



ARIZONA STATEWIDE CRISIS TELEPHONE LINE

INVITATION TO RESPOND

DATE OF ISSUANCE: February 18, 2022

RESPONSE DUE DATE: March 21, 2022

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INVITATION TO RESPOND

The purpose of this Invitation to Respond is to identify a sole source single statewide crisis phone vendor serving the State of Arizona.

The selected vendor will be under contracts with Mercy Care, Care1st and Arizona Complete Health-Complete Care Plan (AzCH-CCP).

Table of Contents

Section	Page
Preface	2
Background and Overview	3
Description of the Process (Letters of Interest)	3
Eligibility and Selection Process	3
Invitation to Respond Requirements	4
Due Diligence, Presentations, Site Visits	5
Confidentiality of the Response	5
Estimated Timeline	5
Invitation to Respond Questions	6-9
Innovations	9-10
Additional Differentiators/Value Adds	10
Implementation Plan	10
Compliance Plan	10
Contracting	10

Preface

Mercy Care, Care1st and Arizona Complete Health-Complete Care Plan (AzCH-CCP) are seeking to contract with a strategic partner to provide statewide crisis phone services to people in Arizona.

Mercy Care, Care1st and AzCH-CCP are looking to build a long-term, mutually beneficial relationship with a single statewide crisis phone line operator. The selected vendor will have demonstrated expertise and capability to:

- Deliver quality, cost-effective services
- Meet required capacity and system reporting and monitoring requirements
- Develop and maintain strong system partner collaboration
- Demonstrate innovation in ongoing system improvement processes



Background and Overview

In 2019, based on feedback received from the community through multiple forums and stakeholder meetings, AHCCCS announced the decision to transition from three regional crisis lines to a single statewide vendor. The implementation of a single statewide vendor is intended to strengthen the crisis system response capacity, streamline the process for callers to access services in a timely manner, increase consistency in response and follow up across the state, and standardize data tracking and analysis.

Under the AHCCCS Complete Care – Regional Behavioral Health Agreement (ACC-RBHA) contract, Mercy Care, Care1st and AzCH-CCP are to collaborate in selecting a vendor deemed to be best equipped to deliver and ensure delivery of quality, statewide, crisis phone services and continue to advance the delivery of crisis phone services throughout Arizona.

Description of the Process (letter of interest)

Mercy Care, Care1st and AzCH-CCP are jointly issuing an Invitation to Respond for a vendor to serve as the statewide crisis line vendor. Please see the initial letter of interest questions articulated on page 6 of this Invitation to Respond. As part of this process, Mercy Care, Care1st and AzCH-CCP may conduct site visits, interviews, and request additional information as needed to finalize the decision.

The Invitation to Respond submissions will be evaluated based on the strengths and weaknesses of each response in relation to the capability of each potential vendor to provide statewide crisis phone services to any person in Arizona. Mercy Care, Care1st and AzCH-CCP reserve the exclusive right to select the vendor they believe is best suited to advance the delivery of statewide crisis phone services in Arizona.

After a decision is made, the selected vendor will be asked to enter contractual relationships by May 27, 2022, at 5pm MST with Mercy Care, Care1st and AzCH-CCP. If the selected vendor does not complete negotiations with Mercy Care, Care1st and AzCH-CCP by the specified date, negotiations will end with no contract being awarded and with no remedy available to that vendor, and a different vendor will be selected by Mercy Care, Care1st and AzCH-CCP.

Eligibility, Selection Process and Limitations

A potential vendor must have at least three years of crisis phone line and related call center experience to be eligible for consideration. Each potential vendor must submit a letter of interest and respond to the questions articulated at the bottom of this Invitation to Respond. The selection of a vendor to serve as the statewide crisis line services vendor will be based on the information submitted and contained within the responses to this Invitation to Respond, presentations, interviews, site visits, and other sources that Mercy Care, Care1st and AzCH-CCP may consult during the selection process.



In completing the submission, the response should contain:

- a) Essential information for Mercy Care, Care1st and AzCH-CCP to clearly understand the potential vendor's experience, capacity, and approach to optimally manage and provide crisis call center services serving all parts to the State of Arizona
- b) Verifiable evidence of capacity to manage the volume of a statewide crisis call center and perform the services needed in a timely manner.

