



**STATE OF WASHINGTON  
HEALTH CARE AUTHORITY**

**RFP NO. 2020HCA5**

**Amendment #1**

**PROJECT TITLE: 2021 Integrated Managed Care (IMC) – Expanded Access**

**PROPOSAL DUE DATE:** July 1, 2020 by 2:00 p.m. Pacific Time, Olympia, Washington, USA.

Emailed bids will be accepted. Faxed bids will not be accepted.

**ESTIMATED TIME PERIOD FOR CONTRACT:** January 1, 2021 to December 31, 2021

At its sole discretion, HCA reserves the right to extend any contract that might result from this RFP for up to two additional one-year periods.

**The above referenced RFP is amended as follows:**

**1.** Section 1, Introduction, 1.1 Purpose and Background, 1.1.2 is amended to update the list of RSAs as follows:

1.1.2 The following RSAs currently do not have five contracted MCOs:

- Great Rivers
- Greater Columbia
- North Central
- **Pierce**
- Salish
- Southwest
- Spokane
- Thurston-Mason

Under the previous procurement, RFP 2567, HCA established minimum numbers of MCOs in each RSA. And now, through this RFP, HCA is soliciting bids for the purpose of considering expansion of geographical coverage into RSAs where there is significant provider support for additional MCO(s).

This RFP is being released in order to identify MCOs qualified to operate in additional RSAs, effective January 1, 2021 (see Figure A). An MCO that currently has a contract with HCA to provide services in a given RSA does not need to submit a bid in order to continue operating in that RSA. The purpose of this RFP is to award contracts to MCOs for services in additional RSAs (i.e., RSAs in which the MCOs do not currently operate), as determined by the process defined herein.

HCA reserves the right to not enter into any contract at all under this RFP. HCA is under no obligation under this RFP to enter into any contracts with any Bidders, even if a Bidder meets all the qualifications for any given RSA.

2. Section 1, Introduction, 1.2 Objectives and Scope of Work, 1.2.1.2 is amended to read as follows:

- 1.2.1.2 Maintain a network capable of meeting the standards of all covered services, including behavioral health services, as outlined in Attachments 1 and 2. This network must include available behavioral health providers and agencies willing to provide services to Medicaid clients and meet the requirements identified in Sections 3.3 and 4.3, and Bidder should have a plan to improve and expand access to behavioral health services over the course of the contract;

3. Section 1, Introduction, 1.3 Minimum Qualifications, 1.3.1 is amended to correct the due date for the Letter of Intent to Propose, as follows:

- 1.3.1 Submit a Letter of Intent to Propose to HCA by the deadline of **May 4, 2020**, at 2:00 p.m., as identified in Subsection 2.2;

4. Section 3, Proposal Contents, 3.3 Provider Network, 3.3.5 is amended to read as follows:

- 3.3.5 Essential Behavioral Health Providers

The Bidder must demonstrate capacity to provide BH services through established contracts with providers within or outside the RSA, inclusive of the Essential Behavioral Health Providers (listed below). In addition, Bidder's network should include all behavioral health providers, as identified in Department of Health certified Behavioral Health agency providers, willing to contract to serve Medicaid enrollees within each region (<https://www.doh.wa.gov/Portals/1/Documents/Pubs/606019-BHADirectory.pdf>).

- 3.3.5.1 Certified residential treatment providers<sup>1</sup>;

- 3.3.5.2 Licensed Community Mental Health (MH) agencies;

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<sup>1</sup> Certified residential treatment providers: residential programs must have Department of Health (DOH) Residential Treatment Facility (RTF) license and then can apply for Certification for a type of services such as Evaluation and Treatment, Crisis Stabilization, Intensive Inpatient, Recovery House, Long Term, and Detoxification.

