

**BRIEFING  
DRAFT**

**FORSYTH COUNTY  
BOARD OF COMMISSIONERS**

MEETING DATE: MAY 10, 2018

AGENDA ITEM NUMBER: 10

**SUBJECT: RESOLUTION AUTHORIZING EXECUTION OF NECESSARY DOCUMENTS TO  
SUBMIT TWO PROPOSALS TO CARDINAL INNOVATIONS HEALTHCARE FOR  
COMMUNITY REINVESTMENT FUNDING  
(EMERGENCY SERVICES DEPARTMENT- MOBILE INTEGRATED HEALTH DIVISION)**

**COUNTY MANAGER'S RECOMMENDATION OR COMMENTS:**

**SUMMARY OF INFORMATION:**

Cardinal Innovations Healthcare (Cardinal) is seeking requests for proposals as part of its community reinvestment funding program. These funds may be used for capital, equipment, and/or programmatic needs over the next 12 months. A condition to receiving these funds is the inclusion of a long-term sustainability plan for project continuance. Counties, municipalities, Local Public School Districts/Systems and/or Higher Education Institutions, or "well-established" organizations (defined as being in operation for a minimum of three (3) years and exempt under Section 501 (c)(3), 501 (c)(4), or 501(c)(6) of the IRS code) are allowed to submit proposals.

Forsyth County's Emergency Services Department, under its Mobile Integrated Health (MIH) Program, seeks authorization to submit two (2) proposals to Cardinal for:

(1) **Buprenorphine Project** - treatment of opioid withdrawal in the field - \$137,000 - This would fund the cost of a year's supply of the drug Buprenorphine (an opioid withdrawal drug) and a Licensed Clinical Social Worker/Case Manager to help link these patients receiving Buprenorphine to a Medication-Assisted-Treatment (MAT) provider.

(2) **Alternate Destinations** - Hospital diversion program - \$120,000 - The hospital diversion program trains paramedics in mental health symptom recognition and instructs EMS to transfer patients to crisis facilities instead of emergency departments when appropriate. The program has been successfully demonstrated in pilot programs in North Carolina communities and Forsyth County was among the pilot sites. Based on the data, of the 290 MIH calls from July through March 2017-2018, an average 58.03% of calls have been diverted from hospital emergency departments.

ATTACHMENTS:  YES  NO

SIGNATURE: \_\_\_\_\_

COUNTY MANAGER

DATE: \_\_\_\_\_

**RESOLUTION AUTHORIZING EXECUTION OF NECESSARY DOCUMENTS  
TO SUBMIT TWO PROPOSALS TO CARDINAL INNOVATIONS  
HEALTHCARE FOR COMMUNITY REINVESTMENT FUNDING  
(EMERGENCY SERVICES – MOBILE INTEGRATED HEALTH DIVISION)**

**WHEREAS**, Cardinal Innovations Healthcare is committed to improving the health and wellness of its members and families, and believe that investing in communities is key to ensuring that services and supports are available to those in need; and

**WHEREAS**, as part of its community reinvestment efforts, Cardinal Innovations Healthcare is seeking Requests for Proposals for Community Reinvestment funds; and

**WHEREAS**, the Forsyth County Emergency Services Department, through its Mobile Integrated Health Division requests authorization to submit two proposals for Cardinal Reinvestment Funding totaling \$257,000; and

**WHEREAS**, Cardinal Innovations Healthcare will announce funded proposals by June 29, 2018;

**NOW, THEREFORE, BE IT RESOLVED** that the Forsyth County Board of Commissioners hereby authorizes the County Manager or his designee, and the Clerk to the Board to execute, on behalf of Forsyth County, the necessary documents to submit two proposals to Cardinal Innovations Healthcare to fund two Community Reinvestment Projects as further described herein, subject to a pre-audit certificate thereon by the County Chief Financial Officer, if applicable, and approval as to form and legality by the County Attorney.

Adopted this 10<sup>th</sup> day of May 2018.



