the persons to be served pursuant to this Agreement.

4. Contractor agrees to administer/utilize any and all surveys, screening instruments, assessment tools and outcomes/satisfaction measurements as directed by Contra Costa County's Alcohol and Other Drugs Services and once per year, the contractor will administer the Treatment Perception Survey (TPS).

5. Contractors must also comply with all reporting requirements set forth by the Department of Health Care Services (ie. NACT, Cal OMS, DATAR) including, but not limited to, completion of cost reports, audits and onsite visits.

6. Programs must comply with state and federal laws and regulations regarding informed consent for children also known as "Minor Consent" disclosure of confidential information such as patient-identifying information (including communication with parents, guardians, courts) child abuse and neglect reporting requirements, and duty-to-warn issues.

7. Client Confidentiality. Contractor shall comply with Federal client confidentiality regulations (Confidentiality of Drug and Alcohol Patient Information – 42 U.S.C. 290dd-2; 42 C.F.R Part 2),

and all applicable Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulations

C. Selective Contracting

Neither the applicant, nor any staff to be assigned to the program which is the subject of this request, shall have been disqualified to provide services which are funded by any Federal or State healthcare program. To be eligible to contract with the County an individual or entity must not be listed on the current Cumulative Sanction List of the Office of the Inspector General (U.S. Department of Health and Human Services) or the General Services Administration's list of parties excluded from federal programs, or the California Medi-Cal Suspended and Ineligible Provider List. The County will not review a proposal submitted by an individual or entity found to be on any of these lists. The County plans to use the following links to identify individuals and entities that are not eligible to contract with the County: <http://exclusions.oig.hhs.gov>, <https://www.sam.gov>, and Medi-Cal Suspension Search Database.

Each bidder should verify that it is not on any list prior to preparing a proposal to submit in response to this solicitation. Correction of any errors found on any sanction list is the sole responsibility of the bidder and must be made prior to the day the proposal is submitted. The County requires all potential bidders (individuals or entities) to self-disclose any pending charges or convictions for violation of criminal law and/or any sanction or disciplinary action by any federal or state law enforcement, regulatory or licensing agency or licensing body, including exclusion from Medicare and Medicaid programs. During the term of the contract between a selected bidder (the contracting entity or individual) and the County, and in accordance with law, if the contracting entity or individual becomes an ineligible person, the contractor shall be removed from any responsibility and/or involvement with County contracted obligations related to any direct or indirect federal or state health care programs and any other federal and state funds.

An ineligible person is defined as any individual or entity who is currently excluded, suspended, debarred or otherwise ineligible to participate in the federal health care programs; or has been convicted of a criminal offense related to the provision of health care items or services and has not been reinstated into the federal health care programs after a period of exclusion, suspension, debarment, or ineligibility.

Funding

Funding sources for this RFP include Substance Abuse Block Grant (SABG) and the Adolescent Treatment Set-Aside. Other local funding, Drug Medi-Cal and local state funds will be used as a match. Because Contra Costa is committed to the implementation of services for adolescents, a limited amount of Adolescent Treatment Set-Aside funds is available for Program Start-Up and Development.

Program Start-Up and Development Funds

The proposed Start-Up funds shall not exceed ten percent (10%) of the total budget of the initial contract period of the contract. Startup funds are not additional funds, and they are allocated only to the first term of the contract.

A separate cost center for start-up funds shall be included in the proposed budget for the initial contract period and start-up expenditures shall be tracked separately from ongoing costs.

Expenditures for start-up activities shall conclude on or before the first quarter of operations of the first year of program implementation.

Start-Up costs will be reimbursed based on actual costs (cost reimbursement). Contractor shall comply with Cost Reimbursement Contract requirements.

RFP Guidelines

Contra Costa County AODS hopes to contract with SUD treatment providers for:

- 1.0 Outpatient Services
- 2.1 Intensive Outpatient Services

After the execution of the contract, receipt of DMC certification for the facility and the facility meets performance standards (80% productivity rate for all direct staff), organizations will be required to offer the following services which are a requirement of the DMC-ODS Waiver:

- Case Management
- Recovery Support Services

These services are to begin no later than 12 months after the execution of the initial contract and shall be available for all youth who are funded under DMC.

