



JACKSON COUNTY
COMMUNITY MENTAL HEALTH FUND

EXCELLENCE • ACCOUNTABILITY • COMPASSION

Request for Proposals: Safety Net, Children & Families
Proposals Due: October 6, 2017 before 12:00 Noon

Responses to Questions from Applicant Agencies

In the Service Unit Definitions (available on the ‘required documents’ web page) there is no maximum dollar amount indicated for case management service units. Are we able to request an increase, and if so where would we justify that in the proposal? *Increases in case management are not likely to be approved. This is because we are planning changes to billable case management units. Changes will not affect your proposal this year, but are likely to be phased-in. For the latest information on case management tiers, visit the ‘accountability’ page of our web site.*

Can we ask for an increase in the 2018 contract amount? *There is no restriction on this. Use professional judgement to convey a clear, data-based rationale in relevant parts of the proposal. Consider that all agencies face unmet need, greater severity and revenue restrictions. Demonstrate why yours merits extra funding. Performance data on file at the Levy office will be a factor in the decision. Board consideration may include areas such as: accreditation, utilization of funding, benefits billing, record of on-time reporting, cultural competence, outcomes, and quality assurance processes. Please note that unfortunately there is no significant change in our revenue to support multiple requests and/or large increases.*

Question 11: We have clinicians and interns that do case management. Our interns change every year. Can we put in the turnover rate for any Jackson County location clinician that does case management? *We are interested in better understanding the effects of turnover on participant-provider relationships and continuity of care. Our question applies to all persons providing case management. Special issues related to interns could be part of your discussion with the Appropriations Committee.*

Question 18: May we respond with two phone numbers? We have telephone numbers for Spanish- and English-speaking participants. *Yes.*

In contrast to prior years I don’t see a place to include diversity information. Am I correct that we do not submit participant/staff diversity information in the current application? *We are not requesting that information in the current RFP. The question is likely to appear in future RFPs.*

Question 14: List major non-Levy sources of payment for behavioral health. It appears there is only room for our top 5 payer sources. Is this correct, or do we need to list all of our non-Levy sources of payment for behavioral health? Also, would you like us to list our largest school district payer or would you like us to aggregate the total amount for all of our school district payers? *This question limits responses to the five most important behavioral health payment sources. To narrow your focus, consider: the largest sources, those in Jackson County, and how other revenue streams*

maximize the impact of Levy funds. Use your professional judgement about whether aggregating revenue sources helps us better understand your agency's value or impact.

Questions 16 and 17: Receiving and making interagency referrals for psychiatry. Are these questions specific to Levy-funded programs at our agency, or do they apply to our organization's full range of services? *The questions are in the "agency documentation" section of the proposal instructions, so they apply to the agency overall. We are interested in learning about referral patterns for psychiatry in the community. Responses should also take into account any referrals involving Advanced Practice Nurses or Physician Assistants prescribing medication for mental health treatment.*

I do not see a place to attach an annual audit. Is that correct? Do you continue to require the auditor's statement of Jackson County residency for requests over \$300,000? *Thank you for bringing this oversight to our attention and a standard upload box for the audit report (PDF) has been added to the required documents section of the instructions. Regarding the audit letter, there has been excellent response to this requirement, and we are not requesting a separate letter at this time. The question is likely to appear in future RFPs.*

In the Service Unit Definitions (available on the 'required documents' web page) there is no maximum dollar amount provided for assessment/evaluation service units. Are we able to request an increase, and if so where would we justify that in the proposal? If not, we really need 90 minutes for an assessment. Can we bill at the current rate for 1.5 units? *From our perspective, billing for 1.5 units per assessment/evaluation encounter is the simplest way to address your longer assessment. There is space in the expenditure plan to clearly indicate "NEW." Your change will then be part of your discussion with the Appropriations Committee.*

Question 11: What is the annual turnover rate for case management staff? Do you want us to provide the turnover rate for our case management staff that serve Levy-funded clients, or for all of the case management staff that we have at the organization? In our case, this would include Foster Care Case Managers that are funded through a contract with the MO Dept of Social Services. *This question is in the "agency documentation" section of the proposal instructions, and as that implies, we are interested in the turnover rate of case management staff for the agency overall.*

Our agency plans to make two applications in response to the RFP: core funding and a small supplemental proposal. Can you set up a special process to allow this? *No special process is needed. Using the link we provided, establish separate accounts by using different user names.*

Do you foresee Innovation Grants being available in 2018? *Yes. The 'request for letters of interest' will probably be released in March, 2018. Priorities are not yet final but last year's priorities: Medicaid/benefits; electronic records; first-time accreditation and cultural components of multi-disciplinary care, are likely to continue. Proposed new priorities (subject to approval) include: improving services for LGBT youth; demonstrating/evaluating improved engagement technology/techniques, and: grass-roots engagement in zip codes with highest incidence child abuse, such as the Prospect Corridor and Western Independence.*