**State of Alaska**
**Department of Health and Social Services**
**Division of Behavioral Health**

# Request for Proposals
# Residential Withdrawal Management
# For FY2023

Grants and Contracts

NOTICE: Proposals will ONLY be accepted through GEMS. Applicants are responsible for reviewing the GEMS homepage at https://gems.dhss.alaska.gov/ for details regarding agency registration and availability of technical assistance. Log into GEMS through myAlaska, https://my.alaska.gov/Welcome.aspx to begin the application process. Once you are logged into GEMS, guidance and instruction are available in the Documents tab and from the film strip icon. Applicants are responsible for monitoring GEMS or the State Online Public Notices site for any changes or amendments that may be issued regarding this solicitation.

Relay Alaska provides assisted communication services at 711 or 1-800-770-8973 from a TTY phone, and at 1-800-770-8255 from a voice phone.

CONTACT PERSON: Amy Burke, Grants Administrator
PHONE: (907)465-1624
E-MAIL: amy.burke@alaska.gov

PROPOSAL DUE DATE: April 8, 2022, 3:59 PM
DEADLINE FOR WRITTEN INQUIRIES: March 29, 2022, 3:59 PM
PROJECT PERIOD BEGINS: July 1, 2022

# Table of Contents

**Section 1 Grant Program Information**

1.01 Introduction and Program Description

1.02 Program Goals and Anticipated Outcomes

1.03 Program Services/Activities

1.04 Program Evaluation Requirements and Reporting

1.05 Target Population and Service Area

1.06 Program Funding

**Section 2 Applicant Qualifications**

2.01 Agency Experience

2.02 Project Staffing

2.03 Administrative, Management, and Facility Requirements

2.04 Support/Coordination of Services

**Section 3 General Instructions for Proposal Submission**

3.01 Eligibility

3.02 Acceptance of Terms

3.03 Inquiries

3.04 Proposal Costs and Content

3.05 Duration

3.06 Proposal Review

3.07 Final Decision Authority

3.08 Notification of Grant Award and Appeals

3.09 Cancellation of the RFP/Termination of Award

**Section 4 Submission Requirements/Evaluation Criteria**

4.01 Minimum Responsiveness Criterion per 78.100(2)(A)

4.02 Other Technical Requirements per 7 AAC 78.060, 78.090(b) and 78.100

4.03 History of Compliance with Grant Requirements per 7 AAC 78.100(2)(B)

4.04 Questions and Criteria Related to Program Policy, Goals, Outcomes, and Activities

4.05 Applicant Qualifications - Criteria Relating to Personnel, Management, and Facilities

4.06 Demonstration of Support/Coordination of Service

## Section 1 Grant Program Information

### 1.01 Introduction and Program Description

The Department of Health and Social Services (DHSS or Department), Division of Behavioral Health (DBH) is requesting proposals from eligible applicants to provide residential Substance Use Disorder (SUD) Withdrawal Management services in Alaska that are in alignment with the American Society on Addiction Medicine's (ASAM) standards for withdrawal management. Program Services are authorized under 7 AAC 78 Grant Programs. Additional governing statutes are AS 47.30.520-620 Community Mental Health Services Act; AS 47. 37 Uniform Alcoholism and Intoxication Treatment Act, 7 AAC 70 Behavioral Health Services, 7 AAC 135 Medicaid Coverage Behavioral Health Services, 7 AAC 138 115 Substance Use Disorder Waiver Services, 7 AAC 139 1115 Behavioral Health Waiver Services, and 7 AAC 160 Medicaid Program: General Provisions. Access State of Alaska statutes and regulations at Department of Law document library or through the contact identified on the cover of this Request For Proposal (RFP).

DBH receives multiple phone calls from individuals seeking withdrawal management services (WM) for themselves or their loved ones or acquaintances, primarily for alcohol and/or opiates. These calls are usually made when someone has "hit bottom" and is desperate for immediate help. Ambulatory Withdrawal Management is not sufficient in these circumstances; the individuals need 24-hour monitoring involving trained medical staff, whether it be in a medically monitored or clinically managed WM program. If they are unable to access this level of care, most individuals return to their alcohol and/or drug use or go to the hospital emergency department.

There are currently only a few residential WM programs in the State of Alaska. Some of these programs are consistently at full capacity and have a wait list. Since, as aforementioned, most of these individuals cannot wait for a bed to become available, they either return to substance use or show up at the emergency department. This RFP is in response to the urgent need for more residential WM programs and/or an expansion of the number of WM beds in existing programs. There will be up to two awards granted.

### 1.02 Program Goals and Anticipated Outcomes

The proposed project must demonstrate a thorough understanding and support of the grant program goals and outcomes anticipated by the Department.

- Providing timely, accessible care
- Providing effective care as indicated by program outcomes
- Utilization of Evidence-Based Practices
- Provision of culturally and linguistically appropriate services
- Provision of trauma-informed services
- Promotion of recovery, resilience, and community integration

Projects must meet or exceed anticipated minimum outcomes described in this RFP.