Dear Requester:

Cardinal Innovations Healthcare is committed to improving the health and wellness of our members and families, and we believe that investing in our communities is key to ensuring that services and supports are available to those in need. As part of our ongoing philosophy of community reinvestment, we are accepting Requests for Proposals (RFP's) to fund capital, equipment, and/or programmatic needs over the next 12 months.

Cardinal Innovations Healthcare serves more than 850,000 North Carolinians with complex needs. We provide access to both Medicaid and State-funded services and supports that best meet the unique needs of our members with mental health conditions, intellectual/developmental disabilities, or substance use disorder. Our community-based model of managed care supports natural interaction among members, local providers and stakeholders, and will serve as the foundation for identifying unmet needs. As you consider the needs within your community, we ask that you consider stable, sustainable investments that will improve health outcomes for these individuals, so that collectively, we may better serve North Carolina's most vulnerable citizens.

The following entities may submit a proposal for consideration:

- Counties
- Local Public School Systems/Districts and/or Higher Education Institutions
- Municipalities
- Well-established organizations (defined as being in operation for a minimum of three (3) years and qualifying for exemption under Section 501(c)(3), 501(c)(4), or 501(c)(6) of the IRS code).

Proposals from the following 20 counties will be considered:

Alamance, Cabarrus, Caswell, Chatham, Davidson, Davie, Forsyth, Franklin, Granville, Halifax, Mecklenburg, Orange, Person, Rockingham, Rowan, Stanly, Stokes, Union, Vance and Warren

Please review the timeline below as well as the attached requirements before submitting your application.

- February 1, 2018: Opening date to receive requests
- March 31, 2018: Deadline to submit questions
- May 1, 2018: Deadline to receive requests
- June 29, 2018: Funds awarded for approved requests

Together we will continue to make a difference in the lives of those we serve.

Sincerely,  
Cardinal Innovations Healthcare



## 2018 Request for Proposal Process Requirements

### **Guidelines:**

- The area of need should be fully detailed, including how the project/equipment/program will provide additional services and/or supports within the community, and how your proposal aligns with the mission of Cardinal Innovations Healthcare
- RFP's are limited to three pages. (Applicants will be contacted if further information is needed.) Supplemental brochures may also be provided as addendums
- A budget form must be submitted with your proposal. This form should itemize proposal expenses and justify how final dollar amounts were determined. Expanded budgets, bids, and/or 3<sup>rd</sup> party quotes may also be submitted as backup documentation
- Long-term sustainability should be outlined in the proposal. Is the proposal sustainable without ongoing fund consideration from Cardinal Innovations Healthcare? Does the proposal address and/or explain potential fluctuations in state funding, rate changes, or adjustments?
- Project outcomes, including ongoing measurement and support, should be included in the proposal
- Up to three letters of support for your request may be attached to your proposal. Letters may come from any stakeholder familiar with the community and the identified need
- Clarification questions may be asked through March 31, 2018. Please submit questions via email to [adam.cook@cardinalinnovations.org](mailto:adam.cook@cardinalinnovations.org)
- Cardinal Innovations Healthcare leadership and the Board of Directors will review all proposals and submit their final recommendations to the NC DHHS
- The North Carolina Department of Health and Human Services will provide final review and approvals
- For convenience and clarity, this RFP packet is provided in Microsoft Word format. Please download, save, and complete the documents in Word. Handwritten documents will NOT be accepted
- Deadline for submission is May 1, 2018
- A final project report must be submitted to Cardinal Innovations Healthcare within 364 days of RFP approval
- Copies of any promotional materials related to the project/equipment/program will be submitted to Cardinal Innovations Healthcare for approval prior to release, and should also be included in the final project report
- If the program, project, or equipment runs under-budget, Cardinal Innovations Healthcare must be notified and any remaining funds must be transferred back within the 364-day deadline



2018 Request for Proposals  
Cover Page

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Primary Contact: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Funding will be used for (check all that apply):

- Capital                       Equipment                       Program

Name of RFP: \_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_

Please return the completed signed cover page with your attached proposal and budget via email to:  
[adam.cook@cardinalinnovations.org](mailto:adam.cook@cardinalinnovations.org)

Or mail your paper application to:  
Cardinal Innovations Healthcare  
Attn: Adam Cook, Director of Strategic Alliances  
550 South Caldwell Street #1500  
Charlotte, NC 28202

Please email or call Adam Cook at 704-723-1851 regarding any questions during the RFP process.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Printed Name



## 2018 Budget for Requested Funds

- Please use this form and/or attach a page detailing the proposed budget.

