



REQUEST FOR PROPOSAL

FOR

24/7 CRISIS PHONE AND TEXT LINE FOR
BEHAVIORAL HEALTH SERVICES

RFP NUMBER: 24-002

ISSUED: JULY 22, 2024

Genesee Health System 1040 W. Bristol Road, Flint, MI 48507

TABLE OF CONTENTS

Contents

1.	SCOPE OF WORK	4
1.1.	PROJECT SUMMARY.....	4
1.2.	SPECIFIC PHONE AND TEXT CRISIS LINE SERVICE REQUIREMENTS:	4
1.3.	GENERAL REQUIREMENTS AND STANDARDS	6
2.	CURRENT CONDITIONS.....	6
2.1.	ABOUT THE OWNER.....	6
3.	PROPOSAL REQUIREMENTS	7
3.1.	DATE AND TIME REQUIREMENTS	7
3.2.	GENERAL FORMAT	8
3.3.	SUBMISSION REQUIREMENTS.....	8
3.4.	SUBMITTAL FORM TEMPLATES	9
3.5.	Organizational Information.....	9
3.6.	PROJECT APPROACH	10
3.7.	PROJECT NARRATIVE – Caller Experience	10
3.8.	PROJECT NARRATIVE – Crisis Line Process	11
3.9.	PROJECT NARRATIVE – Performance measures and data utilization.....	11
3.10.	OFFEROR’S QUALIFICATIONS AND EXPERIENCE.....	12
3.11.	ORGANIZATION’S CAPACITY	12
3.12.	SCHEDULE PROPOSAL	13
3.13.	COST PROPOSAL	13
4.	EVALUATION PROCEDURES	13
4.1.	EVALUATION SUMMARY.....	13
4.2.	EVALUATION PROCESS.....	13
4.3.	INTERVIEWS	13
5.	ADMINISTRATIVE REQUIREMENTS	14
5.1.	PURCHASING CONTACT	14
5.2.	QUESTIONS, INQUIRES, CLARIFICATIONS, REQUESTS FOR INFORMATION.....	14

5.3.	ADDENDA.....	14
6.	PROPOSAL FORMS.....	14
7.	STANDARD TERMS & CONDITIONS	19
7.1.	COST LIABILITY	19
7.2.	OTHER MATERIALS.....	19
7.3.	AWARD OF CONTRACT	19
7.4.	DISCLOSURE	19
7.5.	CONFLICT OF INTEREST.....	19
7.6.	RELATIONSHIP OF THE PARTIES (INDEPENDENT CONTRACTOR)	19
7.7.	NO WAIVER OF DEFAULT	20
7.8.	DISCLAIMER	20
7.9.	REFERRAL PROCESS.....	20

1. SCOPE OF WORK

1.1. PROJECT SUMMARY

Genesee Health System (Board or GHS) is seeking sealed proposals from interested and qualified parties experienced in providing 24/7 CRISIS PHONE AND TEXT LINE FOR BEHAVIORAL HEALTH. These services will be provided to clients residing in Genesee County, Michigan. The purpose of the 24/7 Behavioral Health Crisis Phone and text line is to implement staffed telephonic and text message crisis and referral support for behavioral health emergencies, 24 hours per day, 7 days per week, 365 days per year, for citizens of Genesee County. The goal is to provide a fully integrated crisis service system that utilizes a problem-solving approach and that markedly increases access to a comprehensive range of person-centered, recovery-oriented, and trauma informed crisis management and avoidance services.

The Phone and Text Crisis Line is an integral part of the overall GHS crisis safety net, both for active consumers of GHS services, as well as for the community at-large. The Crisis Line service will integrate and coordinate with other established components of the existing GHS crisis safety net, including but not limited to the mobile Crisis Team, 24/7 clinical service teams and contracted hospital providers. These services will provide opportunities to meet individuals' emergent behavioral health needs while serving them in the least restrictive setting and preserving community integration. During normal business hours, the GHS Customer Services responds to all callers though, depending on the demand, may warm-transfer crisis calls to the 24/7 call and text line. The majority of crisis calls are received after normal business hours but the expectation is for the Crisis Line Service to be fully operational and to meet all service requirements 24 hours per day, 7 days per week, 365 days per year.

