

REQUEST FOR QUALIFICATIONS (RFQ)

for

RESIDENTIAL TREATMENT FACILITY FOR ADULTS

issued by

COMMUNITY BEHAVIORAL HEALTH

Date of Issue

February 8, 2016

**Proposals must be received no later than 5:00 P.M., Philadelphia,
PA, local time, on March 7, 2016**

**Questions related to this RFQ should be submitted via E-mail to:
Stephanie.Wiseman@phila.gov**

**EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER – MINORITY, WOMEN
AND DISABLED ORGANIZATIONS ARE ENCOURAGED TO RESPOND**

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I. Project Overview

A. Introduction; Statement of Purpose

Community Behavioral Health (CBH) is seeking to identify providers to develop residential treatment facilities for adults with significant behavioral health needs. The residential treatment facility for adults (RTFA) would be for individuals who are being discharged from Norristown State Hospital (NSH), including individuals with forensic involvement, and individuals in the Philadelphia Prison System who have been sentenced and are awaiting community placement.

B. Organizational Overview

The City of Philadelphia contracts with the Commonwealth of Pennsylvania Department of Human Services for the provision of behavioral health services to Philadelphia's Medicaid recipients under Pennsylvania's HealthChoices behavioral health mandatory managed care program. Services are funded on a capitated basis through this contractual agreement. The City of Philadelphia, through the Department of Behavioral Health and Intellectual disAbility Services (DBHIDS), contracts with Community Behavioral Health to administer the HealthChoices program.

CBH was established as a non-profit organization by the City in 1997 to administer behavioral health care services for the City's approximately 550,000 Medicaid recipients. As a result, CBH manages a full continuum of medically necessary and clinically appropriate behavioral health services. CBH employs more than 390 people and has an annual budget of approximately \$800 million.

DBHIDS has been actively transforming Philadelphia's behavioral health system for the last ten years. This system transformation is rooted in approaches that promote recovery, resilience and self-determination and build on the strengths and resilience of individuals, family members and other allies in communities that take responsibility for their sustained health, wellness, and recovery from behavioral health challenges. System transformation takes place in an environment of self-determination and is individualized, comprehensive, flexible, person-first (culturally responsive), and designed to support health and wellness across the lifespan. In administering behavioral health services for Philadelphia's Medicaid recipients, CBH has been actively involved in the support and implementation of this system transformation.

C. Background

The ACLU of Pennsylvania filed a federal class action lawsuit against the Commonwealth of Pennsylvania on October 22, 2015 on behalf of people with severe mental illness who have been found incompetent to stand trial by the court. These individuals are in custody in county jails or at one of Pennsylvania's two forensic hospitals, Norristown State Hospital (NSH) and Torrance State Hospital. While the case is in settlement, it illustrated additional opportunities to provide for the treatment needs of the many of the associated individuals.

DBHIDS is committed to helping Philadelphians at NSH, including those involved with the criminal justice system, successfully transition back to the community. The RTFAs being requested through this RFQ are being developed to provide additional community-based resources for individuals at NSH who are appropriate for transfer to a lower level of care. The RTFAs will serve

multiple purposes, increasing treatment resources for Philadelphians, enhancing the forensic treatment system and assisting the state in their response to the federal lawsuit. They will ensure that individuals at NSH can be transitioned to the least restrictive environment for treatment.

D. Request for Qualifications (RFQ)

Two 14-bed RTFAs are being proposed to provide psychiatric stabilization and integrated treatment to individuals with mental health disorders who may also have co-occurring substance use disorders. The RTFA facility should be secure and offer 24 hour/day supervision. RTFA services provide a less restrictive alternative to inpatient hospitalization, as the RTFA will be based in the community and provide services to a small group of individuals.

An RTFA is a highly structured therapeutic environment for adults who do not need hospitalization, but who require intensive mental health treatment. It is to provide psychiatric stabilization and integrated treatment to individuals with mental illness and substance use disorders. RTFA programming must include assessment for level of treatment services needed and individualized treatment/discharge planning, with appropriate aftercare treatment options. Length of stay in an RTFA is short to medium term (less than 30 days – up to 18 months).

The RTFA facilities are to be licensed as mental health treatment facilities accredited by the Joint Commission on the Accreditation of Hospital Organizations (JCAHO) or the Commission on Accreditation of Rehabilitation Facilities (CARF).

The selected provider(s) will be required to all accept all individuals that DBHIDS deems appropriate. There must be a "no rejection" policy for the RTFA and will include individuals with serious behavioral health issues and criminal histories.

E. Applicant Eligibility Requirements

To be eligible to respond to this RFQ, Applicants must be enrolled currently in the MA program, enrolled in the CBH network for at least one year with a current mental health license and have a demonstrated history of serving individuals with serious mental illness.

To apply for this RFQ, the Applicant must not be on any of the three CBH exclusion lists nor on a Corporate Integrity Agreement.

F. General Disclaimer

This RFQ does not commit CBH to award a contract. This RFQ and the process it describes are proprietary and are for the sole and exclusive benefit of CBH. No other party, including any respondent, is intended to be granted any rights hereunder. Any response, including written documents and verbal communication, by any Applicant to this RFQ, shall become the property of CBH and may be subject to public disclosure by CBH.

II. Scope of Work

A. Project Details

1. Objective/Purpose

The purpose of this RFQ process is to identify a limited number of providers who have the capacity to develop RTFAs. The services must be delivered in a manner that is consistent with the DBHIDS system transformation. The proposed services should be flexible, make available a wide variety of recovery-focused clinical interventions and recovery supports and be individualized to the needs of each person. Services are to be offered from a strength-based recovery oriented philosophy with the ultimate goal of community reintegration in the least restrictive environment for an individual's needs.

The services and programming at the RTFA must be based on the needs of each individual, and services are to be provided in the context of respect for the individual and his/her preferences. The services must be trauma informed and culturally competent and able to meet special needs of individuals. These individually based services are to be provided in a secure facility with 24/7 supervision. The process is designed to identify providers that are responsive to this RFQ by demonstrating the capability to offer high quality behavioral health care services. The merits of each submission will be evaluated based upon its quality and responsiveness to this RFQ.

2. Location

The RTFA program is to be located within Philadelphia. Applicants are expected to have a facility available in the city that can be used for an RTFA. The Applicant may own or lease the property directly or describe control of the facility through a partnership with an entity that has an appropriate facility. For each potential facility, the Applicant is required to provide information on the property's zoning and licensing status as well as describing how it can be configured as an RTFA.

3. Target Population

The individuals who are eligible for this program have a physician certified primary DSM 5 mental health diagnosis and qualify for voluntary admission under Section 201 of the Mental Health Procedures Act (MHPA) (50 P.S. S7201) or involuntarily under Sections 303 or 304 of the MHPA (50 P.S. S7303-7304).

The initial group of individuals who will enter the RTFAs are persons who are being discharged from NSH whose criminal matters have been resolved or will be resolved within six months. Most of these individuals will have histories of criminal justice involvement and will have been found Incompetent to Stand Trial. All will have significant mental health needs, and many will have co-occurring substance use needs.

It is expected that the following groups may also be considered for admission at a later date depending on the flow of persons requiring services through system resources.

1. Individuals coming out of the Philadelphia County Prison System who are Incompetent to Stand Trial and unlikely to regain competency,
2. Individuals who are sentenced by the court and awaiting community placement.

