

**Call for Applications:
Service Provider(s) for Rhode Island's
Pay for Success (PFS) Permanent Supportive Housing (PSH) Pilot
Program**

**Letter of Interest Deadline:
September 30, 2022 @ 11:59PM**



Rhode Island Coalition to End Homelessness

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Executive Summary

The Pay for Success (PFS) Permanent Supportive Housing (PSH) pilot program is a new initiative that aims to increase the number of Rhode Island residents with a history of chronic homelessness who successfully find and maintain permanent housing. The PFS PSH pilot explicitly seeks to engage persons who are high utilizers of health care, the justice system, and/or homeless services, with the intent to diminish statewide costs while improving the lives of those with exceptionally complex needs.

The new PFS PSH program in Rhode Island will make available **125 PFS PSH “slots”** over a period of up to four years for individuals with exceptionally complex needs and a history of homelessness. The endeavor is supported by State budget appropriations enacted in the FY 2022 State Budget not to exceed \$1.5 million per fiscal year/\$6 million in aggregate over five years. Per the terms of these appropriations, **~75 PFS PSH slots** must be filled by Medicaid high utilizers; the remaining **~50 PFS PSH slots** must be filled by individuals with high Department of Corrections (DOC) involvement and/or by those who are high utilizers of homeless services. The State budget language recognizes that there may be significant overlap between these three groups.

The Coalition is issuing this application to solicit responses from eligible Service Providers in Rhode Island to contract with the Coalition to provide permanent supportive housing (PSH) services for individuals identified as eligible for the PFS PSH pilot based on their high utilization of Medicaid, DOC, and/or homeless services. *Please note that, for the purposes of this application, “Service Provider” may refer to a single organization or two or more organizations that have decided to partner in response to this opportunity.*

More information about Pay for Success and permanent supportive housing is provided in Exhibit A.

Application Process

The Coalition is aware of the pressures on Service Providers’ time and conscious that Pay for Success is a new model in Rhode Island. For these reasons, a two-stage application process is being implemented.

- **Letter of Interest** – Organizations interested in providing PSH services for the PFS PSH pilot are required to submit a brief Letter of Interest (LOI) that responds to the **questions outlined in Attachment 1 (page 18)**. Applicants with relevant experience, expertise, and motivation based on their LOI will be invited to submit a full application and budget.
- **Full Application and Budget** – The full application requires organizations to describe their PSH delivery model, staffing plan, and budget; **an application cover sheet, application questions, budget guidance and a budget form are provided in Attachments 2, 3, 4, and 5.**

Since the Pay for Success model may be unfamiliar to some Applicants, the Coalition will be available to answer questions and provide technical assistance for organizations as they prepare their full application and budget. Technical assistance might include but will not be limited to 1) providing more details about PFS models, plans for the PFS PSH pilot program, and expectations for Service Providers, 2) aiding finalist Applicants in exploring potential partnerships with other finalist candidates, and 3) helping develop budgets, including the “match” budget component.

Important Dates

| Event | Date/Time |
|--|--|
| Application Released | September 13, 2022 |
| Informational Webinar | September 22, 2022 |
| Deadline for Submission of Questions | September 23, 2022 |
| Posting of Answers to Questions (estimated) | September 27, 2022 |
| Letters of Interest Due | September 30, 2022 |
| Invitations to Submit a Full Application and Budget Sent | October 12, 2022 |
| Technical Assistance Available | October 12, 2022 – October 28, 2022 |
| Full Applications and Budgets Due | November 8, 2022 |
| Notifications of Award Sent | November 23, 2022 |
| Contracts Finalized | December 16, 2022 |
| Project Start Date (estimated) | January 15, 2023 |
| Project End Date (estimated) | December 31, 2027 |

Eligible/Ineligible Applicants

Eligible Applicants include:

- Not-for-Profits (501(c) (3))
- For-profit healthcare or other human service providing business
- Municipal Governments
- Quasi-public agencies
- Public Housing Authorities
- Native American tribal governments

Proposals from both single organizations and partnerships of two or more organizations are accepted.

All Applicants must be legal entities in good standing within the State of Rhode Island and not be debarred as a local, state, or federal contractor in any jurisdiction.

All Applicants must have a demonstrated experience providing services for individuals with exceptionally complex needs and/or a history of chronic homelessness.

Applicants must be willing and able to meet the requirements associated with the PFS financing model and PFS PSH program design. These are outlined throughout this document and more specifically in Exhibit E.

Ineligible Applicants include individual persons, foreign entities, sole proprietorship organizations, and other organizations unable to comply with the terms of the PFS PSH pilot program.

