

**State of Louisiana
Department of Health
Office of Behavioral Health**

**Request for Information (RFI)
For
Provision of Inpatient Psychiatric Services**

June 6, 2022

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Confidentiality

The designation of certain information as trade secrets and/or privileged, confidential, or proprietary information shall only apply to the technical portions of your response to this Request for Information. *Any response to this request marked as copyrighted or marked as privileged, confidential, or proprietary **in its entirety** is subject to rejection without further consideration or recourse* based on the professional opinions of the Louisiana Department of Health (LDH) legal staff.

Respondents should bear in mind that while trade secrets and other proprietary information submitted in conjunction with this RFI may not be subject to public disclosure, ***the submitting party must claim protections at the time of submission.*** The following guidelines provide accurate instructions to mark adequately certain information as privileged, confidential, or proprietary.

- The respondent must clearly designate the part of the response that contains a trade secret and/or privileged or confidential proprietary information as “confidential” in order to claim protection, if any, from disclosure. The respondent shall mark the cover sheet of the response with the following legend, specifying the section(s) of the response sought to be restricted in accordance with the conditions of the legend:

“The data contained in pages _____ of this response have been submitted in confidence and contain trade secrets and/or privileged or confidential information, and such data shall only be disclosed for evaluation purposes. This restriction does not limit the State of Louisiana’s right to use or disclose data obtained from any source, including the proposer, without restrictions.”

- Further, to protect such data, respondents should identify and mark each page containing such data as “CONFIDENTIAL.” A watermark or footnote delineating each page containing such data as “confidential” will satisfy this requirement.

Respondents must be prepared to defend the reasons why material should be held as confidential. If another respondent or entity seeks to review copies of a respondent’s confidential data, LDH will notify the owner of the asserted data of the request. If the owner of the asserted data does not want the information disclosed, it must take legal action as necessary to restrain LDH from releasing information LDH believes to be public record.

If the response contains confidential information, the respondent should submit a redacted copy of the response. Without the submission of a redacted copy, LDH may consider the entire response to be public record. When submitting the redacted copy, it

should be clearly marked on the cover as a “REDACTED COPY.” The redacted copy should also state which sections or information have been removed.”

Introduction

About the Office of Behavioral Health

Mission

The mission of the Office of Behavioral Health (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 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.

Vision

People can and do recover from mental illness and addictive disorders. Through the delivery of timely and person-centered, clinically effective behavioral health and healthcare and supports, citizens of Louisiana will experience positive behavioral health outcomes and contribute meaningfully to our State's growth and development.

Statement of Need

Louisiana Office of Behavioral Health (OBH) currently contracts with privately operated inpatient hospitals through Cooperative Endeavor Agreements (CEAs) to provide primary psychiatric and psychosocial services in compliance with all licensing and accreditation standards to meet individual adult and adolescent patient needs for inpatient care for males and females with serious and persistent mental illness or serious emotional disturbance needing longer-term care than that typically authorized in more acute inpatient psychiatric care settings.

These “safety net” beds are meant to serve the uninsured, underinsured and may include beds for those who no longer qualify for Medicaid reimbursement for inpatient psychiatric services. Adults typically continue to meet acute criteria, but adolescents must sometimes be served based on court order. Patients may be referred from the community or directly from the State. Patients will include individuals in need of psychiatric stabilization as well as persons under judicial commitment, court ordered to the custody of LDH, or court ordered to receive inpatient hospitalization or competency restoration services, and may require additional services and supports to transition successfully from the inpatient psychiatric hospital setting to a lesser restrictive community placement.

Under the CEAs, OBH authorizes payment in the event patients are indigent and meet medical necessity or require ongoing hospitalization after no longer meeting medical necessity due to court involvement or placement issues.

The Louisiana Department of Health (LDH), Office of Behavioral Health seeks to expand its system of partners and diversify placement options to better serve Louisiana's citizens. OBH may consider redistribution of the current bed capacity of its CEA partnerships with hopes of dispersing beds throughout the state allowing patients to be treated closer to their families and home communities.

Purpose of the RFI

The Louisiana Department of Health, Office of Behavioral Health, issues this Request for Information (RFI) with the intent to determine the interest and capabilities of provider organizations to provide approximately 24 adult and/or adolescent psychiatric beds.

The Department of Health desires to find partners able to provide the above services in one or multiple locations geographically dispersed throughout the state. (*e.g., Greater New Orleans area, Central Louisiana, and North Louisiana, etc.*).

Potential providers may submit a single response or multiple responses for the services indicated.

This document describes the basic components of the current system and requests information regarding a provider's thoughts, interest and ability to meet the Louisiana licensure requirements, as well as, the expectations of the Office of Behavioral Health. The RFI may be used to help LDH and OBH gauge interest and capabilities of provider organizations to provide the services outlined in this RFI. A Request for Proposals (RFP) is not required for this solicitation.

