



# **REQUEST FOR PROPOSALS:**

## ***Community Peer Project***

**Release Date: June 12, 2024**

**Pre-Proposal Conference: Thursday, June 20, 2024 @ 1 pm**

**Proposal Due: Friday, July 19, 2024 at noon.**

**Anticipated Award Notification: September 16, 2024**

**Anticipated Contract Start: October 1, 2024**

**Issued by:**

Behavioral Health System Baltimore, Inc.  
100 South Charles Street, Tower II, 8<sup>th</sup> Floor  
Baltimore, Maryland 21201

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# REQUEST FOR PROPOSALS

## *Community Peer Project*

### II. Overview of the Project

#### A. Overview of BHSB

Behavioral Health System Baltimore, Inc. (BHSB) is a non-profit organization tasked by Baltimore City to manage the city's public behavioral health system. As such, BHSB serves as the local behavioral health authority for Baltimore City. In this role, BHSB envisions a city where people live and thrive in communities that promote and support behavioral health and wellness.

BHSB is committed to enhancing the behavioral health and wellness of individuals, families, and communities through:

- The promotion of behavioral health and wellness prevention, early intervention, treatment, and recovery;
- The creation and leadership of an integrated network of providers that promotes universal access to comprehensive, data-driven services; and
- Advocacy and leadership of behavioral health-related efforts to align resources, programs, and policy.

BHSB is committed to promoting behavioral health equity in Baltimore City by ensuring that the behavioral health provider network is culturally and linguistically responsive to the diverse populations served, reducing behavioral health care access barriers for populations known to experience discrimination and marginalization, and supporting communities directly to develop services that are responsive to their unique strengths and needs.

#### B. Overview of Project

Through this Request for Proposals (RFP), BHSB is seeking a qualified organization to initiate a new Community Peer Project that bridges the gap in care for individuals experiencing a behavioral health crisis.

The Community Peer Project will serve individuals experiencing a behavioral health crisis and having difficulty managing their mental health and/or substance use disorders. The target population will also consist of individuals not well connected to resources or services in the community or having challenges attending scheduled follow-up appointments. The resources and service linkage provided should be tailored to the needs of the individual and guided by those seeking assistance.

The Community Peer Project emphasizes the importance of consistent connection and engagement through peer support. The referral process should be open for self-referral, family, hospital, and community providers. The multiple entry points for referrals will assist in utilizing a “no wrong door” approach that eliminates barriers to accessing services through this project. The Certified Peer Recovery Specialists (CPRS) associated with this project may meet consumers at the hospital, crisis services provider, mobile treatment provider, personal residences, and any other community location to engage and connect.

This project supports the larger system of care as linkage and navigating the Public Behavioral health system can be challenging for some individuals. The support of a Certified Peer Recovery Specialist is paramount to navigating the system effectively and utilizing available community support.

### **C. Scope of Service**

Peer services are essential in supporting consumers experiencing a behavioral health crisis. CPRSs often have lived experiences that enable them to be best suited to engage individuals who are not well connected to services or have not been successful in engaging in services.

This project will include peer support and outreach that assist consumers in making meaningful connections with community behavioral health providers, and linkage to community recovery resources (including peer-run services). The selected applicant is expected to utilize a consumer-centered approach that enables collaboration among peers and consumers. Recovery is not linear, so peers will use a strength-based approach to engage consumers. Peer support services include documented one-on-one peer support sessions, recovery plan development, recovery advocacy work, resume building and interview prep, vocational/educational activities, and accompanying individuals to medical or court appointments.

The target number of consumers to be served is **(300)** annually. A description of services to be provided by CPRS includes the following:

- I. The delivery of services is facilitated exclusively by individuals who identify as having lived experience in behavioral health recovery.
- II. Referrals should be simple, low-barrier, and uncomplicated to complete. The applicant is expected to accept a high percentage of referrals to appropriately meet the population's needs while creating a rapid turnaround time. Peers can link consumers to services within their organization if the consumer prefers. Peers should inform consumers of all resources available, including linkage to organizations across the PBHS. Referrals should be driven by consumer choice.
- III. Provide opportunities for Certified Peer Recovery Specialists (CPRS) to meet with individuals in comfortable settings for those seeking support.

