

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
Behavioral Health and Developmental Disabilities Administration
Children and Adults with Autism Spectrum Disorder Section

University Autism Programs
Request for Proposal

Released: August 3, 2015
Application Due Date: August 28, 2015

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Respondents must meet submission requirements in this Request for Proposal (RFP) to be considered for a contract with the Michigan Department of Health and Human Services (MDHHS). Failure to comply with the requirements will disqualify respondents without further consideration. Each respondent is responsible for the preparation and submission of a proposal in accordance with the instructions. It is recommended the entire RFP be read before preparing the proposal.

BACKGROUND AND PURPOSE:

This University Autism Program grant opportunity is being issued by the Children and Adults with Autism Spectrum Disorder (ASD) Section within the Michigan Department of Health and Human Services. The purpose of this grant opportunity is to fund universities to increase the number of applied behavior analysis (ABA) therapists, autism diagnostic centers, autism applied behavior analysis treatment centers, employment programs placing individuals with ASD in paid positions, and ASD clinical training for primary care providers.

In October 2012, Michigan required all state-regulated private insurance health plans (for profit, HMO and non-profit) to cover diagnosis and all medically necessary treatments for children with ASD through 18 years of age. The children are required to have an evaluation by a licensed physician or licensed psychologist to determine the treatments medically necessary. Treatments covered by this mandate include evidence-based behavioral health treatment (including ABA therapy), pharmacy, psychiatry, psychology and therapeutic care (speech therapy, occupational therapy). Although many health plans offered these services within a mental health benefit, children with ASD were not consistently approved for services. The low number of clinicians with skills to complete the diagnostic evaluations and clinicians to provide ABA services has caused a delay in both diagnosis and delivery of ABA services for children with ASD. Six months after the insurance mandate, Michigan Medicaid Services added ABA to their array of services for children ages 18 months through 5 years old. The number of autism evaluation centers has grown from 2 in 2012 to 15 in 2015; however, the wait for a diagnostic evaluation is 3 to 24 months. The number of Board Certified Behavior Analysts (BCBAs) has increased from 118 in 2012 to 303 to date; however, there is still a need for more BCBAs, board certified assistant behavior analysts and behavior technicians. Michigan is committed to improving the timeliness of services for children with ASD ages 0-18 with an ultimate goal of all children with ASD receiving services within 4 months of the initial call to clinicians' offices. The number of individuals with ASD acquiring paid employment is also a priority of Michigan.

The MDHHS ASD Section aligns priorities with the Michigan ASD State Plan's recommendations, the data analysis from commercial health plans, Medicaid plans, and Prepaid Inpatient Health Plans to assure children receive diagnostic evaluations and treatment as intended through the 2012 ASD insurance mandate and Medicaid policy. The MDHHS is submitting a policy to the Centers for Medicare and Medicaid (CMS) to expand the Medicaid ABA services from ages 18 months through 5 years to ages 0 through 20. This expansion will allow Michigan to provide all medically necessary services for children with ASD and be in full compliance with guidelines from CMS. The challenge is the shortage of therapists trained in applied behavior analysis (ABA) in Michigan; therefore it is imperative for MDHHS to work with universities and higher learning institutes in expanding our number of well-trained clinicians and trained behavioral professionals.

The proposals funded will be distributed to address the following Michigan ASD Metrics by September 2016:

- Increase the number of Board Certified Behavior Analysts to 450 (from 303)
- Increase the number of students seeking a master's degree in ABA to 180 (from 120)
- Increase the number of Board Certified Assistant Behavior Analysts to 50 (from 13)
- Increase the number of Registered Behavior Technicians to 300 (from 108)
- Expand the number of children receiving ABA within Medicaid system to 1,500 (from 980)
- Increase the number of children receiving diagnostic evaluations
- Increase the number of people with ASD ages 16 and older who obtain paid employment
- Increase the number of primary practices/medical homes/health centers who are conducting ASD screenings and referring/treating children with ASD
- Increase the number of clinicians with skills to diagnosis children with ASD symptoms and evaluate children with ASD

The Centers for Disease Control and Prevention reports approximately 1 in 68 children are diagnosed with ASD in the United States. The Michigan Department of Education reports 17,986 children with ASD in special education during the 2014-15 school year and the annual growth rate has been 7 to 8 percent in the last 5 years.

