

*Commonwealth of Massachusetts
Executive Office of Health and Human Services
One Ashburton Place, 11th Floor
Boston, MA 02108*

**Request for Information (RFI)
Regarding Western and Central Massachusetts Secure Section 35 Treatment Centers**

Issued: May 31, 2019

Document Number: 19CBEHSSECURESECTION35RFI

Section 1: Overview

The Section 35 Commission was established under chapter 208 of the Acts of 2018. This commission is charged with: studying the efficacy of involuntary inpatient treatment for individuals diagnosed with substance use disorder; and evaluating and developing a proposal for a consistent statewide standard for the medical review of individuals who are involuntarily committed due to an alcohol or substance use disorder pursuant to M.G.L. c. 123, § 35 (Section 35). The Section 35 Commission is chaired by the Secretary of Health and Human Services and is comprised of a diverse panel of legislators, policymakers, public health professionals, legal scholars, clinicians, and residents.

During a Section 35 Commission discussion, questions were raised about whether the provider community in Western and Central Massachusetts would be willing to provide treatment services to individuals committed for treatment under Section 35. A purpose of this RFI is to seek information responsive to those questions. EOHHS will provide responses to this RFI to the Commission and may use responses it receives to inform any future procurement EOHHS, or an EOHHS agency, decides to issue for secure Section 35 treatment centers in Western and Central Massachusetts.

Section 2. Background

The availability of treatment resources is a critical part of any effective response to the epidemic of opioid addiction in Massachusetts. Section 35 allows for the adjudication of short-term civil commitment of individuals who are clinically assessed to be at risk of serious harm as a result of a diagnosed substance use disorder. Providers of involuntary treatment services in Section 35 treatment centers, must be licensed by the Commonwealth of Massachusetts Department of Public Health, Bureau of Substance Addiction Services (DPH/BSAS) pursuant to 105 CMR 164. These providers in Section 35 treatment centers must be able to provide Acute Treatment Services (ATS) and Clinical Stabilization Services (CSS), and to provide client engagement in a fully secured environment. Such providers must also connect all clients with continuing treatment and recovery options, such as residential rehabilitation, outpatient services and other community-based services and supports that promote recovery. Further, providers in Section 35 treatment centers must provide Medication Assisted Treatment (MAT), connect clients to MAT providers in the community upon discharge, and connect clients to and track recovery support services in the community, for at least six months following release, such as recovery coaches and community support programming (CSP). Finally, providers in Section 35 treatment centers must have the capacity to bill third party payers, including public and private insurance, and to assist eligible individuals with enrolling into a health insurance plan.

Additional minimum requirements for Section 35 treatment centers include:

- Ability to locate in Western or Central Massachusetts;
- Compliance with building and fire codes for a fully secure treatment facility;
- Provision of exterior and grounds security to prevent elopement;
- Being a therapeutic and secure environment for individuals involuntarily committed for treatment; and
- Having insurance liability coverage

EOHHS pays providers in Section 35 treatment centers rates established by EOHHS and set forth in 101 CMR 346. As of the date of this RFI, those rates are \$340.32 for ATS and \$247.82 for CSS per client bed day, plus an add-on rate of \$36.03.

Please feel free to respond to only those questions on which you would like to provide input. Please submit your response, according to the instructions provided in **Section 5**, no later than **12:00 PM on June 20, 2019**. EOHHS encourages you to respond and thanks you in advance for your participation.

Section 3: Questions for Response

Please respond to the following questions:

1. If the Executive Office of Health and Human Services (EOHHS), or one of its agencies, issued a procurement to purchase Section 35 bed capacity in Western and Central Massachusetts, for men and women, do you expect that your agency would submit a proposal?
2. What factors would be most important in influencing whether your agency would submit a proposal?
3. Where in Western and Central Massachusetts would you expect to locate your treatment center?
4. If awarded a contract, how long do you expect that it would take your agency to begin delivering treatment services?

Section 4: RFI Respondent Information

Please respond to the following questions with respect to the Respondent:

1. What is your name, agency/organization, address, email address, and URL?
2. What is your affiliation or interest?
3. In what geographic areas in Massachusetts do you currently provide services?