The LDH goal is to provide comprehensive and effective services for the populations indicated above. To this end, the Office of Behavioral Health is open to innovative alternative strategies to address the needs of these individuals. Respondents are not limited in their method of providing services or to any specific geographic location within the state of Louisiana, and are free to propose options outside the scope of this RFI that may more effectively and efficiently serve the identified populations.

Scope

The scope of work indicated by this Request for Information is to create:

- One or multiple psychiatric units' beds that will maintain a safe, supportive, and therapeutic environment while providing comprehensive, intensive, individualized

care. In the case of adult psychiatric patients, admission will originate primarily from an emergency room referral in any region of the state. In the case of youth psychiatric patients, admission may originate from a court order for LDH custody and/or court order for inpatient competency restoration. The services requested include evaluation, stabilization and discharge planning for adults and adolescents. The estimated length of stay for some adults may be approximately 6 months. The length of stay for juveniles can vary, but is typically about 3 months. Providers have the option of including detoxification for co-occurring disorders as a part of the acute care psychiatric unit.

Criteria for Admission:

The provider shall establish patient criteria for admission, as approved by OBH and in conjunction with the Healthy Louisiana managed care plans/Managed Care Organizations (MCO's), which shall assure that only medically stable patients needing active psychiatric treatment in a hospital setting are admitted for care. Admission criteria will be applied uniformly to all patients. In some adolescent referrals, youth may be court-ordered into LDH custody for competency restoration and/or inpatient psychiatric hospital admission. In such cases, the youth may require admission and evaluation for the potential need of acute or ongoing inpatient treatment, until the most appropriate and least restrictive treatment option can be determined and approved by the court.

Patient Management:

Provider shall be responsible for establishment and implementation of all policies and procedures related to patient management and service delivery, to include admission criteria, evaluation, treatment and discharge of patients, subject to the review and approval of OBH.

Provider shall submit to OBH for approval, all policies and procedures utilized in the operation of the units and all descriptions and/or narratives of the clinical programs. These policies must be approved by OBH at the beginning of the contractual period and revisions must be approved by OBH prior to becoming an official part of the policy or procedures. This includes all policies and/or procedures initiated by either OBH or the provider.

Provider shall assure that staff for each of the units conduct all activities in compliance with state and federal statutes and regulations and The Joint Commission (TJC) standards.

Provider shall ensure appropriate treatment programs and services for all patients, as approved by OBH. Daily patient care, including diagnosis, development of the treatment

plan, revisions to the treatment plan, and discharge planning are the responsibility of the licensed physician who is a member of the provider's Medical Staff and practicing on the Unit.

Provider shall assure the availability of adequate numbers of appropriately qualified clinical support staff to render treatment services to include, at a minimum, psychiatric, psychological, social work, psychiatric nursing, occupational therapy and recreational therapy services. In addition, provider should be able to facilitate educational /school services for youth who may remain admitted beyond customary average length of stay.

Providers shall assure that one or more members of each patient's clinical treatment team will be made available as requested to participate in court hearings relative to the treatment and disposition of those patients judicially-committed and/or who are receiving competency restoration services and/or who are court ordered to the custody of LDH. It should be noted that, while all efforts shall be made to minimize the need for in-person court appearances, in some cases in-person or virtual court appearances by knowledgeable clinical staff may be mandated and occur with minimal notice.

All provider personnel shall be appropriately trained, experienced and licensed to meet the responsibilities in providing a comprehensive treatment program.

Provider shall assure that all employees attend all required meetings, including but not limited to provider orientation, in-services, fire/safety and disaster drills as stated in provider policies and procedures manual.

Those personnel who provide patient care that requires delineation through the medical staff process must be competent to provide such services. Competency assessments shall be performed as required by TJC. Documentation of these assessments shall be included in the records of the provider. This documentation shall be provided to OBH at the beginning of the period and at the intervals required by TJC standards.

Provider shall assure that prospective employees meet all of the provider employment criteria.

Provider shall develop a process, to include a timeline, for coordinating the reporting of performance deficiencies of employees.

Provider shall assure that professional clinical support staff meet all applicable licensing and certification board requirements, and shall monitor job performance to assure the quality and appropriateness of care delivery.

Provider shall determine the numbers and types of nursing personnel and staff necessary to provide psychiatric services at a minimum consistent with all standards

governing such services. Provider shall provide adequate oversight and evaluation of the nursing activities and shall maintain a record for review by OBH.

Provider shall assure an organizational structure, which will allow staff to work closely and cooperatively with the provider's Compliance Officer to ensure that the hospital is in compliance with licensure and accreditation, as well as federal and state laws.