Universities submitting a proposal under this RFP are encouraged to review ASD demographics, service and clinical needs, and key partnering agencies in the targeted regions or statewide based on the items to be included in the RFP.

Technical Requirements:

Eligibility

Eligible applicants are limited to institutions of higher education (including two and four-year colleges/universities, graduate schools) accredited with campuses in Michigan. Public, private and state institutions of higher education are eligible for consideration of funding.

Funding Scope

The funds for ASD metrics are intended to have direct and immediate effect for the ASD population in Michigan. This competitive RFP will fund an array of programs to meet the ASD Metrics outlined in the background and purpose section. Due to the limited funding, it is not guaranteed all of the metrics will be funded in fiscal year 2016. The funding must be used for new or expanded ASD initiatives interventions and to supplement current efforts to meet ASD metrics. The funding cannot supplant existing funds for services currently being provided at the university. The funding cannot be granted to university projects, services and programs currently being funded by the State of Michigan within this grant period. The proposal funding must correlate with the number of people provided with services.

The RFP will be a competitive process and expects to award the grantees for a three year funding cycle from November 1, 2015 through September 30, 2016, with opportunities to continue to receiving funding through

September 30, 2018. Contracts for the two additional years are contingent upon the State of Michigan 2017 and 2018 budgets including university autism programs. Program progress will be evaluated by MDHHS on an annual basis to determine viability for continued funding for each grantee. Supplemental statements of work and budgets will be required for final approval annually.

The total of grant funds is \$2.5M for fiscal year 2016. MDHHS expects to award \$2.5M for the period November 1, 2015 through September 30, 2016 and all funds must be spent by September 30, 2016. The awards are expected to be between \$250,000 and \$1,000,000 in the fiscal year 2016. MDHHS' intention is to award a minimum of three universities.

Match Requirement

Applicants will be required to provide 25 percent match for the total funds requested each year. The match must be provided between November 1, 2015 and September 30, 2016. Match may consist of (1) cash, (2) tangible items supplied/purchased, (3) in kind staff time, (4) space/rent/lease, or (5) combination of items listed 1-4 contributed by the applicant, partner, donation or other funding source. Items not allowed for match include meeting rooms, food, fringe benefits, indirect costs, conference registration/travel/attendance, and professional education.

Administrative Guidelines

- Type of Contract – This contract will be a cost reimbursement contract.
- Incurring Costs – The MDHHS is not liable for any costs incurred by the applicant prior to issuance of a contract fully signed by all parties.
- Rejection of Proposal – The MDHHS reserves the right to reject any and all proposals in full or in part received or to negotiate with any source in any manner necessary to serve the best interests of the MDHHS, the State of Michigan, and its citizens. The contents of this RFP will become contractual obligations if a contract ensues. Failure of the Grantee to accept these obligations may result in cancellation of the award.
- Notification of Award – All applicants will be notified in writing of the results of the selection process.
- Grantee Responsibilities – An applicant whose proposal has been selected for contract will be required to assume responsibility for all services offered in their proposal. Moreover, the contractor shall indemnify and hold harmless the MDHHS and its agents and employees from and against all claims, damages, losses, and expenses including attorneys' fees arising or resulting from the performance of work, which includes all labor, material, and equipment required to produce the service required by the contract. The MDHHS will consider the selected applicant to be the sole point of contact with regard to contractual matters, including payment of any and all charges resulting from the contract. All subcontracts entered into by the applicant, subsequent to the contract award, must have prior approval by the MDHHS.

Grantee Expectations

- Collaborate with MDHHS and present updates at conferences, webinars and venues to educate stakeholders.