Organizations may apply for one or both levels of care in different regions, and/or submit proposals in collaboration with other individuals/organizations. Please note that a separate proposal is required if a different region is proposed.

ASAM Levels of Care in the following Contra Costa's regions:

- Central: Concord, Martinez
- East: Antioch (Southeast), Pittsburg, Bay Point
- West: San Pablo, Richmond (Central and North), Pinole

The applicant must demonstrate in writing the establishment of a partnership with a Local Education Agency (LEA) including Alternative and Continuation schools, program and/or other representative via a Memorandum of Understanding (MOU). Examples of partnerships include schools, parent-teacher associations, principals, school juvenile Probation officers, etc. The MOU should indicate the roles and responsibilities of each partner, utilizations of space, description of a referral process and other related procedures. Similarly, applicants are encouraged to establish partnerships with Community Based Organizations such as the Boys and Girls Clubs, YMCA, teen health clinics, etc. in the vicinity where the proposed program will operate. The purpose of the MOU is to guarantee a referral flow of clients. If a MOU is not in

place at the time of submission, AODS will accept letters of intent to sign a MOU upon award from outside sources such as those listed above.

The program shall be located in Contra Costa, near public transportation, and prior to signing into any agreement with Contra Costa County AODS, responders shall have an established place of business appropriate and adequate for the services billed or claimed to the DMC program as relevant to his or her scope of practice or type of business and meets all of the following criteria:

- Is open and conducting business at the time the application is submitted for participation in this contract
- Has the administrative and fiscal foundation to survive as a going concern
- Has the ability to meet the terms and conditions of the DMC Waiver and obtain and maintain DMC certification prior to the implementation of any contract (where applicable)
- Has adequate staff to meet current and anticipated service requirements for its business as required by the Waiver
- Has Worker's Compensation insurance as required by state law
- Obtains and maintains Liability insurance and Cyber insurance coverage in an amount not less than \$100,000 per claim, with a minimum annual aggregate of not less than \$300,000, from an authorized insurer pursuant to Section 700 of the Insurance Code
- Has the necessary equipment, office supplies and facilities available to carry out its business, including storage and retrieval of all documentation
- Has the necessary payment mechanisms to process and submit demands for reimbursement

All providers shall remain DMC certified to participate in the DMC-ODS Waiver program throughout the duration of the contract. Only those providers with proven experience and a good record of providing Substance Use treatment and have an AOD license and/or certification issued by the Department of Health Care Services (DHCS) that is in good standing will be considered. If the applicant does not possess the above- mentioned current certification(s) (Alcohol and Other Drugs and/or Drug Medi-Cal), then the applicant must demonstrate their ability to submit a completed application to the (DHCS) within 60 calendar days of the Notice of Intent to Award being posted.

When developing the response, please discuss all items listed throughout this RFP. Further detail on each section is listed below:

A. Cover Page

- 1) Please complete the attached cover page (see attachment on final page of RFP) and submit with RFP.

B. Organizational History, Structure and Philosophy (1-2 pages)

- 1) A brief corporate profile along with resume(s) of key staff positions who will oversee the scope of the project (resumes not included in page count). Include the overall history of the organization and its connection with the SUD field. Please include a list

of the Board of Directors, an Organizational Chart and a description of how each programming position fits within the agency. Include a description of organizational capacity to serve the target population.

- Eligible applicants may include but are not limited to governmental agencies, community-based agencies and faith-based organizations.

