



# Treatment and Supportive Services

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## Notice of Funding Opportunity: Crisis Services RFP

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## **A. Montgomery County Alcohol, Drug Addiction, and Mental Health Services Board**

The Montgomery County Alcohol, Drug Addiction, and Mental Health Services Board (ADAMHS) oversees the planning, funding, and evaluation of publicly funded behavioral health services in Ohio, operating under Ohio Revised Code Chapter 340.01. ADAMHS collaborates with community partners to assess local needs, set priorities, and deliver recovery-focused services. Our mission is to provide accessible, equitable behavioral health care to elevate individual and community well-being.

ADAMHS has departments with specific expertise in information technology, claims and enrollment, planning, administration, prevention and early intervention, training, strategic initiatives, and clinical behavioral health services. ADAMHS has an extensive background in supporting programs and implementing strategies that have and will continue to support multifaceted solutions that integrate healthcare, social services, and community resources to address the ongoing opioid epidemic.

Relevant programs include:

Continuum of Crisis Services

Community Training & Staff Development

Familiar Faces

GAINS Center for Behavioral Health and Justice Transformation

Montgomery County Prevention Coalition (MCPC)

NEOMED and the Criminal Justice Coordinating Center of Excellence

Ohio Association of County Behavioral Health Authorities (OACBHA)

Promoting Resilience Overtime to Eradicate Childhood Trauma (PROTECT)

Retailers CARE (Creating a Responsible Environment)

Zero Suicide

### **Mission-**

The innovative work of Montgomery County ADAMHS supports accessible, equitable behavioral health care and supportive resources for people in need to elevate individual and community well-being.

### **Vision-**

We envision an inclusive community that promotes mental well-being, so everyone has the opportunity to live a life of fulfillment.

## **B. Project Overview**

The Alcohol, Drug Addiction, and Mental Health Services (ADAMHS) Board for Montgomery County is requesting proposals for the delivery of crisis services with a focus on the creation of a Mobile Crisis Response Team within Montgomery County.

In June 2024, ADAMHS hosted three community meetings to allow community members and stakeholders to provide input on delivering crisis services. The meetings were recorded and are available on the [ADAMHS YouTube Channel](#).

Feedback heard most often includes the ability to share data across stakeholders operating within the crisis system, including law enforcement, healthcare, behavioral health providers, the justice system, and agencies providing social support.

ADAMHS is seeking proposals for the delivery of crisis services by a Mobile Crisis Response Team in Montgomery County.

All proposals should include a plan to create a business associate agreement (BAA) that ADAMHS will approve for sharing information across the continuum of care, as well as a plan to coordinate and build relationships with local law enforcement.

### **Montgomery County Mobile Crisis Response Requirements -**

- Include a licensed and/or credentialed clinician capable of assessing the needs of individuals within Montgomery County, whether in person or via telehealth;
- Respond where the person is (home, work, park, etc.) and not restrict services to select locations Monday-Friday 8:00 am – 8:00 pm;
- Connect individuals to facility-based care as needed through warm handoffs and coordinating transportation when and only if situations warrant transition to other locations.
- Incorporate peers within the mobile crisis team;
- Schedule outpatient follow-up appointments in a manner synonymous with a warm handoff in order to support connection to ongoing care.

## **C. Proposal Process**

The Crisis Services RFP schedule is subject to change at the discretion of ADAMHS.

Proposals are due by January 3, 2025, at 4:00 pm

## **D. Proposal Format & Submission**

ADAMHS utilizes “e-CImpact” by Seabrooks as our Agency Portal System for providers to submit funding request applications. This software is secure and unique to our organization, so to gain access to the site, you will need to request a log-in through our e-CImpact MCADAMHS Site. This site can be found using the following information below.

### **TO CREATE A LOGIN FOR A NEW AGENCY:**

- Website: <https://agency.e-cimpact.com/login.aspx?org=MontgomeryCountyADAMHS>
- Click “Request a MCADAMHS Provider Portal account”
- Follow the instructions prompted
- For questions, email Emma Goldinger  
[egoldinger@mcadamhs.org](mailto:egoldinger@mcadamhs.org)

### **Request a MCADAMHS Provider Portal account**

To create a new account select the link below:

[Click here to create a new account](#)



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## **E. Proposal & Organization Requirement**

### **General Conditions of the RFP**

Confidentiality – All materials contained in this RFP, or later distributed or referred to, including, and without limitation, the descriptions of Montgomery County and its organizations, systems, procedures, and features of the new crisis center facility design, are the property of Montgomery County ADAMHS. The participating applicant agrees that it will keep all such materials and information in strict confidence within its company on a need-to-know basis and will not provide duplicates of such materials or information or disclose such materials to any person outside its organization without the prior written consent of Montgomery County ADAMHS.