Section 5: RFI Response Instructions

A. Response Submission Instructions

All responses to this RFI are due no later than **12:00 PM on June 20, 2019**. Responses may be submitted in one of the following ways:

- By email to: Louis.DeLena@massmail.state.ma.us, placing “RFI: Western and Central Massachusetts Secure Section 35 Treatment Centers” in the subject line; or
- In writing to:
Louis DeLena
Procurement Coordinator
Executive Office of Health and Human Services
One Ashburton Place, 11th Floor
Boston, MA 02108
RE: RFI: Western and Central Massachusetts Secure Section 35 Treatment Centers

B. Format

All parties interested in responding to this RFI (Respondents) should prepare an electronically submitted response or a typewritten response to the questions listed in **Sections 3 and 4** above. EOHHS prefers to receive electronic submissions but will also accept typewritten responses. Any typewritten response should be double-sided/single-spaced. Parties responding in hard copy should submit one original and one copy of their Response.

Interested parties are invited to respond to any or all of the RFI questions; please respond to as many as you feel are appropriate. Responses should be clearly labeled.

Section 6: Additional RFI Information

A. RFI Questions

Interested parties may submit written questions concerning this RFI until no later than **June 7, 2019**. Written questions must be sent to the RFI Contact at the e-mail address listed in **Section 5.A**.

B. COMMBUYS Market Center

COMMBUYS is the official source of information for this RFI and is publicly accessible at no charge at www.commbuys.com. Interested parties are solely responsible for obtaining all information distributed for this RFI via COMMBUYS. It is each interested party's responsibility to check COMMBUYS for any amendments, addenda, modifications to this RFI and any related document. The Commonwealth accepts no responsibility and will provide no accommodation to interested parties who submit a Response based on out-of-date information received from any source other than COMMBUYS. Interested parties may elect to obtain a free COMMBUYS Seller subscription which provides value-added features, including automated email notification associated with postings and modifications to COMMBUYS records. To learn more about the COMMBUYS system, please visit the COMMBUYS Resource Center. Questions specific to COMMBUYS should be made to the COMMBUYS Help Desk at commbuys@state.ma.us.

C. Communications

Interested parties are prohibited from communicating directly with any employee of EOHHS or any of its constituent agencies with regard to the subject matter of this RFI except as specified above, and no other individual Commonwealth employee or representative is authorized to provide any information or respond to any question or inquiry concerning this RFI. Interested parties may contact the RFI contact person in **Section 5.A** above in the event the interested party is having trouble obtaining any documents or attachments electronically through COMMBUYS.

D. RFI Amendments

Interested parties are solely responsible for checking COMMBUYS for any addenda or modifications that are subsequently made to this RFI. The Commonwealth and its subdivisions accept no liability and will provide no accommodation to interested parties who fail to check for amended RFIs.

E. Costs

By submitting a Response, Respondents agree that any cost incurred in responding to this RFI, or in support of activities associated with this RFI, shall be the sole responsibility of the Respondent. EOHHS shall not be held responsible for any costs incurred by Respondents in preparing their respective Responses to this RFI.

F. Use of RFI Information

Please note that this RFI is issued solely for the purpose of obtaining information. The RFI does not obligate EOHHS to issue a RFR nor to include any of the RFI provisions or responses in any RFR. No part of the response to this RFI can be returned. Receipt of RFI responses will not be acknowledged. Information received in response to this RFI shall serve solely to assist the Commonwealth in the development of policy. No information received in response to this RFI is binding on the Commonwealth or any of its agencies. Responding to this RFI is voluntary and will not affect consideration of any proposal submitted in response to any subsequent procurement or solicitation. Responses to this RFI become the property of the Commonwealth of Massachusetts and, except as otherwise provided in this **Section 6.F**, are public records under the Massachusetts Freedom of Information Law, M.G.L.c.66, section 10 and c.4, section 7, clause 26, regarding public access to such documents. Information provided in response to this RFI and identified by the Respondent as trade secrets or commercial or financial information, or which EOHHS has determined is such, shall be kept confidential to the extent permitted by law and shall be considered by EOHHS as exempt from disclosure as a public record (see Massachusetts General Laws, Chapter 4, section 7(26)(g)). This exemption may not apply to information submitted in response to any subsequent procurement solicitations.