1.2. SPECIFIC PHONE AND TEXT CRISIS LINE SERVICE REQUIREMENTS:

- A. To use innovative evidenced based strategies to provide 24/7/365 crisis phone and text line services to assist consumers with self-identified behavioral health crises.
- B. Work within the current crisis continuum of care with community partners and with the person in crisis' primary supports team.
- C. Reach and provide services to a broad swath of Genesee County residents across all socio-economic groups and highly diverse demographics in a safe and inclusive manner.
- D. Provide telephonic and text triage, assessment, counseling and referral response to an individual, family, or community caller impacted by a crisis, by a trained behavioral health responder, 24 hours per day, 7 days per week, 365 days per year;
- E. Provide clinically skilled and empathic assistance to individuals and families in crisis in order to mitigate the crisis as quickly and safely as possible;
- F. Provide coordination with community based providers, such as the mobile Crisis Team, Assertive Community Treatment and Home Based Teams, and contracted hospitals to ensure a face-to-face assessment and crisis support when indicated;

- G. Identify those individuals who have an urgent need for follow-up calls for behavioral health support to prevent hospitalization;
- H. Adhere to defined performance metrics and commit to a quality assurance and improvement process.
- I. Maintain staffing levels and competencies as follows:
 - a. Individual staff must be dually trained and competent for serving children, adolescents, adults and older adults and the program must have staff assigned to work from all competency areas at all times;
 - b. Staff competencies must include cultural competence and co-occurring disorders;
 - c. Provide 24/7 access to a licensed, masters level (or above) mental health professional who is a professionally credentialed expert in crisis work or suicidology and who will provide case level consultation as needed;
 - d. Identify a program supervisor or director that has at least 1 year prior experience in behavioral crisis work and some formal education in crisis intervention or suicidology.
 - e. Operate under policies and procedures that ensure initial and ongoing staff training, and ongoing staff monitoring and evaluation, and that includes a defined, planned training curriculum that is competency and performance based. Staff performance measures will include telephone etiquette, staff knowledge and competency, work error rate, and adherence to crises line protocols.
- J. Coordinate a range of services and referrals that divert people from inpatient psychiatric hospitalization and emergency rooms whenever possible, to less restrictive, recovery-oriented service alternatives. Coordination efforts will primarily consist of phone communication with on-call ACT or Home-Based team members, Mobile Crisis Team staff, GHS Utilization Management, Access, and Customer Services staff,
- K. Implement standardized protocols reflecting evidenced based practices that are co-occurring capable, trauma-informed, and recovery focused for individuals with multiple service needs, including but not limited to individuals with co-occurring disorders (e.g. substance abuse, developmental disabilities, traumatic brain injury, mental illness) and/or accompanying medical conditions as well as being sensitive to the special needs of older adults, children, and adolescents
- L. Provide clinical summary of service and disposition for coordination and continuation of care purposes through an accessible electronic method that is maintained in real-time and accessible 24/7 to the PIHP.
- M. Have the capacity to receive and review "real time" crisis support plans, crisis alerts and other appropriate clinical information electronically from service providers.
- N. Sufficient information technology system that allows for

- a. immediate access to client and resource data needed to provide clinically informed, efficient, safe, and coordinated crisis intervention and triage;
- b. measurement of performance against expected standards, outcome measurement, and monitoring and evaluation of program and service quality;
- c. Crisis line technology to document all calls providing sufficient call detail and transfer capability;
- d. internet access, resource database, electronic documentation, and reporting system;
- e. Capability to interface with the current GHS data collection system and EMR.