Eligible Activities

Costs eligible under the PFS PSH pilot program include those that are needed to operate PSH, including:

- **Outreach, Engagement, and Housing Navigation** – Funds may be used to pay the eligible costs of activities needed to locate, engage, enroll, and find housing for eligible individuals “assigned” to Service Providers. Funds will be allocated based on the number of PSH “slots” the Service Provider is awarded.
- **Supportive Services** - Funds may be used to pay the eligible costs of supportive services that address the special needs of the program participants. Service Providers must provide supportive services for housed participants to enable them to live as independently as is practicable throughout the duration of their participation in the project, including but not limited to case management, coordinating services, monitoring participant progress, referring to other resources, ongoing risk/safety planning, transportation to services etc. Funds will be allocated based on the number of PSH “slots” the Service Provider is awarded.
- **Housing Assistance** - Funds may be used to pay the eligible costs of rental and utility assistance for project participants including (but not limited to) security deposits, rental application fees, rent, utility payments, utility deposits, moving costs, furniture costs, and utility arrears (in order to ensure reconnection of services). Funds will be administered in a flexible funding pool that all Service Providers will be able to tap into. It is envisioned that Service Providers will likely utilize PFS housing assistance funds first, to bridge the gap until program participants qualify for an existing housing voucher or similar resource, at which point PFS will no longer need to provide financial assistance.
- **Operational/Administrative Expenses** - Funds may be used to pay for operational and administrative costs associated with these activities (e.g. office space, bookkeeper, insurance, etc.).

For the purposes of the PFS PSH pilot program, services might include but will not be limited to: substance abuse services, psychiatric/mental health services; treatment planning and monitoring; transportation to services, accompaniment to medical and dentist appointments; help to order and manage medications; representation at court hearings; help with managing money and paying bills; help to grow confident with housekeeping, shopping, cooking, and transportation; help enrolling in benefits like SSI/SSDI; and help with finding and keeping a job or enrolling in GED, training, or similar programs.

Exhibit C and Exhibit D provide more details on the above requirements and processes, in addition to the additional information provided at contract signup and implementation.

Eligible Program Participants

Program participants for this project will be identified through Medicaid, HMIS, and DOC utilization data, the Coordinated Entry System, and case conferencing. As mentioned previously, participants will be Rhode Islanders who are high utilizers of the justice and/or healthcare systems, in addition to residing in a homeless shelter (including a domestic violence shelter) or place not meant for human habitation (with priority given to those that are chronically homeless). The service area for this project is statewide. Exhibit B provides more details on the processes by which eligible individuals will be identified and “assigned” to procured Service Providers.

Number of Contract Awards

The Coalition anticipates selecting and contracting with at least one (1) Service Provider and no more than five (5) Service Providers to deliver PSH services consistent with the parameters established for the PFS PSH pilot program. **Please note again that, for the purposes of this RFP, “Service Provider” may refer to a single organization or two or more organizations that have decided to partner in response to this opportunity.**

Size of Contract Awards

Applicants will be asked to identify the number of PFS PSH slots for which they would like to be accountable in their response. Applicants may request a minimum of 25 PFS PSH slots up to a maximum of 125 PFS PSH slots. Slots MUST be selected in increments of 25 slots. The number of PFS PSH slots awarded to an Applicant will be determined by:

- the number of slots requested by the Applicant;
- the overall quality of the Applicant’s application, including the perceived capacity of the Applicant to provide high quality services for the number of individuals associated with the slots requested; and
- potential overlaps in service area(s) with other selected Applicants.

Funding

The PFS PSH pilot program makes available \$1.1 million per year/\$4.4 million over four years to support PSH service delivery in Rhode Island.

Funds may be disbursed quarterly or semi-annually, in advance of expenses (i.e. not reimbursement based), to ensure that Service Providers have sufficient cash-on-hand to operate the program.

Supportive service and operations/administrative funding will be provided as budgeted.

Housing assistance will be accessed on an as-needed basis depending on the circumstances of the individuals enrolled with Service Providers.

Success Payments for Performance

In addition to providing funds for PSH service delivery, the PFS PSH pilot program will enable Service Providers to collectively earn up to \$137,500 per year/\$550,000 over four years in “success payments” based on the extent to which they achieve the PFS PSH outcome measures. (This represents 12.5% of total PSH service delivery funds inclusive of both housing and supportive services funds).

Success payments will be tied directly to the PFS PSH Evaluation Plan.¹ The total value of the success payments available to a particular Service Provider will be proportional to the number of PFS PSH slots awarded to that Service Provider.

¹ The PFS PSH Evaluation Plan was still being developed at the time of the Service Provider RFP release; hence, specific outcome measures could not be included in the RFP. Outcome measures are expected to include those related to housing stability, healthcare utilization, and DOC-involvement, as well as measures intended to recognize and reward early and important successes such as locating and engaging eligible individuals.

