



Arizona  
Department  
of Housing



## Request for Information

### Transitional Shelter for Persons Experiencing Homelessness with Mental Health Needs

**Agency Officer:**

**ISSUE DATE:** December 17, 2019

Name: Lori Moreno  
Title: Human Resources and Procurement Administrator  
Phone: 602-771-1061  
Email: lori.moreno@azhousing.gov

**OFFICE ADDRESS:**

Arizona Department of Housing  
1110 W. Washington Street Suite 280  
Phoenix, Arizona 85007

**RFI NAME:** Transitional Shelter for Persons Experiencing Homelessness with Mental Health Needs

**RESPONSE DUE DATE:** Friday, January 24, 2020 no later than 3:00 pm AZ time

Responses to this RFI must be in the actual possession of ADOH on or prior to the time and date indicated above.

**This Request for Information (“RFI”) is a joint inquiry by the Arizona Department of Housing (ADOH) and the Arizona Health Care Cost Containment System (AHCCCS). This is an RFI only and as such will NOT result in any award of contract from either entity.**

Offeror must submit one (1) electronic copy of the complete Response with all exhibits and forms via the ADOH Portal (<https://housing.az.gov/portals/document-upload-portals/rental-development-upload-portal>). The Responses must be organized in accordance with the numbering on the RFI.

ADOH and AHCCCS are in the information gathering stage and no decisions have been made concerning the agencies’ intent to issue a formal Request for Proposal. Responding to this RFI is appreciated and will NOT prohibit the respondents from responding to any future Requests for Proposals.

It is the policy of ADOH to comply in all respects with the non-discrimination requirements of Title II of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973. Individuals who require the reports to be provided in an alternative format may contact Joy Johnson at joy.johnson@azhousing.gov to make their needs known. Requests should be made as soon as possible to allow sufficient time to arrange the accommodation.

# REQUEST FOR INFORMATION

## 1. OVERVIEW

## 2. DEFINITIONS

- 2.1. Serious Mental Illness (SMI) - A designation as defined in A.R.S. §36-550 and determined in an individual 18 years of age or older.
- 2.2. Homeless - A person is considered homeless only when he/she resides in one of the places described below:
  - In places not meant for human habitation, such as cars, parks, sidewalks, abandoned buildings (on the street);
  - In an emergency shelter;
  - In transitional or supportive housing for homeless persons who originally came from the streets or emergency shelters;
  - In any of the above places but is spending a short time (up to 30 consecutive days) in a hospital or other institution;
  - Is being evicted within a week from a private dwelling unit and no subsequent residence has been identified and lacks resources and support networks needed to obtain housing;
  - Is being discharged within a week from an institution, such as a mental health or substance abuse treatment facility or a jail/prison, in which the person has been a resident for more than 30 consecutive days and no subsequent residence has been identified and the person lacks the resources and support networks needed to obtain housing;

### HOMELESS (PERSONS IN THESE SITUATIONS ARE NOT INCLUDED IN THE HUD DEFINITION OF OR FUNDING PURPOSES)

- Persons living in housing, even though they are paying an excessive amount for their housing, the housing is substandard and in need of repair, or the housing is Crowded;
  - Persons living with relatives or friends;
  - Persons staying in a motel, including a pay-by-the-week motels;
  - Persons living in a Board and Care, Adult Congregate Living Facility, or similar place;
  - Persons being discharged from an institution that is required to provide or arrange housing upon release; or
- 2.3. General Mental Health/Substance Abuse Disorder GMH/SU(D) - Behavioral health services provided to adult members age 18 and older who have not been determined to have a Serious Mental Illness.
  - 2.4. Transitional Shelter – for the purposes of this project, Transitional Shelter would be a temporary shelter or for persons determined SMI or with other behavioral health needs to provide a safe and stable setting in which to address barriers to community or other long term/permanent housing solutions. Supportive services would be available on site to meet needs of target population. Supportive services could include, but would not be limited to, clinical behavioral services, life skills, alcohol or substance abuse services, employment assistance, case management, securing IDs or other documentation, benefit applications, group activities or housing search and placement assistance. Residents could stay a maximum of up to two years although the primary goal would be to re-connect program participants to sustainable community housing and supportive services. This would not be a secured facility and resident could leave the program as desired.
  - 2.5. Arizona State Hospital (ASH). ASH will be lease the Birch Building facility for the purposes of operating a Transitional Shelter facility. The Birch Building will be physically secured and have separate access from the ASH facility and its operations.