1.3. GENERAL REQUIREMENTS AND STANDARDS

- A. The selected Offeror shall comply with all privacy and security standards as stipulated by the Health Insurance Portability and Accountability Act (HIPAA) of 1996.
- B. The selected Offeror shall comply with all Federal and Michigan Laws, regulations and the Michigan Administrative Code, the Michigan Mental Health Code, 42 CFR and the Michigan Department of Health and Human Services (MDHHS) Contractual obligations.
- C. Offerors must assure that all clinicians and supervisors will have a minimum of a master's degree in psychology, social work, or counseling, TLLP, LLP, LLPC, LPC, LLMSW, LMSW and follow all Michigan state licensure guidelines as applicable. Minimum work experience for supervisors must include one (1) or more year post-masters experience in mental health substance abuse services and clinical experience with all target populations: SMI, SED, IDD and SUD. The selected Offeror must demonstrate within the proposal how the crisis helpline services will operate according to best practice industry standards as defined by MDHHS and Substance Abuse and Mental Health Services Administration's (SAMHSA) national guidelines for crisis care.
- D. The proposal to provide these services will be in compliance with all applicable State and Federal standards and guidelines.
- E. The Board reserves the right to accept or reject any/all proposals received pursuant to this RFP, in whole or in part; and/or to waive any/all irregularities therein; and/or to delete/reduce the units of service; and/or to negotiate proposal terms in any way whatsoever to obtain a proposal as deemed in its best interest. The Board reserves the right to re-solicit/re-advertise as deemed necessary.

2. CURRENT CONDITIONS

2.1. ABOUT THE OWNER

The Board received Authority status as of January 1, 2013, effectively becoming a distinct non-profit separate from the County of Genesee. Funding for the service(s) described herein is enabled by a cost reimbursement contract with Region 10 Prepaid Inpatient Health Plan (PIHP) to manage the Concurrent 1915(b)(c) Programs, the Healthy Michigan Plan and relevant waivers in Genesee County,

Michigan and to provide a comprehensive array of specialty mental health services and supports as indicated therein. The Board also operates Genesee Community Health Center, which offers a holistic approach to physical health care for those who may otherwise go without.

The Board has chosen to meet the challenge of managed care by managing its mental health care service delivery through evaluation and monitoring and expecting its service providers to be solely responsible for managing its operations consistent with terms of the accepted contract.

Consequently, the Offeror should be aware that providers from whom the Board purchases services are expected to operate in the marketplace and be able to effectively meet the requirements for establishing and maintaining a contractual relationship with the Board. This RFP establishes criteria and requirements that have been designed to cover important aspects of the services to be provided.

Crisis Services

Genesee Health System has a robust crisis service continuum of care. Key community-based crisis services include a Behavioral Health Urgent Care, Crisis Residential Services, mobile crisis teams, co-response with law enforcement for mental health related 911 calls, and crisis follow up care. Additionally, GHS is currently building a Crisis Stabilization Unit that will reside within the Behavioral Health Urgent Care.

Volume of calls

Emergency Call Center volume has historically ranged from 400 to 900 calls per month, with an average call volume of 572 calls per month occurring during FY '23.

3. PROPOSAL REQUIREMENTS

3.1. DATE AND TIME REQUIREMENTS

The Board will make every effort to adhere to the schedule below. However, the Board reserves the right, at its sole discretion, to adjust the RFP Schedule of Events as it deems necessary. All time is local to Flint, Michigan:

<u>EVENT</u>	<u>TIME and DATES</u>
Issue RFP	Monday, July 22, 2024
Questions accepted until (email to RFPpreplies@genhs.org)	Tuesday, August 6, 2024, 11:00 am
Q and A document posting	Friday, August 9, 2024
Deadline for Final Submission of Proposals DUE DATE:	Thursday, Sept 5, 2024 11:00 am
Opening	September 5, 2024
Award (tentatively)	October 11, 2024

Service Date:	November 1, 2024 or other date agreed to by both parties
---------------	--

3.2. GENERAL FORMAT

A. Preparation and Formatting Requirements [Non-Scored]

The Offeror shall be responsible for preparing and submitting an effective, clear, and concise proposal. Proposals must contain the following information:

- (a) Shall be written in the English language
- (b) Offeror will prepare a comprehensive document incorporating responses to each Section; said responses shall be presented as follows: Font Style “Arial or Calibri” with a minimum Font Size of 12
- (c) Offeror shall prepare a Table of Contents with page numbers.
- (d) Offeror shall respond regarding how they will answer or meet the requirements of each Section, cite the section number for each response with each section being individually tabbed, corresponding to the Table of Contents.
- (e) Proposal must be signed by the official authorized to bind the submitter to its provisions.

*Please note, Offerors should not submit handbooks and extensive documents as examples, but rather items such as Table of Contents from handbooks previously developed or brief samples to demonstrate competency.