Responses to this RFI may be reviewed and evaluated by any person(s) at the discretion of EOHHS, including independent consultants retained by EOHHS now or in the future. EOHHS retains the right to request additional information from any Respondent. EOHHS may, at its sole discretion, elect to request formal presentations from certain Respondents and/or create an RFR based, at least in part, on the Responses received from this RFI. EOHHS may request further explanation or clarification from any and all Respondents during the review process.

1. Arbour Hospital and Arbour Counseling Services intend to submit a joint proposal
2. Our proposal would take into account RFR specific requirements for medical, clinical, and security coverage. Our expectation is that the RFR will state requirements in detail.
3. The treatment center could be located in the Worcester area, and we have begun to look at available properties that can provide the security and safety required.
4. The center could be operational in three to six months.
5. The two organizations collaborating on this proposal are:

Arbour Hospital

URL: arbourhospital.com

Arbour Counseling Services

Email: John.Fletcher@uhsinc.com

Cell: 617 959 0149

URL: arbourhealth.com

6. Our organizations currently provide services to the population which include:
 - inpatient and partial hospitalization
 - Structured Outpatient Addiction Programs at all outpatient sites,
 - DAE and multiple offender programs at the Worcester Center as well as other locations,
 - Community based services to include Recovery Coaches and Recovery Navigators. Teams are located in Worcester, Lowell, Boston, and Fall River
 7. Arbour Counseling Services provides care through 9 locations which cover Eastern Massachusetts. The locations are:
 - 411 Chandler Street, Worcester
 - 10 Bridge Street, Lowell
 - 116 Summer Street, Haverhill
 - 100 George P. Hasset Drive, Medford
 - 10-I Roessler Road, Woburn
 - 14 Fordham Road, Allston
 - 38 Pond Street, Franklin
 - 1082 Davol Street, Fall River
 - 384 Washington Street, Norwell
- Arbour Hospital has locations at:
- Arbour Hospital, 49 Robinwood Avenue, Jamaica Plain 02130
- Quincy Center, 460 Quincy Avenue, 02169
- Arbour Counseling JP, 157 Green Street

What is your name, agency/organization, address, email address, and URL?

Rose Evans, Vice President of Behavioral Health Network, Inc., 417 Liberty Street, Springfield, MA 01104, rose.evans@bhninc.org, www.bhninc.org

What is your affiliation or interest? BHN established its first Substance Use Disorder outpatient clinic and ATS over 11 years ago. Since that time, BHN has successfully added a variety of substance abuse services throughout the Springfield/Holyoke and Greenfield areas, including

- Opioid Treatment Program-at Liberty Street Clinic in Springfield
- Medication Assisted Treatment_Transitional Addiction Treatment Program in Springfield in collaboration with Providence Behavioral Health Hospital and Baystate Health System
- Residential for men, women and families-3 programs in Springfield: My Sisters House prioritizes pregnant and post-partum women, Opportunity House and Cole's Place (Section 35 for men), all in Springfield – 98 beds
- Two-tiered Jail Diversion Program: 3-month residential recovery home in Greenfield with 9-months state-wide, community-based, non-masters level case management and peer support services
- ASAM Level 3.1 co-occurring enhanced residential recovery home, 16-beds-New program in Greenfield
- Outpatient-11 clinics in Springfield, Holyoke, Agawam, Westfield and Ware
 - One SUD primary treatment at Sloan Clinic within Carlson Recovery Center
- Intensive Outpatient Program-at Liberty Street Clinic
- Forensic Services to all Western MA Drug Court Sessions: Springfield, Pittsfield, Greenfield and Orange
- MISSION services in the Springfield Mental Health Court Session for co-occurring SUD and mental illness.
- MISSION services in Franklin County Family Drug Court. BHN delivers comprehensive, trauma-informed case management as well as integrated assessment, treatment and wrap-around services.
- 1st and 2nd Offender DUI Classes-regionally
- Federal Probation SUD Outpatient Services, ATS and Residential Recovery Homes,
- FUSE-family substance use support group
- The Living Room-peer support program in Springfield. Many persons wait for ATS beds here. This is not a residential program but people may rest overnight.