- IV. All peer-to-peer services are offered and conducted voluntarily and guided by a recovery plan created and maintained by the individual receiving the support.
- V. Maintain a relationship with a Registered Peer Supervisor (RPS), as evidenced by an RPS certificate on file, who will provide supervision hours to staff seeking or maintaining their Certified Peer Recovery Specialist credentials.
- VI. The applicant will develop and maintain a working relationship with hospital and departmental staff, the Mobile Crisis Team (MCT), the Behavioral Health Crisis Stabilization Team, the Crisis Response Team (CRT), and other referral sources to assist with peer and consumer linkage.
- VII. Peer staff must provide rotating on-call coverage that will cover after-hours and weekends as needed
- VIII. Through the support of CPRS, ensuring that individuals receiving services navigate community-based supports and resources.
- IX. Support services shall include, but are not limited to:
  - a. Documented one-on-one peer support sessions
  - b. Recovery Plan development
  - c. Recovery advocacy work
  - d. Community outreach
  - e. Resume building and interview prep
  - f. Vocational/Educational activities
  - g. Accompanying individuals to medical or court appointments
  - h. Providing linkage to needed resources such as:
    - i. Housing
    - ii. Entitlements and other social services
    - iii. General resources
    - iv. Employment
    - v. Formal education program
    - vi. Treatment based support
    - vii. Mental Health Services
    - viii. Substance Use Services

The Certified Peer Recovery Specialist (CPRS) associated with this project will provide intensive peer support services to consumers who are experiencing a behavioral health crisis, diversion of consumers at risk of hospitalization because of a behavioral health crisis, and support upon discharge from a hospital setting after experiencing a behavioral health crisis. These services must be individualized, person-centered, and strength-based to match the needs and preferences of everyone served. The selected applicant will provide creative, persistent, and

assertive community-based engagement to minimize disconnectedness between consumers and their mental health or substance use services.

Deliverables that will guide the outcomes of this project include.

- a. 300 individuals (unduplicated) will be served annually
- b. A record of the number of individuals linked to substance use or mental health treatment services.
- c. Information regarding the community resources individuals refer to (i.e., housing, transportation, behavioral health services, employment, education, entitlements, etc.)
- d. Providing the number of individuals served that were linked to wellness and recovery centers
- e. A record of the number of individuals accompanied to follow-up appointments for mental health, substance use, or medical treatment.

### **C. Focus Population**

The Community Peer Project will serve adults residing in Baltimore City who are experiencing or have experienced a behavioral health crisis and are seeking assistance with resources and possible treatment linkage. Peer support services will be provided to consumers seeking assistance through self-referral, family referral, hospitals, and other community providers. Eligible consumers for this project may also be at risk of hospitalization because of a behavioral health crisis or are being discharged from a hospital setting after treatment for a behavioral health crisis.

### **D. Staffing Requirements**

Staffing Pattern would include:

- a. A minimum of 6 six (1.0 FTE) Certified Peer Recovery Specialists
- b. 1 (1.0 FTE) Recovery Peer Supervisor
- c. 1 (0.5 FTE) Program Director

All Peer Recovery Specialist must have their CPRS certification upon hire. Upon hire, the Peer Supervisor must have their Recovery Peer Supervisor (RPS). It is preferred that the Director also has a (RPS) certification. A copy of all staff certifications issued by [The Maryland Addiction and Behavioral Health Professionals Certification Board](#) (MABPCB) must be available upon request. Applicant's staff will be expected to maintain all required certifications.

### **E. Funding Availability**

- a. The total funding award for this project is \$556,053.
- b. One provider will be selected to provide the services outlined in this RFP.
- c. Allowable costs associated with this project will cover identified staff salaries, transportation for staff to support the consumers to appointments

and community resources, communication costs, and emergency resources necessary to alleviate barriers to treatment and resources.

## **F. Quality and Financial Review**

As part of BHSB's procurement process, internal quality and financial reviews are completed to ensure there are no significant concerns with the organization(s) being selected. Applicants should be sure to provide the most recent available versions of all requested documentation with their RFP application to ensure this is a smooth process.

## **G. Contracting with BHSB**

Applicants selected through this process will enter into a contractual agreement with BHSB. Following notification of selection, BHSB will issue a Letter of Award that provides details about the contract and the process for executing it. The selected organization must submit a new budget on BHSB's budget forms, which will be reviewed for allowable costs under the grant.

Please note that applicants may be asked to change their budgets and/or details of their proposals even if the proposal was selected for funding. Applicants new to BHSB's contract process are encouraged to review relevant forms available on our website here: <https://www.bhsbaltimore.org/for-providers/forms-for-providers>.