C. Clinical Program Design and ASAM Level of Care (6 pages)

- 1) A description of how the ASAM Criteria will be integrated into the clinical practice, policies and procedures of the program. (1 page)
- 2) Description of how the *Youth Treatment Guidelines* 2002 will be integrated into the program design. (2 pages)
- 3) Description of the evidence-based practices that will be utilized by the staff within the facility, specifically MI and CBT. Also, describe how the staff will be trained and supervised on such practices on an annual basis and how the EPBs will maintain fidelity. Include the program model curriculum that will be utilized to meet the SUD treatment standards. For the purpose of this RFP Contra Costa has considered the implementation of Cognitive-Behavioral Interventions for Substance Abuse (CBI-SA) and Matrix (Contra Costa County's DMC-ODS Plan Practice Guidelines)
- 4) Describe the treatment staffing pattern to be used in the facility. Attach a list of all clinical staff utilizing Section E of the budget worksheet. Attach a list of all clinical staff. This list should align with the structure listed on the Personnel tab of the AODS Work Plan. (1 page)
- 5) Description of the applicant's understanding of adherence to cultural and linguistic competence and the Culturally and Linguistically Appropriate Services (CLAS), how they are utilized within the facility and how the staff will be trained in cultural and linguistic competence on an annual basis. This shall include the ability to communicate with participants in the County's threshold language (Spanish). Explain how the needs of beneficiaries who speak languages other than English and Spanish will be met. Describe how the needs of culturally diverse and LGBTQ populations will be addressed within the program. (1 page)

D. Administrative Work Plan Narrative (2-3 pages)

- 1) Describe how billing, reporting, data collection/entry and other administrative requirements will be handled by the provider.
- 2) Describe the administrative staffing pattern to be used in the implementation and evaluation of the Work Plan as well as meet the expanded requirements as described in the terms and conditions of the DMC Waiver.

- 3) Describe the Quality Improvement and Utilization Management processes and how they will be utilized to ensure compliance with the DMC-ODS Waiver on a regular and consistent basis.

E. Budget and Budget Justification (1page)

- 1) Include a budget outlining the expected cost of the project, broken down by major cost categories, utilizing the attached worksheet for the appropriate ASAM Level of Care. The worksheet should include the overall cost per unit of service:
 - a. Outpatient Services
 - b. Intensive Outpatient Services
- 2) The Work Plan should include any start-up costs that are required to begin services at a site. Line items for all costs associated with the start-up of the program shall be included. This total shall not exceed 10% of the total budget.
- 3) Include a budget justification linking the budget to the Clinical Program Design and Work Plan Narrative.

F. Sustainability Plan (1 page)

- 1) Include a plan describing how the provider plans to sustain the program/model throughout the duration of the contract and how continued training will be utilized to strengthen the overall treatment model at each facility.

G. Memorandum of Understanding or Letter of Intent for MOU from outside entity – 1 per site

IV. Method of Evaluation

A. Initial Screening

Proposals will be screened for compliance, completeness and eligibility as they are received. This is a pass/fail screening and failure to meet any one of the following criteria will result in a failing rating. **FAILED SUBMISSIONS WILL NOT BE REVIEWED FURTHER.**

- 1) Proposal was received by due date.
- 2) All sections of Proposal as outlined in RFP are included within page limit for Narrative (Excluding Attachments).
- 3) Attachments are included and are complete.

A. Scoring of Submission

A panel of RFP reviewers will score each submission. A maximum of 100 points for each submission is possible using the following scoring:

- | | |
|---|-----------|
| 1) Organizational History, Structure and Philosophy | 5 Points |
| 2) Clinical Program Design and ASAM Level of Care | 45 Points |
| 3) Administrative Work Plan Narrative | 15 Points |
| 4) Budget and Budget Justification | 25 Points |
| 5) Sustainability Plan | 10 Points |

RFP reviewers will recommend to the Contra Costa County Alcohol and Other Drugs Services Administration the agency/agencies/awardee(s) to *potentially* fund for implementation of the SUD continuum of care treatment and other services, dependent upon plan approval from the State, and based on their overall score.