The following table summarizes how available PFS PSH funds would be allocated across multiple procured Service Providers consistent with the above descriptions:

| Service Provider | # PFS PSH Slots | PFS PSH Housing Funds | PFS PSH Supportive Services Funds | PFS PSH "Success Payments" |
|--------------------|-----------------|---------------------------|-----------------------------------|----------------------------|
| Service Provider A | 25 | TBD based on client needs | \$120,000 per year | Up to \$27,500 per year |
| Service Provider B | 50 | TBD based on client needs | \$240,000 per year | Up to \$55,000 per year |
| Service Provider C | 50 | TBD based on client needs | \$240,000 per year | Up to \$55,000 per year |

Matching Requirements

The State budget appropriations require that PFS PSH funds be "matched" by existing resources and funding, as follows:

- **Housing Assistance** [40% PFS funds: 60% existing funds] - It is anticipated that the PFS PSH pilot program overall will meet this match requirement as individuals move from PFS housing support to existing housing voucher and similar programs.
- **Supportive Services** [60% PFS funds: 40% existing funds] – Service Providers will be expected to match the PFS supportive services funds they are awarded through other grants and billing health insurance for services (e.g., Medicaid).

Note that Service Providers will have wide discretion as to how they leverage and "match" PFS PSH funding for supportive services delivery so long as they can clearly demonstrate that:

- All PFS PSH activities are fully funded by some combinations of PFS PSH funding and existing resources, and
- The proposed use of PFS PSH funding advances the Service Provider's ability to achieve the outcomes established for PFS PSH.

Reporting Requirements

Service Providers will be expected to submit the following reports using templates provided by the Coalition

- **Semi-Annual Report:** This brief report will be due on July 31st and January 31st of each year and will provide an update on PFS PSH service delivery activities, including 1) obstacles and challenges, 2) accomplishments and "bright spots," and 3) changes in staff, including staff working directly with enrolled individuals, during the relevant time period. Service Providers will also be expected to include the results of standardized satisfaction surveys distributed to PFS PSH program participants and present qualitative feedback received from participants as part of these reports.
- **Quarterly Expenditure Reports:** These reports will be due on April 30th, July 31st, October 31st, and January 31st of each year.

Response and Submission Requirements

Informational Webinar

An informational webinar has been scheduled for Thursday, September 22, 2022 at 2PM ET. Interested Applicants are strongly encouraged to attend. Registration for the webinar is available at: [XXX](#)

Applicant Questions

Questions about this RFP will be accepted via email through Friday, September 23, 2022 at 11:59PM ET. Please send all questions to Gretchen Bell, Healthcare Initiatives Lead, at gretchen@rihomeless.org. All questions and responses will be posted on the Coalition's website.

Full Application Review Process and Criteria

Full applications and budgets will be reviewed by a committee that includes representation from the Coalition, EOHHHS, BHDDH, DOC, and subject matter experts in social impact investing.

Review criteria outlined below will be used to review and rank applications.

Please note that prior experience and success in the following areas is not included in the review criteria for full applications since all organizations invited to submit a full application will be regarded as highly competent in these areas:

- Working with individuals with a history of chronic homelessness and/or complex needs
- Ensuring that services are sensitive and responsive to the needs and circumstances of individuals from diverse backgrounds, including individuals from traditionally underrepresented or marginalized groups

| REVIEW CRITERIA | POINT VALUE |
|--|-------------|
| <p>The Applicant's plan for providing permanent supportive housing as a PFS PSH Service Provider, including the:</p> <ul style="list-style-type: none">● Extent to which the proposed plan is well-described and reasonable given the resources and capacity of the agency or partnership;● Extent to which the proposed plan reflects creativity and flexibility in the context of persistent statewide challenges related to housing and service delivery;● Extent to which the proposed plan reflects a hands-on understanding of the challenges inherent in serving individuals with a history of chronic homelessness and/or exceptionally complex needs;● Extent to which the proposed plan reflects a hands-on knowledge of the resources available in Rhode Island to support | 60 |

| | |
|--|------------|
| <p>such individuals, as well as an ability to leverage those resources on behalf of individuals enrolled in PFS PSH;</p> <ul style="list-style-type: none"> • Appropriateness of the proposed use of new PFS funds and the plan for meeting “match” requirements; • Ability of the proposed Management Plan to ensure coordinated service delivery and nimble decision making (<i>for Service Providers comprised of partnerships between two or more organizations, only</i>) | |
| <p>The Applicant’s staffing plan, including the:</p> <ul style="list-style-type: none"> • Experience and qualifications of proposed leaders and staff • Experience and qualifications of proposed vendors or consultants • Approach to recruiting, onboarding, and supporting staff members, especially those that work directly with clients | 30 |
| <p>The Applicant’s ability to work flexibly and collaboratively with peer organizations and stakeholders from different agencies and sectors, including the:</p> <ul style="list-style-type: none"> • Extent to which the Applicant demonstrates commitment and describes a thoughtful approach to working flexibly and collaboratively with peer agencies and stakeholders from different organizations and sectors • Extent to which the Applicant provides past examples of such flexible and collaborative work. | 10 |
| ALL REVIEW CATEGORIES | 100 |