### 1.03 Program Services/Activities

Responses to this solicitation can be for one of two levels of withdrawal management: Level 3.7-WM or level 3.2-WM. Each of these levels of withdrawal management must align with the standards contained in The ASAM Criteria 3 (American Society of Addiction Medicine, Third Edition).

The goals of these WM programs are to assist adults to safely withdraw (formerly "detox") from alcohol and/or other drugs as these individuals are often frequent users of Emergency Medical Services (EMS), Public Safety services, the Emergency Rooms (ER) of acute care hospitals or inpatient psychiatric care services. Outcomes will demonstrate a reduction in the use of these expensive services as well as a reduction in deaths and continued substance misuse. In addition, these WM programs are expected to refer these individuals to continuing care during or upon completion of these WM services.

NOTE: DBH funded programs providing SUD services are required to comply with Substance Abuse Block Grant (SABG) Requirements and these can be found in Attachment A- DBH Behavioral Health Provider Standards and Administrative Manual for SUD Services.

**Medically Monitored Inpatient Withdrawal Management (WM) Facilities (ASAM Level 3.7-WM)**. This level of care provides for 24-hour evaluation and withdrawal management in a permanent facility with inpatient beds. Services are delivered by medical and nursing professionals under a defined set of physician-monitored procedures or clinical protocols.

**Clinically Managed Residential Withdrawal Management Facilities (ASAM Level 3.2-WM)** This level of care is sometimes referred to as "social detox". It is an organized service that may be delivered by appropriately trained staff who provide 24-hour supervision, observation, and support for patients who are intoxicated or experiencing withdrawal. This level is characterized by its emphasis upon peer and social support rather than medical and nursing care, however medical evaluation and consultation must be available 24 hours a day as needed.

Both levels of Withdrawal Management must provide the following services:

- Availability of specialized clinical consultation and supervision for biomedical, emotional, behavioral, and cognitive problems.
- Availability of medical nursing care and observation as warranted based on clinical judgement.
- Direct affiliation with other levels of care
- Ability to conduct or arrange for appropriate laboratory and toxicology tests.
- A physical examination done by a Physician, Physician Assistant or Nurse Practitioner within 24 hours of admission and appropriate laboratory and toxicology tests.
- An addiction-focused history and sufficient biopsychosocial assessment to determine the level of care in which the patient should be placed and for the individualized care plan.
- An individualized treatment plan with goals and objectives and recommended actions to meet those objectives.
- Daily assessment of patient progress through withdrawal management and any treatment changes.

Required Documentation must include:

- Alaska Automated Information Management System (AKAIMS) Minimal Data Set.
- Progress notes that clearly reflect implementation of the treatment plan and the patient's response to treatment, as well as subsequent amendments to the plan.
- Withdrawal rating scale (i.e. CIWA/COWS) tables and flow sheets (which may include tabulation of vital signs) are to be used as needed.

Applicants will upload a timeline for the initiation of services and project activities. The start date for this project is July 1, 2022.

Proposals must describe the ways in which the project aligns with program intent as well as identifying the

ASAM level of service to be provided. The response will identify agency resources available to the project; describe project activities; and clearly state the project's anticipated goals, outputs, and outcomes.

**1.04 Program Evaluation Requirements and Reporting**

Results Based Budgeting Framework

Results based budgeting provides a framework in which allocated resources support, and are justified by, a set of outputs and expected results. Within this framework, actual performance and achieved outcomes are measured by objective performance measures.

Projects are required to align with program objectives expressing Department priorities and core services. Projects will use performance measures to evaluate progress toward meaningful outcomes, and to initiate data collection and reporting consistent with Department priorities.

The Department Priorities, Core Services, Objectives, and Performance Measures of Effectiveness and Efficiency for this program are:

**Department Priorities**

1. Health & Wellness Across the Life Span

**Department Core Services**

1.1 Protect and Promote the Health of Alaskans

**Department Objectives**

1.2 Decrease Substance Use and Dependency

**Performance Measures**

- Efficiency: Maintain a bed utilization rate of at least 75%
- Effectiveness: Meet or exceed the state average for program completion rates as documented in AKAIMS (to include Satisfactory Completion, Referral to another program with satisfactory progress, and Transferred to another facility for health reasons)
- Effectiveness: Percent of individuals referred to SUD treatment upon discharge

The applicant's proposed evaluation plan will incorporate the performance measures of effectiveness and efficiency identified above. Applicants can propose additional performance measures for evaluating the project's progress in achieving results supportive of program goals and outcomes. The applicant's evaluation plan must include indicators and data gathering strategies that will be used.

Required grant reporting will include:

1. Cumulative Fiscal Reports recording overall grant and match expenditures by budget line; and
2. Program Reports in the format prescribed by the program.
3. AKAIMS Minimal Data Set (MDS) is required of all applicants. See Attachment B for a comprehensive description of AKAIMS Minimal Data Set requirements.

Applicants must affirmatively agree to comply with the requirements of the AKAIMS Minimal Data Set (Attachment

B).

**1.05 Target Population and Service Area**

Applicants must clearly describe the population targeted by the project, including the area or communities that will be served. Proposals will be evaluated for compatibility with the program's intended target population identified in this solicitation.