4. Evidence Based Practices

DBHIDS has a strong focus on the use of evidence based practices (EBP) for all levels of services throughout its provider network. The services to be procured through this RFQ must include EBP's for each service. Applicants will need to describe the evidence based practices which will be offered. The selected provider may be required to work with CBH to use Cognitive Behavioral Therapy (CBT) as an evidence based practice in the RTFA. Applicants should describe their

experience with CBT and willingness to partner with CBH to use this methodology in the RTFA.

5. Continuous Quality Improvement (CQI) and Program Monitoring

As part of the DBHIDS initiative to assure delivery of high quality services with positive measurable outcomes, Applicants will be expected to describe a plan for continuous quality improvement (CQI) that includes planned, systematic, formal and ongoing processes for assessing and improving the outcomes of each proposed service.

Applicants are also expected to describe their planned processes to track, evaluate and report outcomes at the individual and program levels. It is expected that the provider will identify individual and program outcome measures and DBHIDS may also identify outcome measures. The program will be required to monitor and track these measures in collaboration with DBHIDS. In addition, the program must implement post-discharge monitoring of individuals. The overall monitoring plan, including the post-discharge monitoring function, should be part of the Applicant's quality assurance plan to assess and strengthen ongoing collaborative services and to follow up on the progress of individuals who received treatment.

B. Services to be Provided/Required Tasks

1. Assessment/Treatment Planning

It is expected that each individual entering the RTFA will receive a comprehensive biopsychosocial assessment which includes a psychiatric evaluation. The assessment process must include a clinical formulation and the development of a plan of care based on the results of the comprehensive assessment. The assessment process should include comprehensive assessment and treatment planning for both mental health and substance use issues. The plan of care is to be agreed to by the participant and clinical staff. Staff is to work with each participant to develop and provide regular updates to an individualized Wellness Recovery Action Plan (WRAP) or other appropriate planning tool.

2. Psychiatric Services

The RTFA must have psychiatry services. Each participant is expected to receive a psychiatric evaluation to determine and the nature and severity of the mental illness. The psychiatrist will be responsible for medication prescription, supervision and education for all participants. Further, there is to be psychiatric leadership and consultation for all aspects of the program.

3. Treatment Modalities

It is expected that the treatment provided to participants should address mental health and any relevant substance use issues. In addition efforts should be made to address social determinants of health (i.e. connecting individuals with employment when possible and/or facilitating connections with faith entities, etc.). Applicants are expected to provide information on evidence based and/or evidence informed modalities to be used in the RTFAs. The treatment modalities may include Cognitive Based Therapy which may be introduced into the program in cooperation with CBH. The treatment in the RTFA must include intensive individual and group therapies and family therapy. It should be organized to provide daily structured programming, including daily community meetings and activities to support recovery.

4. Criminal Justice Focus

The RTFA program must include a strong criminal justice focus. Many participants will have past or present criminal justice involvement as well as serious behavioral health challenges. The

program must address criminogenic issues which may include at least a history of antisocial behavior, an antisocial personality pattern, antisocial cognition and antisocial associates. The program will be expected to address these issues through risk reduction, anger management and aggression containment strategies. The criminal justice focus must also include helping participants learn to work productively with criminal justice requirements.

5. Trauma Informed Treatment

Many individuals who are involved with the justice system and who have mental illness also have experienced traumatic life events. It will be essential for the RTFAs to operate a trauma informed environment and to offer trauma-specific treatment as needed and as appropriate for each individual's needs.

6. Education/Vocational Services

There should be services available to improve the literacy and vocational skills of participants and to teach methods to relate positively to the community. These skills may be offered through individual tutoring or group sessions. It will be essential to include components that introduce basic vocational skills and improve reading skills.

7. Health and Wellness

All program participants should receive an initial physical health wellness evaluation and ongoing evaluation of their health status. Arrangements are to be made to assure that treatment is available for individuals in the RTFA. The treatment team is expected to monitor the physical health status of participants and actively coordinate with physical health care providers. The program should include a comprehensive wellness program including nutrition, physical activity, stress reduction training and health maintenance awareness. The facility must provide a tobacco free campus with counseling and support for smoking cessation, prohibition of tobacco use, as well as provision of nicotine replacement and other pharmacotherapies for smoking cessation available to all participants.

8. Preparation for Transition to Community Based Care

The RTFA should focus on preparing individuals for transition to lower levels of care. The preparation for transition to community based care should be designed to improve independent living skills, such as personal care and hygiene, money management, managing home and transportation, and health and safety. Preparation for other levels of care is to include education on self-management of symptoms and medications. Participants should learn about community-based social and recreational activities and community living supports that promote recovery and independent living (e.g., medical services, mental health resources, benefits, transportation).

9. Emergency Services

It is expected that the RTFAs will be staffed to be able to handle most psychiatric emergencies. Applicants must develop protocols to have both physical and psychiatric emergencies. Applicants will be expected to develop referral arrangements for emergencies with medical and psychiatric facilities.

10. Case Coordination Activities

The program will be expected to provide case coordination services. These staff will work with each participant to arrange and coordinate community related activities including meeting criminal justice and other system requirements, reaching out to family members and other potential supports

for the individual and developing community resources for the individual to be used following discharge from the program.

11. Co-occurring Substance Use Issues

The RTFAs should provide integrated treatment for co-occurring mental health and substance use disorders. Many individuals who will enter the RTFA will have a history of substance use problems. Research suggests that substance use is a primary risk factor for future violence, psychiatric decompensation, and recidivism. The co-occurring programming should include the development and application of recovery skills, motivational interviewing, and evidence based treatment for substance use.

12. Staffing

a. Required Staff

The RTFA must be staffed as follows:

- Director – must be a licensed clinical psychologist
- Psychiatrist – must be on staff at least 0.25 FTE over 2 days
- Clinical Supervisor - must be master's level clinician with previous supervisory experience
- Forensic Mental Health Professional – must be master's level clinician with working with individuals with forensic, mental health and substance abuse challenges
- Case Coordinator – must be at least bachelor's level with 2 years' experience with forensic population
- Psychiatric nurse – at the BSN level to provide 24/7 coverage
- Mental Health Workers – for 24/7 coverage. Must have a high school diploma and at least 12 behavioral health credits. Number of mental health worker staff to be dependent on the needs of the population
- Certified Peer Specialist – must have completed certification process and be familiar with the target population
- Administrative Assistant
- The Director and/or an additional Clinical Psychologist must have the capacity to provide psychological services, conduct psychological assessments, guide the implementation of evidence-based treatment approaches and facilitate program evaluation activities

b. Training

Applicants must describe the initial and ongoing training for staff. Training must include at least the following topics:

- Management of the RTFA
- All therapeutic procedures including evidence based practices
- Factors related to working with individuals with criminal justice involvement
- Emergency procedures.

C. Timetable

It is expected that all services requested through this RFQ will be fully operational by May 2, 2016.

D. Monitoring

Programs which are funded will be subject to evaluation, program, compliance and budgetary monitoring by DBHIDS and CBH.

E. Reporting Requirements

By accepting an award under this RFQ, Applicants agree to comply with all data reporting requirements of CBH. Awardees agree to supply all the required data necessary for outcome evaluation and CQI purposes and to participate in required assessments. To fulfill the data reporting requirements, successful Applicants must work with CBH and, where applicable, the CBH Claims, Information Services and CQI Departments to ensure the quality and completeness of data. Reporting requirements may be modified prior to or during the contract award period.

F. Performance Standards

The selected Applicant will be required to meet CBH credentialing standards.