Bonus Points: To incentivize the uptake of new Medicaid benefits, Applicants that are already certified to provide Home Stabilization Services (HSS) or Community Health Worker (CHW) services or that commit to becoming certified to provide such services prior to the launch of PFS PSH in January 2023 will receive 5 bonus points per Medicaid benefit (for a total of 10 possible bonus points) in the scoring of their PFS PSH application. For Applicants composed of a partnership between two or more agencies, a minimum of one partner agency must be certified to qualify for bonus points.

Project Terms and Conditions

Applicants awarded contracts will be required to abide by the Coalition’s Standard Contract Terms and Conditions, which will be provided during contract negotiation.

Applicants may review these terms and conditions prior to submitting their application by contacting Gretchen Bell at gretchen@rihomeless.org. All final contracts are subject to successful negotiation of a final statement of work and budget.

Exhibit A Overview and Background

The PFS PSH pilot will be Rhode Island's first experience with social impact investing, an innovative approach to financing social programs that makes it possible for governments to tackle social problems by tapping private investors for upfront program costs. In social impact investing models (also known as Pay for Success models), governments work with high performing service providers and intermediary organizations like nonprofits and charities to identify targets for measurably achieving program outcomes. These outcomes are in turn selected to reflect meaningful improvements in program participants' lives. If a PFS program successfully meets the identified outcome measures, government repays the original private investment plus a modest return. If the program falls short of achieving outcomes, private investors bear the risk and therefore the costs.

The main purpose of PFS models is to shift the financial "risk" of new social programs from taxpayers to private investors. Importantly, PFS can also be highly effective in terms of the following:

- unlocking new funding streams for nonprofits,
- building uncommon, inclusive, cross-sector partnerships to advance innovation and program effectiveness,
- sharpening the focus on clearly defined, jointly agreed to, and meaningful outcomes tracked by a third-party evaluator; and
- introducing rapid feedback to strengthen adaptive, data-driven program management and service delivery.

More information about PFS models in general is available [here](#).

In Rhode Island, PFS is being leveraged to launch a new permanent supportive housing (PSH) program as a means of addressing chronic homelessness, one of the state's most intractable and worsening problems. PSH is an evidence-based intervention that combines affordable housing assistance with voluntary supportive services to address the needs of chronically homeless individuals. According to the National Alliance to End Homelessness (NAEH), on a national level, investments in PSH have helped decrease the number of chronically homeless individuals by 8% since 2007. Research demonstrates that PSH can also increase housing stability and improve health for participants, as well as lower public costs associated with the use of services such as shelters, hospitals, jails, and prisons. More information about permanent supportive housing is available [here](#).

The Coalition, a statewide organization that engages collaboratively with advocates, providers, and faith-based organizations across Rhode Island to create and advance lasting solutions to prevent and end homelessness, serves as the lead agency for PFS PSH planning, implementation, and management. The State of Rhode Island, including the Rhode Island Executive Office of Health and Human Services (EOHHS) and Executive Office of Housing are close partners in these efforts.

Exhibit B Processes for Identifying and “Assigning” PFS PSH Eligible Individuals

Per the terms of the FY 2022 State budget appropriations for PFS PSH, ~**75 PFS PSH** slots must be filled by Medicaid high utilizers; the remaining ~**50 PFS PSH** slots must be filled by individuals with high DOC involvement and/or by those who are high utilizers of homeless services. The State budget language recognizes that there may be significant overlap between these three groups.

To ensure compliance with these State budget terms and consistent with the data-driven approach that characterizes PFS models, the PFS PSH pilot program will leverage data from Medicaid, HMIS, and DOC to identify high utilizers. The highest utilizers of each of these systems will be combined into a single PFS PSH “Eligibility List.” Individuals on the PFS PSH Eligibility List will in turn be distributed, or “assigned,” to Service Providers via a regular bi-weekly or monthly meeting based on numerous criteria, including:

- Existing relationships with Service Providers
- Match between Service Provider expertise and an individual’s unique circumstances
- Individual preference
- Service Provider preference
- Geographic proximity

The Eligibility List will be updated semi-annually throughout the program.