# REQUEST FOR INFORMATION

- 2.6. Housing First - A Housing approach that works quickly and successfully to connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment, or service participation requirements. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry.

### 3. INTRODUCTION / PURPOSE of RFI (and/or Background)

- 3.1. The Arizona Department of Housing (ADOH) has allocated \$3.0 million to renovate the Birch Building located on the Arizona State Hospital (ASH) grounds for the purpose of providing up to fifty (50) units of transitional shelter and supportive services for persons experiencing homelessness with mental health conditions including persons determined seriously mentally ill (SMI). Participants may have co-occurring disabilities or service needs in addition to mental health needs. Through this RFI, ADOH is seeking to identify:
  - 3.1.1. Specific homeless sub population needs that could be served by this project and facility;
  - 3.1.2. Potential sustainable programmatic transitional shelter programs that could be operated within the designated facility including possible Medicaid reimbursable services;
  - 3.1.3. Sustainable fiscal funding strategies, including potential utilization of Medicaid reimbursement for partial or full programmatic and operational funding, to allow ongoing use of the facility for its intended purpose; and
  - 3.1.4. Potential operators who would be interested in providing transitional shelter in the facility.

### 4. REQUIREMENTS

- 4.1. Overall Requirements
  - 4.1.1. The proposed program, must utilize the Birch Building facing 24<sup>th</sup> Street on the Arizona State Hospital (ASH) property. Other than the property lease from ASH, the proposed program will not be legally associated with ASH and will be programmatically, operationally and fiscally separate from ASH and its programs.
  - 4.1.2. The Birch Building is a 17,500 square foot building that is currently configured for 26 single occupancy units that are approximately half of the facility as well as facilities for offices, common areas, programmatic office space and shared restroom facilities (including showers). While the Birch Building is on the ASH grounds, it will be physically secured from the ASH facilities and operations and will have separate direct street access to the facility.
  - 4.1.3. ADOH administered Housing Trust Funds of up to \$3.0 million will be made available to renovate and remodel the space for up to 50 shelter units as well as any other identified programmatic space needs (ex: office space, licensed clinical facilities, showers, kitchen) to operate a transitional shelter program.
  - 4.1.4. Under current ASH use restrictions, the facility must serve persons with “mental health” needs although other co-occurring needs may be present (ex: substance abuse, physical disability). The intent is to primarily serve persons experiencing homeless who have been determined SMI, but may also include those determined GMHSU.
  - 4.1.5. Transitional Shelter proposed here should include appropriate behavioral health or other services to assist program participants address their needs so that they may transition to sustainable living in the community.

# REQUEST FOR INFORMATION

- 4.1.6. The facility is not intended to serve as a “secured” or inpatient treatment setting and program participants should be allowed to leave the facility/program/services on their own volition. The project should incorporate housing first principles wherever possible including having minimum barriers to entry and connection to supportive housing and services to end participant homelessness and shelter residency as quickly as possible.
- 4.1.7. Respondent would be responsible for all operational and programmatic expenses associated with the facility and program including rent use agreement with ASH. See the Optional Attachment “C” – Sample Operating Budget

## 5. INFORMATION REQUESTED

If a vendor is interested in responding to any or all of the areas identified, ADOH is requesting the following detailed written response:

### 5.1. Proposed Program Description

- 5.1.1. Describe the target population of persons with mental health issues including persons determined SMI to be served through the proposed project.
  - a) Describe any other specific subpopulations or issues to be addressed (ex: gender, age groups, demographics, substance abuse or other co-occurring disorders) in working with the target population.
  - b) Describe the specific service needs and resources required to successfully serve the target population. What is the scope of the need for the proposed services? Provide any data or documentation used to inform the targeted population and/or proposed service model to be implemented.
  - c) How will the target population be identified, prioritized and referred to the program?
  - d) Are there additional eligibility requirements or limitations anticipated for program participants?
- 5.1.2. Describe the best proposed Transitional Shelter use/program that could be implemented at the Birch Facility. Include key proposed program elements including:
  - a) Number of beds/units/persons to be served
  - b) Processes and tools used to evaluate and identify resident’s needs.
  - c) Case management or other strategies for developing resident service plans and goals.
  - d) Proposed staffing levels (number of staff, coverage hours) and competencies.
  - e) Target length of stay
  - f) Any evidence-based practices to be implemented
  - g) How will services and shelter deliver “client focused” services
  - h) How program model will align with “Housing First” strategies to assist in transitioning program participants to end their homelessness including employment, securing income, finding permanent housing, and/or coordination with other systems of care to address housing barriers.
  - i) Describe program strategies, collaborations or resources for ensuring adequate housing or post-transitional placements are available for persons exiting the project.
- 5.1.3. Does the proposed model require any medical or behavioral health licensing to implement the proposed service model.

