

**REQUEST FOR PROPOSALS
CCDOH-2025-07**

FOR

**Independent Living Program for Transition-Age
Youth with
Co-Occurring Mental Illness and
Substance Use**

Issued By:

**Charles County Department of Health
Core Service Agency
10480 Theodore Green Blvd.
P.O. Box 1050
White Plains, MD 20695
Phone: 301-609-5757
Fax: 301-609-5749**

October 25, 2024

WARNING: To ensure proper submission processing, place the Tracking Number: CCDOH-2025-07 on your proposal bid submission. This tracking number is essential for efficiently evaluating and handling all submissions.

Prospective bidders who have received this document from a source other than the Issuing Office should immediately contact the Issuing Office and provide their name and mailing address so that amendments to the RFP or other communications can be sent to them. Any prospective bidder who fails to notify the Issuing Office of this information assumes complete responsibility if they do not receive communications from the Issuing Office before the closing date.

Minority businesses are encouraged to participate in this procurement process.

REQUEST FOR PROPOSALS
Independent Living Program for Transitional Age Youth with
Co-Occurring Mental Illness and Substance Use

A. PURPOSE OF REQUEST FOR PROPOSALS

The Charles County Department of Health Local Behavioral Health Authority is requesting proposals to acquire a vendor to provide a Tri-County Independent Living Program for developmentally and age appropriate evidence-based and evidence-informed intervention for Transition-Age Youth (18-25 years-TAY), from Charles, Calvert, and St. Mary's Counties who have been diagnosed with a primary mental health disorder and are at imminent risk for development of a co-occurring substance use disorder. Participants must meet eligibility criteria for Adult Psychiatric Rehabilitation Services in the Public Behavioral Health System

For purposes of the RFP, the Charles County Department of Health Local Behavioral Health Authority (CCLBHA) shall be the grantor of record for the funding award from the Maryland Department of Health (MDH)

B. ELIGIBILITY

Any licensed or incorporated agency or organization, public or private, may apply under a Request for Proposals. The applicant must be a Public Behavioral Health System service provider, or be willing to become one, as delineated in the COMAR, and be licensed by the Behavioral Health Administration and the State of Maryland's ASO. The RFP does not include funding for services, which are reimbursable through the Maryland Public Behavioral Health System fee-for-service schedule or under contract with the Behavioral Health Administration (BHA). Therefore, any bidder not approved by MDH to provide the outpatient psychiatric treatment, psychiatric rehabilitation, or substance use counseling services needed by the consumers in the program will be required to demonstrate that it has or will have agreements with MDH-approved providers of such services who will render these services to the consumers in this program.

C. TIMELINE

Milestone	Completion Date
RFP Published	October 25, 2024
Pre-Proposal Conference	November 4, 2024
Last Day for Questions	November 11, 2024
Answers to Questions Posted	November 15, 2024
Proposal Submission Deadline Delivered to: Charles County LBHA Attn: Linda Deano 4545 Crain Hwy, P.O Box 1050 White Plains, MD 20695	November 18, 2024 (No later than 5:00 pm)
Review Committee	November 21, 2024
Contract Award Announcement	November 26, 2024
Services are Expected to Begin	January 01, 2025

D. FUNDING AVAILABILITY & TERM OF CONTRACT

CCLBHA has received conditional funding approval for **\$65,000** annually for the Transitional Age Youth MISA Independent Living Program grant for this fiscal year, and \$130,000 for the subsequent fiscal years. CCLBHA expects the program to be fully implemented throughout FY 2025. Bidders should submit a single budget covering the period from October 1, 2024, through June 30, 2025, including start-up costs. Bidders should plan to admit the consumers to the program (3) on January 1, 2025. The term of this agreement shall be for the period commencing on January 1, 2025, and ending on June 30, 2027. After the initial three (3) years, this contract will be renewable for an additional two (2) years on a year-to-year basis for a total of five (5) years, provided the contract deliverables are met and there is continued funding from DHMH.

