

REQUEST FOR INFORMATION
Management Services for
Residential and Therapeutic Foster Care Services

- 1. Will the youth be referred to the Administrator or to the TFC/NMGH programs directly?**
 - Youth will be referred to the Administrator who will work with the Regional Placement Specialist in locating a placement for the youth.
- 2. Is the Administrator responsible for Intake activities?**
 - The administrator is expected to receive information that will inform securing the most appropriate placement.
- 3. Who finds the bed for the youth, the Administrator or the State?**
 - The Administrator will be responsible to provide placement options and opportunities, the final decision will be made by DCFS.
- 4. Will the youth still have a DCFS worker assigned to complete court reports, family visits and permanency plans?**
 - Yes, the DCFS worker role will not change.
- 5. Will the state pay the placement agency directly or the administrator who will contract with and pay the Placement Agency?**
 - Payment will go to the Administrator.
- 6. Are there set rates for TFC Beds and NMGH Beds? If so, can you provide those?**
 - The current rates are
 - TFC \$65.71
 - NMGH \$ 125.63
- 7. Will the Administrator have any fiscal responsibility if a TFC/NMGH bed is not available?**
 - This has not yet been determined.
- 8. What percentage of youth are placed out of their parish of origin?**
 - DCFS cannot provide this information. This report would require building a specialized report that cannot be accomplished within this timeframe.
- 9. It would be helpful to know specifically where the programs are so that we know how much travel would be required to function as the Administrator.**
 - The programs are located throughout the nine DCFS regions of the state at the current time.

NMGH facilities per region

Region	# of NMGHs
New Orleans	6
Baton Rouge	3
Covington	2
Thibodaux	6
Lafayette	1
Lake Charles	2

Alexandria	2
Shreveport	2
Monroe	0

Child Placing Agencies per region

Region	# of Child Placing Agencies
New Orleans	3
Baton Rouge	3
Covington	0
Thibodaux	1
Lafayette	1
Lake Charles	1
Alexandria	0
Shreveport	2
Monroe	0

10. Are there any regions that need capacity building and will the administrator be responsible for recruiting to build this capacity?

- Yes, the administrator is responsible for building the network of providers. Currently the network of residential and child placing agencies is more dense in the southern regions of the state, and could be enhanced in the northern regions.
- The managing entity will be responsible to develop and maintain a network of providers who are able to meet the needs of the special population served by DCFS, including youth who: are victims of human trafficking; are medically fragile; are lesbian/ gay/ bisexual/ transgender/ questioning (LGBTQ), have behavioral health challenges, exhibit conduct disorder; are delinquent; are sexually aggressive; and who are aging out of the child welfare system.

11. Will there be any financial penalty to the Administrator if a youth exceeds the normal length of stay?

- The length of stay at the NMGH and TFC levels of care is based on need. When it becomes evident that a youth is ready to be stepped down, it is expected that the administrator will notify DCFS and work with the Department so a transition can be planned and managed. The Administrator will be paid for the duration that a child or youth is in a TFC or NMGH placement.

12. Does the state have the foster home capacity to accept youth who are ready for stepdown? Are there any incentives for CPA's to take these high need children as a stepdown?

- The availability of stepdown destinations is ever changing. DCFS is always working to develop foster care resources.
- Special board compensation remains available to homes that qualify.

13. Who is responsible for finding the bed for the youth to stepdown?

- That depends on the level of care into which the child is stepping down. If a child is stepping down into the TFC or NMGH level of care, then the administrator will be responsible for finding the bed for the youth. If the stepdown destination is an alternate level of care, DCFS will be responsible for finding the stepdown destination.

14. What percentage of the Child Placement Agencies have non-TFC homes?

- No Child Placement Agencies have non-TFC homes.
- However, there are times when a Therapeutic Foster Care home may have a private foster care youth in their home, when the youth is a sibling of a child who is in need of therapeutic foster care services.