G. Compensation/Reimbursement

The RTFA will be funded as follows. During the first 12 months following the contract award, the provider will be program funded using four (4) quarterly allocations. It is expected that start-up expenses and the initial operating costs will be included in the quarterly allocation. During the second year of operation, the RTFA funding will move to a fee-for-service reimbursement model. CBH reserves the right to suspend the quarterly allocation payment structure and shift to fee for service within year one should claims and/or service unit data reports support the shift.

CBH will negotiate the budgets to be used in determining the amounts of both the quarterly advances and the fee-for-service payments. Applicants will be required to submit the following budgets as the basis for negotiation with CBH.

- 1) Start-up budget: This budget must contain all initial costs including renovations, supplies, equipment, communications, and staff hiring and training.
- 2) Ongoing operations budget: This budget must include all operating costs such as staff, administrative costs, ongoing supplies, ongoing building expenses including rent and maintenance, etc.

The Applicant is to use the budget forms which are provided separately on the DBHIDS website to develop each budget. Make sure to label clearly the start-up and ongoing operations budgets.

H. Technology Capabilities

Applicants must have the technology capabilities required to perform the proposed activities in this RFQ. At a minimum, applicants must have capability for electronic claims submission.

I. Available Information

In 2005, DBHIDS and CBH initiated a system transformation to change service delivery for people who live with behavioral health challenges. Transformation in Philadelphia moves beyond the field's historical focus on pathology and disease processes to a model directed by the person in recovery's needs, wants and desires and that emphasize the individuals' culture, resilience and unique recovery processes. A recovery/resilience-oriented system attends to the issues of symptom reduction but ultimately provides access to services, supports, environments and opportunities that help individuals restore a positive sense of self and rebuild a meaningful and fulfilling life in their community. Through the implementation of recovery/resilience-oriented innovative, evidence-based, evidence-informed and promising practices, the system transformation holds the potential to improve quality of care and the lives of service recipients and their families.

The core values of the transformation were drawn from the earlier work of the Recovery Advisory Committee and from the values identified in the report issued by the Mayor's Blue Ribbon Commission on Children's Behavioral Health and can be found in the Practice Guidelines for Recovery and Resilience Oriented Treatment that was issued by DBHIDS in 2011 (<http://www.dbhids.org/practice-guidelines/>).

Core Values

1. Strength-based Approaches that Promote Hope: A strengths perspective is woven throughout system-transformation efforts. Services are focused on identifying and building strengths, assets, resources and protective factors within the individual, family, peer group and community, rather than focusing solely on identifying and addressing problems or challenges in the individual's or family's life. These strengths are mobilized to support the individual's and the family's journey to wellness. A focus on hope is equally essential—the message that people can and do show resilience in the face of adversity, and can and do recover from behavioral health conditions. Change is always possible, and the extent to which people's lives can change is often beyond what we can imagine. We learn hope by seeing others lead meaningful lives in their communities, listening to their stories and having opportunities to give to others. Hope-inducing environments can help people of all ages in their recovery processes.

2. Community Inclusion, Partnership and Collaboration: The focus of care is on integrating individuals and families into the larger life of their communities, connecting with the support and hospitality of the community, developing community resources that support recovery and resilience and encouraging service contributions to and from the larger community. Resilience, recovery and wellness can be tapped, initiated, catalyzed and promoted in care settings, but can be maintained only in the context of people's natural environments. Connecting services, individuals and families with the community is no longer considered optional, but is understood as an integral factor in sustaining wellness.

3. Person and Family-Directed Approaches: In recovery and resilience-oriented systems, service designs shift from an expert model to a partnership/consultation model, in which everyone's perspective, experience and expertise is welcomed and considered. Each person's and each family's values, needs and preferences are respected and considered central to any decision-making process. Services and supports are individualized, built with and around each person and family. All parties in the system recognize that there are many pathways to recovery and that people have a right to choose their own paths. People have the opportunity to choose from a diverse menu of services and supports and to participate in all decisions that affect their lives and those of their children. Multidisciplinary teams that include participants and family members reduce fragmentation and ensure the delivery of comprehensive, effective services.

4. Family Inclusion and Leadership: Family members are actively engaged and involved at all levels of the service process. Families - and particularly parents of children and youth - are seen as an integral part of policy development, planning, service delivery and service evaluation. Assessment and service planning are family focused. The system and its providers recognize that families come in many varieties. Families of birth, foster and adoptive families and families of choice are respected, valued and involved in meaningful ways. When multiple family members are involved in care in different programs and agencies, providers take steps to ensure that services are integrated

5. Peer Culture, Support and Leadership: Service systems and providers recognize the power of peer support and affirm that recognition by: a) creating environments in which peers can support one another in formal and informal ways and providing opportunities for that support; b) hiring people to provide peer support to individuals and/or families; c) ensuring representation of youth and people in recovery at all levels of the system; d) developing respectful, collaborative relationships between behavioral health agencies and the service structures of local recovery mutual-aid societies and assertively linking people to peer-based support services (e.g., mutual/self-help groups, other recovery community support institutions and informal peer support); e) acknowledging the role that sharing stories of lived experience can play in helping others initiate and sustain the recovery process; and f) developing opportunities for people in recovery and youth to engage in active leadership roles at all levels of the system.

6. Person-First (Culturally Competent) Approaches: The title of this core value reflects the fact that services that are appropriate to and respectful of culture - often referred to as culturally competent - must also respect the individuality and centrality of each unique individual. In a person-first (culturally competent) service system, all staff and volunteers are able to work effectively with individuals and families from different cultures. They possess knowledge of the values, worldviews and practices of the major cultural groups they serve - and, equally important, the humility to know the limits of their knowledge. They address culture broadly, not forgetting the importance of ethnicity, nation of birth and primary language, but also acknowledging the implications of gender, age, sexual orientation, religion, socioeconomic factors and other key characteristics. Rather than merely developing a generic understanding of the people they serve, however, they are also skilled at using cultural knowledge to develop an accurate and individualized understanding of each person they serve, each family and each community. Providers also possess an understanding of their own cultural worldview, the ways in which it enriches their work and the ways in which it may constrain their work.

7. Trauma-Informed Approaches: All components of the service system are designed with an understanding of the role that serious adverse events can play in the lives of individuals and families. Services are delivered in safe and trustworthy environments and through respectful, nurturing relationships to promote healing and avoid inadvertent re-traumatization. Individuals and families are always assessed for the extent to which the spectrum of traumatic experiences may have affected their lives and their ability to participate in care and establish recovery. They are offered services and supports that will help them reduce the destructive effects of traumatic experiences and maximize the growth that can emerge from the healing process.

8. Holistic Approaches toward Care: Services and supports are designed to enhance the development of the whole person. Care transcends a narrow focus on symptom reduction and promotes wellness as a key component of all care. In attending to the whole person, there is an

emphasis on exploring and addressing primary care needs in an integrated manner. Providers and peers also explore, mobilize and address spirituality, sexuality and other dimensions of wellness in service settings.

9. Care for the Needs and Safety of Children and Adolescents: Service systems and providers recognize the incredible resilience of children and adolescents, along with their unique vulnerabilities and the complexities that attend their need for services and support. As a result, providers employ a developmental approach in the delivery of services. Adults, children and their families are shown respect and given a partnership role in services and supports. Screening and assessment processes are informed by knowledge of the ways in which children and adolescents' strengths, symptoms, needs and progress tend to differ from those of adults and of the ways of honoring those differences. Providers also recognize that attention to the safety, needs and well-being of children and adolescents includes attention to the safety, needs and well-being of their families - and back up that recognition with concrete action.