E. PRE-PROPOSAL CONFERENCE

A Pre-Proposal conference will occur on November 4, 2024, at 1:00 p.m. via video/teleconference. Bidders interested in participating should notify the CCLBHA at least 24 hours in advance of the Pre-Proposal conference. Bidders should email a statement of interest to MDH.CharlesCountyCSA@Maryland.gov. A conference link will be emailed to interested parties no later than 10:00 a.m. on November 4, 2024

F. ADDITIONAL INFORMATION

Inquiries concerning the procurement process or bid documents, and/or questions of a technical nature, should be directed, in writing only with a subject line of CCDOH-2025-08: TAY/MISA (via e-mail) to:

Linda Deano
 Agency Grants Specialist
 Charles County Local Behavioral Health Authority
 Charles County Department of Health
 Fax: (301)-609-5749
 E-mail: MDH.CharlesCountyCSA@maryland.gov

All questions must be received prior to the close of business **seven (7) calendar days** prior to the deadline for submission of bids. A response to the inquiries will be posted on the Charles County Department of Health website and eMaryland Marketplace within a minimum of three (3) calendar days prior to the submission deadline.

G. PROPOSAL SUBMISSION PROCEDURES

All proposals must be received by 5:00 p.m. November 18, 2024.

By mail:
 Local Behavioral Health Authority
 Charles County Department of Health
 P.O. Box 1050
 White Plains, Maryland 20695
 ATTN: CCDOH-2025-08: TAY/MISA

Hand-delivery
 Local Behavioral Health Authority
 Charles County Department of Health
 10480 Theodore Green Blvd.
 White Plains, Maryland 20695
 ATTN:CCDOH-2025-08: TAY/MISA

By Email:
MDH.CharlesCountyCSA@Maryland.gov
 Subject: CCDOH-2025-08: TAY/MISA

To be considered, a proposal must be received by the time/date above. Proposals postmarked by but not received by 5:00 p.m. November 18, 2024, will not be considered. E-mail submissions and proposals received after the deadline will not be considered.

One unbound original proposal bearing the original signature(s) in BLUE ink by an authorized principal(s) of the agency/organization, and one electronic copy are to be submitted. Proposals failing to comply with this request will be rejected.

H. PUBLIC INFORMATION ACT NOTICE

Offerors shall identify those portions of their proposal that they deem to contain confidential and/or proprietary information. Such information must be individually and specifically noted, either at the location in the proposal or in a separate listing contained within the proposal. Justification must also be provided, explaining why the material should not be subject to disclosure by the CCLBHA upon request under the Maryland Public Information Act. Offerors may not declare their entire proposal to be confidential or proprietary. Failure to provide specific identification and justification may result in the release of the information if CCLBHA is requested to do so under the Act.

I. PROPOSAL/BID/AWARD PROTESTS

All protests made pursuant to this solicitation must be in writing and delivered to the CCLBHA: (a) within ten (10) calendar days after the CCLBHA has publicly posted the proposed contract award if the bidder seeks as a remedy the award of the contract, or (b) before the submission date for bids if the bidder seeks as a remedy the cancellation or amendment of the solicitation.

Only an offeror who is “aggrieved” is eligible to file a protest. Aggrieved means that the offeror who is filing the protest is susceptible to an award of the contract if the protest is sustained (e.g., a fourth-ranked bidder is not aggrieved unless the grounds for a protest, if sustained, would disqualify the top three ranked offerors or would require that the solicitation be reissued). Each protest must contain the following: identification of the solicitation; the name, address, and telephone number of the protesting offeror/bidder; a statement supporting that the offeror/bidder is aggrieved; and specification of all grounds for the protest, including submission of detailed facts and all relevant documents, citation to relevant language in the solicitation, regulations, or law relied upon; and, all other matters which the offeror/bidder contends supports the protest. The burden of production of all relevant evidence, data, and documents, and the burden of persuasive argument to support the protest is on the offeror/bidder making the protest.

J. REJECTION OF BIDS

The CCLBHA reserves the right to reject any or all bids.

K. AWARD OF CONTRACT

The award will be to the most qualified, responsive, and responsible offeror who complies with all provisions of the RFP, providing that it is in the best interest of the CCLBHA to accept the proposal. The Contract entered with the successful offeror shall meet all standard provisions required by the CCLBHA and by any involved government agencies. Award of the Contract will

be by formal contract. The Contract documents will consist of the Contract, RFP, the offeror's proposal, MDH Conditions of Award, and any addenda or other modifications to the RFP.

