



Office of Behavioral Health

Eastern Louisiana Mental Health System

Request for Information (RFI)

For

118 Bed Intermediate Psychiatric Facility Provider

RFI due date/time: 08-22-2022/05:00 P.M.
RFI SOLICITATION #3000019490

NOTE: This Request for Information (RFI) is solely for information and planning purposes and does not constitute a solicitation. Any and all information received may be received and discussed, as appropriate, and may result in a Request for Proposal, or in Cooperative Endeavor Agreements, or any other process resulting in award of a contract or agreement of any type or form, for any or all of the services included in the RFI.

Only information which is in the nature of legitimate trade secrets or non-published financial data may be deemed proprietary or confidential. Any material within a response to this RFI identified as such must be clearly marked and will be handled in accordance with the Louisiana Public Records Act. R.S. 44:1-44 and applicable rules and regulations. Any response marked as confidential or proprietary in its entirety may be rejected without further consideration or recourse.

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1 GENERAL INFORMATION

1.1 *Background*

The mission of the Louisiana Department of Health (LDH) is to protect and promote health and to ensure access to medical, preventive, and rehabilitative services for all citizens of the State of Louisiana. The Louisiana Department of Health is dedicated to fulfilling its mission through direct provision of quality services, the development and stimulation of services of others, and the utilization of available resources in the most effective manner.

LDH is comprised of the Medical Vendor Administration (Medicaid), the Office for Citizens with Developmental Disabilities (OCDD), the Office of Behavioral Health (OBH), the Office of Aging and Adult Services (OAAS), and the Office of Public Health (OPH). Under the general supervision of the Secretary, these principal offices perform the primary functions and duties assigned to LDH.

The mission of OBH is to work collaboratively with partners to develop and implement a comprehensive integrated system of behavioral health and healthcare, social supports, and prevention services that promote recovery and resilience for all citizens of Louisiana. OBH assures that public behavioral health services are accessible, family-driven, have a positive impact, are culturally and clinically competent, and are delivered in partnership with all stakeholders.

OBH operates the Eastern Louisiana Mental Health System (ELMHS), a twenty-four (24) hour mental health care system with approximately seven hundred (693) licensed beds on two (2) campuses, an outpatient aftercare clinic, and a statewide network that monitors approximately 450 conditionally discharged forensic patients. LDH/OBH/ELMHS treats those persons with severe and persistent mental illness who require increased supervision as compared to what community services can provide, and/or are forensically involved, until they can be served in the least restrictive setting within the community. This population is challenging in that most clients exhibit aggressive/dangerous behaviors and require ongoing interaction with the court system.

1.2 *Purpose of RFI*

The purpose of this RFI is to enter into one or more in-kind Cooperative Endeavor Agreements for services from qualified Private Sector Providers who are interested in providing a highly secure, licensed, Joint Commission Accredited, and CMS Certified Intermediate Psychiatric Hospital with 50-118 licensed inpatient hospital beds for the Severely/Persistently Mentally Ill adult population in the State of Louisiana. The population served are those who are forensically involved with aggressive/dangerous behaviors, and who have been civilly committed subsequent to being found un-restorably incompetent to proceed to trial.

1.3 *Program Overview*

Inpatient Psychiatric Services are to be provided to patients referred by ELMHS for continued intermediate psychiatric hospital treatment, in a safe and secure location in Louisiana in accordance with regulatory agency requirements for inpatient behavioral/mental health hospitals. Unlike other civilly committed mental health patients, many of these patients must remain

hospitalized for extended periods of time due to risk factors related to their forensic history. All patients shall require at least biannual Physician Reports to Court (PRCs) as well as regular and routine collaboration and communication with LDH regional attorneys, ELMHS Community Forensic Services Department, and District Forensic Coordinators (DFC's), and all patients must be maintained in a secure facility that has the ability to transport these patients to and from court proceedings securely and safely, if and when necessary.

2 ADMINISTRATIVE INFORMATION

2.1 *RFI Coordinator*

Written inquiries regarding RFI content or Scope of Services must be emailed to the RFI coordinator listed below:

Rebecca Ratcliff
Accounting Tech
Louisiana Department of Health/Office of Behavioral Health/Eastern Louisiana Mental Health System
Rebecca.ratcliff@la.gov

Any and all written inquiries and responses will be posted by the date specified in the Schedule of Events to the following web links: <http://www.cfprd.doa.louisiana.gov/OSP/LaPAC/pubMain.cfm> and <http://new.ldh.louisiana.gov/index.cfm/newsroom/category/47>.