10. Partnership and Transparency: This system transformation effort is built upon the values of partnership and transparency at all levels of the system. This applies to the ways in which system administrators strive to work with providers, as well as the ways in which providers aim to collaborate with the individuals and families receiving services.

III. Proposal Format, Content and Submission Requirements; Selection Process

A. Required Proposal Format

1. Format Structure

a. Proposal Cover Sheet

The cover sheet (see Appendix A) must be completed with the Applicant's information and included as the first page of the proposal.

b. Table of Contents

A table of contents must be included as the second page of the proposal with each section of the proposal included and with a page number for the first page of each section.

c. Format Requirements

Proposals must be prepared simply and economically, providing a straightforward, concise description of the applicant's ability to meet the requirements of the RFQ. Each proposal must provide all the information detailed in this RFQ using the format described below. The narrative portion of the proposal must be presented in print size of 12, using a Times New Roman font, single spaced on 8.5" by 11" sheets of paper with minimum margins of 1". For each section where it is required, the applicant must fully answer all of the listed questions in the outline form in which they are presented in the RFQ. Answers to each question must be numbered/lettered and correspond to the numbered/lettered questions in this RFQ. Failure to number and letter the questions or to respond to all questions may result in the proposal's being considered non-responsive. Each attachment, appendix or addendum must reference the corresponding section or subsection number.

Applicants are required to limit their General Narrative Description to 10 (ten) single spaced pages. As a general comment, if you have responded to a requirement in another part of your proposal, make reference to that section and do not repeat your response. Applicants whose narrative exceeds the page limits may have their proposals considered non-responsive and be disqualified.

B. Proposal Content

1. Introduction/Executive Summary

Prepare a very brief introduction including a general description of your understanding of the scope and complexity of the proposed project.

2. Statement of Qualifications/Relevant Experience

Provide information on the continuum of services offered by the applicant agency and the length of time the agency has been in existence. Describe previous work with similar target populations and experience providing services similar to those requested in this RFQ. This should include experience working with adults with serious mental health challenges who have been involved with the criminal justice system. Also describe experience working with adults with co-occurring mental health and substance use issues.

The Applicant must also be able to provide documentation of the availability of an appropriate facility for the RTFA. Documentation of availability of the facility must be through ownership or lease documents that are included in the response to this RFQ. The Applicant may either have direct control of the proposed facility or it may be available through a partnership with another entity.

3. Corporate Status

Please indicate your corporate status, including whether you are a for-profit or not-for-profit organization and provide legal documentation of that status as an attachment to your proposal.

4. Governance Structure

Describe the governing body of your organization. Each Applicant must provide a list of the names, gender, race, and business addresses of all members of its Board of Directors. Please indicate which, if any, board members are self-disclosed service recipients or are family members of people who have received services.

5. Program Philosophy

This section provides the opportunity to describe the vision, values and beliefs that will be evident in the design and implementation of the proposed services. The Applicant should explain how the values of the Philadelphia System Transformation and the Practice Guidelines, including being strengths-based and recovery and resilience focused, are evident in the operations of the applicant organization. This section should also include a description of how person-first (culturally competent) and trauma-informed practices and approaches are incorporated into the applicant organization and into the proposed program.

6. Program Design

a. Describe the assessment process including instruments to be used and the staff who will administer the assessments. Describe how the assessment results will be used in the development of a clinical formulation and plan of care.

b. Describe the treatment modalities to be used. Provide information concerning evidence based and evidence informed practices to be used and justify the selection of the specific modalities in terms of evidence of effectiveness with the target population. Describe

willingness to institute Cognitive Based Therapy (CBT) in partnership with CBH. Provide information on experience working with CBT. The description of potential treatment modalities should include their use in addressing criminogenic factors. Include description of individual and group therapies to be used by the program.

c. Describe plans to institute CQI and program monitoring activities. This should include discussion of outcome measures to be used and methods to assess the success of interventions. Describe how post-discharge information will be collected and tracked as a CQI measure.

d. Describe how trauma informed treatment will be integrated into the services provided at the RTFA.

e. Describe the program's criminal justice treatment focus including how criminogenic issues will be addressed.

f. Describe the educational, pre-vocational and vocational services to be offered at the RTFA. The description should include information on services designed to prepare individuals for more independent living and must include discussion of how education about self-management of symptoms and medications will be integrated into the program design.

g. Explain how health and wellness information and services will be incorporated into the program.

h. Describe procedures to handle psychiatric emergencies and ongoing physical health care needs. The procedures should include evidence of referral arrangements with local psychiatric and physical health care emergency services providers and arrangements for treatment of ongoing non-emergent physical health care needs. If possible, attach Memoranda of Understanding as an Appendix to the response. The Applicant should also describe plans to handle emergent issues within the RTFA.

i. Describe how individuals will receive preparation for lower levels of care and integration into the community. The Applicant should outline the methods to be used to help participants access community resources and supports.

h. Describe procedures to work with individuals who have co-occurring mental health and substance use issues. This section should include evidence based modalities.

i. Provide a sample schedule of weekly activities for a program participant.

7. Personnel

a. Provide a list of all staff with percentages of time. Provide job descriptions and resumes for personnel as an Appendix to your response.

b. Identify those individuals who will serve as contact persons for the management of the contract.

c. Describe the plan for recruitment, retention and support of staff for this program given the challenges of an RTFA.

d. Describe the initial and ongoing training to be provided to all staff. Include both basic training concerning issues related to the RTFA and training on the evidence-based and/or evidence informed modalities to be used in the program.

8. Operational Documentation and Requirements

Applicants must demonstrate the financial capability and fiscal solvency to do the work described in this RFQ, and as described in their proposal. At a minimum, Applicants must meet the financial threshold requirements described below for their proposal to be considered for further review. The following documentation is required at the time of proposal submission and should be submitted as an Attachment to the proposal:

- Tax Identification Number
- An overview of your agency's financial status, which will include submission of a certified corporate audit report (with management letter where applicable). If this is not available, please explain, and submit a review report by a CPA firm. If neither a certified corporate audit report nor review report is available, please explain and submit a compilation report by a CPA firm. Any of these submissions must be for the most recently ended corporate fiscal year. If the report is not yet available, submit the report for the prior corporate fiscal year. Please note, the most recent report must be submitted prior to any potential contract negotiations.
- Federal Income Tax returns for for-profit agencies, or IRS Form 990, Return of Organization Exempt from Income Tax for non-profit agencies. Either of these submissions must be for the most recently ended corporate fiscal year. If the tax return is not yet available, submit the return for the prior corporate fiscal year. Please note, the most recent tax return must be submitted prior to any potential contract negotiations.
- Proof of payment of all required federal, state and local taxes (including payroll taxes) for the past twelve (12) months.
- Proof of an adequate Line of Credit demonstrating funds available to meet operating needs. If not available, please explain.
- Disclosure of any Bankruptcy Filings or Liens placed on your agency over the past five years. Please include an explanation of either. If there were no Bankruptcy Filings or Liens placed on your agency over the past five years, please include an attestation indicating that this is the case, signed by either your Chief Executive Officer or Chief Financial Officer.
- Certificates of insurance. Certificates of insurance with the named insured entity being the same name and address as the provider contracting with CBH. The insurance company providing coverage must be certified to do business in Pennsylvania or be otherwise acceptable to CBH. The insurances certificate must include the following coverage: General Liability with a minimum of \$2,000,000 aggregate and a minimum of \$2,000,000 per occurrence. Professional Liability with a minimum of \$1,000,000 aggregate and a minimum of \$3,000,000 per occurrence. Professional liability policy may be per occurrence or claims made, if claims made, a two-year tail is required. Automobile Liability with a minimum combined single limit of \$1,000,000. Workers Compensation/Employer Liability with a \$100,000 per Accident; \$100,000 Disease-per Employee; \$500,000 Disease Policy Limit. CBH, City of Philadelphia and Commonwealth of Pennsylvania Department of Public Welfare must be named as an additional insured with respect to your General Liability Policy. The certificate holder must be Community Behavioral Health.