L. TERMINATION OF CONTRACT FOR CONVENIENCE

The CCLBHA may, by 90-day written notice to the Contractor, terminate this contract in whole or in part at any time, either for the CCLBHA's convenience or because of the failure of the Contractor to fulfill his obligations under this contract. Upon receipt of such notice, the Contractor shall:

1. Immediately discontinue any part or all services as directed by the CCLBHA's authorized representative, and
2. Deliver to the CCLBHA the originals of all data, records, reports, and such other information and materials as may have been accumulated by the Contractor in performing under this contract, whether completed or in process.
3. If the termination is for the convenience of the CCLBHA, an equitable adjustment in the contract price shall be made but no amount shall be allowed for anticipated profit on unperformed services.
4. If the termination is due to the failure of the Contractor to fulfill his obligations under this contract, the CCLBHA may take over the work and prosecute the same to completion by contract or otherwise. In such case, the Contractor shall be liable to the CCLBHA for any additional cost occasioned to the CCLBHA.
5. If, after notice of termination for failure to fulfill obligations, it is determined that the Contractor had not so failed, the termination shall be deemed to have been affected for the convenience of the CCLBHA. In such an event, an adjustment in the contract price shall be made as determined to be equitable by the CCLBHA.
6. The rights and remedies of the CCLBHA provided in this clause are in addition to any other rights and remedies provided by law or under this contract.

M. TERMINATIONS FOR DEFAULT

If the Contractor refuses or fails to prosecute the work, or any separable part thereof, with such diligence as will ensure its completion per the Contract or any extension thereof, the CCLBHA may, by written notice to the Contractor, terminate the Contract. In such event, the Contractor shall have the right to be compensated for work performed up until the time of termination. The CCLBHA shall be the sole authority in determining the amount of equitable payment to the Contractor.

N. ACCEPTANCE OF PROPOSAL CONTENT

Applicants are strongly encouraged to review the feasibility of their proposals before submission. The content of this RFP and the proposal of the successful vendor/provider will be included in any resulting contract. Non-compliance with that contract (failure to provide services as contracted and/or achieve expected results) may lead to termination by the CCLBHA.

O. POPULATION TO BE SERVED

The intended recipients of the services are young adults ages 18-25 with mental illness and substance abuse issues that interfere significantly with the individual's ability to successfully move from adolescence to independent community living as adults. Recipients must have a documented diagnosis of a co-occurring mental health and substance use disorder or have been diagnosed with a primary mental health disorder and are at imminent risk for the development of a co-occurring substance use disorder. Referrals may come from a variety of sources in the Tri-County region and may include youth in foster care, youth returning from hospitals, RTCs, group homes, or other living arrangements. Participants must meet the eligible criteria for Adult Psychiatric Rehabilitation Services in the Maryland Public Behavioral Health System.

P. SCOPE OF SERVICES

Scope Of Services To Be Provided Through The Federal Block Grant.

The Independent Living Program will provide the following:

1. Youth-driven, strengths-based, developmentally sensitive, non-stigmatizing, culturally competent, and appealing TAY services and supports that are evidence-based interventions. The vendor will engage youth and young adults in their own person-centered planning process; and involve the youth and their families, and other key informal players, in a process that prepares and facilitates them in their movement toward greater self-sufficiency and achievement of their goals related to relevant transition domains.
2. Residential Services - The vendor shall develop and/or support a variety of residential options suitable for the unique needs and circumstances of the program participants. The vendor will maintain scattered site community-based housing with staff supervision and support for a minimum of six (6) individuals at any given time. If residential services are not required, youth may be provided with all other program components in a community-based residence. To ensure adequate standards are maintained, the vendor will meet the provisions of COMAR for the program-based housing and the participants residing in program-based housing.
3. On-site supervision and support of transition-age young adults.
4. Indirect services that are not otherwise reimbursable through the Public Behavioral Health System.