**Target Population:** The target population for the solicited services are individuals with substance use disorders and co-occurring substance use and mental health disorders.

**Service Areas and Communities:** The service areas and communities requested for the services solicited are Statewide, however communities with the greatest need for these services will be prioritized.

**1.06 Program Funding**

Funds available for this program are anticipated to total $1,600,000 in Federal American Rescue Plan Act (ARPA) funds for the grant duration. Funds available for this program statewide total $800,000 per fiscal year. Up to two grants will be awarded.

**Match Requirement:** The budget must include matching funds equal to 25.00% of the proposed DHSS funds. Calculate required match with the following formula.

Total Requested Grant Award x Required Match Percentage = Required Match

Federal grant funds may not be used to match federal funds awarded through this grant program, and State grant funds may not be used to match State funds awarded through this grant program.

Eligible sources of matching funds include:

- Local Cash: local sources, including local tax receipts, municipal revenue sharing, cash donations
- Local In-Kind: donated items of value for which the applicant incurs no cost, including volunteer labor and donations of supplies, equipment, space
- Other Sources: government and non-government grant awards, third party receipts, direct receipts such as gaming or sales of goods
- Grant Income: earnings anticipated as a result of this project proposal receiving award, and Medicaid reimbursements if award of this grant is required for the applicant to bill Medicaid for awarded services
- Medicaid: includes Medicaid which is not Grant Income, as well as other third-party receipts

**Proposed Budget:** The applicant must submit a budget proposal for the first fiscal year of the project. The proposed budget detail and narrative, including required match, will support the program's results-based service delivery and staffing requirements stated in this RFP. Funds are to be used for administrative costs and service delivery, including supplies and equipment. Expenditures for construction and building repairs are not allowable.

The proposed budget will be fully compliant with the limitations described in this RFP, and those detailed in 7 AAC 78.160 (Costs). Regulations are provided under the GEMS Documents tab.

Resources specific to budgeting are also available under the GEMS Documents tab. DHSS Grant Budget Preparation Guidelines provide information and guidance about budget lines, cost detail groupings, and narrative requirements.

Grantee User Manual Part I provides detailed instructions for entering a budget proposal in the chapter "Responding to a Solicitation."

**Other Agency Funding:** Prior to submitting a proposal, applicants are required to list all other agency funding received and applied for. This task must be completed by an Agency Power User in the Other Funding section of the Agency Administration tab. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

**Indirect Costs:** If the proposed budget includes indirect costs, 7 AAC 78.160(p) requires a copy of the agency's current federally approved Indirect Cost Rate Agreement. The agreement is to be uploaded in the Agency Administration tab. Lapsed agreements can be used if uploaded with the negotiating federal agency's written approval to continue using the rate until a new agreement is negotiated. If an agency has never entered into a federally approved Indirect Cost Rate Agreement or no longer has a federally approved agreement in place, the recently updated Federal Uniform Guidance 2 CFR 200 now allows that agency to budget the 10% De Minimis.

**Payment for Services/Grant Income:** If applicable to the services proposed in response to this solicitation, awarded grantees will have a Medicaid Provider Number or apply to obtain one, and will make reasonable effort to bill all eligible services to Medicaid and any other available sources of payment before seeking grant support for delivery of the proposed services. DHSS funds are the payer of last resort.

In the applicant's proposed budget, anticipated receipts and expenditures for all grant income must be evident in the detail and narrative. Fiscal reports for awarded income generating projects will include the receipts and expenditure of all grant income.

## Section 2 Applicant Qualifications

### 2.01 Agency Experience

Proposal evaluation will include consideration of the applicant's history of compliance with service and grant requirements, and previous experience in providing the same or similar services. Evaluation may include DHSS site reviews, program audits, and confirmation of the successful resolution of any findings. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

The applicant must describe previous experience providing services the same or similar to those proposed. The description must clearly identify the time period over which services were provided and the target population served.

### 2.02 Project Staffing

Project staffing must be sufficient to implement the proposed activities in order to meet program goals and the anticipated outcomes.

Resumes or position descriptions for current vacant or proposed positions and professional credentials for key project personnel must be uploaded as part of the response. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

**Medically Monitored Inpatient Withdrawal Management**

- A Physician (or Physician's Assistant or Nurse Practitioner designated by a Physician, under a collaborative

agreement) must be available 24 hours a day by telephone.
- A Physician (or Designee) must be available to assess patients within 24 hours of admission, or this can be done prior to admission via a medical or acute care clinic.
- A Registered Nurse or Licensed Practical Nurse must be available to conduct a nursing assessment upon admission.
- Appropriately licensed and/or credentialed staff must be available to administer medications in accordance with physician orders
- A nurse is responsible for overseeing the monitoring of the patient's progress and need for medication administration. The level of nursing care should be appropriate to the severity of patient needs.
- An interdisciplinary team of appropriately trained medical staff, clinicians, counselors and/or social workers should be available to assess and treat the patient and to obtain and interpret information regarding the patient's needs.