Further, for Applicants that have passed all threshold review items and are recommended by the Review Committee to be considered for contract negotiations for this RFQ, each Applicant will be required to provide a statement from an independent CPA attesting to the financial solvency of the Applicant agency.

C. Terms of Contract

The contract entered into by CBH as a result of this RFQ will be designated as a Provider Agreement. Negotiations will be undertaken only with the successful applicants whose applications, including all appropriate documentation (e.g., audits, letters of credit, past performance evaluations, etc.) shows them to be qualified, responsible and capable of performing the work required in the RFQ.

The selected Applicants shall maintain full responsibility for maintenance of such insurances as may be required by law of employers, including but not limited to Worker's Compensation, General Liability, Unemployment Compensation and Employer's Liability Insurance, and Professional Liability and Automobile Insurance.

D. Health Insurance Portability and Accountability Act (HIPAA)

The work to be provided under any contract issued pursuant to this RFQ is subject to the federal Health Insurance Portability and Accountability Act (HIPAA), as amended, and/or other state or federal laws or regulations governing the confidentiality and security of health information. The selected Applicant(s) will be required to comply with CBH confidentiality standards identified in any contractual agreement between the selected applicant and CBH.

E. Minority/Women/People with Disabilities Owned Business Enterprises

CBH is a city-related agency and as such its contracted providers must cooperate with the intent of the local municipality regarding minority/women/disabled-owned business enterprises. It is the expectation of CBH that the selected Applicants will employ a "Best and Good Faith Efforts" approach to include certified minority, women and disabled businesses (M/W/DSBE) in the services provided through this RFQ where applicable and meet the intent of M/W/DSBE legislation.

The purpose of M/W/DSBE state legislation is to provide equal opportunity for all businesses and to assure that CBH funds are not used, directly or indirectly, to promote, reinforce or perpetuate discriminatory practices. CBH is committed to fostering an environment in which all businesses are free to participate in business opportunities without the impediments of discrimination and participate in all CBH contracts on an equitable basis.

- For-profit Applicants should indicate if their organization is a Minority (MBE), Woman (WBE), and/or Disabled (DSBE) Owned Business Enterprise and certified as such by an approved certifying agency and/or identified in the City of Philadelphia Office of Economic Opportunity (OEO) Certification Registry. If the Applicant is M/W/DSBE certified by an approved certifying agency, a copy of certifications should be included with the proposal. Any certifications should be submitted as hard copy attachments to the original application and copies that are submitted to CBH.
- Not-for-profit Applicants cannot be formally M/W/DSBE certified. CBH does utilize adapted state definitions to determine the M/W/DSBE status. Criteria are applied to not-for-profit entities to determine M/W/DSBE status in the CBH provider network, as follows (all criteria must be satisfied):
 - At least 51% of the board of directors must be qualified minority individuals and/or women and/or people with disabilities.
 - A woman or minority individual or person with a disability must hold the highest position in the company.

- Minority groups eligible for certification include African Americans, Hispanic Americans, Native Americans, and Asian Americans.
- Citizenship and legitimate minority group membership must be established through birth certificates, military records, passports, or tribal cards.
- Not-for-profit organizations may have sub-contracting relationships with certified M/W/DSBE for-profit organizations. Not-for-profits should include a listing of their M/W/DSBE certified sub-contractors, along with their certification information.
- For additional information regarding the Commonwealth of Pennsylvania’s M/W/DSBE certification process, go to the following website:
www.dgs.state.pa.us/portal/server.pt/community/bureau_of_minority_and_women_business_opportunities/1358

a. City of Philadelphia Tax and Regulatory Status and Clearance Statement

As CBH is a quasi-governmental, city-related agency, prospective Applicants must meet certain City of Philadelphia requirements. It is the policy of the City of Philadelphia to ensure that each contractor and subcontractor has all required licenses and permits and is current with respect to the payment of City taxes or other indebtedness owed to the City (including, but not limited to, taxes collected by the City on behalf of the School District of Philadelphia), and is not in violation of other regulatory provisions contained in The Philadelphia Code. To assist the City, through its Department of Revenue and Department of Licenses and Inspections, in determining this status, each Applicant is required to complete and return with its proposal, a City of Philadelphia Tax and Regulatory Status and Clearance Statement Form (see Appendix B).

If the Applicant is not in compliance with the City’s tax and regulatory codes, an opportunity will be provided to enter into satisfactory arrangements with the City. If satisfactory arrangements cannot be made within a week of being notified of their non-compliance, Applicants will not be eligible for award of the contract contemplated by this RFQ.

All selected Applicants will also be required to assist the City in obtaining the above information from its proposed subcontractors (if any). If a proposed subcontractor is not in compliance with City Codes and fails to enter into satisfactory arrangements with the City, the non-compliant subcontractor will be ineligible to participate in the contract contemplated by this RFQ and the selected Applicant may find it necessary to replace the non-compliant subcontractor with a compliant subcontractor. Applicants are advised to take these City policies into consideration when entering into their contractual relationships with proposed subcontractors.

Applicants need not have a City of Philadelphia Business Privilege Tax Account Number and Business Privilege License Number to respond to this RFQ, but will, in most circumstances, be required to obtain one or both if selected for award of the contract contemplated by the RFQ. Proposals for a Business Privilege Tax Account Number or a Business Privilege License may be made on line by visiting the City of Philadelphia Business Service site-
<http://business.phila.gov/Pages/Home.aspx> and clicking on “Register Your Business.” If you have specific questions, call the Department of Revenue at 215-686-6600 for questions related to City of Philadelphia Business Privilege Tax Account Number or the Department of Licenses and Inspections at 215-686-2490 for questions related to the Business Privilege License.