Invitation to Respond Requirements

This Invitation to Respond includes the following requirements:

- a) Responses to this Invitation to Respond must be submitted on or prior to 12pm MST on March 21, 2022. Late responses will not be considered.
- b) Questions concerning this Invitation to Respond should be submitted via email to AzCHCriticalCare@azcompletehealth.com and crisis@mercycaresaz.org by February 25, 2022, by 5pm MST. Telephonic questions will not be accepted.
- c) Potential vendors must submit two identical copies of their response electronically (via e-mail) in pdf and native file (MS Word, Excel) formats with one set of files for each individual health plan to the following emails: AzCHCriticalCare@azcompletehealth.com and crisis@mercycaresaz.org
- d) Potential vendors shall submit a complete response, with all questions included in the Invitation to Respond thoroughly addressed.
- e) A signed Non-Disclosure Agreement ("NDA") must be submitted with the potential vendor's response, and no redlines or alterations are permissible to that NDA.
- f) Letters of interest should be no more than 40 pages in total. The staffing chart, financial reports, disaster recovery plan, list of reports, financial statements, implementation plan, compliance plan, and the Non-Disclosure Agreement (NDA) do not count toward the 40-page limit. Answers to the Invitation to Respond questions must be submitted in Microsoft Word using 12-pt Times New Roman font, with a one-inch margin on all sides. Responses not adhering to this requirement will not be considered.
- g) Mercy Care, Care1st and AzCH-CCP reserve the right to reject submissions as ineligible that exceed maximum page limits, including maximum page limits per section.
- h) Neither the contents of the Invitation to Respond, nor a response to it, constitute a commitment by Mercy Care, Care1st and/or AzCH-CCP to purchase services or contract with any potential vendor.
- i) All costs, fees, and expenses related to developing and submitting a response are entirely the responsibility of the potential vendor. All information and documents submitted by the potential vendor will become the property of Mercy Care, Care1st and AzCH-CCP and none will be returned to the potential vendor.
- j) Mercy Care, Care1st and AzCH-CCP reserves the right to reject any responses or take exception to any requirement or data provided by a potential vendor.
- k) Mercy Care, Care1st and AzCH-CCP retains all rights to select, request further information from, and negotiate with qualified potential vendors at the discretion of Mercy Care, Care1st and AzCH-CCP.



- l) Mercy Care, Care1st and AzCH-CCP reserve the right to reject any submissions or to terminate negotiations at any time without incurring any obligations to any potential vendor.
- m) Mercy Care, Care1st and AzCH-CCP reserve the right to withdraw this Invitation to Respond at any time before or after submission of letters of interest, without prior notice.
- n) Mercy Care, Care1st and AzCH-CCP assume no responsibility for any representation made by its officers or agents during the Invitation to Respond, or subsequent contract negotiation process with any potential vendor, and by proceeding with this process, each potential vendor understands and agrees that the scope of any potential agreement must be expressly stated in a formal written contract signed by all parties.

Due Diligence, Presentations, Site Tours

Mercy Care, Care1st and AzCH-CCP are providing this Invitation to Respond with the goal of reducing the amount of due diligence needed to be performed by potential vendors to provide adequate responses. The due diligence period is a time for potential vendors to ask questions and get clarification via e-mail. As stated in the Invitation to Respond requirement section, questions concerning this Invitation to Respond should be submitted via email to AzCHCriticalCare@azcompletehealth.com and crisis@mercycaresaz.org on or before February 25, 2022, by 5:00 pm MST. Telephonic questions will not be accepted. Presentations by potential vendors may be requested by Mercy Care, Care 1st and AZCH-CCP. It is possible that some or all potential vendors will not be invited to make a formal presentation. We encourage you to be prepared if you are invited to make a presentation.

Confidentiality of the Response

The response of any potential vendor to this Invitation to Respond shall be subject to the terms of the NDA. No rights of the potential vendor, and no obligations of Mercy Care, Care1st and AzCH-CCP, regarding the confidentiality of information contained in any response to this Invitation to Respond, shall exist outside of the terms and conditions of the NDA.

Estimated Timeline

The general timeline for this process is identified below. Dates are subject to change.

Milestone Date	Event
2/18/22	Invitation to Respond received by potential vendors
3/21/22	Invitation to Respond responses due
3/22/22 to 3/30/22	Invitation to Respond potential vendor discussions / site visits (as applicable)
4/01/22	Selected vendor announced
5/27/2022	Contract Signed
10/1/22	Contract effective date