15. Page 7: Non-Medical Group Home bed capacity is listed as 180. How many homes does this represent?

- Twenty-three (23)

16. Page 7: NMGH Capacity: Please specify NMGH average for youth per home.

- The number of youth per home differs among Providers. At this time, current distribution
 - 8 providers are contracted for 4 beds
 - 1 provider are contracted for 6 beds
 - 1 provider are contracted for 7 beds
 - 4 providers are contracted for 8 beds
 - 2 providers are contracted for 10 beds
 - 1 provider are contracted for 11 beds
 - 1 provider are contracted for 12 beds
 - 1 provider are contracted for 14 beds
 - 1 provider are contracted for 15 beds
 - 2 providers are contracted for 16 beds

17. Page 8: Proposals are due by November 20th, 2015. Is it possible to extend this deadline considering the amount of information required for the response?

- It is not possible to extend the deadline.

18. Page 8: Can the response be submitted via email?

- No

19. Would it be a conflict of interest for a current provider of Medicaid services to additionally serve as the Management Entity for Residential and Therapeutic Foster Care Services?

- This question should be addressed to Medicaid.

20. Is this RFI suggesting that the Management Entity directly provide case management for youth with a focus on returning the youth to a home setting or would the Management Entity oversee the case management services provided by the NMGH/TFC? Are there any care management requirements anticipated for this program?

- It is expected that the Management Entity oversee the case management services provided by the NMGH/TFC.

21. Can DCFS provide the current average length of stay for youth in these settings?

- DCFS cannot provide this information. This report would require building a specialized report that cannot be accomplished within this timeframe.

- 22. With regards to proposing a reimbursement schematic, is this RFI asking for a schematic by which DCFS reimburses the Management Entity?**
- Yes. Please propose how you conceive reimbursement would flow throughout the entire cascade of parties participating in the reimbursement process.
- 23. As it appears there is an overlap with this program and Bayou Health Plan membership. Please confirm that DCFS and DHHS do not believe there is a conflict of interest for Bayou Health MCOs that may be potential respondents to this RFI.**
- DCFS cannot offer an opinion or a confirmation on behalf of DHH.
- 24. Please provide utilization profile/patterns for the Residential Non-Medical Group Home (NMGH) and Therapeutic Foster Care (TFC) levels of care including average length of stay, children being served annually/daily by level of care, and/or back log prevalence of a waiting list at any given point in time.**
- Currently the NMGH occupancy is typically maintained at 80%, serving approximately 150 youth on a daily basis. TFC beds are typically maintained at 90%, serving approximately 200 youth on a daily basis,
 - Bed usage in these levels of care is very fluid.
- 25. On page 3 of the RFI, the State is seeking for respondents to provide claims management services. Please confirm how providers are currently paid and how does the State anticipate providers being paid under the proposed contract.**
- Currently payment is managed by the State Management Organization. It is not definitive how this process will be managed in the future.
- 26. Are there any provider capacity or access issues that need to be addressed during program implementation or ongoing program administration?**
- Attention is needed to increase capacity of providers to manage the care for youth with complex behavioral health concerns.
- 27. Please expand further what the State is seeking regarding Respondents' proposed reimbursement schematic requirement. Is the State seeking proposed methods of reimbursing the selected administrative entity?**
- Respondents are encouraged to propose reimbursement schematics.
- 28. What standards does the State currently use to credential and/or recognize TFCs and NMGHs?**
- Please see licensing standards licensing at <http://www.dcfsl.a.gov/index.cfm?md=pagebuilder&tmp=home&nid=179&pnid=0&pid=298>

29. For purposes of continuity of care, is it anticipated that the vendor will contract with the existing NMGH and TFC Providers, or it is anticipated that the vendor will reproduce both provider networks?

- It is anticipated that the vendor will contract with the existing NMGH and TFC Providers.

30. Is it anticipated that the vendor will oversee and manage the progress of the children and youth in Non-Medical Group Homes and in Therapeutic Foster Homes through pre-admission screenings, concurrent reviews or similar processes, or is the focus more on tracking bed capacity and expanding capacity of Therapeutic Foster Homes?

- DCFS expects the vendor to assume the full array of responsibilities to successfully oversee and manage the progress of the children and youth and to successfully manage the provider network.

31. Currently, do NMGH and TFC Providers submit information on census and occupancy through electronic channels to LBHP or DCFS? If so, will DCFS provide sample screen shots of the provider portal?

- No, daily census and occupancy information is not submitted through electronic channels to DCFS, nor is it provided to DCFS via LBHP.