VI. Important Due Dates

Event	Due Date
Request for Proposal – Posted Online	Monday, September 30, 2019
Submission of preliminary questions by applicants	Tuesday, October 22, 2019
RSVP Deadline for attendance to MANDATORY applicant Conference	Monday, October 28, 2019
Applicant Conference	Tuesday, October 29, 2019
Submission of Post Conference Questions	Friday, November 8, 2019
Answers to post conference questions to be emailed to all conference attendees	Friday, November 15, 2019
RFP Application Due Date	Friday, December 6, 2019
Awardee or Next Steps Announcement	Tuesday, December 31, 2019

Contra Costa County Alcohol and Other Drugs Services
 Drug Medi-Cal Organized Delivery System
Adolescent Substance Use Disorder Treatment
 ASAM Levels 1.0 and/or 2.1
 Proposal Submission
 Cover Page

Name of Applicant or Agency: _____

Agency Address: _____

Contact Name: _____

Title of Contact Person: _____

Contact Phone/Email _____

Name of Facility: _____

Address of Facility: _____

Facility Level(s) of Care (choose all that apply) and Regions:

ASAM Levels of Care	Selection	Geographical Region (City)
1.0 Outpatient Services		
2.1 Intensive Outpatient Services		

Population to be Served at Facility (choose all that apply):

Populations	Selection
Adolescent Services (ages 12-17)	
Adolescents Co-Occurring Disorders	
Other (specify): _____	

Applicant Agency Signature:

This signature assures commitment to participate in this program if selected.

Signature

Printed Name and Title

Attachment A

List of References concerning the DMC-ODS Waiver, ASAM Criteria and other information pertinent to the RFP

1. ASAM Copyright and Permission Frequently Asked Questions:
<https://www.asam.org/copyright-and-permissions/copyright-and-permission-faqs>
2. Overview of the DMC-ODS:
<https://www.chcf.org/wp-content/uploads/2018/11/DrugMediCalOrganizedDeliverySystem.pdf>
3. DMC-ODS Frequently Asked Questions:
https://www.dhcs.ca.gov/provgovpart/Documents/DMC-ODS_Waiver/DMC-ODS-FAQ-June-2019.pdf
4. Drug Medi-Cal Intergovernmental Agreement (Contract) Boilerplate:
https://www.dhcs.ca.gov/provgovpart/Documents/DMC-ODS_Waiver/Exhibit_A_Attachment_I_ODS_final_11_13_18.pdf
5. Contra Costa County Drug Medi-Cal Organized Delivery System Implementation Plan:
<https://cchealth.org/aod/pdf/DMC-ODS-Implementation-Plan-2016.pdf>
6. 42 CFR Part 2: Confidentiality of Drug Abuse Patient Records:
<http://www.ecfr.gov/cgi-bin/text-idx?rgn=div5;node=42%3A1.0.1.1.2>
7. United States Federal Regulation Title 42, Chapter IV, Subchapter C, Part 438: Managed Care
<http://www.ecfr.gov/cgi-bin/text-idx?rgn=div5&node=42:4.0.1.1.8>
8. Special Terms and Conditions (refer to pages 96-128 and 384-415 for the DMC-ODS system)
<https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Waivers/1115/downloads/ca/ca-medi-cal-2020-ca.pdf>
9. DMC-ODS Resources:
<http://www.dhcs.ca.gov/provgovpart/Pages/Drug-Medi-Cal-Organized-Delivery-System.aspx>
10. Cognitive Behavioral Therapy Part 1 – An Overview – SAMHSA:
https://www.samhsa.gov/sites/default/files/programs_campaigns/samhsa_hrsa/cognitive-behavioral-therapy.pdf
11. Youth Treatment Guidelines, Department of Health Care Services, 2002
https://www.dhcs.ca.gov/individuals/Documents/Youth_Treatment_Guidelines_2002.pdf

12. Contra Costa County Drug Medi-Cal Organized Delivery System (DMC-ODS) Plan Practice Guidelines:
<https://cchealth.org/aod/pdf/DMC-ODS-Plan-Practice-Guidelines-2018.pdf>
13. California Healthy Kids Survey:
<https://www.cde.ca.gov/ls/he/at/chks.asp>
14. California Healthcare Foundation, Mental Health and Substance Use: A Crisis for California's Youth:
<https://www.chcf.org/wp-content/uploads/2018/12/AlmanacMentalHealthSUDYouth.pdf>