



Office of State Courts Administrator
P.O. Box 104480
2112 Industrial Drive
Jefferson City, Missouri 65110- 4480

CONTRACT RENEWAL 001
RFP NO. OSCA-14-042
TITLE: Specialized Treatment Provider
for Treatment Court
ISSUE DATE: February 10, 2015

CONTACT: Beth Rodeman
PHONE NO.: (573)522-2617
E-MAIL: osca.contracts@courts.mo.gov

RETURN PROPOSAL NO LATER THAN: March 6, 2015

MAILING INSTRUCTIONS: Print or type **RFP Number** and **Return Due Date** on the lower left hand corner of the envelope.

RETURN PROPOSAL TO:

(U.S. Mail)
 Office of State Courts Administrator
 Attn: Contract Unit or

PO Box 104480
 Jefferson City Mo 65110 - 4480

(Courier Service)
 Office of State Courts Administrator
 Attn: Contract Unit
 2112 Industrial Dr
 Jefferson City Mo 65109

CONTRACT PERIOD: JULY 1, 2015 THROUGH JUNE 30, 2016

DELIVER SUPPLIES/SERVICES FOB DESTINATION TO THE FOLLOWING ADDRESS:

VARIOUS LOCATIONS THROUGHOUT THE STATE OF MISSOURI

The vendor hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions of the Request for Proposal. The vendor further agrees that the language of this RFP shall govern in the event of a conflict with his/her proposal. The vendor further agrees that upon receipt of an authorized purchase order or when this RFP is countersigned by an authorized official of the Office of State Courts Administrator, a binding contract shall exist between the vendor and the Office of State Courts Administrator.

SIGNATURE REQUIRED

AUTHORIZED SIGNATURE <i>Ward M. Lawson</i>		DATE <i>2-10-15</i>
PRINTED NAME Ward M. Lawson, PhD, ABPP		TITLE Clinical Director
COMPANY NAME Tri-County Psychological Services, Inc.		
MAILING ADDRESS P.O. Box 256		
CITY, STATE, ZIP Marshfield, MO 65706		
E-MAIL ADDRESS ozarkscare@yahoo.com		FEDERAL EMPLOYER ID NUMBER [REDACTED]
PHONE NUMBER 417-859-7746	FAX NUMBER 417-859-7411	

NOTICE OF AWARD (OSCA USE ONLY)

ACCEPTED BY OFFICE OF STATE COURTS ADMINISTRATOR AS FOLLOWS: <i>In its entirety as submitted.</i>		
CONTRACT NUMBER OSCA 14-042-36	CONTRACT PERIOD July 1, 2015 through June 30, 2016	
CONTRACTS PRINCIPLE MANAGEMENT ANALYST <i>Russell W. Rottmann</i>	DATE <i>3/10/15</i>	DEPUTY STATE COURTS ADMINISTRATOR <i>Carl [Signature]</i>

CONTRACT RENEWAL 001toOSCA 14-042-36

TITLE: SPECIALIZED TREATMENT PROVIDER FOR TREATMENT COURT

CONTRACT RENEWAL PERIOD: JULY 1, 2015 THROUGH JUNE 30, 2016

The Office of State Courts Administrator desires to renew the above referenced contract.

Due to budget shortfalls and the expansion of Treatment Courts, the Office of State Courts Administrator requests there not be any increase in cost for this contract period.

All other terms, conditions and provisions of the contract shall remain the same and apply hereto. The contractor shall, sign and return this document with a completed pricing page on or before the date indicated.

PRICING PAGE – RENEWAL 001

The vendor must provide firm, fixed prices for the services identified below. The prices stated herein shall be legally binding for the entire contract period.