32. For SFY2014 and SFY2015 will DCFS provide the following data:

- **Total State and Federal spend for this population**
- **Unique individuals who were served during these time periods**
- **How many total days were covered during those time periods**
- **How many individuals were “waited listed” at the beginning and end of each of those time periods.**
 - DCFS cannot provide this information. This report would require building a specialized report that cannot be accomplished within this timeframe.

33. Will DCFS please provide the following provider network lists:

- **LBHP provider network from August 2015, that included 22 NMGH and 10 TFC Providers**
 - In August 2013, LBHP provider network included
 - NMGH Providers
 - AB HORN HOME
 - BOYS AND GIRLS VILLAGES FNDTN
 - BOYS TOWN LOUISIANAINC BEHRMAN
 - BRAGG ST GRP HOME
 - CANE RIV CHILD SVCSINC
 - CHANGES GRP HOME
 - FATHER FLANAGANS BOYS TOWN BIENV
 - FATHER FLANAGANS BOYS TOWN IN NEW
 - FATHER FLANAGANS CITY PARK HOUSE

- HARBOUR HOUSE ETC EMER SHELTER
 - HARMONY III GRP HOME
 - JESSE DOTEY YTH DEVCTR
 - LIGHT HOUSE RANCH FOR BOYS INC
 - LIGHTHOUSE MINISTRIES INC
 - LOUIS INFNT CRISIS CTR
 - LOUIS INFNT CRISIS CTR CHATEAU
 - MACDONELL UNTD METHDST CHILD
 - OPTIONS FOR INDPDNCHOOOPER DORM
 - RAINTREE SVCS INC RAINTREE HOUSE
 - THE AGAPE HOUSE CRFII
 - THE AGAPE HOUSE LLC
 - YOUTH OASIS
- TFC Providers
 - CANE RIV CHILD SVCSINC
 - GULF COAST SCL SVCSBATON ROUGE
 - GULF COAST SCL SVCSHOUMA OFC
 - GULF COAST SCL SVCSNEW ORLEANS REG
 - LOUISIANA MENTOR
 - LOUISIANA MENTOR
 - LOUISIANA MENTOR
 - RAINTREE SVCS
 - THE KENNEDY CTR OF LOUISIANA
 - THERAPEUTIC FMLY SVCS
- **Current DCFS Providers selected by DCFS**
 - At this time, information cannot be provided for TFCs. DCFS is involved in an active solicitation process for this level of care.
 - At this time, DCFS has offered contracts the following NMGH providers:
 - HARBOUR HOUSE
 - CANE RIVER CHILDREN'S SERVICES
 - LAFOURCHE PARISH JUVENILE JUSTICE
 - BOYS TOWN MAGAZINE
 - BOYSTOWN CITYPARK
 - BOYS TOWN BEHRMAN
 - BOYS TOWN BIENVILLE
 - RENAISSANCE
 - THE AGAPE HOUSE LAFAYETTE
 - THE AGAPE HOUSE NOLA
 - HARMONY CENTER BRAGG STREET
 - HARMONY CENTER AB HORN
 - MACDONELL UNTD METHODIST CHILD

- RAINTREE SVCS INC RAINTREE HOUSE
- LOUIS CRISIS CENTER CHATEAU
- BOYS AND GIRLS VILLIAGE
- LOUIS INFANT CRISIS CTR EL PASO
- LOUIS INFANT CRISIS CTR MIDLAND
- OPTIONS HOOPER DORM
- HARMONY CENTER III
- YOUTH OASIS
- LIGHTHOUSE RANCH FOR BOYS
- JESSE DOTEY YOUTH DEVELOPMENT CENTER

34. Page 3 of the RFI indicates that the entity will be required to certify providers. However, it is our understanding that the State currently licenses MNGH and TFC Providers. Please confirm the following:

- **Will the awarded entity have additional criteria to certify existing or new providers?**
- **If additional certification is required, can DCFS provide the additional criteria that the vendor must follow?**
 - These details have not yet been determined. This will be addressed in the Scope of Work of the RFP.

35. Will DCFS provide the number of admissions and discharges by level of care for the past 12 months, by provider and by geographical area?

- DCFS cannot provide this information. This report would require building a specialized report that cannot be accomplished within this timeframe.

36. Please confirm if this contract is only for children who are in the custody of DCFS or Juvenile Justice, or does it include children who are voluntarily placed that would require additional administrative or reimbursement processes?

- This contract is only for children in the custody of DCFS.