### Contract Type and Payment

The contract and payment type that will result from this procurement are described below. Applicants are encouraged to consider whether their organization will be able to operate with this payment mechanism before applying for these funds.

- Cost Reimbursement – Advance Basis
  - Vendor receives payment in advance of incurring and reporting costs based on a pro-rated budget (e.g., 1/4 of budget each quarter), with payment amounts adjusted based on spending.
  - BHSB issues payments once per month. Applicants should note that submitting required documents and reports late can result in delayed payment.

### Contract Monitoring and Technical Assistance

Selected applicants will be required to submit regular program and financial reports to BHSB using an electronic contract management system. BHSB will review these reports to monitor progress and contract compliance throughout the contract term.

**Program reports** include an update on progress toward deliverables (e.g., number of people served, number of services delivered, etc.). Some program reports may

also require organizations to attach a data report with additional information (e.g., consumer demographic information, process and/or outcomes data, etc.). BHSB monitors progress on these reports throughout the contract term and may offer technical assistance and support if deliverables are not being met.

**Financial reports** are required to generate payment and involve submitting actual expenditures or invoices (depending on the contract type) and to monitor spending compared to the budget or award amount. If organizations are spending more or less than expected awarded throughout the contract term, BHSB may offer technical assistance and support to ensure the funding covers the contract term fully and BHSB may reduce funding if all funds are not likely to be expended by the end of the contract term.

Please note that submitting program or financial reports late can result in delayed payment.

#### Verification of Services

BHSB audits all contracts to review whether the requirements set forth in the contract were completed as reported and that relevant federal, state, and local regulations were followed. This generally occurs after the conclusion of the contract period. Audits may be conducted remotely through a review of documents submitted to BHSB or on-site at the organization's location.

Applicants should be aware of best practices in documenting both programmatic and financial activities to aid in an efficient audit.



### III. Overview of RFP

#### A. Purpose of RFP

The purpose of this RFP is to select to implement to initiate a new Community Peer Project that bridges the gap in care for individuals experiencing a behavioral health crisis. The Community Peer Project will serve individuals experiencing a behavioral health crisis and having difficulty managing their mental health and/or substance use disorders. The target population will also consist of individuals not well connected to resources or services in the community or having challenges with attending scheduled follow-up appointments. The resources and service linkage provided should be tailored to the needs of the individual and guided by those seeking assistance.

#### B. Applicant Eligibility

Applicants must meet all of the criteria outlined below to be considered eligible to be selected through this RFP process:

- a. Licensed in Baltimore City to provide behavioral health services. Provider types Type 32, Type 50, and FQHC are excluded.
- b. A minimum of 3 years of experience providing services to consumers with mental health and substance use disorders is required.
- c. Providers must have experience integrating peers into service delivery. This could include providers who have utilized peers to engage consumers served within their organization and connect them with behavioral health services and various community resources.
- d. Provider must demonstrate in their application an understanding of CPRS responsibilities that are congruent with the guidelines outlined by (MABPCB)
  - In Good Standing with the Maryland Department of Assessments and Taxation.

#### C. Proposal Timeline and Specifications

##### 1. Timeline

Release Date:	June 12, 20224
Pre-Proposal Conference:	June 20, 2024, at 1 p.m.
Proposal Due:	July 19, 2024, at 12:00 p.m.
Anticipated Award Notification:	September 16, 2024
Anticipated Contract Start:	October 1, 2024
Anticipated Service Start:	October 1, 2024

## 2. Pre-Proposal Conference

**Date:** June 20, 2024

**Time:** 1pm

**Location:** Microsoft Teams meeting - Join on your computer or mobile app

**Click here to join the meeting** [Join the meeting now](#)

**Meeting ID: 215 186 920 605**

**Passcode: ePnMJn**

**Or call in (audio only):**

**Dial in by phone**

[+1 443-819-0973,,937807078#](tel:+14438190973937807078) United States, Baltimore

[Find a local number](#)

Phone conference ID: 937 807 078#

***Please join five minutes early to leave time to troubleshoot. If you have any problems accessing the meeting, please contact [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org).***

All questions related to this RFP should be submitted in advance to [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org) no later than the close of business on **Thursday, June 20, 2024**. There may be time at the end of the meeting to ask additional questions, depending on the number of questions submitted.