These are not SUD specific, but many persons with co-occurring mental health and SUD come here:

- Partial Hospitalization Program-at Liberty Street Clinic
- Day Treatment-at Liberty Street Clinic

Specific to this RFI, BHN currently provides 64 beds in two Acute Treatment Services programs: Carlson Recovery Center, 471 Chestnut Street in Springfield (32 beds) and Franklin Recovery Center, 298 Federal Street, Greenfield (32 beds and Section 35 for women). BHN ATS programs administer Methadone, Suboxone and Vivitrol.

BHN currently provides 64 beds in two Clinical Stabilization Services programs: Hope Center, 35 Heywood Street in Springfield (32 beds) and Northern Hope Center, 298 Federal Street, Greenfield (32 beds and Section 35 for women).

BHN has capacity and interest in increasing our service provision for persons entering our ATS and CSS programs via Section 35 for either men or women. We are able to add Section 35 capacity for men in addition to our current position of serving women.

ACCREDITATIONS

We have many employees throughout our continuum of services with a wealth of experience and knowledge in providing high quality services to the Substance Use Disordered population. Many of our program staff are in recovery. All of our clinical programs are accredited by CARF, licensed by the DPH, DMH, EEC, or DDS, and are well respected by our payer sources throughout the Commonwealth. BHN has contractual relationships with insurers, MCO's and Medicaid that insure most individuals living in Mass, enabling those who seek service to use insurance to pay for their care.

In what geographic areas in Massachusetts do you currently provide services?

We serve all four Western MA counties, with program locations in Agawam, Greenfield, Holyoke, Springfield, Ware, and Westfield.

Please respond to the following questions:

If the Executive Office of Health and Human Services (EOHHS), or one of its agencies, issued a procurement to purchase Section 35 bed capacity in Western and Central Massachusetts, for men and women, do you expect that your agency would submit a proposal?

Yes.

What factors would be most important in influencing whether your agency would submit a proposal?

BHN would likely propose adding capacity at all of our ATS and CSS program sites, negotiating capital funds to make security improvements and create additional bedroom and clinical space.

Where in Western and Central Massachusetts would you expect to locate your treatment center?

Greenfield and Springfield. BHN would be open to further discussion of locating ATS or CSS (including Section 35) in other BHN service areas.

If awarded a contract, how long do you expect that it would take your agency to begin delivering treatment services?

BHN anticipates a 3-6 month start up period to manage infrastructure upgrades in order to address the risk of elopement.

Request for Information (RFI)

Regarding Western and central Massachusetts Secure Section 35 Treatment Centers

Document Number: 19CBEHSSECURESECTION35RFI

Questions for Response

Question 1:

Our institution would plan to respond to a procurement to add Section 35 bed capacity in Western Mass for men and women. Berkshire Medical Center currently operates a level 3.7 ATS detox unit licensed by DPH/BASAS and would welcome the opportunity to add Section 35 beds to our current service line. This would allow clients the opportunity to receive this level of care closer to home and involve their families and other support systems into their recovery process. We also operate a CSS unit adjacent to our main campus. These units are licensed by DPH/BSAS.

Question 2:

There are limited factors that would influence our submission of a proposal. This service would be added to our substance use and behavioral health service line.

Question 3:

Our treatment center is located at Berkshire Medical Center in Central Berkshire County, Pittsfield, Massachusetts. This is a central location accessible to communities throughout Berkshire County. Berkshire is one of the lower socioeconomic class counties in the state with a large influx of opioids and other substances. The location of the medical center would make it easily accessible to support services that could help ensure continued recovery after treatment is completed.

Question 4:

It would take, on average, approximately three months to begin delivering services. We already have a secure treatment environment established. We would need time to train staff and develop policies to cover the delivery of high quality services to this population.