- When projects supported by this contract produce brochures, books, films, or other copyrightable materials issued by the applicant, the applicant must provide the MDHHS and their agents with royalty-free, exclusive, and irrevocable right to reproduce, publish, or otherwise use and to authorize others with prior MDHHS approval to use any copyrighted or copyrightable materials developed fully or in part under the grant.
- Acknowledge receipt of support from the MDHHS with logo or name in all programs and produced materials, events, articles or publications that result from the grant. The full name Michigan Department of Health and Human Services should be written out; abbreviations or acronyms such as “MDHHS” are not acceptable on printed materials.
- Maintain adequate program and fiscal records and files including source documentation to support program activities and all expenditures made under the terms of the grant.
- Provide quarterly progress reports to the MDHHS.
- Participate in up to five meetings within a fiscal year.
- Participate in a minimum of two site visits.
- Contract Payment Schedule – Financial status reports, which reflect actual expenditures, shall be prepared and submitted to the MDHHS on a monthly basis for payment. All reports should reflect actual work that has been completed. The payment schedule will be established with significant project benchmarks. Specific details of invoices and payments will be agreed upon between the MDHHS and the contractor after the proposed Grantee Agreement has been signed and accepted by both the contractor and the MDHHS.

Proposal Guidelines

The applicant must submit a narrative proposal which includes the applicant contact information, project abstract, FY 2016 ASD Metrics Narrative, FY 2017 and 2018 ASD Metrics Narrative, statement of work, sustainability plan, budget justification, budget forms, and letters of support. The proposal should be double-spaced with a 12-point font and 1-inch margins, and no more than 12 pages. The cover page, statement of work, budget justification, budget forms, and letters of support do not count toward the 12 page limit. The statement of work and budget must be prepared using the forms included in appendices of this RFP.

Proposal Submission and Due Date

All proposals are due by 12:00 PM on August 28, 2015. Proposals must be sent in one email to Lisa Grost at grostl@michigan.gov. Late proposals will **NOT** be considered. An email will be sent to the applicant to confirm receipt of the proposal. If an applicant submits a proposal and does not receive a confirmation on or before September 1, 2015 at 12:00 PM, please contact Lisa Grost at (517) 241-0678.

Letter of Intent

Universities intending to submit a proposal must submit a brief letter of intent including the university’s name, contact person, ASD metrics to be targeted within the forthcoming proposal, and estimated total budget via email to Lisa Grost at grostl@michigan.gov by August 10, 2015.

Questions

MDHHS will provide an opportunity to submit questions for this RFP. All RFP questions are to be submitted before Monday, August 10, 2015 at 12 p.m. to Lisa Grost, ASD Manager, at grostl@michigan.gov. The questions submitted in writing electronically before this deadline will be included in an “Questions and Answers to the University Autism Program RFP” posting by August 12, 2015 at 5 p.m. at

www.michigan.gov/autism and http://www.michigan.gov/mdch/0,1607,7-132-2946_43858---,00.html. It is possible the posting may be updated during the time frame of August 3 through August 12, 2015.

Proposal Content and Review Criteria:

Applicant Contact Information – Cover Page (not scored)

- 2016 University Programs Proposal
- Applicant name (university name)
- Total amount of funding requested
- Name of contact person (one staff only) and title
- Address, telephone number, fax number
- E-mail address

Project Abstract (10 points)

Provide a succinct summary of the proposed ASD Metric objectives and outcomes. This should be a description of the entire proposal including the ASD Metrics the university is addressing in the proposal, methods intended to accomplish the objectives and measurable deliverables, source(s) of matching funds, as well as, the university's past ASD accomplishments and any current ASD activities, including source of funds, complementing the metrics for this funding. This summary should be suitable for dissemination to the public and be one page or less in length.

Review Criteria

- Are the ASD metrics in the abstract?
- Are the objectives and measureable deliverables listed?
- Is the source of match in the abstract?
- Are the university's ASD complimentary activities and source of funds listed?
- Is the abstract one page or less in length?