Invitation to Respond Questions

1. **Corporate Capacity and Experience:** Provide your organization's background including information on each of the following items. **(Maximum of five pages)**
 - a. **Organizational Structure:** Describe entity type, ownership/parent Company, corporate structure, leadership, accountable administrators, clinical supervision, and company accreditation. Include a call center staffing chart indicating job titles, licenses, and job duties. The staffing chart is not included in the page count.
 - b. **Financials:** Describe financial capacity to fund and ensure continuity of services. Include audited financial statements. The financial statements are not included in the page count.
 - c. **Minority Ownership:** Is your company currently certified as a Minority Business Enterprise (MBE) in the State of Arizona? If so, please provide a copy of current certification.
 - d. **Experience:** Experience providing crisis phone line services, including, but not limited to, managing large volumes of crisis calls, oversight, system collaboration with members/families, advocates, healthcare providers, municipalities, schools, as well as lessons learned. Include experience serving veterans and service members, people experiencing homelessness, people living with disabilities (including intellectual/developmental disabilities) children and youth, seniors, tribal communities, adults with a Serious Mental Illness (SMI) determination, LGBTQIA+, justice involved persons, and families served by the child welfare system.
 - e. **Downstream Vendors:** Identify any downstream vendors you utilize to support operations.

2. **Call Center Operations (Maximum of ten pages):** Describe your approach to effectively providing crisis call center services statewide, including urban, suburban, rural and frontier regions, in accordance with AMPM 590 and the SAMHSA National Guidelines for Behavioral Health Crisis Care Best Practice Toolkit, including:
 - a. **Call Center Plan:** Describe capacity and approach to meet and exceed expectations of all communities in Arizona, including urban, suburban, rural, frontier, and tribal lands. Include capacity to meet AHCCCS and Regional Behavioral Health Authority (RBHA) speed of answer requirements, capacity to respond to spikes in demand and ensure callers do not get directed to voice mail. Include how you will support health equity, including health literacy, and how you will ensure services are available in all languages.
 - b. **Call Center Location(s):** Describe specific locations where you will locate your call center(s), including use of out-of-state or partner call centers as appropriate to meet spikes in demand.
 - c. **Technology:** Describe the technological solutions you employ to support your operations, produce efficiencies, reduce human error, and ensure excellent customer service, including culturally appropriate customer service.



- d. **Data Collection, Reporting and Data Integrity:** Describe capacity, experience, and approach to data collection, reporting and data integrity. Include a plan for data sharing in real time with crisis providers and for interfacing with the Arizona HIE consistent with the Crisis Call Hub Services outline in the SAMHSA National Guidelines for Behavioral Health Crisis Care Best Practice Toolkit. Provide in an attachment a list of all reports, how the data is collected, and performance data for each data element for fiscal year 2021-2022. Describe experiences and capacity to demonstrate data integrity, data accuracy and transparency, reference AHCCCS policy AMPM 590, <https://www.azahcccs.gov/PlansProviders/Downloads/RFPInfo/YH20/AMPM590.pdf> Crisis Services, Attachment A. The list of reports will not be included in the page limits.
 - e. **Capacity and Approach to Claims Processing:** Describe capacity and approach to effectively document services, and submit clean claims, including data integrity and self-audit processes.
3. **Quality Management/Quality Improvement Processes (Maximum of two pages):** Describe capacity and approach to monitoring quality service and continuously improve performance and quality of services, including use of complaint information and satisfaction surveys.
 4. **Crisis Provider Coordination (Maximum of seven pages):** Describe your approach and commitment to effectively coordinate services with other crisis providers and ensure maximum benefit to callers. Include how you deploy a trauma-informed approach to care and deliver culturally appropriate care and services (including to those individuals who do not speak English). Also include a discussion of your plans for providing this coordination to meet the needs of veterans and service members, people experiencing homelessness, tribal communities, people living with disabilities (including intellectual/developmental disabilities), LGBTIA+ individuals, justice involved persons, children and youth, and families involved in child welfare, for the items listed below.
 - a. **Crisis Mobile Team Dispatch and Support:** Describe your capacity and approach to dispatch and support crisis mobile team interventions, including ensuring AHCCCS timelines are met statewide, members needs are met, and community-stabilization is maximized.
 - b. **Coordination with Crisis Observation Units (OBS) Units:** Describe your capacity and approach to coordinate with OBS units statewide, generating efficiencies and reducing redundancy.
 - c. **Coordination with 24/7/365 day with alternative levels of care:** Describe your capacity and approach to effectively coordinate with behavioral health facilities statewide and crisis respite opportunities, generating efficiencies and reducing redundancy.
 - d. **Coordination with other crisis lines:** Describe your collaboration with and support of the national 988 Suicide Hotline, including any proposed processes and plans related to texting callers.