If the units are to become a part of a general medical hospital or psychiatric hospital, designated provider staff will participate in the various committees and teams that operate within the hospital and will be assigned to such in a fashion similar to that of other departments in the hospital. At a minimum, it is expected that each of the units will have a representative on the performance improvement team and the Clinical/Medical Directors of the unit will participate in the Medical Executive Committee.

Patient Records and Information:

Provider shall be responsible for the care and custody of the medical record of each patient admitted to and discharged from the units through the Medical Records Department. Provider shall assure that the content and care of the medical record meets all applicable Centers for Medicare and Medicaid Services (CMS) criteria, TJC standards, and any other applicable medical records maintenance and retention standards.

Admission and discharge records of patients admitted to the units shall be maintained in the Medical Records Department in accordance with CMS guidelines and Louisiana Minimum Licensing Standards.

Utilization Review:

Provider shall develop and implement standards for its Utilization Review Plan which addresses the type of care offered by each of the units. Utilization Review activities, as directed by the provider's Utilization Review Plan will be ongoing and consistent with the plan.

Selection and Removal of Staff:

Provider is responsible for all hiring and termination of staff assigned to each of the units, with the exception of psychology interns and psychiatry residents.

Provider shall provide in-service orientation to all Unit employees on all applicable procedures, policies, and plans to ensure compliance with appropriate hospital, licensure, accreditation, state and federal rules and regulations. Copies of these

documents shall be provided to OBH at the beginning of the contractual period and shall be kept updated in the same fashion as other departments in the facility.

The provider shall maintain health and personnel records of all Unit staff as required by policy and make them available to OBH when requested.

All physicians and psychologists and other licensed professionals employed by each of the units, including interns and residents, who provide medical and/or psychiatric services on the units must be privileged and shall follow the procedures as established for the submission of credentials for approval and granting of privileges and subsequent renewal of time.

Fiscal Requirements:

Provider shall be responsible for maintaining support records to substantiate costs attributable to the unit and for maintaining statistical data necessary to support the basis for allocation of any shared costs. Providers may be required to submit cost reports regarding operations relevant to the services provided under the CEA.

Any alterations or modifications to the physical plant as may be required for continued compliance with all state and federal regulations shall be the responsibility of the provider.

Health Screening:

Provider shall perform all necessary pre-employment and periodic health screening examinations, including annual TB testing, for all employees. All employee health records will be maintained with strict confidentiality.

Support Services:

Provider shall be responsible for the provision of all support care services necessary for operation of the units, to include all necessary medical and non-medical supplies, pharmaceuticals, ancillary services, maintenance and environmental services, dietary services and security services. All such services shall be provided in accordance with all applicable licensing, accrediting, and regulatory body standards and criteria.

Patient Billing:

Provider shall assume responsibility for determination of financial eligibility and billing status for all patients admitted.

Provider agrees to make every attempt within its available resources to determine at the time of admission whether or not the patient has Medicare, Medicaid, or insurance coverage, and to document any such information obtained. Provider shall be contracted with all Medicaid managed care organizations.

Provider will bill the Managed Care Organization (MCO) for all Medicaid members at the rate established between the provider and the MCO as part of their contract with the provider. Treatment for individuals who are uninsured and do not meet Medicaid eligibility or stay beyond Medicaid determined medical necessity will be reimbursed by the Department in accordance with a cooperative endeavor agreement and rate established by the department and set in necessary authorities, if applicable.

Risk Management:

The requirements, policies and procedures regarding risk management issues are to be used by the units for all risk management issues. These requirements, policies and procedures are to form the basis for defining “critical incidents” on the unit and for the process and timeline to be used in reporting of “critical incidents” by the unit.

Collaboration with OBH:

The provider will maintain ongoing contact with OBH regarding CEA patients and case developments. The provider will be responsive to OBH requests for information regarding case issues and documentation needed for court, payment authorization, and collaboration with other departments and providers. When applicable, the provider will be expected to participate in collaborative efforts with other departments, such as the Department of Corrections, the Office for Citizens with Developmental Disabilities, as needed. The partner will communicate with OBH regarding any issues affecting the services provided under the CEA and work with OBH to identify and implement resolutions.

Accreditation:

The provider shall maintain current accreditation by TJC. Any threat of the loss of accreditation (i.e., TJC) or the failure to maintain the conditions of participation for CMS, must be immediately reported to the Assistant Secretary for OBH.