Scope Of Services To Be Provided Through The Fee For Service Public Behavioral Health System:

To the extent possible the bidder will be expected to utilize the Public Behavioral Health System (PBHS) to pay for mental health services needed by the consumers. The Independent Living Program will consist of a coordinated array of services that are developmentally and age-appropriate evidence-informed-based interventions, including:

1. Outpatient Treatment – participants will be referred to and supported in engaging in outpatient mental health and substance use treatment that meets individualized needs.
2. Psychiatric Rehabilitation – The vendor will provide on-site and off-site psychiatric rehabilitation services that offer independent living skills development in a group format, as well as individually, to take full advantage of the potential for group members' positive interaction, mutual support, and practicing of social skills. These services will focus on helping the youth gain proficiency in a broad range of independent living skills tailored to the individuals in this phase of life. All participants shall be enrolled in Psychiatric Rehabilitation Program Services. The vendor shall maintain approval by the Office of Health Care Quality (OHCQ) as a psychiatric rehabilitation program under the provisions of COMAR.
3. Case Management-The vendor will provide case management services that link participants to all needed services and resources, including but not limited to somatic, dental, and vision services, financial and safety net resources, transportation, etc. The vendor will monitor progress in accessing and maintaining community-based resources.
4. Evidence-Based Supported Employment and Education- The vendor shall provide or arrange for the provision of Evidence-Based assistance to participants in meeting self-determined educational goals and external educational requirements for graduation from high school or post-secondary education. Additionally, the vendor shall provide or arrange for the provision of developmentally tailored Evidence Based supported employment services appropriate to the needs and desires of the transition-age youth population, to eligible youth with a primary mental health disorder and ensure that all such youth who desire to pursue education and/or competitive employment are referred to the Division of Rehabilitation Services (DORS).

The vendor, at a minimum, must adhere to the following structure in delivering:

1. Develop working relationships with all relevant programs/service providers serving young adults in the Tri-County area.
2. Complete a face-to-face rehabilitation assessment with the consumer, to include at a minimum the individual's strengths, skills, wants, and needs in the following areas: substance use/abuse, independent living, housing, employment, self-administration and management of medications, mobility and transportation, social relationships and leisure activities, education and vocational training, adaptive equipment or resources, current resources and support system, legal status, and forensic history, behaviors that are potentially dangerous to self or others and self-care skills;

3. Develop individualized service plans in collaboration with the young adults, and if appropriate, their families, which address the strengths and needs identified in the rehabilitation assessment.
4. Provide referrals to appropriate mental health, substance abuse, education, vocational services/programs, and other community-based health and support services.
5. Survey consumers, clients/family members, and providers to determine their level of satisfaction with the services provided and whether they have any specific recommendations for improvement of the program. Include in the provider survey a means of evaluating the appropriateness of referrals and identifying systems integration issues.
6. Provide monthly census and quarterly reports to the CCLBHA Child and Adolescent Coordinator in a format approved by CCLBHA.
7. The program will serve a minimum of six (6) transition-age young adults in Phase II at any given time.

Program expectations in addition to the above, the successful bidder must:

1. Promote culturally competent services to meet the consumer's needs.
2. Assure services are recovery-focused and build upon the person's strengths.
3. Assure consumers participate as full partners and are actively involved in individual service planning.

Q. RESULTS TO BE ACHIEVED

1. Residential Services: The program will maintain scattered site community-based housing with staff supervision and support a minimum of six (6) individuals at any given time. If residential services are not required, youth may be provided with all other program components in a community-based residence.
2. One hundred percent (100%) of participants will attend counseling to address mental health and substance use issues (if/until released from treatment).
3. One hundred percent (100%) of participants will be enrolled in psychiatric rehabilitation services.
4. Sixty percent (60%) of participants will move into a Phase II or Phase III setting within six to twelve months of admission.
5. One hundred percent (100%) of participants will be offered the option of referral for Supported Employment services within sixty (60) days of admission.
6. Eighty-five percent (85%) of participants will secure employment at least ten hours per week at minimum wage or more **or** will be enrolled in an educational program within six months of admission.
7. At least eighty percent (80%) of participants who complete the program shall exit the program with a high school diploma or GED.
8. One hundred percent (100%) of participants will be assisted in applying for appropriate benefits, including Social Security entitlements, Medical Assistance or Primary Adult Care (PAC), and Section 8 Housing, within sixty (60) days of admission.