RFI Respondent Information

Question 1:

Shannon McCarthy, LCSW, LADC, MSW

Berkshire Health Systems/Berkshire Medical Center

725 North Street

Pittsfield, Ma. 01201

Email address: SMcCarthy@bhs1.org

URL: www.berkshirehealthsystem.org

CHD Response to RFI: Western and Central Massachusetts Secure Section 35 Treatment Centers

Section 3: Questions for Response

Please respond to the following questions:

- 1. If the Executive Office of Health and Human Services (EOHHS), or one of its agencies, issued a procurement to purchase Section 35 bed capacity in Western and Central Massachusetts, for men and women, do you expect that your agency would submit a proposal?**

Yes, CHD is interested in further developing its continuum of care for individuals with mental health and substance use disorders, including Section 35 commitments. CHD has four residential treatment programs that serve adults and adolescents who are Section 35 committed: Two Rivers Recovery Center for Women (Greenfield), Astor House (East Longmeadow), Grace House (East Hampton) and Goodwin House (Chicopee). The specific populations served is discussed below, in Section 4, Number 3.

- 2. What factors would be most important in influencing whether your agency would submit a proposal?**

CHD would consider many factors on submission, including but not limited to:

- EOHHS siting considerations,
- Availability of start-up cost reimbursement,
- Needed renovations to meet security requirements,
- Licensing timelines, and
- Financial viability.

- 3. Where in Western and Central Massachusetts would you expect to locate your treatment center?**

CHD provides human service, behavioral health and substance abuse programming throughout Western Massachusetts, with primary service delivery in Hampden, Worcester, Hampshire, and Franklin Counties. We would particularly look to site the program in the Springfield, Holyoke, and Chicopee areas. These areas are in high need with increasing numbers of deaths by opioid overdoses; by locating in this area we can address the treatment need and the agency would be able to provide individuals in recovery post-treatment with access to our extensive network of outpatient clinics, community supports, and peer recovery resources.

- 4. If awarded a contract, how long do you expect that it would take your agency to begin delivering treatment services?**

CHD has extensive successful experience implementing new programs for a variety of state funders, including DPH, BSAS, DCF, DSS, DMH, DYS, and CT-DMHAS. CHD's strong organizational and administrative resources enable efficient and timely development of safe, appropriately sized, clinically effective sites. CHD retains a realtor to assist in site location, and has relationships with numerous contractors to provide required renovations, as well as in-house capacity. In the past year, we have opened a residential treatment program for persons with

CHD Response to RFI: Western and Central Massachusetts Secure Section 35 Treatment Centers

enhanced, co-occurring disorders in East Longmeadow, three ACCS residential houses for adults with mental health issues, and are relocating a division administrative office. All new locations met zoning and occupancy requirement, fire code, and licensing requirements per funder and internal timelines. The agency's property portfolio is extensive. We currently operate over 135 program and administrative locations throughout Western Massachusetts and Connecticut, 50 are owned. In addition to the mental health and substance use disorder program location discussed below, CHD has over 350 service locations, including: 25 group homes for adult with ID/D, 6 group homes for adolescents in the care of DCF, 7 CT-DMHAS residential programs, 3 residential programs for DYS, and numerous scattered-site supervised apartments and community support locations.

Subject to many of the conditions cited above and given our organizational capacity, we anticipate it would take six months to open and ready to deliver services, depending on site location, zoning procedures, and licensing processes.

Section 4: RFI Respondent Information

Please respond to the following questions with respect to the Respondent:

1. What is your name, agency/organization, address, email address, and URL?

James Goodwin, President and CEO
Center for Human Development
332 Birnie Avenue
Springfield MA 01107
jgoodwin@chd.org
www.chd.org

2. What is your affiliation or interest?

CHD is a not for profit, human service organization that provides integrated behavioral health/substance abuse services throughout Western Massachusetts in both residential, community-based and outpatient treatment settings licensed by the Commonwealth. A CARF certified organization, CHD is committed to the provision of high quality, evidenced-based treatment modalities for persons with mental health and substance abuse issues.

CHD's recovery philosophy is one that promotes recovery and empowerment and overall health and well-being through treatment that is person and family centered and trauma-informed through the use of evidence-based practices that are culturally and linguistically competent. CHD recovery services meet the person where they are at in the recovery process; there is no wrong door or wrong path to recovery. Recovery is a life-long process that is real and possible.