**Clinically Managed Residential Withdrawal Management**

- Appropriately credentialed personnel who are trained and competent to implement physician-approved protocols for patient observation and supervision, determination of appropriate level of care, and facilitation of the patient’s transition to continuing care.
- Medical evaluation and consultation available 24 hours a day, in accordance with treatment/transfer protocols and guidelines.
- Clinicians that assess and treat patients who are able to obtain and interpret information regarding the needs of these patients, including signs or symptoms of alcohol and other drug intoxification and withdrawal, as well as appropriate treatment and monitoring of those conditions and how to facilitate entry into ongoing care.

In facilities that supervise self-administered medications, there must be staff who are appropriately licensed or credentialed and policies and procedures in accordance with state and federal law.

**2.03 Administrative, Management, and Facility Requirements**

The applicant must demonstrate the agency's sustainable fiscal and administrative capacity. Executive, administrative, and financial staff must be qualified, as indicated by the resumes of position holders uploaded as an element of the proposal. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

1. The applicant must ensure procedures are in place to protect client confidentiality compliant with State and federal standards.
2. The applicant must ensure its most recent financial audit was submitted to the appropriate state office (see Audit Requirements below), and any findings identified have been resolved.
3. The applicant must provide a copy of a Board approved sliding scale policy and a copy of the sliding fee schedule.
4. The applicant must provide a copy of their agency Client Grievance Policy which is consistent with DBH Grantee Grievance Policy Guidelines (Attachment C)

Successful applicants will be required to submit additional agency information if the agency GEMS record is not current.

**Audit Requirements**:

Federal Requirements: Agencies spending $750,000 or more total Federal Financial Assistance in the agency fiscal

year may be required to comply with conditions of the Single Audit Act of 1984, P.L. 98-502, as amended by the Single Audit Act Amendments of 1996, P.L. 104-156, and as defined in 2 CFR 200.

State Requirements: Agencies spending $750,000 or more total State Financial Assistance in the agency fiscal year are required to comply with the conditions of 2 AAC 45.010-090. The current regulations may be viewed at the State of Alaska, Department of Law website, Department of Law Document Library, or copies may be obtained from the contact identified on the cover page of the RFP.

Information on State and Federal Single Audit Acts compliance may be obtained from:

State Single Audit Coordinator
Department of Administration
Division of Finance
PO Box 110204
Juneau, AK 99811-0204
Telephone: (907) 465-4666
Fax: (907) 465-2169

DHSS Program Audit Requirements: All DHSS grantees are subject to the requirements of 7 AAC 78.230. If awarded, agencies which are not required to file State Single Audits under 2 AAC 45.010 must ensure a fiscal audit of the agency operations under the grant program is performed by an independent, licensed, certified public accountant at least once every two years and submitted to:

State of Alaska Department of Health and Social Services
Finance and Management Services
Audit Section
PO Box 110602
Juneau, AK 99811-0602
Telephone: (907) 465-3120

**Facility, Service Access, and Safety**:

1. The applicant must address potential safety concerns for clients and staff in the management of services proposed in response to this RFP.
2. The applicant should describe client accessibility to services and the way in which that will enhance project success.
3. All applicants for DHSS grants should submit a written plan for emergency response and recovery that provides for potential safety concerns and the safe evacuation of clients and staff. This plan is mandatory for agencies providing residential and/or critical care services as noted in the State Grant Assurances (Attachment D).

**2.04 Support/Coordination of Services**

Applicants must demonstrate the proposed project has the necessary support and coordination for the successful delivery of services. The proposal must address the following:

1. Involvement of public and potential service recipients in the planning process.
2. Please submit supporting documentation showing support, partnerships and collaborations with other community providers

## Section 3 General Instructions for Proposal Submission

### 3.01 Eligibility

Applicants must be eligible to apply under 7 AAC 78.030 (Eligible Applicants). Eligible applicants are state agencies; political subdivisions of the state such as cities, organized boroughs, and Regional Educational Attendance Areas; nonprofit organizations and consortia of nonprofits; and Alaska Native entities. As follows, eligibility will be verified by Grants and Contracts.

1. Political subdivisions of the state and Regional Educational Attendance Areas will be verified by State records.
2. Eligible nonprofits are listed in the State's database of registered nonprofit entities or the US Internal Revenue Service's register of tax-exempt organizations. Nonprofit subsidiaries of nonprofit corporations must also provide a letter from the parent organization confirming nonprofit status.
3. Alaska Native entities as defined in 7 AAC 78.950(1) must submit, with the application, a legally binding resolution waiving the entity's sovereign immunity to suit through the duration of the program, identified in RFP Subsection 3.05. The resolution must be authorized in compliance with the tribe's constitution, either by the tribal council or by majority vote of the tribal membership. The required template is provided at Subsection 4.02, Other Technical Requirements.

Federal Funding Accountability and Transparency Act (FFATA): In accordance with 2 CFR Chapter 1, Part 170 Reporting Sub- Award And Executive Compensation Information, reporting is required of any grant award with federal funding equal to or greater than $30,000. FFATA is intended to hold the federal government accountable for spending decisions. Accountability data is available to the public at US Spending website. Reporting requirements extend to recipients of State-issued awards with federal funds. An Agency Power User must complete the FFATA form under Federal Reporting in the GEMS Agency Administration tab. The report data will reflect the audited figures of the agency's most recently completed fiscal year. The report captures expenses and executive compensation for your agency. More information regarding FFATA requirements can be found at Federal Funding Accountability and Transparency Act Subaward reporting system.