FY 2016 ASD Metrics Narrative (50 points)

In the narrative include the ASD metrics, measureable objectives, detailed description of the activities, targeted age for the objectives, location of the population (including statewide, Prepaid Inpatient Health Plan Region(s) and/or Prosperity Region(s)), university departments implementing the objectives, and involved partners/stakeholders. The proposal must include the measurable contribution to each ASD metric incorporated in the proposal and long-term impact for the Michigan ASD population. A description of the method the applicant will use to track the data for reporting on each ASD metric needs to be included in the narrative. The proposal needs to contain the university's and/or stakeholders' complementary activities for each objective, as well as, the total cost for each ASD metric included in the proposal.

Review Criteria

- Are the ASD metrics described and supported by the objectives?
- Do the proposed objectives contribute to an ASD metric listed within the Purpose Section of this Proposal?
- Do the objectives include measureable ASD outcomes?
- Are the activities described in detail of the measureable outcomes to be achieved by September 30, 2016?

- Are the populations clearly stated for each objective including the age range and location (statewide, PIHP, and/or Prosperity Region)?
- Do the objectives include the university's departments and stakeholders involved in the ASD metric?
- Is there a description of the tracking method for each ASD metric?
- Is the long-term impact for the Michigan ASD population described in the proposal?
- Are there any university and/or stakeholders' complementary activities?
- Is there a total cost for each ASD metric?
- Is the amount of funding for the ASD metrics reasonable given the number of individuals to be reached and expected outcomes?

FY 2017 and FY 2018 ASD Metrics Narrative (30 points)

In the narrative include the ASD metrics, measureable objectives, activities to implement the objectives, targeted age for the objectives, location of the population (including statewide, Prepaid Inpatient Health Plan Region(s) and/or Prosperity Region(s)), university departments implementing the objectives, and involved partners/stakeholders. The proposal must include the measurable contribution to each ASD metric, method of tracking each metric, as well as, an estimated total cost for each ASD metric included in the following two years of the proposal.

Review Criteria

- Do the proposed objectives contribute to an ASD metric listed within the Purpose Section of this Proposal?
- Do the objectives include measureable ASD outcomes?
- Are the activities described in detail to be achieved by end of the proposed fiscal year(s)?
- Are the populations clearly stated for each objective including the age range and location (statewide, PIHP, and/or Prosperity Region)?
- Do the objectives include the university's departments and stakeholders involved in the ASD metric?
- Is the measurable contribution to each ASD metric proposed contained in the proposal?
- Is there a description of the tracking method for each ASD metric?
- Is there an estimated total cost for each ASD metric?
- Is the amount of funding for the ASD metrics reasonable given the number of individuals to be reached and expected outcomes?

FY 2016 – 2018 ASD Metrics Statement of Work (30 points)

Complete the Statement of Work included in the appendix of this RFP. The Statement of Work must reflect the ASD Metrics Narrative described in the previous two sections. This will be utilized for the formal contract of the awarded universities.

Review Criteria

- Does the Statement of Work include all ASD Metrics proposed in FYs 2016, 2017 and 2018?
- Are the measurable objectives and activities aligning with key items necessary to achieve the ASD metric goals within this proposal?
- Is it stated the work will begin November 1, 2015 with objectives met by September 30, 2016 for FY 2016 ASD metrics?
- Are the staff identified in the FY 2016 activities?
- Are the deliverables listed reasonable items and evidence of the completion of the activities?
- Are all elements of the work plans completed in full?

- Is it stated that objectives for FY 2017-2018 will begin on October 1, 2016 and October 1, 2017, and be met by September 30, 2017 and September 30, 2018, respectively?

Sustainability Plan (10 points)

Describe plans to sustain the proposed interventions within this proposal, how the university will financially support ASD metrics, future ASD goals, funding sources, and key stakeholders to assist in implementing objectives without financial support from MDHHS.

Review Criteria

- Are there viable funds to support the sustainability of the ASD metrics?
- Does the plan include diverse funding sources?
- Are stakeholders involved in the sustainability of the plan?
- Is it clear the role the university will have for the ASD population in Michigan in the future?