F. Compliance with Philadelphia 21st Century Minimum Wage and Benefits Ordinance

Applicants are advised that any contract awarded pursuant to this RFQ is a “Service Contract,” and the successful Applicant under such contract is a “Service Contractor,” as those terms are defined in Chapter 17-1300 of the Philadelphia Code (“Philadelphia 21st Century Minimum Wage and Benefits Standard Ordinance”). Any Subcontractor and any sub-subcontractor at any tier proposed to perform services sought by this RFQ is also a “Service Contractor” for purposes of Chapter 17-1300. If any such Service Contractor (i.e. Applicant and subcontractors at any tier) is also an “Employer,” as that term is defined in Section 17-1302 (more than five employees), and is among the Employers listed in Section 17-1303 of the Code, then during the term of any resulting contract, it is subject to the minimum wage and benefits provisions set forth in Chapter 17-1300 unless it is granted a waiver or partial waiver under Section 17-1304. Absent a waiver, these minimum wage and benefits provisions, which include a minimum hourly wage that is adjusted annually based on the CPI, health care and sick leave benefits, are mandatory and must be provided to Applicant’s employees or the employees of any subcontractor at any tier who perform services related to the City contract resulting from this RFQ. Applicants and any subcontractors at any tier proposed by Applicants are strongly encouraged to consult Chapter 17-1300 of the Philadelphia Code,¹ the General Provisions, and the About/Minimum Wage and Equal Benefits Ordinances Impacting Some City Contractors links on the eContract Philly home page for further details concerning the applicability of this Chapter to, and obligations it imposes on certain City contractors and subcontractors at any tier. In addition to the enforcement provisions contained in Chapter 17-1300, the successful Applicant’s failure or the failure of any subcontractor at any tier to comply (absent an approved waiver) with the provisions of Chapter 17-1300, or any discrimination or retaliation by the successful Applicant or Applicant’s subcontractors at any tier against any of their employees on account of having claimed a violation of Chapter 17-1300, shall be a material breach of any Service Contract resulting from this RFQ. By submitting a proposal in response to this RFQ, Applicants acknowledge that they understand, and will comply with the requirements of Chapter 17-1300, and will require the compliance of their subcontractors at any tier if awarded a contract pursuant to this RFQ. Applicants further acknowledge that they will notify any subcontractors at any tier proposed to perform services related to this RFQ of the requirements of Chapter 17-1300.

G. Certification of Compliance with Equal Benefits Ordinance

If this RFQ is a solicitation for a “Service Contract” as that term is defined in Philadelphia Code Section 17-1901(4) (“A contract for the furnishing of services to or for the City, except where services are incidental to the delivery of goods. The term does not include any contract with a governmental agency.”), and will result in a Service Contract in an amount in excess of \$250,000, pursuant to Chapter 17-1900 of the Philadelphia Code (*see* footnote 1 for online access to the Philadelphia Code), the successful Applicant shall, for any of its employees who reside in the City, or any of its employees who are non-residents subject to City wage tax under Philadelphia Code Section 19-1502(1)(b), be required to extend the same employment benefits the successful Applicant extends to spouses of its employees to life partners of such employees, absent a waiver by the City under Section 17-1904. By submission of their Proposals in response to this RFQ, all Applicants so acknowledge and certify that, if awarded a Service Contract pursuant to this RFQ, they will comply with the provisions of Chapter 17-1900 of the Philadelphia Code and will notify their employees of the employment benefits available to life partners pursuant to Chapter 17-1900. Following the award of a Service Contract subject to Chapter 17-1900 and prior to execution of the Service Contract by the City, the successful Applicant shall certify that its employees have received

¹ A link to the Philadelphia Code is available on the City’s official web site, www.phila.gov. Click on “City Code and Charter,” located to the bottom right of the Welcome page under the box “Transparency.”

the required notification of the employment benefits available to life partners and that such employment benefits will actually be available, or that the successful Applicant does not provide employment benefits to the spouses of married employees. The successful Applicant's failure to comply with the provisions of Chapter 17-1900 or any discrimination or retaliation by the successful Applicant against any employee on account of having claimed a violation of Chapter 17-1900 shall be a material breach of the any Service Contract resulting from this RFQ. Further information concerning the applicability of the Equal Benefits Ordinance, and the obligations it imposes on certain City contractors is contained in the About/Minimum Wage and Equal Benefits Ordinances Impacting Some City Contractors links on the eContract Philly home page.

H. City of Philadelphia Disclosure Forms

Applicants and subcontractors are required to complete the City of Philadelphia Disclosure Forms (see Appendix C and separate website Attachment) to report campaign contributions to local and state political candidates and incumbents; any consultants used in responding to the RFQ and contributions those consultants have made; prospective subcontractors; and whether Applicant or any representative of Applicant has received any requests for money or other items of value or advice on particular firms to satisfy minority-, woman- or disabled-owned business participation goals. These forms must be completed and returned with the proposal. The forms are attached as a separate PDF on the website posting.

I. CBH Disclosure of Litigation Form

The Applicant shall describe any pending, threatened, or contemplated administrative or judicial proceedings that are material to the Applicant's business or finances including, but not limited to, any litigation, consent orders or agreements between any local, state, or federal regulatory agency and the Applicant or any subcontractor the Applicant intends to use to perform any of the services described in this RFQ. Failure to disclose any of the proceedings described above may be grounds for disqualification of the Applicant's submission. Complete and submit with your proposal the CBH Disclosure of Litigation Form (see Appendix D).

J. Selection Process

An application review committee will review all responses to this RFQ. Based on the criteria detailed below, the committee will make recommendations concerning the submissions that are best able to meet the goals of the RFQ.

Submissions will be reviewed based upon the merits of the written response to the RFQ.

K. Threshold Requirements

Threshold requirements provide a baseline for all proposals, which means they provide basic information that all Applicants must meet. Failure to meet all of these requirements may disqualify an Applicant from consideration through this RFQ. Threshold requirements include timely submission of a complete proposal with responses to all sections and questions outlined in Section II.B., Project Details. In addition, all required Attachments must be submitted. Threshold requirements include having the requisite experience and licenses to implement the program and being a service provider in good standing with the City and CBH.

The applicant must be a vendor in good standing with the City and CBH, which shall be defined as the following: all programs for that provider must have had a minimum of a two year re-credentialing status for the previous three consecutive site visits. If a provider received a status of

anything less than two years there is a strong likelihood that they would not meet the minimum threshold for their application to be considered for further review. In addition to the definition as stated above, sound judgment will play a role in making 'good standing' decisions and will inform Executive Management's decision about whether a provider should be precluded from the process. It should be noted that the provider may not be delinquent in City taxes with no arrangement, must meet minimum wage requirements for the City of Philadelphia, and must submit the status of whether or not the agency was previously contracted with CBH under the auspices of another entity, and any circumstances for leaving the network.

L. RFQ Responses

A review committee will review all responses to this RFQ. Based on the criteria detailed below, the committee will make recommendations concerning the submissions that are best able to meet the goals of the RFQ.

IV. Application Administration

A. Procurement Schedule

The anticipated procurement schedule is as follows:

RFQ Event	Deadline Date
RFQ Issued	February 8, 2016
Deadline to Submit Questions	February 16, 2016
Answers to Questions on Website	February 19, 2016
Application Submission Deadline	March 7, 2016
Applicants Identified for Contract Negotiations	April 4, 2016
Project Start Date	May 2, 2016

CBH reserves the right to modify the schedule as circumstances warrant.

This RFQ is issued on February 8, 2016. In order to be considered for selection, all applications must be delivered to the address below no later than 5:00 PM on March 7, 2016.

Community Behavioral Health
 801 Market Street
 7th Floor
 Philadelphia, PA 19107
 ATTN: Stephanie Wiseman

Application packages should be marked “Residential Treatment Facility for Adults.”

Applications submitted by any means other than mailing, courier, or hand delivery will not be accepted.

- Applicants must submit an electronic version of the application prepared as a PDF document placed onto a compact disc or flash drive with one clearly marked signed original application and seven (7) copies of the application.
- Applications submitted after the deadline date and time will be returned unopened.
- The individual applicant or an official of the submitting agency, authorized to bind the agency to all provisions noted in the application, must sign the cover sheet of the application.

