**ATTACHMENT A**

**A\_\_ BEHAVIORAL HEALTH MOBILE CRISIS OUTREACH TEAM**

**CONTRACTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SECTION I. PERFORMING AGENCY RESPONSIBILITIES**

1. Contractor shall provide specialized Mobile Crisis Outreach Team (MCOT) services through the inclusion of a Licensed Chemical Dependency Counselor (LCDC) on the MCOT. The inclusion of an LCDC on the MCOT allows optimal screening, assessment, and intervention specific to individuals with Co-Occurring Psychiatric and Substance Use Disorders (COPSD), individuals with Substance Use Disorders (SUDs), and particularly individuals with Opioid Use Disorders (OUDs).
2. Contractor shall provide 24/7 mobile crisis intervention services addressing the crisis event in the individual’s natural environment. Clinical services will be provided to individuals with SUD or COPSD. A goal of the behavioral health MCOT will be to reduce the likelihood of law enforcement intervention that may lead to unnecessary arrest, city or county jail booking, or admissions to community hospitals, particularly, the emergency room.
3. Program Design

Contractor shall:

1. Hire one or more individuals credentialed as an LCDC dedicated to serving on the MCOT.
2. Comply with all rules and laws applicable to the delivery of behavioral health services to individuals with COPSD, SUDs, and/or OUDs to include, but not limited to:
   1. 25 Texas Administrative Code (TAC), Chapter 412, Subchapter G;
   2. 25 TAC, Chapter 411, Subchapter N, relating to Standards for Services to Individuals with Co-Occurring Psychiatric and Substance Use Disorders;
   3. 25 TAC, Chapter 442, relating to Investigations and Hearings;
   4. 25 TAC, Chapter 447, relating to Department-Funded Substance Abuse Programs;
   5. 25 TAC, Chapter 448, relating to Standards of Care; and
   6. 25 TAC, Chapter 140, Subchapter I, relating to Counselor Licensure.
3. Monitor the delivery of MCOT services to ensure the services meet standards specified in Information Item V – Crisis Service Standards.
4. Screen, assess, and provide linkage to providers that can apply SUD intervention to individuals with opioid use needs or individuals with co-occurring mental illness or SUD needs.
5. Coordinate with other members of the crisis team to determine the degree to which substance use intervention or treatment may mediate the crisis event.
6. Coordinate with the Outreach Screening, Assessment, and Referral (OSAR) Centers and provide Screening, Brief Intervention, and Referral to Treatment services.

D. Written Policies and Procedures

Contractor shall develop written policies and procedures for System Agency review and approval. Policies and procedures shall include, but are not limited to:

1. The process for identification, engagement, and connection of individuals in crisis with the LCDC;
2. The type of screening and assessment instrument that will be utilized to determine substance use history, chronicity of substance use, and appropriate treatment intervention(s);
3. The process for linkage to community providers that will assist in the prevention, intervention, and treatment of individuals with COPSD, SUDs, and/or OUDs;
4. The process for follow-up with those individuals linked to community providers that will assist in the prevention, intervention, and treatment of individuals with COPSD, SUDs, and/or OUDs;
5. Documentation of MCOT services provided, particularly services provided by the LCDC.

E. Staff Training Requirements

Contractor shall:

* 1. Ensure behavioral health MCOT staff complete required trainings as identified in 25 TAC, Chapter 412, Subchapter G, Section 412.316, relating to Competency and Credentialing;
  2. Ensure behavioral health MCOT staff are familiar with Information Item V – Crisis Service Standards;
  3. Trainings also include, but are not limited to:
     1. Opioid misuse and abuse prevention;
     2. Suicide prevention;
     3. Comprehensive overdose prevention; and
     4. Motivational Interviewing.

**SECTION II. PERFORMANCE MEASURES**

The terms of this Statement of Work, including the following performance measures, will be used to assess Contractor’s effectiveness in providing the services described in this Statement of Work, without waiving the enforceability of any of the terms of the Contract into which this Statement of Work is incorporated.

Contractor shall:

1. Submit to HHSC a copy of all written policies and procedures within 30 days of the execution of contract;
2. Submit the Form x (x is a placeholder) in accordance with the schedule outlined in Information Item S to include the following data:
   * 1. Number of crisis (mental health, COPSD, SUD, and/or OUD) episodes that occurred in the quarter;
     2. Number of crisis (mental health, COPSD, SUD, and/or OUD) episodes concluded in the quarter;
     3. Number of crisis (mental health, COPSD, SUD, and/or OUD) episodes pending resolution at the end of the quarter;
     4. Number of clients reporting opioid use;
     5. Number of inpatient admissions in the quarter;
     6. Source of referrals to MCOT;
     7. Number of individuals admitted to a Psychiatric Emergency Service Center for crisis intervention and stabilization;
     8. Number of individuals referred to ongoing Local Mental or Behavioral Health Authority (LMHA/LBHA) services;
     9. Number of referrals to OSAR;
     10. Number of individuals linked to community resources without ongoing services provided through the LMHA/LBHA;
     11. Number of individuals booked into a county jail; and
     12. Number of individuals whose crisis was resolved but were not referred to any services.
3. Submit a budget in accordance with the schedule outlined in Information Item S using Form P. System Agency will review, and provide notification of approval for the budget no later than 14 calendar days post-submission.
4. Submit Form M in accordance with the schedule outlined in Information Item S.

**SECTION III. PAYMENT METHOD AND FUNDING**

1. Contractor shall be paid in Quarterly Allocations at the end of the first (i.e., December), second (i.e., March), third (i.e., June), and fourth (i.e., September) quarters.

2. Subject to the restrictions below, without prior approval, Contractor may transfer money between budget categories of this Statement of Work subsequent to notification of the transfer to the System Agency Contract Manager. No budget category transfer or cumulative transfers may exceed 25 percent of the total value of this Statement of Work or $100,000, whichever is less. If the budget transfer(s) exceeds $100,000, alone or cumulatively, prior written approval from the System Agency is required. If the budget transfer(s) exceeds 25 percent of the value of this Statement of Work, alone or cumulatively, a formal contract amendment is required.

3. If Contractor’s total allowable expenditures at the end of each quarter, or state fiscal year, are less than the total amount disbursed by System Agency in Contractor’s four quarterly allocations, Contractor shall be subject to recoupment of the difference between the total amount disbursed by System Agency and Contractor’s total expenditures.