RFI Response

Providers interested in responding to this RFI must submit a capability statement of no more than 20 pages (in 12 pt font with 1 inch margins) that details the ability to meet the statement of need. The following information is required in the response:

- Date of Submission
- Name of Organization
- Medicaid ID Number and NPI
- Denote whether Distinct Part Psychiatric Unit or Freestanding Psychiatric Hospital
- Mailing Address
- Contact Information
- Printed Name & Title of Authorized Representative
- Signature of Authorized Representative

For your convenience, a sample cover page has been appended to the final section of this RFI document. Although this cover page is not required, its use is recommended to ensure uniformity of response and submission of all required information noted above.

Outline

1. Respondents should demonstrate comprehensive experience in working patients with serious mental illness and/or co-occurring substance use in inpatient settings.
2. Respondents should demonstrate knowledge and prior implementation of evidence-based programs for all proposed programs.
3. Respondents should demonstrate organizational viability, providing examples of specific customers, contact information, and assessments of program performance.
4. Respondents should demonstrate capacity to recruit staff and implement the proposed unit on a rapid timeframe.
5. Respondents should provide biographical information of Principals involved in the organization.
6. Respondents should provide references who can attest to the proposer's professional qualifications, as well as the quality of programming the proposer has provided.
7. Respondents should demonstrate where applicable current involvement and linkages with emergency rooms, parish coroners, and mental health centers in the communities they currently serve, as well as their involvement with the current Medicaid MCOs.
8. Respondents should demonstrate the necessary structure for governance, administrative, and budgetary stability.
9. Respondents should discuss previous experience integrating services with academic teaching programs for physicians and other clinicians. Respondents should demonstrate adequate financial resources for performance of the CEA or the ability

to obtain such resources as required during performance under this CEA.
Demonstration of a viable payor mix would be beneficial.

10. Respondents should include for each of the last three (3) years, copies of financial statements, preferably audited, including at least a balance sheet and profit and loss statement, or other appropriate documentation which would demonstrate to the Department the proposer's financial resources sufficient to conduct the project.
11. Additional materials may be included as attachments and must be clearly labeled as such. These may include annual reports, marketing materials, case studies, research papers, etc.

Abbreviations and Terminology

Acute Care	<i>Intensive inpatient care for acutely ill psychiatric patients</i>
CEA	<i>Cooperative Endeavor Agreement</i>
LDH	<i>Louisiana Department of Health</i>
Inpatient	<i>Treatment services offered in a hospital</i>
LGE	<i>Local Governing Entity</i>
MCO	<i>Managed Care Organization</i>
OBH	<i>Office of Behavioral Health</i>
RFI	<i>Request for Information</i>
RFP	<i>Request for Proposal</i>
Unit	<i>Refers to the inpatient setting in which the services will be provided.</i>

Proposer Inquiries

The Department will consider written inquiries regarding the RFI before the date specified in the Schedule of Events. To be considered, written inquiries and requests for

clarification of the content of this RFI must be received at the above address or via the above fax number or email address by the date specified in the Schedule of Events. Any and all questions directed to the RFI coordinator will be deemed to require an official response by the date specified in the Schedule of Events.

Action taken as a result of verbal discussion shall not be binding on the Department. Only written communication and clarification from the RFI Coordinator shall be considered binding.

RFI Procedure

If your organization is interested in providing information on your ability to perform the requested services for the Office of Behavioral Health, please submit an electronic Microsoft Word copy of your 20-page or less (12 pt font; 1 inch margins) response to the contact listed below. The Department may invite qualified organizations to make oral presentations and participate in an individual question-and-answer session concerning their responses. Organizations should indicate in their responses whether they are willing to participate in these sessions. All organizations who have the interest and capacity to fulfill the activities specified in this RFI should indicate their interest **no later than 05:00 P.M. (Central Time) on June 24, 2022.**

How to Deliver the Response

In response to this Request For Information, please send a Microsoft Word-formatted response via email to Leila Miller, PhD (Leila.Miller@LA.GOV), with copy to James Hussey, M.D. (James.Hussey@LA.GOV). Please direct questions regarding this Request for Information in writing to the following point of contact:

Leila Miller, Ph.D.
Psychologist
(225) 342-9252
leila.miller@la.gov

Timeframe

The following table designates the target dates for the request for Information (RFI) process. The dates listed below are target dates, and subject to change without notification.

June 6, 2022	RFI published
June 10, 2022	Deadline for RFI questions
June 17, 2022	Responses to questions posted by LDH/OBH
June 24, 2022	Last day for submission of responses to RFI

Name of Organization

Response to
Office of Behavioral Health
Request for Information

For

Provision of Inpatient Services

Submitted on:

Month 00, 2022

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Name of Organization
00000 Mailing Address
City, ST 00000-0000
Phone: (xxx) xxx-xxxx

Fax: (xxx) xxx-xxxx

Email: main@provider-email.com

Name of Authorized Representative, Title

Respondents are encouraged to use this page as a template for their response cover.