News Releases/Public Disclosure – News releases or public disclosure in any manner pertaining to this RFP or the selection of the operator related to this RFP shall not be made by any participating operator, or they will risk disqualification.

Cost of Preparing Proposals – The submitting applicant is responsible for all costs incurred by any participating applicant in connection with responding to the RFP.

Other – The written responses to this RFP will be an important consideration in the selection process. ADAMHS, at its sole discretion, reserves the right to cancel or significantly modify the terms and provisions of the RFP if it is in its best interest to do so. If the RFP is significantly modified or amended by ADAMHS, prior to the submission of the proposals, a change in the requested submission date for the proposals may be made accordingly.

The submitting applicant should assume that all terms, and conditions specified in this RFP and any amendment hereto, and in the applicant's response to this RFP, could be incorporated or referenced in the agreement(s) executed between ADAMHS and the selected operator.

This RFP is intended to present the opportunity to demonstrate the applicant's ability to perform the tasks required and to present the innovative techniques, processes, methods, and approach that the applicant will bring to meet the project goals and objectives. The proposal should be brief and provide sufficient information to allow ADAMHS to evaluate the applicant's approach, experience, staff, and ability to perform the required work.

The Information requested herein shall be furnished completely in compliance with these instructions. The information requested and the manner of submission is essential to permitting prompt evaluation of all proposals on a fair and uniform basis. ADAMHS shall not be held responsible for any oral instructions.

ADAMHS reserves the right to reject any or all proposals, to reject any proposal in which the offeror takes exception to the terms and conditions of the request for proposals; fails to meet the terms and conditions of the request for proposals, including but not limited to, the standards, specifications, and requirements specified in the request for proposals; or submits prices that the contracting authority considers to be excessive, compared to existing market conditions, or determines to exceed the available funds of the contracting authority, to reject, in whole or in part, any proposal that ADAMHS, as the contracting authority, has determined would not be in the best ADAMHS Request for Proposals – Crisis Center Operator (On-Site Service Provider) interest of the county, to waive any informality or irregularity in any proposal received, and to be the sole judge of the merits of the respective proposals received.

### Eligibility

By submitting a proposal, the applicant confirms that they are not debarred, suspended, proposed for debarment, ineligible, or excluded by any federal department/agency, Ohio state department/agency, or Montgomery County department/agency from transactions involving federal, state, county, or local funds. The bidder may be governmental, community-based, not-for-profit, public, private, or faith-based.

Prior to being awarded a provider agreement from ADAMHS to provide crisis services, all applicants must be accredited by CARF, Joint Commission, Council on Accreditation, or other equivalent body for all proposed services contained within this RFP. Applicants will also be required to be licensed by the Ohio Department of Mental Health and Addiction Services (OhioMHAS) for all proposed services prior to providing those services.

### Non-Discrimination Statement

The applicant represents that the applicant is in compliance with all applicable equal employment opportunity requirements under the law if required by Section 153.59 of the Ohio Revised Code (Discrimination and intimidation on account of race, religion, sex, disability, national origin, or ancestry) or any other applicable state or federal law.

### Proprietary Information and Ohio Public Records Act

It is the practice of ADAMHS to comply with Ohio's Public Records Act, which is section 149.43 of the Ohio Revised Code (Availability of public records for inspection and copying). ADAMHS will retain all proposals submitted and all proposals become the property of ADAMHS upon submission. With limited exception, pursuant to Ohio Revised Code 149.43, all information submitted by the proposer shall be considered a public record. In the event ADAMHS receives any request for any information received as part of this contract, ADAMHS will immediately take steps to release the information to the requesting party. The marking of the information shall not in itself make the information a trade secret or proprietary but rather shall be determined under Ohio law. The determination of confidentiality shall not apply to (a) information that at the time of the disclosure is in the public domain; (b) information that, after disclosure, becomes part of the public domain by publication or otherwise, except by breach of the agreement by a party; or (c) information that is considered an open public record pursuant to the Ohio Sunshine law. Any document submitted to ADAMHS that is not marked as proprietary or trade secret will not be reviewed for confidentiality by ADAMHS upon a public records request and may be released. In most cases a competitive submittal will be released as soon as the contract is awarded in accordance with 307.862(C).

### Unresolved Findings for Recovery

Ohio Revised Code 9.24 prohibits the county from awarding an agreement to any vendor against whom the auditor of the state has issued a finding for recovery if the finding for recovery is “unresolved” at the time of the award. The applicant warrants that it is not now and will not become subject to an “unresolved” finding for recovery under Ohio Revised Code 9.24, prior to the award of any agreement, without notifying the county of such finding. If, after an agreement is awarded, it is determined that an “unresolved” finding for recovery had been issued against the applicant prior to the award, the agreement shall be void. The applicant understands that the applicant shall be responsible to the county for any expenditure against the agreement.