B. Questions Relating to the RFQ

All questions concerning this RFQ must be submitted in writing via email to Stephanie Wiseman at Stephanie.Wiseman@phila.gov by February 16, 2016. CBH will respond to questions it considers appropriate to the RFQ and of interest to all Applicants, but reserves the right, in its discretion, not to respond to any question. Responses will be posted on the DBHIDS website. Responses posted on this website become part of the RFQ upon posting. CBH reserves the right, in its discretion, to revise responses to questions after posting, by posting the modified response. No oral response to any Applicant question by any CBH employee or agent shall be binding on CBH or in any way considered to be a commitment by CBH. Contact with other CBH staff, or other related staff, regarding this RFQ is not permitted and failure to comply with this restriction could result in disqualification.

C. Interviews/Presentations

Applicants may be required to make an oral presentation concerning various aspects of their application to CBH. Such presentations provide an opportunity for applicants to clarify their application to insure a thorough and mutual understanding. CBH will schedule such presentations on an as needed basis.

D. Term of Contract

The initial contract resulting from this RFQ will start within 90 days of receipt of the award letter. CBH reserves the right to set the rates for this service, budgets and rates notwithstanding. Continuation of funding is contingent upon the availability of funds, quality of service being provided and contract compliance. CBH reserves the right to continue subsequent yearly contracts. All contracts become binding on the date of signature by the provider agency's chief executive officer and Community Behavioral Health's chief executive officer. CBH reserves the right to re-issue all or part of the RFQ if it is not able to establish acceptable providers for any or all services. CBH also reserves the right to amend contracts throughout the contract period, and to renegotiate the contract length as needed.

V. General Rules Governing RFQs/Applications; Reservation of Rights; Confidentiality and Public Disclosure

A. Revisions to RFQ

CBH reserves the right to change, modify or revise the RFQ at any time. Any revision to this RFQ will be posted on the DBHIDS website with the original RFQ. It is the Applicant's responsibility to check the website frequently to determine whether additional information has been released or requested.

B. City/CBH Employee Conflict Provision

City of Philadelphia or CBH employees and officials are prohibited from submitting an application in response to this RFQ. No application will be considered in which a City or CBH employee or official has a direct or indirect interest. Any application may be rejected that, in CBH's sole judgment, violates these conditions.

C. Proposal Binding

By signing and submitting its proposal, each Applicant agrees that the contents of its proposal are available for establishment of final contractual obligations for a minimum of 180 calendar days from the proposal deadline for this RFQ. An Applicant's refusal to enter into a contract which reflects the terms and conditions of this RFQ or the Applicant's proposal may, in the sole discretion of CBH, result in rejection of Applicant's proposal.

D. Reservation of Rights

By submitting its response to this notice of Request for Proposals as posted on the DBHIDS website, the Applicant accepts and agrees to this Reservation of Rights. The term "notice of request for proposals," as used herein, shall mean this RFQ and include all information posted on the DBHIDS website in relation to this RFQ.

1. Notice of Request For Qualifications (RFQ)

CBH reserves the right, and may, in its sole discretion, exercise any one or more of the following rights and options with respect to this notice of contract opportunity:

- (a) to reject any and all applications and to reissue this RFQ at any time;
- (b) to issue a new RFQ with terms and conditions substantially different from those set forth in this or a previous RFQ;
- (c) to issue a new RFQ with terms and conditions that are the same or similar as those set forth in this or a previous RFQ in order to obtain additional applications or for any other reason CBH determines to be in their best interest;
- (d) to extend this RFQ in order to allow for time to obtain additional applications prior to the RFQ application deadline or for any other reason CBH determines to be in its best interest;
- (e) to supplement, amend, substitute or otherwise modify this RFQ at any time prior to issuing a notice of intent to develop a provider agreement or consultant contract to one or more Applicants;
- (f) to cancel this RFQ at any time prior to the execution of a final provider agreement whether or not a notice of intent to develop a provider agreement has been issued, with or without issuing, in CBH's sole discretion, a new RFQ for the same or similar services;
- (g) to do any of the foregoing without notice to Applicants or others, except such notice as CBH, in its sole discretion, elects to post on the DBHIDS website.

2. Proposal Selection and Contract Negotiation

CBH may, in its sole discretion, exercise any one or more of the following rights and options with respect to application selection:

- (a) to reject any application if CBH, in its sole discretion, determine the application is incomplete, deviates from or is not responsive to the requirements of this RFQ, does not comply with applicable law, is conditioned in any way, or contains ambiguities, alterations or items of work not called for by this RFQ, or if CBH determines it is otherwise in their best interest to reject the application;

- (b)** to reject any application if, in CBH's sole judgment, the Applicant has been delinquent or unfaithful in the performance of any contract with CBH or with others; is delinquent, and has not made arrangements satisfactory to CBH, with respect to the payment of City taxes or taxes collected by the City, or other indebtedness owed to the City; is not in compliance with regulatory codes applicable to Applicant; is financially or technically incapable; or is otherwise not a responsible Applicant;
- (c)** to waive any defect or deficiency in any application, including, without limitation, those identified in subsections 1) and 2) preceding, if, in CBH's sole judgment, the defect or deficiency is not material to the application;
- (d)** to require, permit or reject, in CBH's sole discretion, amendments (including, without limitation, information omitted), modifications, clarifying information, and/or corrections to their applications by some or all of the Applicants at any time following application submission and before the execution of a final provider agreement or consultant contract;
- (e)** to issue a notice of intent to develop a provider agreement or consultant contract and/or execute a provider agreement and/or consultant contract for any or all of the items in any application, in whole or in part, as CBH, in its sole discretion, determine to be in CBH's best interest;
- (f)** to enter into negotiations with any one or more Applicants regarding price, scope of services, or any other term of their applications, and such other agreement or contractual terms as CBH may require, at any time prior to execution of a provider agreement or consultant contract, whether or not a notice of intent to develop a provider agreement or consultant contract has been issued to any Applicant and without reissuing this RFQ;
- (g)** to enter into simultaneous, competitive negotiations with multiple Applicants or to negotiate with individual Applicants, either together or in sequence, and to permit or require, as a result of negotiations, the expansion or reduction of the scope of services or changes in any other terms of the submitted applications, without informing other Applicants of the changes or affording them the opportunity to revise their applications in light thereof, unless CBH, in its sole discretion, determine that doing so is in and CBH's best interest;
- (h)** to discontinue negotiations with any Applicant at any time prior to the execution of a provider agreement or consultant contract, whether or not a notice of intent to develop a provider agreement or consultant contract has been issued to the Applicant, and to enter into negotiations with any other Applicant, if CBH, in its sole discretion, determine it is in the best interest of CBH to do so;
- (i)** to rescind, at any time prior to the execution of a provider agreement or consultant contract, any notice of intent to develop a provider agreement or consultant contract to an Applicant, and to issue or not issue a notice of intent to develop a provider agreement or consultant contract to the same or a different Applicant and enter into negotiations with that Applicant, if CBH, in its sole discretion, determine it is in the best interest of CBH to do so;
- (j)** to elect not to enter into any provider agreement or consultant contract with any Applicant, whether or not a notice of intent to develop a provider agreement or consultant contract has been issued and with or without the reissuing this RFQ, if CBH determines that it is in CBH's best interest to do so;
- (k)** to require any one or more Applicants to make one or more presentations to CBH at CBH's offices or other location as determined by CBH, at the Applicant's sole cost and expense, addressing the Applicant's application and its ability to achieve the objectives of this RFQ;
- (l)** to conduct on-site investigations of the facilities of any one or more Applicants (or the facilities where the Applicant performs its services);

- (m) to inspect and otherwise investigate projects performed by the Applicant, whether or not referenced in the application, with or without consent of or notice to the Applicant;
- (n) to conduct such investigations with respect to the financial, technical, and other qualifications of each Applicant as CBH, in its sole discretion, deem necessary or appropriate;
- (o) to permit, at CBH's sole discretion, adjustments to any of the timelines associated with this RFQ, including, but not limited to, extension of the period of internal review, extension of the date of provider agreement or consultant contract award and/or provider agreement or consultant contract execution, and extensions of deadlines for implementation of the proposed project; and
- (p) to do any of the foregoing without notice to Applicants or others, except such notice as CBH, in its sole discretion, elects to post on the DBHIDS website.