Budget Justification (10 points)

Provide an outline and detailed description of budget for each ASD metric proposed in FY 2016 including staffing, travel, supplies and materials, contractual, equipment, and match. Include an estimated total without a detailed description for FY 2017 and FY 2018 ASD metrics. Complete the budget form in the appendix for FY 2016 only.

Review Criteria

- Does the applicant include justification for all items listed on the budget?
- Is the justification of expenses reasonable and necessary to complete ASD metrics?
- Does the applicant identify the appropriate match of total requested funds and the source of it?
- Is the amount of staffing requested to be funded by this proposal sufficient but not excessive to complete ASD metrics?
- Is the budget form included for FY 2016 only?

Letters of Support (10 points)

Attach letters of support from the key department head (s), partnering agency (s) and stakeholder (s) who the university will be collaborating with on the outcomes.

Review Criteria

- Is there a letter from each department head, partnering agency and stakeholder listed in the narrative for implementing the ASD metric activities?
- Do the letters of support demonstrate the department or agencies' understanding of their role in the process?
- Are letters of support indicating match or other resources being provided for the projects?

APPENDIX

Appendix A: Statement of Work

November 1, 2015 – September 30, 2016

Goal: (ASD Metric)

Methodology: Activities, Responsible Individual(s), Timeline and Deliverable(s)

Activity (s)	Responsible Individual(s)	Timeline	Deliverable(s)
Objective			
Objective			
Objective			
Objective			

STATEMENT OF WORK

October 1, 2016 – September 30, 2017

Goal: (ASD Metric)

Methodology: Activities, Responsible Individual(s), Timeline and Deliverable(s)

Activity (s)	Responsible Individual(s)	Timeline	Deliverable(s)
Objective			
Objective			
Objective			
Objective			
Objective			

STATEMENT OF WORK

October 1, 2017 – September 30, 2018

Goal: (ASD Metric)

Methodology: Activities, Responsible Individual(s), Timeline and Deliverable(s)

Activity (s)	Responsible Individual(s)	Timeline	Deliverable(s)
Objective			
Objective			
Objective			
Objective			
Objective			

Appendix B: Budget Form

PROPOSED PROGRAM BUDGET SUMMARY

View at 100% or Larger

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

November 1, 2015 – September 30, 2016

Use WHOLE DOLLARS Only

PROGRAM			DATE PREPARED	Page	Of
GRANTEE NAME			BUDGET PERIOD		
MAILING ADDRESS (Number and Street)			BUDGET AGREEMENT	AMENDMENT #	
CITY	STATE	ZIP CODE	FEDERAL ID NUMBER		
EXPENDITURE CATEGORY					TOTAL BUDGET (Use Whole Dollars)
1. SALARIES & WAGES					
2. FRINGE BENEFITS					
3. TRAVEL					
4. SUPPLIES & MATERIALS					
5. CONTRACTUAL (Subcontracts/Subrecipients)					
6. EQUIPMENT					
7. OTHER EXPENSES					
8. TOTAL DIRECT EXPENDITURES (Sum of Lines 1-7)			\$0	\$0	\$0
9. INDIRECT COSTS: Rate #1 %					

INDIRECT COSTS: Rate #2 %				
10. TOTAL EXPENDITURES	\$0	\$0	\$0	\$0

SOURCE OF FUNDS

11. FEES & COLLECTIONS				
12. STATE AGREEMENT				Error! Reference source not found.
13. LOCAL				
14. FEDERAL				
15. OTHER(S)				
16. TOTAL FUNDING	\$0	\$0	\$0	\$0

AUTHORITY: P.A. 368 of 1978	The Michigan Department of Health and Human Services is an equal opportunity employer, services and programs provider.
COMPLETION: Is Voluntary, but is required as a condition of funding	
DCH-0385 FY 2015/2016 6/15(W) Previous Editions Obsolete	

