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Technology for Telemedicine Services Request for Proposals (RFP)

Background

The Home and Community Based Services Federal Medical Assistance Percentage (HCBS-FMAP) funding for the Adult Mental Health Initiative is to enhance, expand, or strengthen HCBS under the Medicaid program. The Center for Medicare and Medicaid Services (CMS) approved funding to groups of counties and tribes for regional collaboration to build community-based mental health service infrastructure that responds to the unique needs and circumstances of their community. Our AMHI has received a total of \$265,157, of which up to \$40,000 is dedicated towards purchasing technology to allow for continued use of telemedicine services in diverse communities of Benton, Sherburne, Stearns, or Wright County who have a diagnosed serious and persistent mental illness (SPMI). These are one-time funds and must be spent by March 31, 2024.

Objective

These funds will help to enhance, expand, and strengthen our home and community-based setting services and/or other mental health rehabilitative services in our region by allowing mental health providers to have technology that will allow them to reach clients & connect them with telemedicine & other mental health services. Examples of this include but are not necessarily limited to the following: tele-communication start-up costs (e.g. equipment, internet connectivity activation costs), software to help with continued use of telemedicine services, purchase of devices (smartphones, computers, tablets), and/or internet activation fees that would allow the agency to meet needs of tele-services to address functional needs, promote independence, and/or support community integration.

Any information systems, tools, content, and work products produced under this CONTRACT, including but not limited to software applications, web sites, video, learning modules, webinars, presentations, etc., whether commercial, off-the-shelf (COTS) or custom, purchased or developed, must comply with the Minnesota IT (MN.IT) Accessibility Standards, as updated on June 14, 2018. This standard requires, in part, compliance with the Web Content Accessibility Guidelines (WCAG) 2.0 (Level AA) and Section 508 Subparts A-D.

Please note that this is intended to build the infrastructure of the HCBS provider. Devices cannot be purchased and given to clients; they are to remain in possession of the provider or with staff if using off-site.

Eligible Recipients

To be eligible for these funds, recipients must meet the following requirements:

• Recipient provides a community support program and/or other mental health rehabilitative services in Benton, Sherburne, Stearns, or Wright County.

- Provides services to individuals who have been diagnosed with a serious and persistent mental illness (SPMI).
- Provider is a Medicaid provider/provides a Medicaid billable service.
- Services cannot be offered in institutional settings such as nursing facilities, IMDs, ICF/DD facilities, or hospitals.
- The long-standing prohibition against using Medicaid funds for room and board applies to
 activities under the HCBS spending plan. This prohibition extends to any reoccurring
 expenditures related to housing and capital expenditures for new construction or rehabilitation of
 housing.
- Upon approval, grantee must implement work plan and provide quarterly progress updates.

Proposal Requirements

1. **Detailed description of renovation(s).** Description should include how the technology will enhance, expand, and/or strengthen their program(s) and ensure that the investment will result in settings that are fully compliant with the home and community-based settings criteria.

Agencies must also describe how the funds will supplement and not supplant existing funds and state what their sustainability plan is, if applicable.

2. Program budget of expenditures. Budget must include itemized costs of the service/technology. Include a narrative explaining each section of the budget and include any formula(s) that were used to determine the dollar amounts.

Please note that funds cannot be used to make capital purchases. Capital purchases are defined as something which has a useful life of more than one year and a per-unit acquisition cost which exceeds \$5,000 and is 1) land, buildings (facilities), equipment, and intellectual property (including software) whether acquired by purchase, construction, manufacture, lease-purchase, exchange, or through capital leases; or 2) additions, improvements, modifications, replacements, 3) rearrangements, reinstallations, renovations, alterations, or repairs of the items listed above that materially increase their value or useful life.

Budget Limitations

Please ensure proposed budgets align with the following limits:

- Each proposal's budget may not exceed \$5,000
- An agency may submit more than proposal; however, there will be a \$5,000 limit in effect for each agency location by address.
- 3. Define outcome measurements. Proposals must include anticipated outcomes of the service/technology that will be provided and must include how the outcomes will be measured. Proposals should include information on estimate of number of people who will be served by the technology.

4. Data Reporting. Proposals must include how data on the clients served will be collected and reported to the Minnesota Department of Human Services (DHS). It is a requirement of all providers who receive funding from CAMHI to report client data to DHS (such as MHIS, SSIS, DHS Spreadsheet, or other approved DHS reporting method). Providers are expected to have a plan to obtain, retain, and report this information.

Grantees will be required to provide quarterly progress reports to include the following;

- Quarterly number of enrolled individuals who accessed AMHI-HCBS-FMAP funded activities. E.g., number of individuals served with the technology purchased.
- Quarterly summary of actual and anticipated allowable expenditures.
- This includes the submission of quarterly reports detailing implementation progress and other updates relevant to each activity under the plan (lessons learned, outcomes, challenges, etc.).

Additional information on data reporting will be made available by DHS in the near future and information will be shared with grantees as they become available.

5. Contact Information. Please provide name, phone number, email address, and address of a contact person from the organization submitting the proposal.

6. Proposal Synopsis

In addition to their full proposal, all proposers must include a synopsis of their proposal, no longer than one page, included with their submission. Include in this synopsis: Proposer's name, address, phone number, and contact person, description of key technology that will be purchased, budget overview, and other relevant information. This synopsis is critical, as it will provide an introduction and an overview of the program to the Reader Group Committee and Joint Powers Board members.

Responder's Conference

A responder's conference/Q&A session is scheduled for Friday, March 31, 2023, from 9-10:30am. This is a virtual conference only and you may join using the link below.

Topic: HCBS-FMAP RFP Responder's Conference

Time: Mar 31, 2023 09:00 AM Central Time (US and Canada)

Join Zoom Meeting

https://us02web.zoom.us/j/84634180067?pwd=dlJoSUVjem1VMXVHUUhacUVmdVZqUT09

Dial by your location: (305) 224 - 1968

Meeting ID: 846 3418 0067

Passcode: 473405

Evaluation Process and Timeline for submitting proposals

Completed proposals must be received no later than 4:00pm (CST) on April 21, 2023. Proposals received after the deadline cannot be accepted. A Reader Group will be selected to evaluate responder proposals. Proposals will be reviewed for approval to ensure they are meeting funding requirements that DHS has set in place for this funding. Proposals will be reviewed by the RFP Reader Group in the beginning of May and responders will be notified of results shortly thereafter.

Proposals may be sent via mail, email, or fax. Please send them to:

CommUNITY Adult Mental Health Initiative

Bethany Oberg, Initiative Coordinator

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