

# **Request for Quotes**

# Mississippi Department of Mental Health Employee Assistance Program (EAP) Services

Contact: Toni Johnson MS Department of Mental Health 239 North Lamar St. Jackson, MS 39201 601-359-1288

toni.johnson@dmh.ms.gov Date: Tuesday, June 4, 2019

#### Introduction

The Mississippi Department of Mental Health (DMH) certifies, provides and/or financially supports a network of services for people with mental illness, intellectual/developmental disabilities, substance use disorders and/or other dementia. It is DMH's goal to improve the lives of Mississippians by supporting a better tomorrow...one person at a time.

#### **Project Overview**

The Mississippi Department of Mental Health, Central Office seeks to contract with up to 3 vendors to provide contractual comprehensive Employee Assistance Program (EAP) services for approximately 100 employees.

#### **Deadlines/Timelines**

Request Issue Date	Tuesday, June 4, 2019
Quote Submission Deadline	Wednesday, June 19, 2019 by 4:00 p.m. CST
Selection Completed	Friday, June 21, 2019 at 12:00 p.m. CST

## **Quote Submission**

A signed quote must be submitted on letterhead directly to Mrs. Toni Johnson via email at <u>Toni.Johnson@dmh.ms.gov</u> by 4:00 P.M. CST on Wednesday, June 19, 2019.

The quote must, at a minimum, contain the following information:

- a) a statement of price;
- b) terms of the agreement (i.e. valid dates of the quote);
- c) a description of the services to be offered by the vendor to the agency; and,
- d) name, address and telephone number of the offeror

#### **Scope of Services**

The Mississippi Department of Mental Health, Central Office is requesting written quotes for contractual comprehensive Employee Assistance Program (EAP) services for approximately 100 employees. The scope of services should include, but not be limited to the following:

1. A maximum of five (5) counseling sessions for an employee or a covered dependent(s) which includes: spouse, unmarried children under the age of 26, step children, or legal dependent under the age of 26 living at home or in school full time. Counseling services should include the following:

- a. individual
- b. family
- c. group therapy/counseling services associated with mental healthissues,
- d. marital conflict,
- e. physical/sexual abuse, and various types of behavioral issues exhibited by children and adults
- 2. Please specify in the written quote if the proposed vendor provides psychological testing services as a component of EAP services. If psychological testing services are provided, indicate if there are additional fees outside of those included for the counseling sessions described in item 1.
- 3. Reports Preparation and submission of quarterly reports of EAP utilization to the MSDMH Coordinator including the number of EAP calls, types of referral, number of admissions to the counseling services and number of counseling sessions, to include type of session.

#### **Selection**

It is the intent of the MS Department of Mental Health to select up to 3 vendors to provide the above stated services. In compliance with regulations regarding small purchases, DMH will award the contract to the vendor offering the lowest and best proposal/quote.

## **Contract Dates**

The anticipated start date for this contract is July 1, 2019. The end date is June 30, 2020. The contract may be renewed an additional four years contingent upon agreement between both parties and availability of funds.