There will be two exceptions to this data-driven approach to PFS PSH eligibility. These are:

- Individuals scheduled for release from prison based on their “good time” accumulated will be added to the PFS PSH Eligibility List if they are being released to homelessness or unstable housing. This modification is intended to disrupt the cycle between homelessness and incarceration at an earlier stage for some individuals.
- An “Alternative Referral Pathway” will enable Service Providers and others in the community to refer individuals to PFS PSH if they appear to meet the general criteria of exceptionally complex needs and a history of chronic homelessness. This modification is intended to ensure that otherwise-eligible individuals who the data-driven processes may have failed to identify still have a point of entry to PFS PSH.

Lastly, per the FY 2022 State budget language, individuals on the PFS PSH Eligibility List must meet either the HUD Category 1 or Category 4 definition of homelessness in order to enroll in PFS PSH:

Category 1: Literally homeless; the situation of an individual or family lacking a fixed, regular, and adequate nighttime residence, meaning:

- Has a primary nighttime residence that is a public or private place not meant for human habitation;
- Is living in a publicly or privately-operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, and local government programs);

- Is exiting an institution where he or she has resided for ninety (90) days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering the institution

Category 4: Fleeing/attempting to flee domestic violence. Any individual or family who:

- Is fleeing, or is attempting to flee, domestic violence;
- Has no other residence; and
- Lacks the resources or support networks to obtain other permanent housing

Exhibit C: PFS PSH Funding for Housing Units: Allowable Uses and “Match” Requirements

The PFS PSH pilot will make available **\$2M** in new private investment funding over four years to cover a portion of the housing costs for individuals participating in the program. Per the parameters established for PFS PSH in the State budget, the PFS PSH pilot must also leverage **\$3M** from the infrastructure of housing vouchers, rental subsidies, and similar resources that already exists in Rhode Island in order to help cover housing costs for program participants.

New PFS funds for housing will be primarily used to enable eligible individuals to move into housing without having to wait to reach the top of a housing voucher waitlist, a process that can take many months. Once program participants qualify for an existing housing voucher program or similar resource, the portion of their housing costs supported by new PFS funds will instead be covered by the existing housing voucher (or similar) program. Individuals who do not meet the eligibility criteria for any existing housing program will be supported by new PFS housing dollars for the duration of their PFS PSH program participation. (The assumption is that many such individuals will have a history of justice involvement).

A regular PFS PSH meeting will serve as a forum for allocating new PFS housing funds to individual program participants. Allocation of new PFS housing funds will be based on criteria such as an individual participant’s place on housing voucher waitlists, their eligibility for existing housing voucher programs, and the urgency of their current situation. Regular meetings will also be used to monitor participants’ progress to the top of the waitlist(s) for existing housing voucher programs so that financial support for their housing can be promptly transferred from new PFS dollars to existing housing resources.

This approach leverages new PFS housing funds to eliminate the lengthy wait for housing vouchers that is a known, significant barrier to helping individuals become stably housed. Notably, it also enables new PFS housing dollars to be used flexibly to assist individuals with the most intractable barriers to obtaining housing and/or the most urgent needs.

Expectations for Service Providers

Service Providers procured for the PFS PSH pilot will be charged with helping program participants navigate the housing voucher (and similar) programs that already exist in Rhode Island. Services Providers will be selected in part based on their demonstrated ability to help individuals with a history of chronic homelessness, high healthcare utilization, and/or frequent justice involvement access the resources they need to obtain housing.

Service Providers will automatically receive the equivalent of two months of PFS housing support for each PSH housing slot awarded to them at the start of the PFS PSH pilot. For example, if three Service Providers are procured, the initial disbursement of PFS housing funds would be:

Subsequent PFS housing funds will be disbursed to Service Providers based on need as communicated at regular meetings and documented via the quarterly financial reports that Service Providers will be required to submit to the Coalition.

The approach to the allocation and disbursement of new PFS housing funds described above is intended to ensure that all Service Providers are equipped with enough cash on hand to 1) make timely housing

payments for the individuals they have already helped to become housed, and 2) get newly enrolled individuals and those who are still looking for housing into housing as soon as it becomes available. Notably, it also aims to take into account: 1) a slower and/or inconsistent timeline for enrolling eligible individuals in PFS PSH at the outset of the program, and 2) variation in the need for PFS housing dollars across Service Providers that will be impossible to predict at the outset of the program. (

The expectation is that Service Providers' need for PFS housing funds will stabilize as more program participants obtain stable housing.

Exhibit D: PFS PSH Funding for Supportive Services: Allowable Uses and “Match” Requirements

The PFS PSH pilot will make available **\$2.4M** in new funding over four years to cover a portion of the supportive services provided for individuals participating in the program. Per the parameters established for PFS PSH in the State budget, the PFS PSH pilot must also leverage **\$1.6M** from existing resources, including but not limited to grants and/or reimbursements from Rhode Island Medicaid, in order to help cover supportive services costs for program participants.

