

Mental Health Study: Review and Recommendation of Proposals

by Sue O'Connell
for the Children, Families, Health, and Human Services Interim Committee
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Background

In November 2007, the Children, Families, Health, and Human Services Interim Committee approved the framework for a Request for Proposals (RFP) from consultants who could undertake the \$200,000 mental health study that was included in the budget approved by the 2007 Legislature. The RFP was issued on Nov. 27, 2007, and — based on committee action at the November 2007 meeting — was scheduled to close on Jan. 8, 2007.

However, in consultation with CFHHS Chairwoman Clark, the time period for response was extended to Jan. 15, 2008, when it became apparent that the staff evaluation committee could not meet immediately after a Jan. 8 closing date. Prospective offerors had requested an extension of the deadline, and Chairman Clark and staff felt that providing an additional week would allow them time to more thoroughly address the study tasks.

Seven vendors submitted proposals by the Jan. 15 deadline.

State Procurement Laws and Regulations

Under 18-4-304, MCA, the state may contract for services — such as a study — through a competitive bidding process in which proposals are solicited through the RFP process. The RFP must state the criteria that will be used in reviewing each proposal and the point value given to each criterion. A contract award must be made to "the responsible and responsive offeror whose proposal best meets the evaluation criteria."

By Department of Administration rule, the highest-scoring offeror is the responsible and responsive offeror.

Mental Health Study RFP and Evaluation

The mental health study RFP contained 14 scored areas, worth a total of 1,500 points.

Four staff members — Susan Fox, Lisa Mecklenberg Jackson, Sheri Heffelfinger, and Sue O'Connell — reviewed each of the proposals and then met as an evaluation committee on Jan. 22 to score the proposals. Scores ranged from 1,125 points to 1,445 points.

The highest-scoring offeror was DMA Health Strategies, based in Lexington, Mass. Staff subsequently checked the references provided by DMA.

Staff Recommendation: Based on the score awarded to the DMA Health Strategies proposal and the subsequent reference check, staff recommends that the contract for the mental health study be awarded to DMA Health Strategies.

The attached document provides a description of the company and a summary of its proposal.

DMA Health Strategies

Mental Health Study Proposal

Background

Formerly known as Dougherty Management Associates, Inc., DMA Health Strategies has been in business for 20 years, working with federal, state, and local health and human service clients on a wide range of projects. The firm has worked in more than 20 states, including Montana.

Recent projects include:

- Working with the state of Rhode Island on a redesign of its mental health, child welfare and juvenile justice systems and on a study that analyzed and mapped how the state financed its public mental health services.
- Assisting in an assessment of New Jersey's statewide system of care for children with mental health needs.
- Surveying publicly funded mental health services for children in Washington state.

Montana Mental Health Study

DMA will have a team of seven employees working on the study, including one who, with some assistance, will be collecting and analyzing extensive claims and system use databases. The study team also includes DMA President Richard Dougherty and Principal Wendy Holt.

Dougherty has worked in the consulting business for 23 years on projects involving strategic planning and quality improvement, including: the design and development of the Massachusetts Medicaid Mental Health and Substance Abuse managed care program; work on the first statewide Quality Improvement Collaborative for the Massachusetts Department of Mental Health; and leadership of the Consumer Directed Services Initiative for the federal Substance Abuse and Mental Health Services Administration (SAMHSA).

Holt specializes in managed behavioral health care and public policy analysis for state agencies and human services providers. Recent projects include: the analysis of New Jersey's children's system of care; leading a SAMHSA-sponsored project for materials to support expanded screenings for children in primary care and other settings; and directing the final year of the Children's Mental Health Benchmarking Project for the Annie E. Casey Foundation.

DMA is also subcontracting with the following for various aspects of the study:

- *Policy Research Associates*, a New Jersey-based firm that currently operates the National GAINS Center, which works on jail diversion and other issues involving justice-involved individuals with mental health needs. PRA will address the portion of the study involving mental health needs in the adult and juvenile justice systems.
- *Leslie Schwalbe*, a former deputy director of the Arizona Department of Health Services who has served as a consultant on projects with other states and with the Substance Abuse and Mental Health Services Administration (SAMHSA). She will assist with interviews, focus groups, mental health system options, and financing issues.
- *John O'Brien*, the program director for the Robert Wood Johnson Foundation's Cross System Financing Project and a former associate director of the Technical Assistance Collaborative (TAC). His work with numerous states on studying and improving behavioral health systems included a needs and gaps analysis for New Mexico. He will lead activities involving current and potential financing structures for Montana's mental health system.

Study Elements

The mental health study RFP outlined three tasks that a contractor must complete. Those tasks, and DMA's strategy for accomplishing them, are outlined below.

- ▶ Conduct a needs assessment and resource mapping of Montana's publicly funded mental health services to identify any gaps in services or in the provider community.
 - *DMA will collect and analyze data compiled by various state agencies that indicate who is being served in the publicly funded mental health system, the number of individuals in the justice system with identified mental health needs, and the costs of providing services. Team members also will contact state agency personnel, consumers, and other stakeholders through interviews, focus groups, and/or surveys. The team plans a four-day site visit to Helena in March, a focus group in Billings in April, and other travel identified in cooperation with CFHHS.*
- ▶ Inventory the federal, state, and local funds currently being spent on publicly funded mental health services and identify additional resources that may be available.
 - *In its review of the federal and state funds currently devoted to mental health services in Montana and those funds that may be available but untapped, DMA will evaluate the rules associated with each source and the legislative, regulatory, and other challenges to obtaining or re-directing the funds. Based on the results of the resource mapping task, DMA also will identify where new capacity may be needed in Montana's mental health system and the funds that may be available for those services.*
- ▶ Identify ways in which Montana's existing publicly funded mental health services could be better integrated or coordinated to serve children and adults with mental health needs.
 - *DMA proposes to use the results of its interviews with various stakeholders to identify ways to better integrate existing services. It will review systems in other states, particularly those that have received Transformation State Incentive Grants from the federal government, to identify elements that may be used for a model system in Montana and to identify potential barriers to changes.*

Study Timeline

DMA proposed the following timeline for its activities:

- *February through mid-March:* Review available documents and reports, meet with legislative and state agency staff, and develop a project plan for review and discussion with CFHHS in mid-March.
- *Mid-March through June:* Collect and analyze information from databases and from interviews, focus groups, and surveys. Develop a summary description for the June CFHHS meeting that addresses service needs, an inventory of service resources and capacity, evidence of gaps in services, and barriers to be addressed.
- *July and August:* Compare the current mental health system and its unmet needs to appropriate models that would move the state toward a best-practices mental health system. Identify coordination efforts and financing strategies that could best support a model system. Identify the advantages and disadvantages of the various approaches and present the results of the analysis at the CFHHS meeting in August.
- *September and October:* Based on comments and direction from CFHHS and the Law and Justice Interim Committee, prepare a final report for the October CFHHS meeting that summarizes the assessment of needs and makes recommendations for: filling service gaps; addressing barriers to access and services; maximizing funding; and improving coordination and integration. The report will also detail the work necessary to put the recommendations into place.