

Criminal Justice Behavioral Health Access Projects for the BHT Region

Background

Better Health Together (BHT) is an Accountable Community of Health (ACH) representing a six-county region in Eastern Washington, including Spokane, Lincoln, Adams, Ferry, Pend Oreille, and Stevens counties. BHT's vision is an integrated community health system, accountable to improving health through delivering quality whole-person care and addressing health inequities. Our goals are to:

- improve access to integrated whole-person care;
- optimize the use of community resources;
- and promote health equity for all, by all.

In December 2019, the BHT Board allocated \$2,500,000 from Integrated Managed Care (IMC) funding to address behavioral health access with criminal justice involved individuals, as well as, early intervention and prevention with youth.

Purpose

The intent is to support innovative approaches that work to reduce recidivism, imbed an equitable approach, and improve access to behavioral health services for these populations.

Funding

\$500,000 for rural partners \$1,000,000 for Spokane partners \$1,000,000 for youth-related projects in either rural or Spokane

Goals

Adult* Proposals:

- Proposals should be grounded in the community and reside with a community-based organization(s) not traditional court/jails/criminal justice.
- Focused on reducing recidivism and improving access for criminal justice involved individuals to behavioral health, health care, and SDoH services.

Youth Proposals:

- Focused on prevention and/or early intervention.
- Provide culturally sensitive and appropriate interventions.

BHT Position Statement: Racism is a public health crisis

Racism is not just when a person treats someone else differently because of their race.

Racism is a developed false idea used to justify a culture whose behavior has positioned white people to dominate positions of power while perpetuating avoidable and unjust health outcomes for people of color for over 400 years.

BHT is committed to building an anti-racist community and opposing oppression in all forms – not only to stand against systemic oppression, but to invest in radical change and steward the process that will lead us to a better future.

We commit to critical analysis of how whitesupremacy culture is influencing our decision making, and to acting on opportunities to disrupt cycles of discrimination and oppression.

A note on the evolving equity journey

We have yet to see an anti-racist world, but we believe we can build one. We do not strive for perfection in our equity journey, but an openness to learn and willingness to be moved. We will make mistakes, and those mistakes will help us grow. We strive to build accountability in our work that will prevent and reduce the harm to those who have already been impacted by oppression along the way. We owe so much of our learning to people of color and members of other oppressed groups who have taken on a great burden in sharing their experiences of oppression in order for us to see how we must do better. To that end, we do our best to express our commitment as we know how to live it out today in this document, however, our commitment to anti-oppression work is evolving and how we communicate and activate our commitment to this work will also evolve and grow.



*The community-based organizations applying for the adult proposal will need support from their local criminal justice partners.

Eligibility & Implementation

BHT will offer a two-year competitive RFP process to select eligible organizations. Eligible organizations will meet the following criteria:

- Be based in BHT's region and provide services that address criminal justice prevention, early intervention, or reduces recidivism, benefitting the BHT region's Medicaid population.
- We will accept applications from non-contracted/MOU partners, but they must have local support
 and have understanding of Better Health Together and Medicaid Transformation efforts. If the
 applicant organization already has a clinical Transformation Agreement or Tribal Agreement with
 BHT, the project proposed in this application should represent new work.

Applicant organizations must also:

- Demonstrate that the proposed project is of value to local criminal justice involved population, particularly those experiencing disparities within corrections system.
- Demonstrate that the proposed project has the support of local criminal justice/courts/jails for each county in which the project will operate. (For adult proposal only)
 - This may be in the form of a letter of support from local criminal justice partner(s).
- Demonstrate that BHT funding is not the sole source of financing for the project.
 - BHT will not require a specific proportion of the total budget funds to be from other sources but intends to invest in projects and partnerships that have some external support. Non-BHT funding may be in-kind and does not have to be administered directly by the applicant organization.
- Provide Organizational Equity Statement and commitment.

The review process will be two-fold with a Letter of Interest as the first step. Then, based on the strength of those LOI's, organizations will be asked to present their proposal to a multi-sector volunteer review panel comprised of regional subject matter experts. This panel, which includes BHT, will ask additional questions not included on the LOI and then recommend which proposals should be put in contract.

Successful organizations will be asked to submit AIMS/milestones of the project that will be put in contract and is the basis from which funds will be earned. There is also the expectation that organizations will identify specific health outcomes that can be measured as part of the project and their contract. Organizations will be offered technical assistance, training, and support to make the project successful and should be willing to participate fully. If organizations are not already participating in a local collaborative, they will be required to become a participating member and sign and MOU with the applicable collaborative.

Selection Criteria

BHT will make award decisions based on:

- Project alignment with BHT's vision and goals and with Medicaid Transformation objectives.
- Strength of the proposed project or plan, including how well the project or intervention supports the applicant's goals and the feasibility and appropriateness of the project budget.
- Potential to improve the health status of Medicaid enrollees (or reduce the degree to which socioeconomic factors hinder the effectiveness of clinical services).



Award Information

Award funds will be disbursed to successful applicants as follows:

- 50% of funds will be released at the beginning of the project period
- 25% of funds will be earned for **progress** toward project milestones
- 25% will be earned upon **achievement** of project milestones

Use of Funds

Awards may not be used to directly fund Medicaid-billable services, or services covered in contracts between Medicaid managed care organizations and the clinical partner(s) involved in the project. The expectation from CMS for Initiative 1 DSRIP earned incentives is that providers would reinvest those dollars into their system in positive ways and all investments support the goals of Medicaid Transformation. Acceptable uses of these awards include but are not limited to services, staffing, materials, interpretation or translation, staff training, software or IT tools, and travel.

How to Apply

Stage 1: Letters of Intent

Interested organizations must submit letters of intent to apply. Letters and their details are non-binding but are required to move forward.

Adult Proposals >> click here
Youth Proposals >> click here

Stage 2: Presentations

Based on review of the letters of intent, organizations will be asked to present their proposal to a multisector volunteer review panel comprised of regional subject matter experts. This panel, which includes BHT, will ask additional questions not included on the LOI and then recommend which proposals should be put in contract. BHT will be available to answer questions or provide consultation on preparation of proposals for a short period after invitations to apply are sent out.

Timeline

September 3, 2020 | RFP released
October 9, 2020 | Letters of intent due
October 19, 2020 | Invitation for panel presentation
November 2, 2020 | Webinar to prep for oral presentations
November 16, 2020 | Tentative date for oral presentations of proposed projects
December 1, 2020 | Notification of funding decisions
January 1, 2021 | Contract start date

Ouestions

For questions about this RFP contact:

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