All potential Service Providers will be required to describe in their full application and budget how they plan to use a combination of new PFS supportive services dollars and existing resources to fund core activities of their permanent supportive housing program. For the purposes of the PFS PSH pilot program, core activities include:

- Finding and engaging/enrolling the eligible individuals “assigned” to the Service Provider
- Providing support and assistance that enables enrolled individuals to obtain permanent housing, including housing search assistance and assistance accessing resources like housing vouchers and rental subsidies
- Maintaining enrolled individuals’ engagement in the PFS PSH program
- Identifying and providing and/or coordinating the wide variety of supportive services individuals might require in order to remain housed.

Such services might include but will not be limited to: substance abuse services, psychiatric/mental health services; treatment planning and monitoring; accompaniment to medical and dentist appointments; help to order and manage medications; representation at court hearings; help with managing money and paying bills; help to grow confident with housekeeping, shopping, cooking, and transportation; help enrolling in benefits like SSI/SSDI; and help with finding and keeping a job or enrolling in GED, training, or similar programs.

Service Providers have wide discretion as to how they use new PFS funds for supportive services flexibly so long as they can clearly demonstrate that 1) all PFS PSH core activities are fully funded by some combinations of new PFS dollars and existing resources, and 2) the proposed use of new PFS funds advances the Service Provider’s ability to achieve the outcomes established for the PFS PSH pilot program.

Examples of potential uses of PFS funds for supportive services include but are not limited to:

- Activities or resources to strengthen partnerships between agencies from different sectors
 - *For example, staff time and/or TA to develop workflows or strengthen cross-sector teams, data sharing platforms, etc.*
- Activities or resources to address workforce challenges
 - *For example, signing bonuses, student loan repayment, professional development, other recruitment/retention incentives*
- Services or programs not currently supported by any existing funding source

- *For example, programs to reduce recidivism among populations with high justice involvement*
- Services or activities for which other funding might exist but is not accessible to or leveraged in a particular Service Provider’s model
 - *For example, one Service Provider may leverage the peer recovery workforce for outreach and engagement and thus tap into the Peer Recovery Medicaid benefit to cover outreach costs; another Service Provider may elect to conduct outreach via a different workforce and thus cover outreach costs via PFS dollars*
- Activities and resources for which funding exists but is often insufficient and/or has numerous “strings” that make it inaccessible to some individuals
 - *For example, food and basic needs, childcare, job training, etc.*

New PFS funds for supportive services will be allocated to procured Service Providers based on the number of PSH slots they are awarded and disbursed quarterly or semi-annually.

This approach is intended to enable Service Providers to leverage new PFS supportive services funds flexibly and creatively based on their access to existing funding streams, their staffing model and internal infrastructure, and the unique populations they serve. It also explicitly recognizes that there may be multiple successful paths to achieving the same outcomes.

Expectations for Service Providers

Service Providers procured for the PFS PSH pilot will be charged with successfully carrying out all PFS PSH core activities (described above) for the eligible individuals assigned to them. Services Providers will be selected in part based on their demonstrated track record of effectively fulfilling responsibilities similar to the PFS PSH core activities for individuals with complex needs and/or a history of chronic homelessness.

Service Providers will receive an annual grant for PFS supportive services that is calculated based on the number of PSH slots they are awarded. For example, if three Service Providers are procured with the following distribution of PSH slots, the annual PFS supportive services funding for each would be calculated as:

| | # PSH slots awarded | PFS supportive services \$ |
|---------------------------|----------------------------|-----------------------------------|
| Service Provider A | 25 | \$120,000 |
| Service Provider B | 50 | \$240,000 |
| Service Provider C | 50 | \$240,000 |
| Total | 125 | \$600,000 |

**Based on the State budget language, the assumption is that one PSH unit = \$4,800 in supportive services per year*

Access to the existing funding sources cited will be verified during the Service Provider RFP review process. (For example, if a prospective Service Provider states that they will leverage Medicaid

reimbursement for Home Stabilization Services, the RFP review team will confirm that the agency is a certified HSS provider).

Procured Service Providers will be required to submit quarterly financial reports on their use of the new PFS supportive services funds awarded to them. Service Providers and the PFS PSH management team, with support from State agencies, will work together to document that the required “match” from existing funding sources has been achieved.

Exhibit E Expectations for Service Providers PFS Financing Model and PFS PSH Program Design

Service Providers selected for PFS PSH will be expected to meet a number of requirements associated with the PFS financing model and PFS PSH program design. These include:

Participation in Regular Meetings – Service Providers will be expected to participate in regular meetings with the PFS PSH program management team and other PFS PSH Service Providers.