9. Assistance will be given to meeting non-mental health needs that also are part of the transition to independence, such as accessing transportation, locating employment, and obtaining educational requirements.

R. DELIVERABLES

1. All referrals for the Transition Age Youth/Mental Illness Substance Abuse Independent Living Program are to be sent to the CCLBHA Child and Adolescent Coordinator for approval.
2. Provide a monthly census of all participants in the program, along with basic demographic information.
3. Quarterly submission of a brief (five-question) narrative report describing the programs' achievements and challenges over the past quarter.
4. Quarterly submission of financial expenditure reports.
5. Quarterly submission of data that illustrates the achievement of results listed in Q, Results to be Achieved.
6. Quarterly meeting with Child and Adolescent Coordinators from the Calvert, Charles, and St. Mary's Counties.
7. Case files shall be made available for inspection by the CCLBHA as requested. Twice yearly monitoring site visits will be conducted by CCLBHA, including an annual housing inspection of housing units.

S. STAFFING REQUIREMENTS

The provider shall ensure the availability of qualified personnel to carry out the duties required of this program. Personnel assigned to work in this program shall have the necessary professional qualifications to perform the work required as delineated in the above Scope of Services.

Proposal submissions shall include a statement describing the recruitment, training, and supervision of personnel proposed to work in this program. All employment practices shall comply with Equal Employment Opportunity guidelines and the Americans with Disabilities Act.

T. REPORTING REQUIREMENTS

Reporting: complete timely reports to include quarterly reports and outcome measures as requested by the LBHA, BHA, and Director of Transition Age Youth and Young Adult Services or designee by the 21st of the month immediately following the end of each quarter. Not complying with reporting requirements can delay current-year funding or future funding.

Outcome Measures: initial screening and assessment will be completed utilizing Behavioral Health Administration (BHA) approved co-occurring screening and assessment tools for

measuring strengths and needs to determine those resiliency factors that are present, as well as what community services and clinical interventions are needed.

U. PROPOSAL CONTENT

Proposal narratives submitted in response to this request shall not exceed 15 typed, single-sided, single-spaced pages and should address the criteria specified below. Use 12-point font and 1-inch margins. Budget pages DHMH Forms 432 A-H and attachments, such as letters of support, are not included in the 15-page maximum. It shall contain a one-page executive summary.

At a minimum, each proposal shall include the following items in the stated order; all pages shall be numbered; and all the listed components must be included. Proposals that do not include all components will be considered non-responsive and therefore not reviewed or considered for funding.

1. **Transmission letter:** Formal letter stating your intent to provide the services you are proposing and that you have the authority to do so. Provide name or organization, address, and all contact information, including primary contact person.
2. **Approval of Governing Body:** Letter or memo which states that you have the approval and support of your governing body to submit such proposal.
3. **Program budget:** Use DHMH Forms 432 A-H, attached. The budget should specify costs including salaries and fringe, rent, supplies, mileage, etc.
4. **Proposed program:**
 - a. **Population to be served:** Describe your understanding of the needs of young adults with mental illnesses and substance abuse concerns. Discuss your expertise and experience working with such populations in the Public Behavioral Health System what you consider the primary issues for these consumers and the implications for future success in the community.
 - b. **Capacity:** Describe your organization's experience providing any similar services and the results those services have achieved.
 - c. **Program Plan:** Describe the services you intend to provide. What constellation of services will you provide? Who will provide the services? What are their qualifications? In what setting will the services take place? What kind of housing will be provided? What will a consumer experience as she/he progresses through the program?
 - d. **Evaluation:** Describe your quality assurance processes. Cite any results of client satisfaction surveys or program evaluations if they are available
 - e. **Staffing:** What are the qualifications of staff involved in the program? What experience do they have? What will their roles be? How frequently will clinical supervision occur? What are the qualifications of the staff responsible for collecting and submitting data to the CCLBHA in a timely fashion? Describe the cultural competency of the staff.