# REQUEST FOR INFORMATION

- 5.1.4. Describe any physical renovations to the Birch Building that would be necessary to implement the proposed model (ex: kitchen facilities, secured or specialized program areas, physical accommodations). This would include any physical renovations necessary to secure proposed licensing or accreditation needed to operate the facility.
- 5.1.5. Describe any collaborations, sub-contractors or other entities that may be involved in providing the proposed services.
- 5.1.6. Describe any proposed programmatic outcomes or success anticipated by the proposed program and how will it be measured and documented. Would the project utilize HMIS or other data systems to track participant outcomes?
- 5.1.7. What timeframe would be needed to implement the proposed program.
- 5.2. Vendor Qualifications
  - 5.2.1. Does the proposed transitional program model described require any specialized provider type, qualifications and/or experience in serving the proposed target population to be served.
  - 5.2.2. Would the proposed transitional program and shelter require any licensing or accreditation, and if so, does the respondent currently have the appropriate licensing or accreditation. Federal law places significant restrictions on the availability of Medicaid funding for services provided in an Institution for Mental Disease and for the cost of room and board. The Respondent should ensure that its response regarding revenue sources for ongoing operations is consistent with federal regulations including 42 C.F.R. 435.1009, 42 C.F.R. 435.1010, 42 C.F.R. 438.6(e), and AHCCCS Contractor Operations Manual Policy 109.
- 5.3. Financial/Total Cost of Ownership
  - 5.3.1. Describe the intended revenue sources needed to cover the anticipated programmatic and operational expenses for the proposed project.
  - 5.3.2. Do the anticipated revenue sources anticipate any Medicaid reimbursement for services through Mercy Care/AHCCCS? If so, describe the anticipated activities or reimbursable services to be provided. Would respondent need to or be willing to contract with all health plans in Maricopa County?
  - 5.3.3. Provide, to the extent possible, an estimated cost model to implement and operate your described solution including unit costs.
- 5.4. Other
  - 5.4.1. Has the respondent identified any legal, physical, programmatic or fiscal concerns not identified elsewhere that may impact the implementation of the proposed program and operational model in the Birch Building that require additional clarification or consideration.

## 6. CONTENTS OF YOUR RESPONSE

If you are interested in responding to any or all of the areas identified above, ADOH and AHCCCS are requesting the following

- 6.1. Attachment "A"- Respondents Contact Information
- 6.2. Attachment "B" - Detailed Written Response to any/all areas listed above.
- 6.3. Attachment "C" – Sample Operating Budget – Optional

# REQUEST FOR INFORMATION

## 7. PROPERTY TOUR

Property Tour: Respondents may have the opportunity to participate in a tour of the ASH Birch Building property at 2 pm on Tuesday, January 7, 2020. Interested respondents are asked to RSVP for the tour with Karina Jajou [karina.jajou@azhousing.gov](mailto:karina.jajou@azhousing.gov) by Friday, January 3, 2020.

## 8. PRE-SUBMISSION ASSISTANCE

The Department will not preview, comment on, or pre-judge any element of any Proposal prior to its initial submittal. All requests for clarification shall be made in writing via e-mail to [Rental-NOFA@azhousing.gov](mailto:Rental-NOFA@azhousing.gov) and identify that the question pertains to this RFP. The responses thereto will be posted no more often than weekly to the Department's website to a document entitled "Clarifications to Transition Shelter RFI". Offerors are responsible for checking the Department's website for this information.

## 9. HOW TO RESPOND

- 9.1 Offeror must submit one (1) electronic copy of the complete Response with all exhibits and forms via the ADOH Portal (<https://housing.az.gov/portals/document-upload-portals/rental-development-upload-portal>). The Responses must be organized in accordance with the numbering on the RFI.
- 9.2 Submit your response no later than the time indicated on the front page of this RFI. Please take into consideration the Arizona time zone.

## 10. CONFIDENTIAL/PROPRIETARY INFORMATION

- 10.1 This RFI and responses to the RFI are subject to the Arizona Public Records law and as such, are open to public inspection after this time.
- 10.2 Respondent shall not submit anything labeled or considered confidential or proprietary.