Regular meetings will serve numerous purposes, including:

- Matching individuals who have been identified as eligible for PFS PSH based on their high utilization of Medicaid, DOC, and/or homeless services to Service Providers.
- Allocating new PFS housing funds to enrolled individuals based on 1) their place on waitlists for existing housing vouchers programs, 2) their eligibility for existing housing voucher programs, and 3) the urgency of their current situation. (Please see Exhibit C for more details on this process).
- Engaging in joint problem solving, shared learning, and ongoing program improvement, especially in the context of the data emerging from PFS PSH as the program gets underway.

Every effort will be made to limit meetings to one hour only. Meetings are expected to occur more frequently (e.g., bi-weekly) at the beginning of the PFS PSH program and then transition to a less frequent cadence as PFS PSH reaches steady state.

Engaging in Data Collection for Outcome Measures – The Coalition and its partners expect that the Service Providers selected for PFS PSH will need to engage in some level of data collection, since provider-level data will likely be essential to determining the extent to which the PFS PSH pilot overall is achieving identified outcome measures. The PFS PSH Evaluation Plan is still being developed, so detailed data collection requirements could not be included in this RFP; however, it is anticipated that most provider-level data collection will relate to “housing stability” outcome measures. Please note that the Coalition is committed to working with Service Providers and the independent PFS PSH Evaluator to minimize the data collection burden for Service Providers while maintaining the level of rigor required by the PFS model.

Meeting Requests Related to Private Investor Due Diligence – Service Providers will be expected to comply with requests from private investors conducting due diligence prior to PFS PSH financing.

Such requests are anticipated to include, but may not be limited to, the following:

- Description of the program intervention
- Project plan, including overview of outreach, referral, and service delivery process
- List of key performance metrics that are tracked
- Reports and/or evaluations that demonstrate evidence of the Service Provider's impact
- Overview of any existing government contracts
- Organizational chart
- Current budget(s)
- Last three (3) years' audited financials

Please note that the Coalition and its partners are committed to working with Service Providers to minimize the burden of such requests for Service Providers. Please also note that such requests would be made prior to the launch of PSH service delivery and constitute a one-time-only task.

Attachment 1
Letter of Interest
Guidance and Questions

Please respond to the questions outlined below in a separate MS Word or PDF document. Responses should adhere to the word limits included next to each question.

Letters of Interest (LOIs) may be submitted by single organizations or partnerships comprised of two or more organizations. Single organizations selected to submit a full application and budget will have the opportunity to form or join a partnership prior to submitting the full application, if they so desire.

Please be sure to identify a contact person for your application and include contact information somewhere in your LOI.

- Please provide a brief description of your organization or the organizations that comprise your partnership, including mission and overall areas of work. (Max. 500 words)

- Please summarize your organization or partnership's experience working with individuals with a history of chronic homelessness and/or extremely complex needs, including high healthcare utilization and/or high Department of Corrections (DOC) involvement. Please be sure to highlight any experience conducting outreach and providing housing navigation services, supportive services, and/or permanent supportive housing. (Max. 750 words)

- Please describe your organization or partnership's approach to ensuring the services you provide are sensitive and responsive to the needs and circumstances of individuals from diverse backgrounds, including individuals from traditionally underrepresented or marginalized communities. (Max. 750 words)

- Please describe your motivation for submitting a Letter of Interest in response to the opportunity to provide permanent supportive housing services through the PFS PSH pilot program. (Max. 750 words)

- Please indicate whether you would be interested in exploring a partnership with other organizations

Attachment 2

Application Cover Sheet

Please complete the Application Cover Sheet and include it with your application submission.

Please note that applications submitted without a signed Application Cover Sheet will be considered incomplete.

The enclosed application is submitted in response to the opportunity for eligible Service Providers to contract with the Rhode Island Coalition to End Homelessness to provide permanent supportive housing services via the Rhode Island Pay for Success (PFS) Permanent Supportive Housing (PSH) pilot program.

For the purposes of the PFS PSH pilot program, “Service Provider” may refer to a single organization or two or more organizations that have decided to partner in response to this opportunity.

Section A: Applicant Information

Is the Applicant a single organization or a partnership between two or more organizations?

- Single organization
- Partnership between two or more organizations

Lead Organization Name:

Lead Organization Address (Primary):

Annual Operating Budget FY21:

Average number of clients served annually:

Please provide any clarifying information, as needed:

Partner Organization Name:

Partner Organization Address (Primary):

Annual Operating Budget FY21:

Average number of clients served annually:

Please provide any clarifying information, as needed:

Partner Organization Name:

Partner Organization Address (Primary):

Annual Operating Budget FY21:

Average number of clients served annually:

Please provide any clarifying information, as needed:

Please identify and provide the above information for any additional partner organizations in a separate document.