- 3.3.5.3 Certified SUD Provider agencies;
- 3.3.5.4 Department of Health (DOH)-certified medication-assisted treatment (e.g., buprenorphine) providers;
- 3.3.5.5 Certified opiate substitution providers (methadone treatment programs);
- 3.3.5.6 Licensed and certified free-standing facilities, hospitals, or psychiatric inpatient facilities that provide Evaluation and Treatment, including Freestanding Evaluation and Treatment facilities;
- 3.3.5.7 Licensed and certified detox facilities (for acute and subacute), including Secure Withdrawal Management and Stabilization facilities;
- 3.3.5.8 Licensed and certified residential treatment facilities to provide crisis stabilization services;
- 3.3.5.9 DBHR-Recognized Wraparound with Intensive Services (WISe) providers; and
- 3.3.5.10 DBHR-Recognized Program for Assertive Community Treatment (PACT) providers for the provision of outpatient behavioral health services, as outlined in the Medicaid State Plan.

**5. Section 4, Evaluation and Contract Award, 4.3 Network Scoring (Pass/Fail), 4.3.2 BH Network Pass, is amended to read as follows:**

- 4.3.2 BH Network Pass. For each bidding region, the Bidder must submit, separated and organized by region:
  - 4.3.2.1 Signed network contracts in accordance with Sections 3.3.5, 3.3.6, and 3.3.7, sufficient to meet the behavioral health needs of enrollees. To receive a passing score for network adequacy: a) contracts with outpatient BH providers must meet the contractually required time and distance standards set in Attachment 1, Draft Sample IMC Contract; and b) the Bidder must provide evidence of contracts with at least one of each of the essential BH provider types listed in 3.3.5, if they are present in a region.
  - 4.3.2.2 An attestation verifying attempts to contract with 100% of the Department of Health certified Behavioral Health agency providers willing to contract to serve Medicaid enrollees within each region (<https://www.doh.wa.gov/Portals/1/Documents/Pubs/606019-BHADirectory.pdf>). A sample attestation document is attached as Exhibit G, Sample BH Attestation. Bidders must include a list with their attestation of all BH provider who are not willing to contract with the Bidder at the time of proposal; and
  - 4.3.2.3 An MOU with the BH-ASO and proof (i.e. dated letter, email with date stamp, etc.) of sent minimum set of standard delegation requirements to the BH-ASO with Proposal, per Section 3.3.8.

6. Exhibit G-1, Sample Behavioral Health (BH) Attestation, supersedes and replaces Exhibit G, and is attached hereto and incorporated herein.

Exhibit G-1  
Sample Behavioral Health (BH) Attestation

I, \_\_\_\_\_ *Insert Bidder Name* \_\_\_\_\_, hereby attest to having attempted in good faith and with due diligence to contract with each behavioral health organized-contracted provider, as identified on the Washington State Department of Health (DOH) website (<https://www.doh.wa.gov/Portals/1/Documents/Pubs/606019-BHADirectory.pdf>), in the \_\_\_\_\_ *Identify RSA(s)* \_\_\_\_\_ Regional Service Area. I further attest to having made, in good faith and with due diligence, an actual and sincere attempt to establish a contract with each provider, which includes a description of services to be provided under the IMC contract and payment methodology specific and appropriate to those services. I further attest that \_\_\_\_\_ *Insert Bidder Name* \_\_\_\_\_ acknowledges and agrees that the awarding of any contract to \_\_\_\_\_ *Insert Bidder Name* \_\_\_\_\_ under this RFP is subject to HCA’s verification and confirmation of these attestations and that HCA may, as a result of its review, decide in its sole discretion not to award the contract.

I, \_\_\_\_\_ *Insert Bidder Name* \_\_\_\_\_ attest to having a network of contracted mental health professionals and chemical dependency professionals that meet the distance standards, as required by Attachment 1, Draft Sample IMC Contract, Section 6.11. In addition, \_\_\_\_\_ *Insert Bidder Name* \_\_\_\_\_ has established contracts with the following providers of crisis stabilization beds:

*(list)*

I further attest that I have the authority on behalf of \_\_\_\_\_ *Insert Bidder Name* \_\_\_\_\_ to make these attestations.

\_\_\_\_\_  
*Bidder Authorized Signatory Name*

*Title*

*Date*