The US Federal Government is transitioning from the Dun & Bradstreet Data Universal Numbering System (DUNS) number to a System for Award Management (SAM) generated Unique Entity Identifier (UEI) alpha-numeric value for federal awards management. During this transition the DUNS number will be phased out and all grantees receiving awards with federal funds will be required to have a UEI. More information regarding this transition can be found or the U.S. General Services Administration webpage at U.S. General Services Administration webpage.

The Grants Electronic Management System (GEMS) has been updated to include fields for both the DUNS nine-digit number and the UEI twelve-digit alpha-numeric value under the General section of the Agency Administration tab. An Agency Power User must confirm the current DUNS number is listed in GEMS and is responsible for adding the UEI once one has been assigned. The DUNS number will continue to be displayed in GEMS until the Federal Government's transition to the UEI is complete.

Applicant agency GEMS records must contain the agency's current State of Alaska Business License number, and a current governing board roster which includes titles, contact information, and terms of office for each seat. The roster must include emergency contact information outside the applicant agency for one or more officers.

Grants and Contracts will verify neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving grant assistance from any State or federal department or agency. If an agency or its principals are excluded from receiving grant assistance, the proposal may not be considered.

If this grant program includes Federal funding, effective November 12, 2020 Federal Uniform Guidance 2 CFR 200 requires that agencies be registered on the System for Award Management (SAM) website. If an applicant is recommended for award and is not registered on this site, the offered award will not be executed, and funds will not be issued until agency registration is confirmed.

Applicants who have had a contract or grant to help produce this RFP are not eligible to apply and any submitted proposal will not be considered.

**3.02 Acceptance of Terms**

By submitting a proposal, an applicant accepts all terms and conditions of this RFP including all identified attachments and guidelines, 7 AAC 78, and any other applicable statutes and regulations. Copies of these may be accessed through the contact person identified on the cover page or through the web address(es) identified in this RFP.

If a grant is awarded, this RFP and the applicant's proposal become part of the grant agreement. The applicant will be bound by the provisions contained in the awarded proposal unless the Department agrees that specific parts of the proposal are not part of the agreement.

Proposals and other materials submitted in response to this RFP become the property of the State and may be returned only if the State allows. Proposals are public documents and may be inspected or copied by anyone after grants have been awarded.

**3.03 Inquiries**

Applicants should immediately review this RFP for defects and questionable or confusing content. Questions that can be answered by directing the applicant to a specific section in the RFP may be answered verbally by the contact person identified on the RFP cover page. Questions that cannot be answered by directing an applicant to a specific section of the RFP may be declared substantive. The applicant will be directed to submit the question in writing to the contact person at the email address on the cover page no later than the Deadline for Written Inquiries, also identified on the cover page. This will allow issuance of any necessary amendments and/or clarifications to all prospective applicants.

Applicants are responsible for monitoring GEMS or the State's Online Public Notices website for any clarifications or amendments that may be issued regarding this solicitation.

**Proposals will not be accepted after 3:59 PM prevailing local time on the due date identified on the cover page.**

**3.04 Proposal Costs and Content**

The Department will not be responsible for any expenses incurred by the applicant prior to the authorized grant performance period. All costs of responding to this RFP are the responsibility of the applicant.

The applicant is responsible for the content of the proposal.

**3.05 Duration**

This RFP is for a one year period, beginning 7/1/2022 through 6/30/2023. At the discretion of the Department, a project funded under this RFP may be considered for continued funding in subsequent program year(s). The annual decision to continue funding for the subsequent year(s) of the two -year grant cycle is based on the following general conditions:

1. the Department's judgment that there is a continued need for the grant project service;
2. the grantee's satisfactory performance during the previous grant year;
3. the availability of sufficient grant program funds, and whether continuation of the financing is consistent with public health and welfare; and
4. the ability of the grantee and the Department to agree on any adjustments in payments or service.

Applicants will submit a budget proposal for year one of the grant only. Funding in each subsequent year will require submission and approval of documents needed to update service plans, evaluation measures, and budgets. Grants and Contracts will notify grantees of specific submission requirements necessary to qualify for consideration of continued funding.

**3.06 Proposal Review**

Following the deadline for receipt of proposals, no revisions will be accepted unless provided in response to a request from the contact person named in this RFP. Proposals will be reviewed as follows:

1. Proposals will be evaluated in a manner that will avoid disclosure of contents before notices of grant award have been issued.
2. DHSS staff will evaluate each proposal for minimum responsiveness and other technical requirements and eliminate nonresponsive proposals from consideration.
3. Using the criteria set out in this RFP and 7 AAC 78.100 (Criteria for Review of Proposals), DHSS staff will evaluate each responsive proposal. **Scores for each criterion will be based solely on the response to the associated question. Points will not be earned if the information was provided in response to another question in Section 4**. DHSS staff will also review relevant departmental documentation regarding the applicant. Staff recommendations regarding awards and levels of funding will include consideration of the following:
    i. a history of the applicant's compliance with grant requirements, to include records of program performance, on-site program reviews, and prior year audits;
    ii. priorities in applicable State health and social services plans;
    iii. requirements of applicable State and federal statutes; and
    iv. municipal ordinances or regulations applicable to the grant program.