3. Miscellaneous

(a) Interpretation; Order of Precedence. In the event of conflict, inconsistency or variance between the terms of this Reservation of Rights and any term, condition or provision contained in any RFQ, the terms of this Reservation of Rights shall govern.

(b) Headings. The headings used in this Reservation of Rights do not in any way define, limit, describe or amplify the provisions of this Reservation of Rights or the scope or intent of the provisions, and are not part of this Reservation of Rights.

E. Confidentiality and Public Disclosure

The successful Applicant shall treat all information obtained from CBH that is not generally available to the public as confidential and/or proprietary to CBH. The successful Applicant shall exercise all reasonable precautions to prevent any information derived from such sources from being disclosed to any other person. The successful Applicant agrees to indemnify and hold harmless CBH, its officials and employees, from and against all liability, demands, claims, suits, losses, damages, causes of action, fines and judgments (including attorney's fees) resulting from any use or disclosure of such confidential and/or proprietary information by the successful Applicant or any person acquiring such information, directly or indirectly, from the successful Applicant.

By preparation of a response to this RFQ, Applicants acknowledge and agree that CBH, as a quasi-public corporation, is subject to state and local public disclosure laws and, as such, is legally obligated to disclose to the public documents, including applications, to the extent required hereunder. Without limiting the foregoing sentence, CBH's legal obligations shall not be limited or expanded in any way by an Applicant's assertion of confidentiality and/or proprietary data.

F. Incurring Costs

CBH is not liable for any costs incurred by Applicants for work performed in preparation of a response to this RFQ.

G. Prime Contractor Responsibility

The selected contractor will be required to assume responsibility for all services described in their applications whether or not they provide the services directly. CBH will consider the selected contractor as sole point of contact with regard to contractual matters.

H. Disclosure of Proposal Contents

Information provided in applications will be held in confidence and will not be revealed or discussed with competitors. All material submitted as part of the RFQ process becomes the property of CBH and will only be returned at CBH's option. Applications submitted to CBH may be reviewed and evaluated by any person other than competing Applicants. CBH retains the right to use any/all ideas presented in any reply to this RFQ. Selection or rejection of an application does not affect this right.

I. Selection/Rejection Procedures

The Applicants whose submission is selected by CBH will be notified in writing as to the selection, and their selection will also be posted on the DBHIDS website. Information will be provided in this letter as to any issues within the application that will require further discussion or negotiation with CBH. This letter should not be considered as a letter of award. A formal letter of award will be forthcoming at such time when mutual agreement has been reached by the parties on all issues pertaining to the application. Applicants whose submissions are not selected will also be notified in writing by CBH.

J. Non-Discrimination

The successful Applicant, as a condition of accepting and executing a contract with CBH through this RFQ, agrees to comply with all relevant sections of the Civil Rights Act of 1964, the Pennsylvania Human Relations Act, Section 504 of the Federal Rehabilitation Act of 1973, and the Americans with Disabilities Act, hereby assuring that:

The contractor does not and will not discriminate against any person because of race, color, religious creed, ancestry, national origin, age, sex, sexual orientation, handicap or disability in providing services, programs or employment or in its relationship with other contractors.

K. Life of Proposals

CBH expects to select the successful Applicants as a result of this RFQ within approximately 90 days of the submission deadline. However, proposals that are submitted may be considered for selection up to 180 days following the submission deadline of this RFQ. By submission of a proposal, respondents agree to hold the terms of their proposal open to CBH for up to 180 days following the submission deadline.

APPENDIX A

RFQ RESPONSE COVER SHEET

COMMUNITY BEHAVIORAL HEALTH

RESIDENTIAL TREATMENT FACILITY FOR ADULTS

CORPORATE NAME OF
APPLICANT ORGANIZATION _____

CORPORATE ADDRESS _____

CITY _____ STATE _____ ZIP _____

PROGRAM SITE LOCATION _____

CITY _____ STATE _____ ZIP _____

MAIN CONTACT PERSON _____

TITLE _____ TELEPHONE # _____

E-MAIL ADDRESS _____ FAX # _____

SIGNATURE OF OFFICIAL AUTHORIZED TO BIND APPLICANT TO A PROVIDER AGREEMENT TITLE

TYPED NAME OF AUTHORIZED OFFICIAL IDENTIFIED ABOVE

DATE SUBMITTED _____

APPENDIX B

**CITY OF PHILADELPHIA TAX AND REGULATORY
STATUS AND CLEARANCE STATEMENT
FOR APPLICANTS**

THIS IS A CONFIDENTIAL TAX DOCUMENT NOT FOR PUBLIC DISCLOSURE

This form must be completed and returned with Applicant’s proposal in order for Applicant to be eligible for award of a contract with the City. Failure to return this form will disqualify Applicant’s proposal from further consideration by the contracting department. Please provide the information requested in the table, check the appropriate certification option and sign below:

Applicant Name	
Contact Name and Title	
Street Address	
City, State, Zip Code	
Phone Number	
Federal Employer Identification Number or Social Security Number:	
Philadelphia Business Income and Receipts Tax Account Number (f/k/a Business Privilege Tax) (if none, state “none”)*	
Commercial Activity License Number (f/k/a Business Privilege License) (if none, state “none”)*	

___ I certify that the Applicant named above has all required licenses and permits and is current, or has made satisfactory arrangements with the City to become current with respect to the payment of City taxes or other indebtedness owed to the City (including, but not limited to, taxes collected by the City on behalf of the School District of Philadelphia), and is not in violation, or has made satisfactory arrangements to cure any violation, or other regulatory provisions applicable to Applicant contained in The Philadelphia Code.

___ I certify that the Applicant named above does not currently do business, or otherwise have an economic presence in Philadelphia. If Applicant is awarded a contract with the City, it promptly will take all steps necessary to bring it into compliance with the City’s tax and other regulatory requirements.

Authorized Signature

Date

Print Name and Title

* You can apply for a City of Philadelphia Business Income and Receipts Tax Account Number or a Commercial Activity License on line after you have registered your business on the City’s Business Services website located at <http://business.phila.gov/Pages/Home.aspx>. Click on “Register” or “Register Now” to register your business.

APPENDIX C

CITY OF PHILADELPHIA DISCLOSURE FORMS

**The City of Philadelphia Disclosure Forms may be found on the DBHIDS Website
along with this posted RFQ.**

APPENDIX D

CBH Disclosure of Litigation Form

The Applicant shall describe in the space below any pending, threatened, or contemplated administrative or judicial proceedings that are material to the Applicant's business or finances including, but not limited to, any litigation, consent orders or agreements between any local, state, or federal regulatory agency and the Applicant or any subcontractor the Applicant intends to use to perform any of the services described in this RFQ.

Not Applicable

Signature

Print Name

Date

Company or Agency Name