CHD instills hope and the possibility of recovery through its strength-based and person-centered assessment, treatment planning and case management processes. Staff work collaboratively with individuals and their families to identify and emphasize strengths that become evident in assessment and weave these into individual action plans, goals and objectives that support

CHD Response to RFI: Western and Central Massachusetts Secure Section 35 Treatment Centers

recovery. Through the case management process, staff provide supports necessary for recovery, independent living, social and cultural relationships, and health wellness. Peer specialists are embedded in programs and work alongside direct care staff to share their life experiences and inspire individuals in recovery. Our integrated team fosters a real working relationship with the individual that motivates them in their recovery.

CHD employs SAMSHA-endorsed, evidence-based practices in its delivery of services. Staff use Motivational Interviewing to engage individuals in making change and working towards their recovery goals and objectives. We design interventions that are trauma-informed based upon SAMSHA's Six Key Principles of a Trauma-Informed Approach: 1) Safety, 2) Trustworthiness and Transparency, 3) Peer Support, 4) Collaboration and Mutuality, 5) Empowerment, Voice, and Choice, and 6) Cultural, Historical, and Gender Issues.

By using a person-centered approach, CHD's clinical staff enters into a collaborative relationship with persons served whereby staff support self-assessments and self-determination of goals and objectives. This treatment plans developed are changed and modified as the person transitions to various stages of recovery.

CHD believes it can offer a complete continuum of care for persons discharged from the Section 35 commitment through the range of mental health and substance use disorder treatment services and supports it can offer in the community. This continuum is outlined in Question 3.

3. In what geographic areas in Massachusetts do you currently provide services?

CHD currently provides outpatient and residential mental health and substance abuse programming throughout Western Massachusetts and can provide a continuum of care for persons in recovery or maintenance when they reenter the community. As a Section 35 provider of ATS and CSS services, our existing residential, outpatient clinics and community-based supports provide a natural continuum of care for maintenance and/or recovery. This continuum includes:

- Eight outpatient clinics in West Springfield, Worcester, Easthampton, Springfield, Holyoke (2), Greenfield and Orange.
- Community-based recovery coaches and community support services that can provide additional services for individuals who are Section 35 committed individuals as they re-enter the community. These services support the persons in recovery and address social determinates of health.
- Residential treatment programs include:
 - Two Rivers Recovery Center for Women, a residential treatment program for pregnant and post-partum women in recovery and their children located in Greenfield*
 - Grace House, a residential treatment program for pregnant and post-partum women in recovery and their children located in Easthampton, *
 - Astor House, a residential treatment program for individuals with enhanced, co-occurring disorders in East Longmeadow, *
 - Goodwin House, a residential treatment program for adolescent males with substance use disorders in Chicopee, *

CHD Response to RFI: Western and Central Massachusetts Secure Section 35 Treatment Centers

*Program accepts Section 35 referrals once medically stable and cleared.

In summation CHD has the clinical ability and capacity to implement this program.

CHD:

- can site the program in Western or Central Massachusetts;
- has a history of siting with compliance with building and fire codes for a fully secure treatment facility;
- can provide exterior and grounds security to prevent elopement;
- can secure third party payments;
- can provide a therapeutic and secure environment for individuals involuntarily committed for treatment; and,
- has insurance liability coverage.

June 20, 2019

Louis DeLena
Procurement Coordinator
Executive Office of Health and Human Services
One Ashburton Place, 11th Floor
Boston, MA 02108

RE: RFI: Western and Central Massachusetts Secure Section 35 Treatment Centers

Dear Mr. DeLena,

I write from Community Healthlink, Inc., in response to your above mentioned RFI.

Section 3: Questions for Response

Please respond to the following questions:

- 1. If the Executive Office of Health and Human Services (EOHHS), or one of its agencies, issued a procurement to purchase Section 35 bed capacity in Western and Central Massachusetts, for men and women, do you expect that your agency would submit a proposal?**

We would not submit a proposal.

- 2. What factors would be most important in influencing whether your agency would submit a proposal?**

Treatment for substance abuse is treatment for a complex medical condition. As such we do not believe that incarceration or a punitive-like environment is either trauma informed or appropriate in getting to the heart of successful treatment for substance use. In the situation for Section 35, there is a legal element to entering treatment. The proposed treatment setting milieu would have requirements to manage access in and out of the program, report to courts and potentially a responsibility/liability around what happens with such patients. To support that type of a model and staffing pattern to ensure that level of safety would require a significant increase in staffing and therefore funding. It's not clear if the funding is connected to this proposal would be sustainable in an ongoing way.