- f. **Professional Collaboration:** If the provider intends to use other qualified professionals outside of their organization, who would they be? What are the roles and qualifications of proposed collaborators?
- g. **Other Collaborative Relationships:** Describe your history of providing services in Calvert, Charles, and St. Mary's Counties and any collaborative relationships you have established. How will you market this program to referral sources and participants?
- h. **Timeline for Implementation:** Please include a timeline showing when you will accomplish all of the major tasks associated with program start-up and implementation, including hiring, marketing, training, supervision, evaluation, etc.

5. Organizational Capacity Statement:

- a. If incorporated, attach a copy of the most current articles of incorporation. Additionally, submit a roster of all members of the organization's board of directors, including addresses and telephone numbers. Indicate consumer/family representation. Attach an organizational chart, illustrating the relationship of the TAY/MISA services to the other programs in the agency.
- b. 2If the provider is MDH licensed, provide the date of the applicant's last MDH licensing visit and briefly describe the findings and recommendations. This should include program approval status and any program improvement plans.
- c. 3Attach copies of the most recent financial audit and any other reports that demonstrate the organization's fiscal soundness
- d. 4Include a statement describing recruitment (in compliance with the Equal Employment Opportunity (EEO) guidelines and the Americans with Disabilities Act (ADA), training, and supervision of personnel to work in this program

6. Letters of Support: Please include at least two letters of support.

7. Freedom of Information: Offerors should give specific attention to the identification of those portions of their proposals that they deem to be confidential proprietary information or trade secrets, and provide any justification why such material, upon request, should not be disclosed by the LBHA under the Maryland Public Information Act, State Government Article, Sections 10-611 et seq. annotated code of Maryland.

Offerors are advised that the mere assertion of confidentiality is not sufficient to make matters confidential under the act. Information is confidential only if it is customarily so regarded in the trade and/or the withholding of the data would serve an objectively recognized private interest sufficiently compelling as overriding the general disclosure policy of the act. In determining whether

information designated as such is proprietary, the LBHA will follow the direction provided by its attorney when responding to requests for information contained in proposals.

It may be necessary that the entire contents of the proposal of the selected offeror be made available and reproduced for examination and discussion by a broad range of interested parties.

V. EVALUATION CRITERIA

1. ***Understanding of the population:*** The applicant has experience working with the identified population. The applicant demonstrates knowledge of the population to be served and an understanding of the benefits and challenges of a TAY program with co-occurring mental illness and substance use services. (10 points)
2. ***Plan/Services to be provided:*** The applicant has experience in providing similar services. The applicant demonstrates up-to-date knowledge of best practices in the areas of services and applies this knowledge to the proposed program. The applicant integrates the scope of services into the program description and adequately addresses all requirements. (25 points)
3. ***Organizational Capacity/Staffing:*** The applicant demonstrates the capacity to employ staff knowledgeable in the implementation of new programs. The organization has the appropriate infrastructure to administer services. Clinical staffing is appropriate for the service. (20 points)
4. ***Quality Assurance/Results:*** The program described is likely to achieve the results listed in Section Q, Results to be Achieved. Methods of outcome assessment and quality assurance procedures are evident. (15 points)
5. ***Budget:*** The budget corresponds to the program description and reflects reasonable costs. DHMH Forms 432 A-H is utilized and complete. The applicant describes sound fiscal practices, demonstrates fiscal accountability, and includes annual financial audit reports to affirm the organization's fiscal ability to adequately support the program. (20 points)
6. ***Appendices/Documentation:*** (10 points)
 - a. Organization Chart
 - b. MDH Licensure/Proof of Accreditation
 - c. Copies of the two most recent annual fiscal audits
 - d. Proof of good standing with the Maryland Department of Assessments and Taxation
 - e. Proof of good standing with the Maryland Department of Charitable Organizations (if applicable)

- f. Letters of Support/Recommendation
- g. Reports of outcomes from other grants
- h. Copy of liability insurance
- i. Key staff position descriptions/resumes

APPENDIX A: Form DHMH 432

APPENDIX B: Proposal Timeline

Appendices Published As Separate Documents

***** END OF REQUEST FOR PROPOSALS*****