### **F. Fiscal Requirements**

As part of the Application for Funding process, each applicant will be required to furnish the following documents for their application to be considered for funding:

- Audited Financial Statements for the previous fiscal year conducted by Independent CPA.
- Federal Tax Identification Number.
- SAM number - *On April 4, 2022, the federal government transitioned from the DUNS number to a SAM number (SAM = System of Award Management identifier).*
- Good Standing Certificate from the Ohio Secretary of State’s Office.
- Copy of current Ohio Bureau of Workers Compensation certificate.
- Certificate of applicable insurance (general liability, auto, professional liability). Upon contracting, ADAMHS will require an insurance certificate as ADAMHS as certificate holder. ADAMHS requires a general aggregate limit of liability of \$3 million.
- Proof of current unemployment insurance.
- Completed program budget that includes appropriate direct and indirect costs.
- Must be current on payment of all taxes.

### **Direct Costs**

ADAMHS uses the modified total direct cost “MTDC” definition used by its federal funders to determine allowable direct costs. Direct costs are expenses that can be directly tied to the program’s budget and can be defined as an item cost or activity that can only be attributed to a specific program. MTDC clearly defines that direct costs include all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each sub-award.

MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs, and the portion of each sub-award in excess of \$25,000.

Facilities operation and maintenance costs, depreciation, and administrative expenses are examples of costs that are usually treated as indirect costs.

### **Unallowable Expenses**

Unallowable Expenses for ADAMHS contracts include but are not limited to:

- Fundraising Costs
- Lobbying
- Bad debt/Debt collection
- Fines/Penalties

### **Program Income**

All other program income earned and expended from the ADAMHS-funded program must be included in your program budget. Please include all funders of the program in your budget. Program income is defined as gross income earned by a funder for an ADAMHS-funded activity or earned as the result of the award.

### **Indirect Costs and Rates**

Historically, the ADAMHS Board has provided its community service providers an indirect cost rate of 10% of their total direct costs in all contracts. As we continue our focus on managing public taxpayer funds, we have ensured the providers are defining appropriate direct expenses in their contracts.

### **Office of Management & Budget (OMB) Uniform Guidance**

The current 10% indirect rate used by the ADAMHS Board is supported by the OMB Uniform Guidance for federal grants and agreements. The National Council of Nonprofits advises its members of the indirect cost mandate in the OMB Uniform Guidance which requires governments to use federal funds to reimburse nonprofits for reasonable indirect costs. All nonprofits are entitled to request the opportunity to negotiate an indirect cost rate with pass-through entities using the federal standards when federal funds are in use. We anticipate that none of our local nonprofits under contract with the ADAMHS Board have a negotiated, federally approved indirect rate due to their complexity, cost, annual



reconciliation requirements, and use of limited federal awards requiring such a negotiated rate. This negotiation is generally between the nonprofit and a federal agency. This information will be collected during the “application for funding” process to determine if the organizations have a federally approved indirect rate.

Further, OMB Uniform Guidance §2 CFR Part 200 allows any non-Federal entity (NFE) that has *never* received a negotiated indirect cost rate to charge a *de minimis* rate of 10% of modified total direct costs (MTDC), which the NFE may use indefinitely as a federally negotiated rate. This option for NFE recovery of indirect costs incurred during work under Federal awards removes administrative barriers smaller nonprofits previously faced receiving and implementing Federal financial assistance. With the *de minimis* rate, nonprofits can charge allowable costs which indirectly support the direct work on the federally funded project(s).

#### **US Department of Health and Human Services “HHS” and Substance Abuse and Mental Health Services Administration (SAMHSA)**

We reviewed SAMHSA requirements for indirect costs and found many of their Funding Opportunity Announcements (FOA) follow the OMB Guidance noted above. We see the same definitions for direct and indirect costs, and we are reminded SAMHSA follows the OMB Uniform Guidance for its grant funds. Indirect costs (also referred to as facilities and administrative costs) are costs that cannot be specifically identified with a particular project, program, or activity but are necessary to the operations of the organization (i.e. overhead). Facilities operation and maintenance costs, depreciation, and administrative expenses are examples of costs that are usually treated as indirect costs. The organization must not include costs associated with its indirect rate as direct costs.

#### **Ohio Mental Health and Addiction Services (OhioMHAS)**

OhioMHAS notes in their Fiscal Budget Definition Reference Guide that “the indirect cost rate allowable on all OhioMHAS awards is up to 10% of the award and is consistent with the federal Super Circular.” The document further states any indirect cost rate that exceeds 10% and does not meet the following conditions will be returned to the applicant for revisions:

- A different indirect cost rate may be used if it has been approved by a federal department (e.g., SAMHSA for federal awards).