2.2 *Schedule of Events*

<u>Activity/Event</u>	<u>Date</u>
Public notice of RFI	07/11/2022
Deadline for receipt of written inquiries	07/22/2022
Response to written inquiries	08/08/2022
Deadline for receipt of RFI Submissions	08/22/2022

OBH reserves the right to deviate from this Schedule of Events.

2.3 *Response Submittal*

Vendors interested in providing information requested by this RFI must submit responses containing the information specified no later than the Deadline for Receipt of electronic RFI response as stated in the Schedule of Events.

The responses must be received by **electronic** copy only to Rebecca.ratcliff@la.gov on or before the date and time specified in the Schedule of Events. E-mail submissions are the only acceptable method of delivery. Fax, mail, and courier delivery shall not be acceptable, and will not receive additional consideration. Vendors should allow sufficient time to ensure receipt of their e-mailed proposal by the time specified in the Schedule of Events. State servers limit email sizes to 30MB

uncompressed and 10MB encrypted. If vendor's email exceeds these sizes, it is the responsibility of the vendor to send multiple emails to avoid rejection and non-delivery.

Responses received after the deadline, corrupted files, and incomplete submissions (e.g. Partial submissions) will not be considered and will not be evaluated.

2.4 *Response Content*

The purpose of this Request for Information is to solicit interest from parties willing and able to provide licensed staffed beds and CMS certified, at an intermediate psychiatric hospital facility located in the State of Louisiana. Responses from interested parties shall be organized in the following sections within the page limit constraints identified next to each section, which includes attachments.

Responses shall demonstrate the potential Responder's knowledge and understanding of the forensically involved, civilly committed population. Specifically, the forensic patients with aggressive/dangerous behaviors who have been civilly committed subsequent to being found un-restorably incompetent to proceed to trial.

2.4.1 *Executive Summary (2 pages)*

Responder must provide an executive summary clearly stating their ability to operate and staff an anticipated number of licensed and certified beds at an intermediate psychiatric hospital facility located in the State of Louisiana. The summary shall demonstrate qualifications specific to running such programs, include a history of operating similar programs and provide a serious commitment to enter an agreement with LDH. LDH expects the response to demonstrate the Responder's awareness and experience in providing intermediate psychiatric hospital services to forensic patients, and/or patients with serious mental health issues who have violent/aggressive behavioral challenges over longer lengths of stay than are typical in the psychiatric hospital system. The summary must also demonstrate the ability to maintain accreditation by Joint Commission and CMS certification.

2.4.2 *Philosophy (1 page)*

Proposals should address how the Responder intends to assume complete responsibility for timely performance of all contractual responsibilities in accordance with federal and state laws, regulations, policies, and procedures.

Responder shall be responsible for a turnkey operation of medical care and provision of all support care services necessary for operation of licensed and CMS certified beds within an intermediate psychiatric hospital, to include all medical and non-medical supplies, personal care items and clothing, pharmaceuticals, ancillary services, maintenance and environmental services, nutritional services, transportation and security services necessary to ensure a safe, secure and therapeutic environment for all patients served. All such services shall be provided in accordance with all applicable licensing, accrediting, and regulatory body standards and criteria. Responder shall be responsible for establishing a process to accommodate civil court proceedings on site, or a process to ensure reliable and secure transportation to and from off-site court as needed. This process must be approved by the ELMHS Community Forensic Department and LDH Bureau of Legal Services.

2.4.3 Corporate Background and Experience (2 pages)

Provide a brief description of the company's history, corporate structure including presence in other states and years in business. Describe experience in operations of inpatient programs administered for forensically involved populations or patients with a serious mental illness who have violent/aggressive behavioral challenges, in a secure, accredited and licensed intermediate psychiatric hospital. If responder has a current contractual or formal arrangement with LDH for provision of services, please describe that arrangement and how potential acceptance of this population will not affect the current obligation. If the Responder is a current Louisiana Medicaid inpatient psychiatric hospital provider, please describe the effect on that system of a potential award of a contract in response to this RFI.

Provide a brief description of the company's experience with various funding sources including but not limited to Medicare, Medicaid, Uncompensated Care (UCC), Private Insurance, self-pay, etc.

Provide a brief description of the company's ability to contribute in-kind support, resources and/or maintenance of a monetary value equal to no less than 15% of the amount of the awarded contract, in order to further a cooperative relationship for the provision of this inpatient program. Specify categories of assistance which may include, but are not limited to marketing, education, training, supplemental services and/or staffing.

In this section, a statement of the Responder's involvement in litigation and the potential impact on services provided, or contract negotiations should be included. If no such litigation exists, Responder should so state.

Responders should clearly describe their ability to meet or exceed the requirements listed in the Approach and Methodology section.