If there are multiple responsive proposals for which there is insufficient money to fully fund, or supplementary expertise is deemed necessary to the review of proposed services, the Department may appoint a Proposal Evaluation Committee (PEC) as an additional advisory body. PEC members will initially evaluate proposals, independently of other committee members. As a committee the PEC will meet in a **closed session** (7 AAC 78.090 Review of Proposals) to further review proposals and develop recommendations. Scores will be assigned based on the applicant's response to each individual question and the associated criteria. **Applicants will not earn points for a given question based on a response to another question in the RFP**. The PEC review will include discussion of each proposal's merits. PEC recommendations will rank proposals in priority order and include approval or disapproval for award, modifications to the proposed project, and special compliance conditions.

All staff advisory recommendations and, if applicable, those of the PEC, and all review materials will be submitted

for consideration by the Division Director, who will make recommendations to the Commissioner of the Department of Health and Social Services or the Commissioner's designee.

### 3.07 Final Decision Authority

Recommendations are advisory only, including those from any PEC that may be held. The final decision to approve or disapprove award, the amount of each award, and whether to impose special conditions or modifications rests with the Commissioner or Commissioner's designee.

NOTE: The final decision may include additional considerations, such as a lack or duplication of services in certain locations, or alternative services that may be available; a critical need for services by vulnerable populations; and matters of health, life and safety. The Department has the responsibility to ensure public monies are utilized in a manner that protects the interests of the people of the State and retains the right to make final awards that ensure responsible distribution of grant funds.

### 3.08 Notification of Grant Award and Appeals

Within fifteen (15) days after the decision regarding grant awards, applicants will be notified of the final funding decisions, and, if awarded, any conditions of award or modifications. Following any necessary negotiations for revisions to the proposed budget and scope of services, successful applicants will be issued a grant agreement. This formal agreement will contain specific performance and reporting requirements consistent with Department policy and procedure and 7 AAC 78.

Per 7 AAC 78.305 (Request for Appeal), an applicant may appeal a final grant award decision. Requests for hearing must be addressed to the Commissioner and received in writing at the address below within 15 days after the applicant receives notification of the decision. The request must contain the reasons for the appeal and must cite the law, regulation, or terms of the grant upon which the appeal is based.

**With a copy to the contact identified on the solicitation cover page, send appeal to:**

Adam Crum, Commissioner
Department of Health & Social Services
3601 C Street, Suite 902
Anchorage, Alaska 99503-5923

### 3.09 Cancellation of the RFP/Termination of Award

Contingent upon funding appropriations and the Governor's approval, the Department may fund proposals from eligible applicants. DHSS may withdraw this RFP at any time and reserves the right to refrain from making an award when such action is deemed to be in the best interest of the State. Funds awarded for a grant as a result of this RFP may be withheld and the grant terminated by written notice from the State to the grantee at any time for violation by the grantee of any terms or conditions of the grant award, or when such action is deemed to be in the best interest of the State.

## Section 4 Submission Requirements/Evaluation Criteria

**4.01 Minimum Responsiveness Criterion per 78.100(2)(A)**

Proposals that fail to meet the minimum responsiveness requirements below will be eliminated from consideration per 7 AAC 78.090(b)(2).

***1 Applicant is eligible per Alaska Administrative Code 7 AAC 78.030.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | Applicant is eligible per Alaska Administrative Code 7 AAC 78.030. | ☑ | |

**4.02 Other Technical Requirements per 7 AAC 78.060, 78.090(b) and 78.100**

Response & Organizational Documentation

***1 If applying as a non-profit organization, confirm non-profit status is documented.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The agency is listed as a non-profit in good standing on the State's corporation database, and/or | ☑ | |
| **b** | The agency's current 501(c)(3) status is confirmed on the Exempt Organizations page, accessible at IRS Tax Exempt Organization Search. | ☑ | |
| **c** | If a non-profit subsidiary of a non-profit corporation, a verifying letter from the parent non-profit agency is uploaded to the applicant's agency GEMS record (under General in the Agency Administration tab). The parent corporation must meet criteria a and/or b. | ☑ | |

***2 If applying as a Federally recognized tribal entity, upload the signed Resolution for Tribal Entities using the template provided below. Confirm the following criteria are met.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The applicant is a recognized Alaska Native entity as verified by the Federal Register. If a tribal consortium, all members are recognized Alaska Native entities. | ☑ | |
| **b** | A Resolution, completed on the provided form, is uploaded in the space provided. If a tribal consortium, a Resolution from each member tribe is uploaded as a single file. | ☑ | |