All areas of the proposal must be addressed in the same sequence cited in the RFP Submission Requirements in order that proper consideration is given to the proposal. Proposals submitted without information or incomplete content will result in the proposal being removed from consideration. The Offeror must complete an **Offeror Background Submittal Form A** and attach to the proposal. The **only** accepted document formats for email submission are **.pdf** or **Microsoft Word .doc, .docx**.

3.3. SUBMISSION REQUIREMENTS

- A. It is the responsibility of the Offeror to understand all details of the RFP. The Offeror, by submitting a response indicates a full understanding of all details and specifications of the RFP. Offerors are expected to present narrative statements/summaries in a clear, concise and organized manner for review.
- B. **The Offeror is solely responsible for delivery of One (1) original submitted by EMAIL to RFPreplies@genhs.org. or at https://www.bidnetdirect.com/mitn.** GHS has partnered with BidNet as part of the Michigan Inter-governmental Trade Network (MITN) to post bid opportunities at the site and receive proposal submissions. Proposals will be accepted until **September 5, 2024, 11:00 am**. Proposals must be received by this date and time in order for the proposal to be considered.

The proposal shall cover services beginning on or about November 1, 2024 or as agreed upon by the Offeror and the Board.

- C. Cost Proposal must be submitted in a separate file and clearly named Cost Proposal with company name (Submittal Form J)

3.4. SUBMITTAL FORM TEMPLATES

- A. The offeror must ensure that their response meets all form and content requirements detailed within this RFP. This RFP contains Submittal Forms, which must be used by the Offerors to submit their proposal. It is expected that the proposal will follow the order of the provided forms and not exceed 75 pages.

Submittal Form	
FORM A - Offeror Background	
FORM B - Certifications	
FORM C – Project Approach	
FORM D – PROJECT NARRATIVE – Caller Experience	
FORM E – PROJECT NARRATIVE – Crisis Line Process	
FORM F – PROJECT NARRATIVE – Performance Measures and Data Utilization	
FORM G – OFFEROR’S QUALIFICATIONS AND EXPERIENCE	
FORM H – ORGANIZATION’S CAPACITY	
FORM I – SCHEDULE PROPOSAL	
FORM J – COST PROPOSAL	

3.5. Organizational Information

- A. Offeror Background (Submittal Form A)
- a. Offeror must provide/submit a current criminal background check for the organization’s executive team.
 - b. Offeror must disclose any litigation involving the organization during the past five (5) years.
 - c. Offeror must provide summaries of any substantiated recipient rights violations by the organization’s staff over the past five (5) years
- B. Certifications worksheet (Submittal Form B)
- C. Legal Structure and Financial Viability
- a. Offeror shall submit documentation and proof of entity (e.g. IRS 50113 determination); copy of Articles of Incorporation or document under which the organization is constituted/organized from its inception;
 - b. Offeror shall include the names, addresses, and title or representation of all owners or controlling parties of the organization, whether they are individuals, partnerships, corporate bodies, or subdivisions of the bodies.

- c. Offeror shall attach audited financial statements for the previous two (2) years of operation.
- d. Offeror shall attach a Certificate of Workers' Disability Compensation insurance coverage.
- e. Liability Insurance, throughout the contract period, the successful offeror must provide the following insurance coverages, attach a certificate of insurance confirming:
 - Professional liability (errors and omissions) in a sum of not less than \$1,000,000 per claim and \$3,000,000 annual aggregate.
 - Offeror shall attach a certificate of general liability insurance with Broad Form General Liability Endorsement or equivalent, if not in policy proper, Provider and Contractual liability coverage with limits of not less than \$1,000,000 per occurrence and \$3,000,000 annual aggregate.