Questions posed prior to or during the Pre-Proposal Conference and BHSB's responses will be posted on BHSB's website at <https://www.bhsbaltimore.org/for-providers/funding-opportunities/> by **Thursday, June 27, 2024**

The questions and answers will also be emailed to all individuals who submitted questions. If you would like to be emailed this document but do not have a question, please let the Procurement Lead know by emailing [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org).

***Questions received after this conference cannot be answered.***

### **3. Proposal Due Date, Time, and Location**

BHSB uses Survey Monkey Apply (SM Apply) to manage applications. All proposals must be submitted through this system. Applicants must register with the system ahead of time and submit narrative and supporting documents directly through the system. You are able to save your application and continue working on it before submitting it. BHSB encourages all applicants to test this system well in advance of submitting proposals.

Applicants can access SM Apply here: <https://bhsb.smapply.org/>

All proposals must be received no later than **12:00 pm (noon) EST on July 19, 2024**. All submitted proposals become the property of BHSB. If you are having technical troubles related to submitting your proposal, contact BHSB before the due date/time at [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org)

*Proposals submitted after the due date/time cannot be considered.*

### **4. Authorized Contact**

Applicants are advised that the authorized contact person for all matters concerning this RFP is Kisha Winston-Watkins, whose contact information is listed below.

Kisha Winston-Watkins, Procurement Lead

Email: [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org)

**5. Anticipated Service Term:** October 1, 2024 – June 30, 2024, with options to renew annually pending availability of funding and performance.

### **C. Award of Contract**

The submission of a proposal does not, in any way, guarantee an award. BHSB is not responsible for any costs incurred related to the preparation of a proposal in response to this RFP. BHSB reserves the right to withdraw an award prior to execution of a contract with a selected applicant in BHSB's sole and absolute discretion.

BHSB will select the most qualified and responsive applicants through this RFP process. BHSB will enter into a contract with selected applicants following the notification of award. All selected applicants must comply with all terms and conditions applicable to contracts executed by BHSB.

### **D. RFP Postponement/Cancellation**

BHSB reserves the right to postpone or cancel this RFP, in whole or in part.

## **E. Applicant Appeal Process**

Applications must be complete and fully responsive to the below Proposal Narrative Outline and must include all required appendices. Applicants may file an appeal within five days of notification of non-selection. BHSB will not review new proposal materials that were not included in the application. BHSB will review the appeal letter and respond to the non-selected applicant within ten working days of receipt of the appeal.

## **F. Governing Law and Vaccination Mandates**

The applicant acknowledges and agrees that BHSB is a federal contractor for purposes of Executive Order 14042, Ensuring Adequate COVID Safety Protocols for Federal Contractors (the "Order"). The applicant and its subcontractors shall comply with the Order and all other applicable mandates, rules, laws, and regulations (collectively, the "Requirements"). Upon request by BHSB, selected applicants shall promptly provide evidence of compliance with the Requirements and shall promptly take such further actions as may be requested by BHSB with respect to the Requirements and/or the resulting contract. The applicant and all of its subcontractors shall, for the duration of the resulting contract, comply with all guidance for contractor and subcontractor workplace locations published by the Safer Federal Workforce Task Force. These requirements shall be incorporated into all subcontracts of the sub-vendor.

## IV. Format and Content of Proposal

### A. Proposal Instructions

- Applicants must submit all required information using Survey Monkey Apply (SM Apply) accessible here: <https://bhsb.smapply.org/>. We recommend you start your application early so you know what to expect with the system.

***Late proposals will not be considered.***

- Generative artificial intelligence (AI) tools are becoming increasingly prevalent. It is important to ensure that proposals reflect authentic responses and realistic service delivery plans.
- It is the policy of BHSB to adhere to the rules and regulations in the Health Insurance Portability and Accountability Act (HIPAA), which require appropriate safeguards to protect the confidentiality, integrity, and security of all protected health information. No proposals submitted in response to this RFP should include individually identifiable health information.

For more information, please refer to the Guide to IT Privacy and Security of Electronic Health Information: <https://www.healthit.gov/topic/privacy-security-and-hipaa/health-it-privacy-and-security-resources-providers>.

### B. Proposal Narrative Outline and Rating Criteria

The outline below shows the information being requested for applications and how points will be awarded during the review. Use SM Apply to submit your responses. See the instructions for more information about how to submit proposals.