***3 If applying as a government entity, confirm the following criterion is met.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The applicant is another State Agency, such as the University; a political subdivision such as a city or municipality, verified at Local Boundary Commission; or an REAA under AS 14.08.031 verified at Department of Education Alaska School Map. | ☑ | |

***4 Confirm neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving grant assistance from any State or federal department or agency. If an agency or its principals are excluded from receiving grant assistance, the proposal may not be considered.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The applicant agency nor its principals are barred from receiving federal assistance as verified in the federal System for Awards Management at System for Award Management (SAM). | ☑ | |

***5 Electronically sign the State Grant Assurances form.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | State Grant Assurances form is signed by an individual authorized to enter into legal agreements on behalf of the applicant agency. | ☑ | |

***6 This program receives federal funds. Confirm the following criteria are met.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The Federal Assurance and Certification form is electronically signed by an individual authorized to enter into legal agreements on behalf of the applicant. | ☑ | |
| **b** | The applicant agency GEMS record, under General in the Agency Administration tab, contains the agency's DUNS number. | ☑ | |
| **c** | The required Federal Funding Accountability and Transparency Act (FFATA) information, located under the Federal Reporting section of the Agency Administration tab, has been provided for the agency's most recently completed fiscal year. This task can only be completed by an Agency Power User. | ☑ | |

***7 Confirm the following information is provided at the Agency Administration tab. These tasks must be completed by a Power User. If the information is found to be incomplete or not current, there may be delay in execution of any offered award.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The General section contains a current governing board roster. The roster includes terms of each seat and contact information outside the applicant agency for one or more officers. | ☑ | |
| **b** | The Other Funding section contains a record for each source of agency operating funds. The record includes funds applied for under this solicitation. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200. | ☑ | |
| **c** | The General section contains a State of Alaska business license number, verified at State Corporation Database. | ☑ | |
| **d** | All agency contact records are up to date, including Head of Agency, Primary Contact, and Head of Financial Operations. | ☑ | |
| **e** | The applicant's agency record contains the Agency Fiscal Year Start Date. | ☑ | |
| **f** | The applicant's agency GEMS record contains a current Federally Negotiated Indirect Cost Rate Agreement. If lapsed, the agreement is uploaded with written confirmation from the negotiating agency that the rate is valid until a new agreement is approved. | ☑ | |

**4.03 History of Compliance with Grant Requirements per 7 AAC 78.100(2)(B)**

***1 Previous recipients of DHSS awards will confirm the following criteria pertaining to past performance and compliance are met. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200. All other applicants will mark Complete without confirming.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | Fiscal, narrative, and data reporting in prior years has been complete and timely. | ☑ | |

| | | | |
|---|---|---|---|
| **b** | Required State and Federal Single Audits have been submitted, verified at Division of Finance, State Single Audit. Any prior year audit exceptions have been resolved, verified by the Finance and Management Services Audit Section contact identified at Finance and Management Services Audit Contact. | ☑ | |
| **c** | Activities in prior year(s) demonstrate effective delivery of services. DHSS review may include documentation such as performance reports, audit reports, grant records, site visits, etc. | ☑ | |
| **d** | Agency historically maintains required standards. Verification may include, though is not limited to, quality assurance reviews, licensing, and certifications. | ☑ | |

**4.04 Questions and Criteria Related to Program Policy, Goals, Outcomes, and Activities**

***1 Describe the proposed project in the text box below, identifying the ways in which it will achieve the program goals and anticipated outcomes stated in this RFP. Additionally, identify the ASAM level of service you are proposing to provide.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The description demonstrates a thorough understanding of program goals and outcomes, and clearly identifies the ways in which they will be achieved. | ☐ | 80 |

***2 Provide the timeline for the initiation of services and implementation of project activities in the upload field below.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The timeline proposed for initiation of services and project activities is compatible with program intent. | ☐ | 120 |

***3 In the text box below, describe the ways in which the project aligns with program intent. The response will identify project resources, activities, and clearly state the project's anticipated goals, outputs, and outcomes.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The described activities are well developed, reasonable and supportive of program intent. | ☐ | 80 |

| | | | |
|---|---|---|---|
| **b** | The response identifies project resources, activities, and clearly states the project's anticipated goals, outputs, and outcomes. | ☐ | 40 |

***4 In the text box below, describe the project evaluation plan, including indicators and data gathering strategies that will be implemented to address the program's performance measures identified in Subsection 1.04. Additionally, provide a statement confirming the requirements for AKAIMS***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The proposed evaluation plan includes indicators and data gathering strategies aligned with the program performance measures identified in Subsection 1.04. | ☐ | 80 |
| **b** | Applicants have provided a statement to comply with the requirements of the AKAIMS Minimal Data Set required for this program | ☐ | 40 |

***5 In the text box below, describe the target population and service area(s) of the proposed project, to include if you are proposing a community prioritized in this solicitation.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The description clearly identifies the proposed target population and service area and meets the intent of the services solicited. | ☐ | 80 |
| **b** | The description has identified a community prioritized in this solicitation. | ☐ | 120 |