3.6. PROJECT APPROACH

- A. The Project Approach should be a brief roadmap that describes the major activities or tasks and how the Offeror will meet the Owner's expectations (i.e. cost, time, resources, quality) as set forth in this RFP. This should include a concise synopsis of the work and approach that will be taken to complete this project. Offeror should describe the philosophy that will be utilized, along with the interest and capacity to meet the needs of our system of care. This should demonstrate to the Board that the Offeror can visualize what they are going to do before they do it.
- B. Offeror shall identify and describe any anticipated or potential problems, the approach to resolving these problems and any special assistance that will be requested from GHS.
- C. Project Approach (Submittal Form C)

3.7. PROJECT NARRATIVE – Caller Experience

- A. Offerors must outline the experience a member of the public accessing phone and/or text crisis line services can expect. Describe menus or automatic routing, screening tools or assessments, clinical interventions, and use of AI.
 - a. Bidder to detail how Bidder will be prepared and skilled to provide crisis support to vulnerable populations or populations at high risk for suicidality (ex: racial/ethnic minorities, LGBTQ+, veterans, first responder and public safety staff).
 - b. Bidder to detail how they would work with linguistically diverse people (non-English speaking persons, persons who use American Sign Language as a first language, etc.)
 - c. Discuss how Bidder would prepare staff to work with “familiar or frequent callers”
 - d. Discussion how Bidder would provide support to persons of the LGBTQAI+ population struggling to cope with gender identity, sexuality, self-harm, and/or suicidality.
- B. Project Narrative (Submittal Form D)

3.8. PROJECT NARRATIVE – Crisis Line Process

- A. The offeror will provide a detailed process of how a crisis line service accessibility via multiple contact methods will be implemented. Define how this process will be adhered to, and procedures to support the process. Define how the crisis line service accessibility goes from initial intake to resolution and/or turn over care to another entity, including a detail plan for collaboration and coordination of care for referral to local community-based services, emergency service, and other pertinent contact points.
- B. Provide detail on how offeror will be prepared and skilled to provide crisis support to vulnerable populations.
- C. Project Narrative (Submittal Form E)

3.9. PROJECT NARRATIVE – Performance measures and data utilization

- A. The Offeror will develop and review data monitoring systems and performance measures with GHS, as well as any State and local community-based partners that may be required should be explained in detail, including examples of past data systems, data monitoring and data utilization for program operations and improvement Offeror has experience with. Examples of data to be reported monthly should include but not limited to the following as metrics may change over time as requirements change programs goals and objectives change:
 - a. **Call Stats** – includes total inbound calls (minus short abandons), regardless of whether the calls were dismissed or documented.
 - b. **Staff turnover rate and Staff diversity**
 - c. **Service Quality** – incorporates a summary and review of high-risk callers and texters, all active rescues, and specific service and outcome data, which may include Percentage of calls answered in 30 seconds, Abandonment rate, Average speed to answer in seconds, Number of referrals, etc.
 - d. **Received Services** – includes documented inbound and outbound Assessment question sets that have a response to the question “Is client receiving services from GHS? If yes, which team?”
 - e. **Type by Month** – includes documented inbound and outbound calls grouped by call type. Call type is a subset of question set type (for example, Initial calls can be Assessment, Hospitalization, Message, or Info Only)
 - f. **Case Breakdown** – includes documented inbound and outbound calls grouped by question set type (for example, Initial calls, Client/Caller Follow-Up calls, Police calls, etc)
 - g. **Day by Hour** – includes documented inbound and outbound calls grouped by the day and hour the call started
- B. Include how feedback will be obtained, describe ongoing quality assurance and service improvement.
- C. Project Narrative (Submittal Form F)

3.10. OFFEROR'S QUALIFICATIONS AND EXPERIENCE

- A. Offeror shall describe any qualifications and/or experience and/or demonstrated competency specifically related to being a 24/7 Behavioral Health Crisis Phone and Text Line provider; list staff positions, license required (if applicable) and qualifications; supervision and backup supervision, additional layers of management and operational support provided by your corporate office, etc. Offeror response should address thoroughly the requirements listed in section 1.2.I.
- B. The successful bidder will describe their efforts to ensure workforce diversity and inclusion in the recruiting, hiring, and retention of staff who are from or have had experience working with target population and other identified individuals served in this initiative. Additionally, the bidder will ensure that there is a training strategy related to diversity, inclusion, cultural competence, and the reduction of disparities in access, quality, and outcomes for the target population. The trainings will include education about implicit bias, diversity, recruitment, creating inclusive work environments, and providing languages access services.
- C. As part of the proposal, include a list of any known potential subcontractors, including the portion of work being contracted out to other licensed contractors. This listing of potential subcontractors shall be limited to the name of the company, name of the company's owner(s), and business address. If any other subcontractor is selected after a contract is awarded, the successful Offeror shall provide the Board with the name of the company, its owner(s), and address. This requirement is not intended to apply to minimal relationships such as the purchase of a small dollar amount of supplies to complete a project.