	Description	Dollar Amount Requested
<i>Capital Project</i>		
<i>Equipment</i>		
<i>Program</i>		
<i>Other</i>		

**Total Funds Requested**

\$ \_\_\_\_\_

# Buprenorphine | SAMHSA - Substance Abuse and Mental Health Services Administration

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X [samhsa.gov/medication-assisted-treatment/treatment/buprenorphine](https://www.samhsa.gov/medication-assisted-treatment/treatment/buprenorphine)

Approved for clinical use in October 2002 by the Food and Drug Administration (FDA), buprenorphine represents the latest advance in medication-assisted treatment (MAT). Medications such as buprenorphine, in combination with counseling and behavioral therapies, provide a whole-patient approach to the treatment of opioid dependency. When taken as prescribed, buprenorphine is safe and effective.

Unlike methadone treatment, which must be performed in a highly structured clinic, buprenorphine is the first medication to treat opioid dependency that is permitted to be prescribed or dispensed in physician offices, significantly increasing treatment access. Under the Drug Addiction Treatment Act of 2000 (DATA 2000), qualified U.S. physicians can offer buprenorphine for opioid dependency in various settings, including in an office, community hospital, health department, or correctional facility. Learn more about SAMHSA's buprenorphine waiver management.

SAMHSA-certified opioid treatment programs (OTPs) also are allowed to offer buprenorphine, but only are permitted to dispense treatment. Learn more about certification of OTPs.

As with all medications used in MAT, buprenorphine is prescribed as part of a comprehensive treatment plan that includes counseling and participation in social support programs.

Buprenorphine offers several benefits to those with opioid dependency and to others for whom treatment in a methadone clinic is not preferred or is less convenient. The FDA has approved the following buprenorphine products:

- Bunavail (buprenorphine and naloxone) buccal film
- Suboxone (buprenorphine and naloxone) film
- Zubsolv (buprenorphine and naloxone) sublingual tablets
- Buprenorphine-containing transmucosal products for opioid dependency

Refer to the product websites for a complete listing of drug interactions, warnings, and precautions.

## How Buprenorphine Works

Buprenorphine has unique pharmacological properties that help:

- Lower the potential for misuse
- Diminish the effects of physical dependency to opioids, such as withdrawal symptoms and cravings
- Increase safety in cases of overdose

Buprenorphine is an opioid partial agonist. This means that, like opioids, it produces effects such as euphoria or respiratory depression. With buprenorphine, however, these effects are weaker than those of full drugs such as heroin and methadone.

Buprenorphine's opioid effects increase with each dose until at moderate doses they level off, even with further dose increases. This "ceiling effect" lowers the risk of misuse, dependency, and side effects. Also, because of buprenorphine's long-acting agent, many patients may not have to take it every day.



## FORSYTH COUNTY COMMUNITY PARAMEDICINE BEHAVIORAL HEALTH DIVERSION

July/2017	18	9	1	8	10	55.56%
August/2017	20	5	6	9	11	55.00%
September/2017	36	11	7	18	18	50.00%
October/2017	52	20	8	24	28	53.85%
November/2017	31	10	7	14	17	54.84%
December/2017	19	8	5	6	13	68.42%
January/2018	36	19	8	9	27	75.00%
February/2018	30	12	4	14	16	53.33%
March/2018	48	23	4	21	27	56.25%
April/2018					0	
May/2018					0	
June/2018					0	

<b>TOTAL</b>	<b>290</b>	<b>117</b>	<b>50</b>	<b>123</b>		
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**AVERAGE % DIVERTED**

**58.03%**