3. Where in Western and Central Massachusetts would you expect to locate your treatment center?

N/A

4. If awarded a contract, how long do you expect that it would take your agency to begin delivering treatment services?

N/A

Section 4: RFI Respondent Information

Please respond to the following questions with respect to the Respondent:

1. What is your name, agency/organization, address, email address, and URL?

Community Healthlink
72 Jaques Avenue
Worcester, MA 01610

Contact:

Sarah Loy, Director of Communications and Resource Development
sloy@communityhealthlink.org

www.communityhealthlink.org

2. What is your affiliation or interest?

CHL contracts with BSAS to provide an array of addiction treatment services, including multiple levels of inpatient care (Acute Treatment Services, Clinical Stabilization Services, and Transitional Support Services), several Residential Recovery Services programs, and Motivating Youth Recovery, a detoxification and stabilization program for adolescent youth. We also provide robust outpatient addiction treatment services, including medication assisted treatment (MAT). We also operate an innovative Behavioral Health and Addiction Urgent Care center, which is open 24 hours a day, 7 days a week and provides walk-in triage, assessment, and referral for anyone seeking assistance for mental health or addiction issues.

We continually look for opportunities to enhance the addiction treatment related services we are able to offer our clients.

3. In what geographic areas in Massachusetts do you currently provide services?

CHL provides services throughout central Massachusetts, particularly in the Worcester area and the north central part of Worcester County.

Section 3: Questions for Response

Please respond to the following questions:

1. If the Executive Office of Health and Human Services (EOHHS), or one of its agencies, issued a procurement to purchase Section 35 bed capacity in Western and Central Massachusetts, for men and women, do you expect that your agency would submit a proposal?
 - a. Yes. The Hampden County Sheriff's Department (HCSD) would submit a proposal to continue operating our existing Section 35 program that currently has 117 beds and serves men from the 5 western counties of Massachusetts. The Hampden County Sheriff's Department would be willing to make changes to meet EOHHS guidelines to become a licensed facility. Beginning on September 1, 2019 the HCSD will also have a licensed Opioid Treatment Program within our facilities. In the one year that the Section 35 program has been operational in Ludlow and Springfield, the HCSD has treated over 750 men with an average stay of 49 days. We have also been able to treat these men at a fraction of the cost of current DPH licensed facilities in MA due to our existing infrastructure. We foresee this will hold true should we be allowed to continue treating men and hopefully begin to treat women from the 5 western counties of MA.
2. What factors would be most important in influencing whether your agency would submit a proposal?
 - a. The Hampden County Sheriff's Department serves the people of Hampden County and Western Massachusetts. We do not believe that any factors would deter us from submitting a proposal and seeking licensure. In the year that we have been operational, we have had a tremendous amount of support from the courts, law enforcement, families and the clients themselves. There is a tremendous need for this program in Western Massachusetts and given our success in treating over 750 men, we strongly believe we are the best and most prepared agency to operate a Section 35 program for both men and women. Additionally, we know that having a secure treatment facility, particularly during the detoxification period, is critical to the success of a treatment program. In a recent DPH meeting where Section 35 statistics were discussed, it was noted that DPH facilities had 200 elopements in a year period, most occurring within the first week of treatment. With our model, there are no elopements within the first week of treatment and we are able to treat for longer periods of time. Currently we are averaging between 48 and 49 days of treatment.
3. Where in Western and Central Massachusetts would you expect to locate your treatment center?
 - a. Treatment for men would continue at the Stonybrook Stabilization and Treatment Centers located in Ludlow and Springfield. We would explore options in Hampden County, a central point for the counties of Worcester,

Berkshire, Franklin and Hampshire, to open a treatment center for women. With the many relationships the HCSD has with the community and our partners, we have full confidence that we can locate a facility to begin to treat women if necessary.