The offeror shall not enter into subcontracts to the final agreement with additional parties without obtaining prior written approval of the Board. A condition of granting such approval is that such subcontractors shall be subject to all conditions and provisions of the contract. The offeror shall be responsible for the performance of all subcontractors.

- D. Provide a list of four (4) complete references for Community Mental Health (CMH's) and/or Pre-Paid Inpatient Health Plan (PIHP's) that offeror has provided services. References related to a 24/7 Behavioral Health Crisis Phone and Text Line and/or similar crisis services, within the State of Michigan are preferred. Include: CMH/PIHP name, contact name, title, phone #, email, type of program service(s) provided, and length of time services provided.
- E. Include intended staffing pattern, by shift.
- F. Project Narrative (Submittal Form G)

3.11. ORGANIZATION'S CAPACITY

- A. Offeror shall describe their capacity to complete the developmental work necessary to implement the services to be provided in this RFP in a timely manner. Specifically, this refers to activities such as securing a State of Michigan license, hiring staff, training staff, obtaining needed equipment, etc.

- B. Offeror shall detail all other services it operates under contract to any PIHP or CMHSP in the State of Michigan.
- C. Project Narrative (Submittal Form H)

3.12. SCHEDULE PROPOSAL

- A. Offeror shall provide a detailed timeline, from the date of award, with benchmarks, to demonstrate the steps necessary to establish and launch a fully functioning 24/7 Behavioral Health Crisis Phone and Text Line.
- B. Schedule Proposal (Submittal Form I)

3.13. COST PROPOSAL

- A. Submit the cost proposal as a separate file, not included with the technical proposal. The file must be named with the proposer's company name and Cost Proposal.
- B. Cost Proposal (Submittal Form J)

4. EVALUATION PROCEDURES

4.1. EVALUATION SUMMARY

- A. Experience, Expertise, Staff Training & Development
- B. Technical Capabilities and Thoroughness of Proposal
- C. Project Management and implementation approach
- D. Cost
- E. References and past performance

4.2. EVALUATION PROCESS

- A. The contract resulting from this RFP, if any, will be awarded to the responsive and responsible Offeror offering the greatest benefit to GHS, as determined by GHS, when considering technical suitability for intended GHS purpose, supplier performance potential, and total cost.

Proposals will be examined by a GHS evaluation team and scored. The team is composed of a variety of evaluators. While simplified language is not necessary, it would be beneficial to identify key points or provide a summary with any long narratives. The intent of the evaluation process is to determine, through application of uniform criteria, how effectively the proposed service satisfies GHS requirements. In addition to material provided in the proposal, the evaluation team may request oral presentations, additional information, or references from the Offeror or others. The evaluation team will assign quality point scores to each proposal using the criteria listed above.

4.3. INTERVIEWS

Will be as needed with the short-listed firms as determined by the evaluation team.

5. ADMINISTRATIVE REQUIREMENTS

5.1. PURCHASING CONTACT

- A. The purchasing contact on this project is Cindy Stahmer, Purchasing Manager. All communications, any modifications, clarifications, amendments, questions, responses, or any other matters relating to this RFP, shall be made by and through the purchasing contact via email RFPreplies@genhs.org. No contact regarding this solicitation made with other GHS employees is permitted. Any violation of this condition may result in immediate rejection of the proposal.

5.2. QUESTIONS, INQUIRES, CLARIFICATIONS, REQUESTS FOR INFORMATION

- A. Questions about the RFP must be submitted in writing to RFPreplies@genhs.org. Questions will be responded to in writing and made available to all interested parties via posting on the Board's web page www.genhs.org under the <https://genhs.org/rfp-grant-opportunities/> link.