- e. **Coordination with Outpatient Providers:** Describe your capacity and approach to collaborating with outpatient providers, including incorporating crisis plans, scheduling appointments, etc.
 - f. **Coordination with EDs:** Describe your capacity and approach to effectively coordinate with EDs statewide, including conducting efforts to support members in the community and reduce the need for inpatient admissions, support bed searches, facilitating placements, and coordinating care.
 - g. **Supporting Peer and Family Run Organizations (PFROs) and Community Based Organizations:** Describe capacity and approach, including coordination with warm lines, tribal warm lines, and teen crisis lines.
 - h. **Court Ordered Evaluation (COE):** Describe capacity and approach to supporting the RBHAs, psychiatric facilities and Counties in the delivery of COE services.
- 5. Coordination with Payers (Maximum of four pages):** Describe your approach and commitment to effectively coordinate services with all payers.
- a. **Coordination with AHCCCS Health Plans, (T)RBHAs, Medicare, and Commercial Insurance Carriers:** Describe your capacity and approach to coordinating effectively with all carriers/payers providing insurance coverage for callers.
 - b. **Coordination with the American Indian Health Program:** Describe your capacity and approach to coordinating effectively with the American Indian Health Program.
 - c. **Coordination with Division of Developmental Disabilities:** Describe your capacity and approach in coordinating effectively with DES/DDD Health Plan including DDD Support Coordinators.
 - d. **Coordination with Department of Child Safety (DCS):** Describe capacity and approach to work effectively with DCS and DCS contracted health plan, and DCS rapid response processes.
 - e. **Benefit and Service Coordination:** Describe your capacity and approach to helping callers enroll in entitlements, access benefits, obtain prescriptions, obtain access to state funded and federal grant funded (such as SABG/MHBG) services and community-based social determinates of health (SDOH) services.
- 6. Coordination with System Partners (Maximum of four pages):** Describe your approach and commitment to effectively coordinate services with all system partners. Include a discussion of your plans for providing this coordination to meet the needs of non-English speaking individuals, veterans and service members, people experiencing homelessness, tribal communities, people living with disabilities (including intellectual/developmental disabilities), LGBTIA+ individuals children and youth, justice involved persons, and families involved in child welfare.
- a. **Coordination with Law Enforcement:** Describe your capacity and approach to coordinating with law enforcement, including local police departments, fire/EMT departments, sheriff departments, tribal law enforcement, and 911 systems.



- b. **Coordination with Tribal Communities and Leadership:** Describe capacity and approach to work effectively with tribal communities.
 - c. **Coordination with School Districts Statewide:** Describe capacity and approach to work effectively with school districts statewide, addressing suicide prevention efforts, Crisis Mobile Team dispatch, and crisis coordination.
7. **Business Continuity and Preparedness (Maximum of three pages):** Describe your approach and commitment to effectively coordinate emergency response services and ensure business continuity:
- a. **Participation in Local Community Crisis Planning and Preparedness:** Describe capacity and approach to work effectively with local communities to support the development of tailored and effective community-based crisis response plans and initiatives.
 - b. **Capacity and Approach to Supporting Emergency Response to Natural Disasters:** Describe capacity and approach to work effectively with emergency response efforts statewide, including fires, floods, etc.
 - c. **Disaster Recovery Program and Redundancy/Business Continuity Plan:** Describe your capacity and approach to address disruptions due to power failures, staff shortages, and catastrophic events, including regional or statewide catastrophic events. Provide a copy of your disaster business continuity plan as an appendix referencing in your narrative where the disaster recovery plan clearly addresses the vulnerabilities addressed in your response. The disaster recovery/business continuity plan is not included in the page count.
8. **Innovations (Maximum of three pages):** Describe innovations you propose to bring to enhance and continually transform and improve crisis phone and coordination services:
- a. Propose **new innovations** you will implement with anticipated outcomes. Do not include innovations currently being utilized.
 - b. **Shared Savings:** Propose two shared savings opportunities you would want the RBHAs to consider improving service delivery and healthcare outcomes. Shared savings opportunities should be tied directly to significant positive outcomes and financial savings impacting the delivery of integrated whole person health care. One proposed shared saving opportunity should be specific to the call center, addressing opportunities for cost savings and system improvement. The other proposed shared saving opportunity should address opportunities for cost savings and system improvement across the health care system. Provide details about how each approach will improve population health, and member and community outcomes, and cost savings.
9. **Additional Differentiators/Value Adds (Maximum of two pages):** Outline any specific capabilities that you feel may set you apart from other potential vendors.



- 10. Implementation Plan:** Provide a detailed implementation plan as an attachment for an October 1, 2022, start date. Include all activities you deem critical for implementation and timeline for completion of each, including but not limited to process flows, staffing plan with notation of local resources vs. out of state resources to be used, collaboration with system partners, and communications plan. The implementation plan is not included in the page requirements.
- 11. Compliance Plan:** Provide a detailed compliance plan as an attachment. Include compliance with HIPAA requirements. The compliance plan is not included in the total page requirements.