- Documentation for higher rates should be uploaded into the GFMS system for OhioMHAS to validate the requested indirect cost rate.”

### **Summary**

Federal and State funders are consistent in the application of the OMB Uniform Guidance, allowing a 10% indirect rate of direct allowable costs in their funding awards. A nonprofit can charge a higher indirect rate on federal grants and agreements but requires approval from the federal agency.

If a nonprofit has an approved federal indirect rate, the nonprofit must provide a copy of the federal approval letter and ADAMHS will consider the rate in their funding application upon review of the provided documentation.

### **G. Quality Requirements**

Quality Improvement Activities:

Agencies who receive funding from the Board will be responsible for the reporting of quality improvement activities which may include but are not limited to the following:

1. Utilization Data – Key Performance Indicators (KPI’s) will be compiled and monitored. Trends will be reviewed for opportunities for improvement.
2. Financial Reports –The finance department will develop and produce online reports detailing the Board’s operations budget.
3. Access to Services – Wait list management reports and no-show rate data reported quarterly from contract providers to MCADAMHS may be utilized to establish indicators and set benchmarks. Information Systems department may produce reports on Assessment to next face to face treatment contact (measures for Crisis Services and agency).
4. Perception of Care - will be reviewed on a quarterly basis to measure clients’ perception of timeliness of appointments, staff’s respect of clients’ cultural background, and overall satisfaction with services.
5. Agency Referral Source Satisfaction – Providers’ will at minimum annually survey referral sources, e.g., doctor, hospital, court, employer, social service agency, school, or another treatment or prevention provider, who send clients for services and

report the aggregate results to the Board. The Board will review on a quarterly basis reports submitted by contract agencies.

6. ADAMHS Provider Satisfaction Survey will be conducted quarterly to assess provider satisfaction with key ADAMHS staff responsible for each of the functions where MCADAMHS interacts on a routine basis with providers.
7. Ohio Behavioral Health Information System (OBHIS): Providers' will at minimum submit OHBH data on a fiscal quarter basis to OhioMHAS. MCADAMHS will review on a quarterly basis reports submitted by contract agencies to OBHIS based on availability. MCADAMHS reserves the right to develop aggregate reports tracking OBHIS data trends.
8. Grievance Process: The Board ensures that each agency has established grievance procedures that are approved according to the Ohio Department of Mental Health and Addiction Services. The Board will summarize and track the total number of grievances in the system for use as part of a quality indicator database. Aggregate data will be reviewed annually by the CQI Council.
9. Fiscal Audits: The Board will ensure each Agency has submitted a financial audit conducted by an independent certified public accountant in accordance with Board policy. If an Agency does not have a financial audit and the Board agrees to enter into an Agreement, the Agency shall furnish a bond to the Board covering faithful performance of the Agreement and all obligations arising hereunder in an amount equal to one hundred percent (100%) of the full sum provided under this Agreement and that bond shall be conditioned upon the faithful performance of the Agreement and shall remain in effect for the duration of the contract term. This requirement may be satisfied by the Agency by posting a bond, or by providing a letter of credit or a cashier's check in the amount specified. If the requirement is satisfied by a bond, the surety for such bond shall be a surety company authorized to do business in the State of Ohio.
10. Quality Performance Reviews (QPR): Treatment and other supportive services reviews may be conducted annually, but not less than every two years. They will include a comprehensive review of quality measures and programmatic utilization analysis of hospitals, jails, housing, and behavioral health services by agency clientele. Review of contracted Treatment and Supportive Services will be conducted to verify that minimum service standards and other contracted requirements are met. The Board, not less than every two years, may visit all funded agencies to review documentation supporting Board invoices and service data submitted to the Board via GOSH in accordance with Board and contracted policies.

11. SAMHSA CCRP Grant requirements: The applicant agrees to comply with the terms and conditions of the cooperative agreement award. The applicant agrees to collaborate with SAMSHA staff in project implementation and monitoring. The applicant will collect mobile crisis response key performance indicators and data and outcome metrics and will submit these performance measures via SAMHSA SPARS database. The applicant will comply with any 988/crisis services evaluation request and engage with the SAMHSA-identified Technical Assistance Center assigned to the grant. The applicant also agrees to participate in monthly grantee calls with the Government Project Officer on grant progress and challenges. The applicant will attend in person joint grantee meetings in year 1 and year 3 of the grant. If selected to receive money from the Cooperative Agreements for Innovative Community Crisis Response Partnerships federal grant, agencies must be a 501 (c)(3) to receive funds.