

Division of Purchases

One Capitol Hill | Providence, RI 02908 | (401) 574-8100 Nancy R. McIntyre, State Purchasing Agent

Solicitation Information March 22, 2021

ADDENDUM #1

RFP # 7611864

TITLE: Behavioral Health Crisis Care System

Bid Closing Date & Time: March 30, 2021 @ 10:00 AM Eastern Time (ET)

Notice to Vendors

Attached are vendor questions with State responses. No further questions will be answered.

Dawn Vittorioso Buyer II

Interested parties should monitor this website, on a regular basis, for any additional information that may be posted.

<u>Vendor Questions with State Responses for RFP #7611864 – Behavioral</u> Health Crisis Care System

Question 1: Section 4A of the RFI specifies that vendors must submit five paper copies (one original and four copies) of their response. Because of the COVID-19 pandemic, such a production is hazardous per state and federal guidance. Therefore, can vendors only submit responses electronically via the required CD-R and without the paper copies?

Answer to question 1: All submission must be mailed or dropped off. Electronic versions will not be accepted.

Question 2: Due to the COVID-19 pandemic and State work-from-home orders, is it permissible for vendors to use an electronic signature for the RIVIP Bidder Certification Cover Form?

<u>Answer to question 2</u>: Yes, use the encrypted signature option.

- Question 3: **RFI page, 9 Section 4: Response Contents.** The first item in this section requests that we complete and submit an RIVIP Bidder Certification Cover Form. It appears that this form is typically submitted as part of an RFP selection process.
 - 1) Please confirm that this completed form is required given that no contract will ensue from the RFI, and
 - 2) If it is required, please confirm that we may use an electronic signature for it, given current COVID workplace restrictions?

<u>Answer to question 3</u>: The RIVIP form is required. Yes, encrypted signatures are accepted.

Question 4: **RFI page, 9 Section 4: Response Contents.** Item 2 in this section includes a requirement for a copy of our response marked "Original-Signed". If the State agrees that an RIVIP Bidder Certification Cover Form is not required for an RFI, please confirm that a) the "Original Signed" version of our response is moot and 2) the State instead wishes to receive 5 copies of our response.

Answer to question 4: RIVIP for is required. Five copies are required.

Question 5: **RFI page, 9 Section 4: Response Contents.** Item 3 in this section requires that we provide our response on a CD-R. Please confirm that this is required for our 6-page response.

<u>Answer to question 5</u>: Confirmed.

Question 6: **RFI page reference N/A.** Does the State envision that the crisis program will operate as an administrative services organization (ASO) or on a risk basis?

Answer to question 6: At this time, the State has not made a decision about how the services will be structured at the administrative level and the extent to which crisis services will enter risk-based healthcare improvements. We would be interested in hearing directly from respondents about any thoughts related to administrative structure.

Question 7: **RFI page reference N/A.** Does the State have a sense of what percentage of members will receive only behavioral Health (BH) services vs. the percentage who will receive both BH and substance use disorder (SUD) services?

<u>Answer to question 7</u>: Ideally, any service the State supports will be maximally adaptive to crises of different kinds. While licensure and training do significantly impact the kinds of services that can be provided through crisis response, we encourage respondents to consider models that allow them to adapt, perhaps through partnership, to crisis calls of different kinds.

Question 8: **RFI page reference N/A.** Will the key stakeholder for the resulting crisis program be the State, or will the program be driven by the counties, with State providing oversight and guidance?

Answer to question 8: Rhode Island does not have county governments, and we do expect the State will be, in partnership with federal authorities, the lead funder for crisis services. However, we do expect that localities will have a prominent role in planning for and guiding the execution of crisis services.

Question 9: **RFI page reference N/A.** Does the State envision that the resulting crisis system will serve all payers, including commercial?

Answer to question 9: Yes

Question 10: **RFI page reference N/A.** When does the State anticipate releasing an RFP for this program? What is the current estimated go-live date?

Answer to question 10: Should any RFP(s) result, we anticipate release in September of 2021 with start date January 2022.

Question 11: References "licenses required by applicable federal, state, and local law necessary to perform the requirements of any contract awarded pursuant to this solicitation". What license(s) does the State anticipate a vendor will need to possess to establish the crisis system outlined in the RFI?

Answer to question 11: At this time, we do not have any fixed expectations on licensure.

Question 12: With being responsible for providing nine types of services could the Behavioral crisis care system be responsible for the identification, collection, analysis, and reporting of mental health and substance use incidence, prevalence data?

Answer to question 12: No, this type of data collection is not envisioned as a function of any provider of behavioral health crisis services, but we would expect any entity operating or supporting behavioral health crisis services to report rigorous utilization and outcomes data for behavioral health crisis services.

Question 13: Could a Behavioral crisis care system provide a list of different types of user with their roles and volume?

<u>Answer to question 13</u>: This question is unclear.

Question 14: How many systems will be integrated with the behavioral health crisis programming within the behavioral healthcare system?

Answer to question 14: We are seeking to make behavioral health crisis services a widely available benefit to anyone in need. For that reason, we will consider how to integrate multiple providers and provider types within our behavioral health crisis systems planning.

Question 15: The crisis services healthcare system will work with different providers; how many providers will need to access the system?

<u>Answer to question 15</u>: We are seeking to make behavioral health crisis services a widely available benefit to anyone in need. For that reason, we will consider how to integrate multiple providers and provider types within our behavioral health crisis systems planning.

Question 16: Will these providers require their own permission access to the behavioral database to ensure delivery of effective person-centered interventions?

Answer to question 16: We intend to support crisis service providers with the maximum degree of access possible to ensure coordination of care.