Service Description	Vendor Firm, Fixed Unit Price	Unit of Service
Assessment	\$ 115.00	per assessment
Assessment option (Multi-axial)	\$ 115.00	per assessment
Assessment update	\$ 90.00	per assessment
HIV or TB Post test counseling		per ¼ hour
Individual Counseling	\$ 17.25	per ¼ hour
Individual Counseling (Co-Occurring Disorder)	\$ 17.25	per ¼ hour
Individual Counseling (Trauma related)	\$ 17.25	per ¼ hour
Individual Counseling (Collateral Relationship)	\$ 17.25	per ¼ hour
Relapse Prevention Counseling	\$ 17.25	per ¼ hour
Case Management		per ¼ hour
Family Conference	\$ 17.25	per ¼ hour
Codependency Individual Counseling	\$ 17.25	per ¼ hour
Codependency Group Counseling	\$ 4.32	per ¼ hour
Family Counseling	\$ 17.25	per ¼ hour
Social Setting Detoxification		per day
Residential Support		per day
Day Treatment		per day
Extended Day Treatment	\$ 4.32	per day
Group Counseling	\$ 4.32	per ¼ hour
Group Counseling (Collateral relationship)	\$ 4.32	per ¼ hour
Group Education	\$ 4.32	per ¼ hour
Group Education (Trauma Related)	\$ 4.32	per ¼ hour
Medication Services		per ¼ hour
MAT Medication		per dosage

Medication: [Medication Assisted Treatment (MAT)]		Per prescription
Missouri Recovery Support Specialist (MRSS)		Per ¼ hour
Missouri Recovery Support Specialist Peer (MRSS-P)		Per ¼ hour
Relapse Prevention Counseling	\$ 17.25	Per ¼ hour
Residential Support		Per day
Treatment Court Day	\$ 11.50	Per ¼ hour
Virtual Counseling (Group)	\$ 4.32	Per ¼ hour
Virtual Counseling (Individual)	\$ 17.25	Per ¼ hour
Drug/Alcohol Testing: Sample Collection Only (Lab conf. only)		Per test
Sample Collection with 1-panel on-site provided by vendor		Per test
Sample Collection with 2-panel on-site provided by vendor		Per test
Sample Collection with 3-panel on-site provided by vendor		Per test
Sample Collection with 4-panel on-site provided by vendor		Per test
Sample Collection with 5-panel on-site provided by vendor		Per test
Sample Collection with 6-panel on-site provided by vendor		Per test
Sample Collection with 7-panel on-site provided by vendor		Per test
Sample Collection with 8-panel on-site provided by vendor		Per test
Sample Collection with 9-panel on-site provided by vendor		Per test
Drug Testing: Sample Collection and On-Site Test (Kit provided by Treatment Court)		Per test
Drug Testing: Breathalyzer (Equipment provided by vendor)		Per test
Drug Testing: Breathalyzer (Equipment provided by Treatment Court)		Per test

Evidence Based Program and Practice curriculum being utilized:

Family Systems, CBT, ACT (acceptance & Commitment therapy)
 assertive community treatment

Which Cognitive Behavioral intervention staff is qualified to deliver:

RET, Beck's CBT, ACT

Please indicate if Medication Assisted Treatment (MAT) is provided. If you do not provide MAT, how and with whom MAT services are arranged and how all services are coordinated. *see attached*

individualized plan development shall be encouraged, as appropriate to the age, guardianship, services provided or wishes of the individual.

(A) The assessment shall begin on the first scheduled appointment. It is designed to assist in ensuring an appropriate level of care, identifying necessary services, and developing an individualized treatment plan. The assessment data shall subsequently be used in determining progress and outcomes. Documentation of the screening in assessment must include, but is not limited to, the following:

1. Demographic and identifying information;
2. Statement of needs, goals and treatment expectations from the individual requesting services. The family's perceptions are also obtained, when appropriate and available;
3. Presenting situation/problem and referral source;
4. History of previous psychiatric and/or substance abuse treatment including number and type of admissions;
5. Health screening;
6. Current medications and identification of any medication allergies and adverse reactions;
7. Recent alcohol and drug use for at least the past thirty (30) days and, when indicated, a substance use history that includes duration, patterns, and consequences abuse;
8. Current psychiatric symptoms;
9. The family, social, legal, and vocational/educational status and functioning. The collection and assessment of historical data is also required, unless short-term crisis intervention or detoxification are the only services being provided;
10. Current use of resources and services from other community agencies;
11. Personal and social resources and strengths, including the availability and use of family, social, support and other natural supports; and
12. Multi-axis diagnosis or current diagnostic impression in accordance with the current edition of the *Diagnostic and Statistical Manual* of the ApA.

