

ADDENDUM #1

RFP-2025-HH-01-BEHAV

Behavioral Health Services for Hampstead Hospital and Residential Treatment Facility

(Changes are in **bold, underlined and italicized text** below to enable vendors to quickly recognize changes in paragraphs and/or wording.)

On November 30, 2023, the New Hampshire Department of Health and Human Services published a Request for Proposals, soliciting proposals for provision of behavioral health services at Hampstead Hospital and Residential Treatment Facility (HHRTF), a facility located in Hampstead, New Hampshire and owned and overseen by the State of New Hampshire. This includes offering acute psychiatric care for children (ages 5-17) and young adults (ages 18-25) admitted on either a voluntary or involuntary basis, as well as Psychiatric Residential Treatment Facility services for children and adolescents up to age 21.

The Department is publishing this addendum to:

1. **Modify Section 2 Background by adding Subsection 2.4 HHRTF Patient Demographics:**

The Department expects that the current census, estimated at 36.09 average daily beds filled (representative of 2023 YTD data) to increase as follows:

<u>Time Period</u>	<u>Anticipated Average Daily Beds</u>
<u>G&C Approval – December 31, 2025</u>	<u>44</u>
<u>January 1, 2026 – December 31, 2027</u>	<u>74</u>

Please note - throughout the duration of the contract, the Department will be working collaboratively with the Vendor to ensure the number of beds appropriately reflects the current landscape of both behavioral healthcare demand and available behavioral health workforce, and the two parties can modify the bed count based on mutual agreement.

The Vendor must reflect the above census within their Appendix E – Program Staff List and Appendix F Budget Sheet - Addendum 1.

Almost all patients referred for services are coming from emergency departments located in New Hampshire, and have nowhere else to go.

As the sole psychiatric facility dedicated to young people, and at a time where the demand for behavioral healthcare exceeds the supply of such care, HHRTF prioritizes NH residents for admission. If a youth from outside of NH is being treated at a NH emergency department and requires behavioral health inpatient or residential care, it is sometimes possible for HHRTF to accept that patient (onto the waitlist), though HHRTF generally encourages referring hospitals to explore placements in the youth's state of origin.

In the future, if a waitlist of NH youth can be eliminated, DHHS is supportive of the vendor accepting admissions of patients from other states.

Below is the breakdown of age ranges of patients at HHRTF based on the current census:

	<u>Age Ranges</u>		
	<u>Child (5-11)</u>	<u>Adolescent (12-17)</u>	<u>Young Adult (18-25)</u>
<u>Inpatient</u>	<u>32%</u>	<u>39%</u>	<u>29%</u>
<u>PRTF</u>		<u>100%</u>	
<u>Outpatient</u>	<u>Currently there are no partial hospitalizations. At any time there may be multiple partial hospitalizations. Over the last year HHRTF has had ten total, and two at any one time.</u>		

2. Modify Section 5 Questions, Section 1 Section 1: Operational Model, Organizational Capacity, Staffing, Recruitment, and Retention (200 points possible), Question 1 to read:

1. What is your organization's proposed care delivery model? Include all elements outlined in Appendix G Scope of Services. **The average daily beds filled (both inpatient and PRTF) is approximately 36.09. For the purposes of your proposal you must assume the below average daily beds filled. Please ensure to describe how you will increase capacity to ensure that you can achieve an average daily bed count of 74.**

<u>Time Period</u>	<u>Anticipated Average Daily Beds</u>
<u>G&C Approval – December 31, 2025</u>	<u>44</u>
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3. Modify Section 5 Questions, Section 1 Section 1: Operational Model, Organizational Capacity, Staffing, Recruitment, and Retention (200 points possible), Question 3 to read:

3. How would you ensure that your organization's leadership and Department leadership located on-site at the facility are working in a complementary and aligned manner? What do you envision would be some of the challenges to navigate relative to this and how would your organization address those challenges?? Include a detailed personnel listing for all staff in the Appendix E Program Staff list (including staff as proposed in Questions 10-14), performing services, including individuals who will provide administrative oversight of the resulting contract on an annual basis for each State Fiscal Year, or more frequently as required by the Department, to ensure the accuracy of information contained therein and proper cost allocation. **The Appendix E Program Staff list should be based on average daily beds in Subsection 2.4. Please include a clear methodology describing how you arrived at this staffing level.**

- 4. Modify Appendix F Budget Sheet in its entirety with Appendix F Budget Sheet – Addendum #1.**
- 5. Modify Appendix D Technical Responses to Questions in its entirety with Appendix D Technical Responses to Questions – Addendum #1.**