5.3. ADDENDA

- A. All offerors shall be responsible for routinely checking the GHS website at <https://genhs.org/rfp-grant-opportunities/> for issued addenda and other relevant information. GHS shall not be responsible for failure of an offeror to obtain addenda and other relevant information issued at any time related to this RFP

6. PROPOSAL FORMS

SUMBITTAL FORM A – OFFEROR BACKGROUND

RFP Number: **24-002**

RFP Name: **24/7 CRISIS PHONE AND TEXT LINE FOR BEHAVIORIAL HEALTH SERVICES**

Offeror Information

Name of Organization:

Address:

Person(s) to Contact, identify an individual that can be contacted for clarification on the proposal:

Name:

Title:

E-Mail Address:

Telephone Number:

STATEMENT OF CERTIFICATIONS AND ASSURANCES

The Offeror has thoroughly reviewed this RFP, contract documents, and all pertinent appendices, exhibits, and attachments included as part thereof, and that we fully understand all elements required for the full completion of the project as defined therein.

The Offeror further certifies that, if selected as the successful firm, we will enter into a contract agreement.

The prices in this Proposal have been arrived at independently without collusion, consultation, communication, or agreement for the purpose of restricting competition as to any matter relating to such prices with any other firms or with any other competitor.

By signature below the signatory certifies legal authority to bind the responding entity to the provisions of this RFP and any contract awarded pursuant to it. The Board may, at its sole discretion and at any time, require evidence documenting the signatory’s authority to be personally bound or to legally bind the responding entity.

Authorized Representative Signature

Date

Printed Name & Title

Include the following as attachments with submittal Form A:

Offeror must provide/submit a current criminal background check for the organization’s principal staff.

Offeror must disclose any litigation involving the organization during the past five (5) years.

Offeror must provide summaries of any substantiated recipient rights violations by the organization’s staff over the past five (5) years

SUMBITTAL FORM B – CERTIFICATIONS

No.	Criteria	Response*
1	The offeror must demonstrate and leverage an understanding of Michigan’s behavioral health and substance use disorder treatment system and honor the rights and protections afforded to those served in Michigan, per the Mental Health Code.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
2	The offeror must identify their plan to develop and follow policies and procedures that meet all crisis call best practices and requirements, including but not limited to imminent risk, active rescue, follow up, and text training.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
3	The offeror must attest to the following; adhering to federal and State accessibility standards, operate utilizing an understanding of cultural humility, intersectionality, and health disparities.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
4	The Offeror must demonstrate how supports and services provided by the offeror demonstrate an ongoing commitment to linguistic and cultural humility that ensures access and meaningful participation for all people in the service area of various diverse populations, in terms of race, culture, gender identity, sexual identity, age, abilities, income level, geography, and religious and spiritual beliefs.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
5	The offeror attests to and will outline how they will ensure translation services are available for immediate use, as necessary, and at no cost to persons served for their use. This includes taking into consideration the special needs of beneficiaries with disabilities or Limited English Proficiency (LEP).	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
6	The offeror possesses and will maintain accreditation through the American Association of Suicidology for Crisis Lines	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
7	Offeror to attest that Offeror will comply with all applicable laws respecting privacy and maintaining the confidentiality and protecting information of persons served under the conditions specified in HIPAA, the Michigan Mental Health Code (PA 258 of 1974, as amended), the Michigan Public Health Code (PA 368 of 1978 as amended), and 42 CFR Part 2.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
8	Offeror will detail processes for conducting coordination, collaboration and interface with MiCAL/988, as necessary and required by MDHHS and the MiCAL/988 Statewide crisis line.	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree
9	Offeror must maintain required training and/or licensure/certification as necessary for all crisis phone line and text services staffing, including assurance of Recipient Rights training. Attestation must assure that all clinicians will be dually trained and competent for serving children, adolescents, adults and older adults and the program must have staff assigned to work from all competency areas	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree

***Attach additional information on any subject where the Offeror responded “Disagree” to a question above**

Include the following as attachments with submittal form B:

Offeror shall submit documentation and proof of entity (e.g. IRS 501(c)3 determination); copy of Articles of Incorporation or document under which the organization is constituted/organized from its inception;

Offeror shall include the names, addresses, and title or representation of all owners or controlling parties of the organization, whether they are individuals, partnerships, corporate bodies, or subdivisions of the bodies.

Offeror shall attach audited financial statements for the previous two (2) years of operation.