Geographies served by the agency or partnership (Please check all that apply):

- Newport
- Pawtucket/Central Falls
- Providence
- South County
- Warwick
- Woonsocket

Please identify whether the organization or partnership is currently certified or intends to become certified by January 2023 to provide the following Medicaid services:

Home Stabilization Services (HSS)

Currently certified Yes No

Intends to be certified by January 2023 Yes No N/A

Community Health Worker (CHW)

Currently certified Yes No

Intends to be certified by January 2023 Yes No N/A

Primary contact person for the application

Name:

Title:

Email:

Phone:

Section B: PFS PSH Slots Requested and Program Commitments

Please identify the number of individuals the organization or partnership is proposing to serve via the PFS PSH pilot program:

25

50

75

100

125

Please check to confirm that if selected as a PFS PSH Service Provider, the organization or partnership will meet the expectations outlined in Exhibit E: Expectations for Service Providers

Authorized Signature

Please note that proposals submitted by partnerships of two or more agencies must be signed by the lead organization:

Authorized Signature:

Printed Name and Title:

Organization Name:

Date:

Attachment 3
Full Application
Guidance and Questions

Please respond to the questions outlined below in a separate MS Word or PDF document. Responses should adhere to the word limits included next to each question.

- Please outline your plan for providing permanent supportive housing services as a PFS PSH Service Provider. Please be sure to clearly address how you intend to carry out the following PFS PSH core activities:
 - Finding and engaging/enrolling the eligible individuals for whom the PFS PSH Service Provider is responsible;
 - Providing support and assistance that enables enrolled individuals to obtain permanent housing, including housing search assistance and assistance accessing resources like housing vouchers and rental subsidies;
 - Maintaining enrolled individuals' engagement in the PFS PSH pilot program; and,
 - Identifying and providing and/or coordinating the wide variety of supportive services that enrolled individuals might require in order to remain housed.

Such services might include but will certainly not be limited to: substance abuse services, psychiatric/mental health services; treatment planning and monitoring; accompaniment to medical and dentist appointments; help to order and manage medications; representation at court hearings; help with managing money and paying bills; help to grow confident with housekeeping, shopping, cooking, and transportation; help enrolling in benefits like SSI/SSDI; and help with finding and keeping a job or enrolling in GED, training, or similar programs.

Please also be sure to identify any organizations, relationships, and/or networks that will be critical to your agency's or partnership's ability to successfully engage and serve individuals eligible for PFS PSH.

(Max. 2,000 words plus any diagrams or graphics that you feel might be helpful)

- Please describe your organization or partnership's approach to working flexibly and collaboratively with peer agencies and stakeholders from different organizations and sectors. Please include specific examples, if possible. (Max. 750 words)
- Please provide a staffing plan that identifies and describes the qualifications, roles, and responsibilities of all staff members critical to success of PFS PSH service delivery, including brief bios for all staff members. Such staff members might include but are not limited to: Program Directors, Program Managers, Case Managers, Advocates, Outreach Workers, Clinical Providers, and/or others depending on the service delivery model proposed. Please be sure to describe your process for recruiting, onboarding, and supporting staff members, with a particular focus on those who work directly with clients. Please be sure to identify the staff-client ratios you will employ for the PFS PSH pilot program. (Max.1,000 words)
- *(For partnerships only)* Please provide a management plan that clearly describes the roles and responsibilities of each partner organization, as well as the processes by which the delivery of services will remain coordinated and program management decisions will be made. Applicants should be sure to clearly identify the lead partner for the purposes of financial management and compliance. (Max. 750 words)

Please also provide Letters of Commitment from all partner organizations.

Attachment 4
Full Application
Budget Guidance

Please use the Excel Budget Form provide a one-year budget for PFS PSH service delivery. Budgets should be based on the number of PFS PSH slots requested and incorporate both new PFS funds for supportive services and required “match” funds. Total dollar amounts based on the number of slots requested are outlined below.

(Note that PFS housing dollars will be distributed to procured Service Providers based on the circumstances of enrolled individuals, as described in Exhibit C).

| # PFS PSH Slots Requested | PFS Funding | “Match” Funding | Total Funding |
|----------------------------------|--------------------|------------------------|----------------------|
| 25 | \$120,000 | \$80,000 | \$200,000 |
| 50 | \$240,000 | \$160,000 | \$400,000 |
| 75 | \$360,000 | \$240,000 | \$600,000 |
| 100 | \$480,000 | \$320,000 | \$800,000 |
| 125 | \$600,000 | \$400,000 | \$1,000,000 |

Please note that the Excel Budget Form requires: 1) a detailed budget for the proposed use of new PFS funds, and 2) estimates of the funding that will be leveraged from existing resources (e.g., Medicaid reimbursements, federal or private grants, etc.) to meet the PFS PSH “match” requirement and fully fund PSH service delivery.