## 11. REIMBURSEMENT

Neither ADOH nor AHCCCS will reimburse any respondent for the cost of preparing and submitting a response to the RFI.

## 12. NO AWARD OF CONTRACT

This is a Request for Information ("RFI") only and as such will NOT result in any award of contract. ADOH and AHCCCS are in the information gathering stage and no decisions have been made concerning the agency's intent to issue a formal Request for Proposal. Responding to this RFI is appreciated and will NOT prohibit the respondents from responding to any future Request for Proposals.

## ATTACHMENT A: RESPONDENT'S CONTACT INFORMATION

Company Name
Address
Federal Employer ID Number

For Clarification of this Response Contact:

Name
Title
Phone
Email

Signature of Authorized Person:
Name
Title
Date

## **ATTACHMENT B: NARRATIVE**

(Attach narrative of detailed written response to any/all areas listed above)



# ATTACHMENT C: SAMPLE OPERATING BUDGET (OPTIONAL)

## ASH Operating Costs

<u>Staffing</u>	<u>ASSUMPTIONS/BASIS</u>	<u>TOTAL</u>
Salaries and Wages	tbd - respondent	\$ -
ERE	% of Salaries	\$ -
<b><u>SUBTOTAL - Staffing</u></b>		<b>\$ -</b>
<u>Utilities</u>	<u>ASSUMPTIONS/BASIS</u>	<u>TOTAL</u>
Electric/Gas (estimate)	ASH Historical (ASH wants separate meter)	\$ 40,320
Water/Sewer (estimate)	No Data - Not Included in ASH Utility Projection	\$ -
<b><u>SUBTOTAL - Utilities</u></b>		<b>\$ 40,320</b>
<u>Rent/Space</u>	<u>ASSUMPTIONS/BASIS</u>	<u>TOTAL</u>
Rent	17,500 sq. ft x \$14.50 per sq ft.	\$ 253,750
<b><u>SUBTOTAL - Rent/Space</u></b>		<b>\$ 253,750</b>
<u>General Administrative Expenses</u>	<u>ASSUMPTIONS/BASIS</u>	<u>TOTAL</u>
Annual Software Licensing Fees		\$ -
Telephone & Internet		\$ -
Travel		\$ -
Office Supplies		\$ -
Bank Service Charges		\$ -
ADOH training and compliance fees		\$ -
Accounting & Tax Preparation & Filing Fees		\$ -
Property Management Fees		\$ -
Owner entity Annual State filing or registry fees		\$ -
Tenant Related legal fees		\$ -
<b><u>SUBTOTAL - Total General Admin. Expenses:</u></b>		<b>\$ -</b>
<u>Repairs and Maintenance:</u>	<u>ASSUMPTIONS/BASIS</u>	<u>TOTAL</u>
Pest Control		\$ -
Cleaning		\$ -
Repairs		\$ -
Security		\$ -
Trash Removal		\$ -
HVAC and Equipment Maintenance		\$ -
Other Contracts		\$ -
<b><u>SUBTOTAL - Total Repairs and Maintenance</u></b>		<b>\$ -</b>
<u>Taxes &amp; Insurance:</u>	<u>ASSUMPTIONS/BASIS</u>	<u>TOTAL</u>
Real Estate Taxes		\$ -
Property Insurance		\$ -
<b><u>SUBTOTAL - Taxes &amp; Insurance Expenses:</u></b>		<b>\$ -</b>
<u>Reserves:</u>	<u>ASSUMPTIONS/BASIS</u>	<u>TOTAL</u>
Replacement Reserves		\$ -
Operating Reserves		\$ -
<b><u>SUBTOTAL - Reserves</u></b>		<b>\$ -</b>
<b>TOTAL Operating Expenses:</b>		<b>\$ 294,070</b>
<b>Administration</b>	Applicant Overhead Rate	<b>\$ -</b>
<b>TOTAL OPERATING</b>		<b>\$ 294,070</b>
	Monthly	<b>\$ 24,506</b>
<u>REVENUE</u>	<u>BASIS</u>	
Item		
Medicaid Reimbursement (estimate)	Daily per Client Reimbursement (est. \$ 125)	
Grants (Other Funding)		
Other		
<b>TOTAL</b>		<b>\$ -</b>
	Per Month	<b>\$ -</b>

**END OF DOCUMENT**

**Intentionally left blank.**