Offeror shall attach a Certificate of Workers’ Disability Compensation insurance coverage.

Liability Insurance, throughout the contract period, the successful offeror must provide the following insurance coverages, attach a certificate of insurance confirming:

- Professional liability (errors and omissions) in a sum of not less than \$1,000,000 per claim and \$3,000,000 annual aggregate.
- Offeror shall attach a certificate of general liability insurance with Broad Form General Liability Endorsement or equivalent, if not in policy proper, Provider and Contractual liability coverage with limits of not less than \$1,000,000 per occurrence and \$3,000,000 annual aggregate.

SUMBITTAL FORM C – PROJECT APPROACH

SUMBITTAL FORM D – PROJECT NARRATIVE – Caller Experience

SUMBITTAL FORM E – PROJECT NARRATIVE – Crisis Line Process

SUMBITTAL FORM F – PROJECT NARRATIVE – Performance Measures and Data Utilization

SUMBITTAL FORM G – OFFEROR’S QUALIFICATIONS AND EXPERIENCE

SUMBITTAL FORM H – ORGANIZATION’S CAPACITY

SUMBITTAL FORM I – SCHEDULE PROPOSAL

SUMBITTAL FORM J – COST PROPOSAL

7. STANDARD TERMS & CONDITIONS

7.1. COST LIABILITY

- A. The Board assumes no responsibility or liability for costs by the Offeror, or any Offeror prior to the execution of a contract between the organization and the Board.

7.2. OTHER MATERIALS

- A. Offerors may attach other materials believed to be relevant to illustrating the Offeror's ability to successfully provide these services. Only material which includes a clearly stated value to GHS will be considered. The offeror must state the relevance and reason for including additional information.

7.3. AWARD OF CONTRACT

- A. It is the intent of the Board to enter into a contract with provider(s) that will emphasize administrative efficiencies, and possess the capacity, infrastructure and organizational competence to provide the requirements under this proposal.
- B. Award recommendations are contingent upon an initial evaluation of the Offeror's qualifications to determine if the Offeror is a quality provider.
- C. Offerors who are awarded contracts shall not assign or delegate any of their duties or obligations under the contract to any other party without written permission of the Board.

7.4. DISCLOSURE

- A. All information in an Offeror's proposal is subject under the provisions of Public Act No. 442 of 1976 known as the Freedom of Information Act.

7.5. CONFLICT OF INTEREST

- A. Offerors awarded a contract will affirm that no principal, representative, agent, or other acting on behalf of or legally capable of acting on the behalf of the Offeror, is currently an employee of the Board; nor will any such person connected to the Offeror currently be using or privy to any information regarding the Board which may constitute a conflict of interest.
- B. At the time of the proposal, all Offerors shall disclose any known direct or indirect financial interests (including but not limited to ownership, investment interests, or any other form of remuneration) that may be present between the Offeror or its potential subcontractors, and Board personnel. This disclosure shall be made to the Boards' Director of Operations who will forward the information to the CEO.

7.6. RELATIONSHIP OF THE PARTIES (INDEPENDENT CONTRACTOR)

- A. The relationship between the Board and any Offerors successful in obtaining a contract is that of client and independent contractor. No agent, employee, or servant of the contractor shall be deemed to be an employee, agent, or servant of the Board for any reason. The independent contractor will be solely and entirely responsible for its acts and the acts of its agents, employees, and servants during the performance of a contract resulting from the RFP.

7.7. NO WAIVER OF DEFAULT

- A. The failure of the Board to insist upon strict adherence to any term of a contract resulting from this RFP shall not be considered a waiver or deprive the Board of the right thereafter to insist upon strict adherence to that term, or any other term, of the contract.

7.8. DISCLAIMER

- A. All the information contained within this RFP reflects the best and most accurate information available to the Board at the time of the RFP preparation. No inaccuracies in such information shall constitute a basis for legal recovery of damages, either real or punitive. If it becomes necessary to revise any part of this RFP, a supplement will be issued to all potential Offerors who obtained the original RFP.

7.9. REFERRAL PROCESS

- A. Information related to the population to be served will be discussed at the pre-proposal conference. Providers must agree to accept and serve all clients referred and authorized by the Board under the contract as described in the following service description.