

Request for Information for Speech, Occupational, and Physical Therapy for Children with Autism Spectrum Disorder

Purpose

This document outlines the St. Clair County Community Mental Health (SCCCMH) need for Occupation, Speech, and Physical Therapy for children with autism spectrum disorder (ASD).

SCCCMH is a Provider of Medicaid services and functions as part of Region 10 Prepaid Inpatient Health Plan (Region 10 PIHP), comprised of Genesee Health System, Lapeer County CMH, Sanilac County CMH and SCCCMH.

Project Details

SCCCMH intends to expand ASD services in St. Clair County specified below:

- County-wide Capacity for the following:
 - Speech Therapy (ST)
 - Occupational Therapy (OT)
 - Physical Therapy (PT)

General Expectations for Interested Providers

- Interested providers must have the appropriate and necessary agency credentials in order to provide services being sought, or the capacity to obtain.
- Interested providers agree to the provider enrollment and credentialing policies/procedures of SCCCMH to be a credentialed member of SCCCMH's Provider Panel through a formal contractual agreement. For additional information, please see SCCCMH's policy #01-003-0011 *Provider Enrollment and Credentialing*, located on our website at <https://scccmh.org/policy-index/>).
- Interested providers must have sufficient qualified staff currently available and credentialed to be able to provide the services being sought, or in the alternative identify an expected timeframe of acquiring qualified staff.
- Interested providers must have the financial capacity to establish or expand existing service locations in St. Clair County to provide services being sought.

- Interested providers must currently be or have capacity to be paneled to be a Medicaid, Medicare, and private insurance provider.

General Information

- Due date for RFI response with statement of interest: **04/01/2025**
- Willingness to accept SCCCMH's Reimbursement Rates (TBD based on cost calculation submission by interested provider)
- Anticipated length of contract: TBD – generally fiscal year to fiscal year with renewal on an annual basis solely at SCCCMH's discretion

General Submission of Interest Information

All interest submissions should include the following components:

- Brief overview of provider's current ST, OT, and/or PT service array/history
- General/high level narrative of how provider would establish the requested services in St. Clair County.
- General/high level description of provider's sustainability plan for new or expanded service sites.
- Any supportive documentation provider may want to include.
- All questions and statement of interest should be submitted in writing by email to:

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