2.4.4 Approach and Methodology

The Responder should clearly demonstrate their ability to meet or exceed the requirements/expectations listed below:

- The Responder has a comprehensive, operational strategy in place at the organizational level to ensure compliance with applicable state and federal rules guiding program operation on a routine basis and when new laws or regulations are enacted in the provision of inpatient mental health care;
- The Responder has a process to accommodate civil court proceedings on site, or a process to ensure reliable and secure transportation to and from off-site court as needed. This process must be approved by the ELMHS Community Forensic Department and LDH Bureau of Legal Services;
- The Responder maintains compliance with regulatory agency requirements (i.e. TJC, CMS, etc.);
- The Responder has an effective governing body or individuals(s) legally responsible for the conduct of the hospital operations including establishment of hospital-wide policies and bylaws, appointment of a chief executive officer or administrator, maintain quality of care and provide an overall institutional plan and budget. The governing body and/or

designee shall develop and approve policies and procedures that define and describe the scope of services offered;

- The Responder has an effective business continuity, disaster recovery and emergency preparedness and management plan including continuity of operations plan in place, which ensures operations are not interrupted when a disaster or a state of emergency is declared by the State, including demonstrated strategies for the provision of uninterrupted care prior to an impending emergency/disaster;
- The Responder has an effective continuous quality improvement/management system, which adequately meets quality standards as required by regulatory agencies (TJC, CMS, state licensing);
- The Responder has an effective patient grievance management system which operates in accordance with state and federal rules, resolves filed grievances in a timely and appropriate manner, and includes tracking and trending of grievances and quality of care concerns to identify and address issues on a systemic basis;
- The Responder has an effective utilization management and care management system including discharge planning which meets standards as required by regulatory agencies (TJC, CMS, state licensing). The Responder has an adequate Provider network to meet the needs of patient served and ensures timely access to care;
- The Responder has processes and procedures in place which allow for real-time oral and signing interpretation services free of charge to patients while meeting timely access standards; and
- The Responder has an automated management information system including patient health records which supports the functions of all program and services provided and includes data exchange with external agencies, electronic and manual claims processing and administration, claims/encounter storage, provider network management, utilization management, quality of care information, grievance and appeals, ability to interoperate with LDH systems and conform to applicable standards and specifications set by LDH, and ability to interface with LDH, Medicaid Fiscal Intermediary, and other current or potential LDH Contractors. The Responder shall provide all inpatient care services to the patient in accordance with an individualized treatment plan provided by a multi-disciplinary treatment team, based on comprehensive assessments that address all major life areas and focuses on the strengths and needs of the patient.
- The Responder shall:
 - Provide inpatient services in the State of Louisiana;
 - Accept all patients referred by ELMHS;
 - Provide separate living accommodations and programming from other psychiatric civil patients;
 - Maintain a safe, secure, and therapeutic environment conducive to providing care for forensically involved patients, or patients with severe mental illness who have aggressive/difficult behavioral issues;
 - Ensure all environmental aspects of the facility are adequate to meet CMS, JC, and state licensure requirements (i.e... ligature resistant environment, seclusion rooms, etc.), and are secure enough to maintain custody of patients at all times;

- Develop security procedures/protocols that ensure the custody of each patient is maintained at all times;
- Maintain state licensure requirements, Joint Commission Accreditation, and CMS certification at all times;
- Develop and maintain on an annual basis, specific, measurable, and time-limited programmatic goals/outcomes with planned action steps toward their completion;
- Provide directly or under contract the following professional departments, services, facilities and functions, with staffing levels sufficient to provide each patient with assessments at a frequency that meets all applicable regulatory requirements:
 - Nursing services including a full-time qualified Director of Psychiatric Nursing Services, an Assistant Director of Psychiatric Nursing Services providing 24-hour nursing coverage with an adequate number of licensed nurses to provide the nursing care necessary under each patient's active treatment plan in a safe and secure manner. A minimum of one registered nurse must be assigned to each individual patient unit/hall/dormitory, and a sufficient number of Licensed Practical Nurses to assist. Additional staff must be available at all times for a sufficient relief factor to address staff absences and/or patient acuity;
 - Direct care mental health workers, under the supervision of nursing services. This must include a minimum ratio of one (1) direct care staff to six (6) patients. Additional staff must be available at all times for a sufficient relief factor to address staff absences and/or patient acuity;
 - Psychological services provided by licensed psychologists. Minimum of one licensed PhD level psychologist, and at least (2) two master level psychologists;
 - Social Services including a director who is a licensed clinical social worker and is experienced in the social service needs of the mentally ill. Staffing should be at a ratio of no more than 30 patients per social worker;
 - Therapeutic Recreational Therapy provided by therapeutic recreational specialists in adequate numbers to meet the therapeutic activity needs of the patients served;
 - Pharmaceutical services;
 - Radiological services;
 - Nutritional and therapeutic dietetic services;
 - Medical record services;
 - Quality assessment and improvement;
 - Physical environment;
 - Infection Control;
 - Respiratory care services;
 - Psychiatric services. Services should be adequate enough to provide each patient with individual staffing with the psychiatrist at a minimum of once per week for the first month, and then at least once per month thereafter. Psychiatric services must be provided additionally upon any deterioration

of the patient's condition, and must be sufficient enough to ensure completion of at least twice annual reports to court, or court appearances as needed;