(B) Recommendations for specialized services may require more extensive diagnostic testing. TCPS will conduct its own psychological evaluations. Appropriate referrals will be made for other specialized testing.

Medication Assisted Therapy. At admission, all patients shall have a substance abuse/psychological evaluation by a doctor of psychology, culminating in a diagnosis from the current DSM (Diagnostic and Statistical Manual of Mental Disorders). Individuals physiologically dependent on substances will be referred for either outpatient step-down treatment or inpatient detoxification. Outpatient medication referrals will be made to Wellpointe Family Medical Clinic, or other clinics as needed. This may include referrals for medication to treat psychological disorders, such as antidepressants for Major Depression. Referrals to medical personnel shall be documented in the patient's file.

(C) Each person shall directly participate in developing his/her individualized treatment plan including, but not limited to, signing the treatment plan.

Pricing Page Continued

Instructions: Below is a list of the judicial circuits and counties in the state of Missouri. Check either the applicable counties or the entire judicial circuit(s) your agency shall provide services. Check the appropriate level of service that shall be provided: DWI, Adult, Family, Veterans and/or Juvenile. Check the applicable gender for which services shall be provided.

JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
1	Clark							
1	Schuyler							
1	Scotland							
2	Adair							
2	Knox							
2	Lewis							
3	Grundy							
3	Harrison							
3	Mercer							
3	Putnam							
4	Atchison							
4	Gentry							
4	Holt							
4	Nodaway							
4	Worth							
5	Andrew							
5	Buchanan							
6	Platte							
7	Clay							
8	Carroll							
8	Ray							
9	Chariton							
9	Linn							
9	Sullivan							
10	Marion							
10	Monroe							
10	Ralls							
11	St. Charles							

JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
12	Audrain							
12	Montgomery							
12	Warren							
13	Boone							
13	Callaway							
14	Howard							
14	Randolph							
15	Lafayette							
15	Saline							
16	Jackson							
17	Cass							
17	Johnson							
18	Cooper							
18	Pettis							
19	Cole							
20	Franklin							
20	Gasconade							
20	Osage							
21	St. Louis							
22	St. LouisCity							
23	Jefferson							
24	Madison							
24	St. Francois							
24	Ste. Genevieve							
24	Washington							
25	Maries							
25	Phelps							
25	Pulaski							
25	Texas							
26	Camden							
26	Laclede							
26	Miller							

JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
26	Moniteau							
26	Morgan							
27	Bates							
27	Henry							
27	St. Clair							
28	Barton							
28	Cedar							
28	Dade							
28	Vernon							
29	Jasper							
30	Benton							
30	Dallas							
30	Hickory							
30	Polk							
30	Webster		X	X	X	X	X	X
31	Greene							
32	Bollinger							
32	Cape Girardeau							
32	Perry							
33	Mississippi							
33	Scott							
34	New Madrid							
34	Pemiscot							
35	Dunklin							
35	Stoddard							
36	Butler							
36	Ripley							
37	Carter							
37	Howell							
37	Oregon							
37	Shannon							

JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
38	Taney							
38	Christian							
39	Barry							
39	Lawrence							
39	Stone							
40	McDonald							
40	Newton							
41	Macon							
41	Shelby							
42	Crawford							
42	Dent							
42	Iron							
42	Reynolds							
42	Wayne							
43	Caldwell							
43	Clinton							
43	Daviess							
43	DeKalb							
43	Livingston							
44	Douglas							
44	Ozark							
44	Wright							
45	Lincoln							
45	Pike							