***6 Provide the proposed budget for the first year of the project. Include detail and supporting narrative as shown in the DHSS Grant Budget Preparation Guidelines (Documents tab). Confirm the following criteria are met.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The budget narrative is complete and mutually consistent with the budget detail. | ☑ | |
| **b** | Cost line items are allowable under 7 AAC 78.160 and are compliant with stated program requirements. | ☑ | |
| **c** | Travel costs are consistent with 7 AAC 78.160(h) and (i), and with any program requirements or limitations identified in the solicitation. | ☑ | |

| | | | |
|---|---|---|---|
| **d** | Equipment costs and subcontract costs are allowed by the program and consistent with 7 AAC 78.280. | ☑ | |
| **e** | Indirect costs are fully compliant with rates and exemptions of the agency's current Federally Negotiated Indirect Cost Rate Agreement, uploaded in the General section of the Agency Administration tab. | ☑ | |
| **f** | The budget supports the proposed project and program intent, and the project appears achievable with demonstrated resources. | ☐ | 40 |
| **g** | Costs are reasonable and substantiated in the narrative. | ☐ | 20 |
| **h** | The proposed budget narrative clearly describes any necessary allocation of resources among target populations or service areas. | ☐ | 20 |
| **i** | Proposed sources of Required Match are identified in the budget narrative as well as in the Matching Fund Source table located near the beginning of the application. All proposed sources of matching funds are eligible, and the level of match is met. | ☑ | |

**4.05 Applicant Qualifications - Criteria Relating to Personnel, Management, and Facilities**

***1*** ***In the text box below, describe the agency's previous experience in providing services the same as, or similar to, those proposed. Clearly identify the time period over which services were provided and the population served. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.***

| ***Evaluation/Review Criteria*** | | **Review** | **Points** |
|---|---|---|---|
| **a** | The applicant's previous experience providing the same or similar services demonstrates the resources and capacity needed to provide the solicited program services. Note: DHSS staff review will also include DHSS documentation such as prior year performance reports, audit reports, site visits, etc. as noted in Subsection 4.03. | ☐ | 60 |

***2*** ***In the text box below, describe the proposed project's program and administrative staffing needs. Scan the following documents as a single file and upload in the space provided below: 1) Position descriptions for key vacant project positions 2) Resumes and professional credentials for position holders 3) Resumes of administrative staff providing supervision, fiscal, reporting, and management needs. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.***

| ***Evaluation/Review Criteria*** | **Review** | **Points** |
|---|---|---|

| | | | |
|---|---|---|---|
| **a** | Staff providing services are qualified and competent as demonstrated by the uploaded resumes and professional credentials. | ☐ | 120 |
| **b** | Staffing levels are sufficient to support the requirements of the proposed project and compliant with all identified program mandates. | ☐ | 80 |
| **c** | Position descriptions for vacant positions support the intent of the RFP and the project proposed. | ☐ | 60 |
| **d** | Administrative staff is qualified as demonstrated by the resumes provided. | ☐ | 80 |
| **e** | Administrative capacity demonstrates capability to meet management and reporting needs. | ☐ | 80 |

***3*** ***In the text box below, describe the procedures that will be used to protect client confidentiality. Additionally, please scan and upload as a single file the Board approved sliding scale policy, a copy of the sliding fee schedule, and a copy of the Client Grievance Policy.***

| ***Evaluation/Review Criteria*** | | **Review** | **Points** |
|---|---|---|---|
| **a** | The applicant's description identifies the procedures necessary to protect client confidentiality compliant with State and Federal standards. | ☐ | 100 |
| **b** | In the upload field please scan and attach as a single document a copy of the Board approved sliding scale policy and a copy of the sliding fee schedule. | ☐ | 60 |
| **c** | Applicant has attached as a single document the agency Client Grievance Policy which is consistent with the DBH Grantee Grievance Policy Guidelines | ☐ | 60 |

***4*** ***In the text box below, describe the service delivery facilities and locations and the ways in which access to services will enhance project success. Additionally, please include a written plan for emergency response and recovery.***

| ***Evaluation/Review Criteria*** | | **Review** | **Points** |
|---|---|---|---|
| **a** | The facilities described are safe and appropriate to the purpose of the program. | ☐ | 60 |

| | | | |
|---|---|---|---|
| **b** | Access to the locations will enhance delivery of services to the targeted populations. | ☐ | 60 |
| **c** | Proposal includes a written plan for emergency response and recovery as requested in the solicitation. | ☐ | 60 |

**4.06 Demonstration of Support/Coordination of Service**

***1 In the text box below, describe the ways in which the project planning process involved the public and potential service recipients.***

| ***Evaluation/Review Criteria*** | | **Review** | **Points** |
|---|---|---|---|
| **a** | The applicant's description demonstrates the involvement of the public and potential recipients of services in planning the project proposed. | ☐ | 40 |

***2 In the text box below, describe partnerships or collaborations necessary to the proposed project. In the upload field below, provide a single-file scan documenting existing partnerships and collaborations specific to the proposed project.***

| ***Evaluation/Review Criteria*** | | **Review** | **Points** |
|---|---|---|---|
| **a** | Partnerships and collaborations necessary for the effective delivery of services are well described. Evidence specific to the proposed project is provided. | ☐ | 60 |