PROGRAM BUDGET – COST DETAIL SCHEDULE

View at 100% or Larger

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

Page

Use WHOLE DOLLARS Only

PROGRAM		BUDGET PERIOD		DATE PREPARED
		From: Error! Reference source not found.	To: Error! Reference source not found.	
GRANTEE NAME		BUDGET AGREEMENT <input type="checkbox"/> ORIGINAL <input type="checkbox"/> AMENDMENT		AMENDMENT #
1. SALARY & WAGES POSITION DESCRIPTION	COMMENTS	POSITIONS REQUIRED	TOTAL SALARY	
			\$0	
			\$0	
			\$0	
			\$0	
			\$0	
			\$0	
			\$0	
1. TOTAL SALARIES & WAGES:		0	\$ 0	
2. FRINGE BENEFITS (Specify)				
<input type="checkbox"/> FICA	<input type="checkbox"/> LIFE INS.	<input type="checkbox"/> DENTAL INS.	COMPOSITE RATE	
<input type="checkbox"/> UNEMPLOY INS.	<input type="checkbox"/> VISION INS.	<input type="checkbox"/> WORK COMP.	AMOUNT 0.00%	
<input type="checkbox"/> RETIREMENT	<input type="checkbox"/> HEARING INS.			
<input type="checkbox"/> HOSPITAL INS.	<input type="checkbox"/> OTHER (specify) _____			
2. TOTAL FRINGE BENEFITS:				
				\$0
3. TRAVEL (Specify if category exceeds 10% of Total Expenditures)				

4. SUPPLIES & MATERIALS (Specify if category exceeds 10% of Total Expenditures)		
5. CONTRACTUAL (Specify Subcontracts/Subrecipients)		
<u>Name</u>	<u>Address</u>	<u>Amount</u>
6. EQUIPMENT (Specify items)		
		6. TOTAL EQUIPMENT:
7. OTHER EXPENSES (Specify if category exceeds 10% of Total Expenditures)		
		7. TOTAL OTHER:
		\$0
8. TOTAL DIRECT EXPENDITURES (Sum of Totals 1-7)		8. TOTAL DIRECT EXPENDITURES:
		\$ 0
9. INDIRECT COST CALCULATIONS	Rate #1: Description	Base \$0 X Rate 0.0000 % Total
	Rate #2: Description	Base \$0 X Rate 0.0000 % Total
		\$ 0
		\$ 0
		9. TOTAL INDIRECT EXPENDITURES:
		\$ 0
10. TOTAL EXPENDITURES (Sum of lines 8-9)		\$ 0
AUTHORITY: P.A. 368 of 1978		The Michigan Department of Health and Human Services is an equal opportunity employer, services and programs provider.
COMPLETION: Is Voluntary, but is required as a condition of funding		
DCH-0386 (E) (Rev 6/15) (W) Previous Edition Obsolete. Use Additional Sheets as Needed		

Appendix C: Resources

Resource	Website
ASD Legislation	Public Act 99: http://www.legislature.mi.gov/documents/2011-2012/publicact/pdf/2012-PA-0099.pdf Public Act 100: http://www.legislature.mi.gov/documents/2011-2012/publicact/pdf/2012-PA-0100.pdf
Michigan Autism State Plan	http://www.michigan.gov/documents/autism/ASDStatePlan_2_19_13_Final_414143_7.pdf
Michigan Autism Program Website	http://www.michigan.gov/autism
Michigan Department of Education, Individual Education Plans	https://www.mischooldata.org/
Blue Cross Blue Shield, Approved Autism Evaluation Centers	http://www.bcbsm.com/content/dam/public/Common/Documents/approved-autism-evaluation-centers.pdf Letter of Intent: https://ereferrals.bcbsm.com/Letter_of_Intent_to_Request_RFP_AAECs_No_Deadline.pdf
Behavior Analysis Certification Board	http://www.bacb.com/
State of Michigan Prosperity Regions	http://www.michigan.gov/dtmb/0,5552,7-150-66155---,00.html Map: http://www.michigan.gov/documents/dmb/Prosperity_Map1_430346_7.pdf?20150724145608
State of Michigan Prepaid Inpatient Health Plan Regions	http://www.michigan.gov/autism/0,4848,7-294-63682_66069---,00.html