#### 1. Organizational Background and Capacity (15 points)

- a. Provide an overview of your organization, including how long it has been in operation or became licensed and when it received or expects to receive accreditation (if applicable). Attach as an appendix all relevant licenses and certifications.
- b. Provide an overview of your organization, including its history, mission, and overall purpose. (Alternative to the above when not seeking licensed/certified organizations.).
- c. Provide an overview of your organization's experience in the last three years providing services with the integration of peers.

## **2. Principles and Values (15 points)**

- a. Describe your organization's commitment to and understanding of the principles of a Recovery-Oriented System of Care (ROSC) that supports client self-determination and multiple pathways of recovery.
- b. Describe your organization's commitment to racial and social justice and health equity. Include specific examples of what your organization does to illustrate this commitment.
- c. Describe your organization's commitment to providing services that are recovery-oriented, trauma-informed, and person-centered to ensure and promote equity in a way that alleviates the stigma of those receiving mental health or SUD treatment.

## **3. Service Delivery (25 points)**

- a. Describe your organization's plan to provide all services as outlined in the Scope of Service section of this RFP.
- b. Describe your organization's ability to successfully implement evidence-based trauma-responsive services, how you will use these interventions within the program, and maintain fidelity to the standards model.
- c. Describe your organization's plan to implement person/family-centered services and treatment planning, to include support of behavioral health needs (mental health/substance use disorder treatment), medical needs, and other identified areas of needed support to ensure overall well-being.
- d. Describe how your organization will collaborate with community partners to identify and engage individuals in need of services and ensure that all individuals referred will, with consent, be linked to and/or receive needed services.
- e. Describe how the proposed program would handle overdoses, suicide risk, and behavioral health crises when they occur onsite, giving examples of how your organization has managed these in the recent past.

## **4. Staffing Plan (15 points)**

- a. Describe your proposed staffing pattern, including supervisors, and how it will fulfill the staffing requirements in this RFP. Include an organizational chart that shows how this program will fit into your organization's overall structure.
- b. Describe your plan to ensure adequate support and clinical supervision for staff, particularly staff who work independently/ off-site.

- c. Describe your proposed training plan for staff assigned to this program and indicate any relevant expertise, training, and/or skills staff already possess.

**5. Effectively Serving the Focus Population (5 points)**

- a. Describe how your organization is uniquely qualified and designed to address known disparities experienced by this population.

**6. Program Evaluation and Quality Assurance (15 points)**

- a. Describe how your organization obtains and incorporates feedback from people served and other stakeholders into the development, implementation, operation, and improvement of program services.
- b. Describe any previous experience your organization has implementing projects similar to this one. Were you able to meet all of the programmatic and financial deliverables and reporting requirements? If there were any quality concerns, how were they addressed?
- c. Specify how consumers' Protected Health Information will be collected, maintained, used, and disclosed in compliance with (i) The Health Insurance Portability and Accountability Act of 1996 (42 U.S.C. 1320d et seq. and implementing regulations at 45 CFR parts 160 and 164) as amended, (ii) the Confidentiality of Alcohol and Drug Abuse Records (42 U.S.C. 290dd-2, as implemented by 42 CFR part 2) as amended; and (iii) the Maryland Confidentiality of Medical Records Act (Md. Code Ann. Health-General Section 4-301 et seq.) as amended

**7. Proposed Program Budget (5 points)**

- a. Provide a budget narrative/justification that explains revenue and expense projections in more detail. The budget narrative should be included in the body of your proposal, not as an appendix.

**8. Implementation Timeline (5 points)**

- a. Provide a detailed timeline for implementation that includes all of the activities that you have committed to perform in your proposal. Show an outline of all the steps necessary to fully operationalize this project and by when each step would be completed. Contracts are expected to start on October 1, 2024.

**9. Appendices**

- Copies of all relevant licenses/certifications, including any licenses issued by the Maryland Department of Health (BHA and OHCQ).
- Organizational chart
- Letters of support

- Line-Item Budget
- Most recent site visit report from the ASO, Accrediting Organization, and/or the Office of Health Care Quality (OHCQ), including any statements of deficiencies and program improvement plans
- Most recent final Financial Audit package including Findings and Management Letter from an independent auditor (preferred) OR a recent unaudited Income Statement AND Balance Sheet, if an audit is not available.
- Most recent IRS 990 – Return of Organization Exempt from Income Taxes or the most recent Business or Personal Tax Return if an IRS 990 form is not required to be filed
- Certificate of Good Standing from the Maryland Department of Assessments and Taxation (screenshots from the MDAT website will not be accepted) - the certificate must be dated within one year of the RFP submission due date.