- Medical Services; and,
 - Laboratory services in accordance with Clinical Laboratory Improvement Amendments of 1988.
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- Develop and maintain a discharge planning process that includes full interaction with ELMHS and its Community Forensic Services Department to ensure appropriate placement, notifications, wrap around services, etc. This process must include a provision to clearly prohibit any discharge unless it is pre-approved by ELMHS' Administration and /or designee;
 - Develop and maintain an organizational chart that delineates lines of authority and responsibility of all hospital personnel;
 - Develop program evaluation methods that will incorporate objectives and reflect programmatic growth, achievement of outcomes, or an explanation for failure to progress;
 - Provide educational approaches to teach patients how to cope with their mental illness, how to manage medications, recognize danger signs, and utilize professional resources when necessary;
 - Assist in developing interpersonal skills and leisure time activities and interests, which provide a sense of participation and personal satisfaction;
 - Provide opportunities for age-appropriate, culturally sensitive and appropriate daytime and evening activities, which offer the chance for companionship, socialization, and enjoyment. One of the pervasive problems that persons with severe and persistent mental illness face is that of isolation; and
 - Develop and maintain a process for afterlife care in accordance with regulatory requirements.

The purpose of this Section is to evaluate the relevant experience, resources, and qualifications of the proposed staff to be assigned to the Project. The experience of Responder's personnel in implementing similar services to those to be provided under this Request for Information will be evaluated. The adequacy of personnel for the proposed project team will be evaluated on the basis of project tasks assigned, allocation of staff, professional skill mix, and level of involvement of personnel.

Responders should state job responsibilities, workload and lines of supervision. An organizational chart identifying individuals and their job titles and major job duties should be included. The organizational chart should show lines of responsibility and authority.

Job descriptions, including the percentage of time allocated to the project and the number of personnel should be included and should indicate minimum education, training, experience, special skills and other qualifications for each staff position as well as specific

job duties identified in the proposal. Job descriptions should indicate if the position will be filled by a subcontractor.

Key personnel and the percentage of time directly assigned to the project should be identified. Résumés of all known personnel should be included. Résumés of proposed personnel should include, but not be limited to:

- Experience with Responder
- Previous experience in projects of similar scope and size
- Educational background, certifications, licenses, special skills, etc.

If subcontractor personnel will be used, the Responder should clearly identify these persons, if known, and provide the same information requested for the Responder's personnel.

2.4.B *Orientation and Training Requirements*

- Prior to providing direct patient care or support services, all staff must complete orientation, and competency assessment. In addition, annual training/competency assessment requirements must be in accordance with regulatory agency requirements (TJC, CMS, state licensing).
- The selected Contractor(s) (who respond to this RFI and are selected for a contract award), shall submit the orientation and annual training program to LDH/OBH/ELMHS for approval prior to the start date of the contract.
- The selected Contractor(s) (who respond to this RFI and are selected for a contract award), shall maintain documentation of successful completion of orientation, competency assessment and annual training requirements in each staff member's personnel file.

2.5 *Response Submittal Instructions*

Responders interested in providing information requested by this RFI must submit responses containing the information specified no later than the deadline for response to RFI as stated in the Schedule of Events. Electronic submissions are the only acceptable method of delivery. Responders must email their response to the RFI Coordinator.

2.6 *Additional Instructions and Notifications to Responders*

2.6.1 *RFI Addenda/Cancellation*

The State reserves the right to revise any part of the RFI by issuing an addendum to the RFI at any time. Issuance of this RFI, or subsequent addendum (if any), does not constitute a commitment by the State to issue a request for services or any other process resulting in award of a contract of any type or form. In addition, the State may cancel this informal process at any time, without penalty.

2.6.2 *Ownership of Response*

The materials submitted in response to this request shall become the property of the State.

2.6.3 Cost of Preparation

The State shall not be liable for any costs incurred by responders associated with developing the response, preparing for discussions (if any), or any other costs incurred by the Responder associated with this RFI.