4. If awarded a contract, how long do you expect that it would take your agency to begin delivering treatment services?
 - a. Our Section 35 treatment centers for men are currently operational. Should the HCSD be licensed to provide treatment for women, we believe we could be operational within 1-2 months if we are allowed to operate at one of our minimum security facilities. If we are required to open up a new, standalone facility, our timeline for opening would be dependent on the build out of such facility.

Section 4: RFI Respondent Information

Please respond to the following questions with respect to the Respondent:

1. What is your name, agency/organization, address, email address, and URL?
 - a. Hampden County Sheriff's Department
 - b. 627 Randall Rd, Ludlow, MA
 - c. Katie.fitzgerald@sdh.state.ma.us
 - d. <http://hcsdma.org/>
2. What is your affiliation or interest?
 - a. The only interest of the HCSD is to serve the people of Western Massachusetts.
3. In what geographic areas in Massachusetts do you currently provide services?
 - a. Our treatment centers are in Hampden County – Ludlow and Springfield, but we currently treat men and women from the 5 western counties of Massachusetts.

"RFI: Western and Central Massachusetts Secure Section 35 Treatment Centers"

From: kevin.burchill@steward.org

To: "Louis.DeLena@massmail.state.ma.us" <Louis.DeLena@massmail.state.ma.us>

Cc: "Nardella, Jason" <Jason.Nardella@steward.org>

Sent: June 19, 2019 1:48:26 PM, EDT

Attachments: image001.gif (7KB)

June 19, 2019

Louis DeLena
Procurement Coordinator
Executive Office of Health and Human Services
One Ashburton Place, 11th Floor
Boston, MA 02108

RE: RFI: Western and Central Massachusetts Secure Section 35 Treatment Centers

Dear Mr. DeLena:

Please consider this as a response to the above-captioned RFI, on behalf of Steward Health Care System (**submission in red**); CC'g our VP/Business Development for the North East Division of Steward.

Section 3: Questions for Response

Please respond to the following questions:

1. If the Executive Office of Health and Human Services (EOHHS), or one of its agencies, issued a procurement to purchase Section 35 bed capacity in Western and Central Massachusetts, for men and women, do you expect that your agency would submit a proposal?
Yes, on behalf of Steward Health Care System, we could expect to submit a proposal for S.35 beds in Central Massachusetts.
1. What factors would be most important in influencing whether your agency would submit a proposal?
Beyond the then in effect per diem rates for ATS and CCS levels of care, a capital add-on methodology to offset design and building retrofitting costs for licensure and start-up would be required for us to consider this service expansion.
1. Where in Western and Central Massachusetts would you expect to locate your treatment center?
Ayer, at Nashoba Valley Medical Center.
1. If awarded a contract, how long do you expect that it would take your agency to begin delivering treatment services?
Construction/building retrofitting and start up staffing would be our timeline to licensure and opening – estimated to be 6 months after successful award and contracting (including capital add-on).

Section 4: RFI Respondent Information

Please respond to the following questions with respect to the Respondent:


1. What is your name, agency/organization, address, email address, and URL?
**Steward Health Care System c/o, Nashoba Valley Medical Center, 200 Groton Road, Ayer, MA 01420 <https://www.nashobamed.org>
My position and contact information is below in my signature line for any follow-up.**
1. What is your affiliation or interest?
Steward Health Care System has an array of behavioral health and substance use disorder programs at our inpatient and outpatient sites, as well as in our primary care and specialty physician offices (Steward Medical Group and other doing business as local names) and clinics and also provided through our accountable care organization (Steward Health Choice) to its members.
1. In what geographic areas in Massachusetts do you currently provide services?
Hospital services areas: Southcoast (Fall River); SE Mass. (Taunton, Brockton, and Stoughton); Metro Boston (Dorchester and Brighton); Suburban Boston (Norwood); Central Mass. (Ayer); and Merrimack Valley (Methuen and Haverhill). In addition, we have physician practices throughout Massachusetts (Steward Medical Group) and a Medicaid ACO of some 120k lives that overlaps our hospital service areas as well as Worcester County and The Cape (through Steward Health Care Network).

Section 5: RFI Response Instructions**A. Response Submission Instructions**All responses to this RFI are due no later than **12:00 PM on June 20, 2019.**

/s/

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