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

# Request for Proposals
# Crisis Stabilization and Residential
# For FY2024 Through FY2025

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: Tanya Howard, Grants Administrator
PHONE: (907)465-2836
E-MAIL: tanya.howard@alaska.gov

PROPOSAL DUE DATE: April 17, 2023, 3:59 PM
DEADLINE FOR WRITTEN INQUIRIES: April 7, 2023, 3:59 PM
PROJECT PERIOD BEGINS: July 1, 2023

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## Amendments

**Amendment 1 Written Responses to Inquiries** **Posted: 4/5/2023**

***Explanation***

This amendment serves to provide answers to written inquiries. Please see the attachment titled, "Amendment 1 Written Responses to Inquiries."

***Additional Information***

Amendment #1, issued 4/4/23 serves to provide answers to written inquiries.

## Section 1 Grant Program Information

### 1.01 Introduction and Program Description

The Department of Health (DOH/Department), Division of Behavioral Health (DBH/Division), is requesting proposals from eligible applicants to provide Crisis Stabilization and Residential services for the State of Alaska in FY2023 through FY2024. Program services are authorized under 7 AAC 78 Grant Programs. Additional governing statutes are AS 47.30.520-620 Community Mental Health Services Act, 7AAC 70 Behavioral Health Services, 7AAC 135 Medicaid Coverage for Behavioral Health Services, 7AAC 138 1115 Substance Use Disorder Waiver Services, 7AAC 139 1115 Behavioral Health Waiver Services, 7AAC 160 Medicaid Program: General Provisions, AS 47.37 Uniform Alcoholism and Intoxication Treatment Act, and AS 47.30.655-.915 Alaska Civil Commitment Statutes. State of Alaska statutes and regulations are accessible at Department of Law Document Library or through the contact identified on the cover page of this Request for Proposals (RFP).

DBH is using the Substance Abuse and Mental Health Services Administration *(SAMHSA) National Guidelines for Behavioral Health Crisis Care Best Practices Toolkit* to guide our work in developing a crisis response continuum of care which promotes developing a coordinated system that provides crisis services to anyone, anywhere and anytime with someone to talk to (*e.g.*, a crisis line), someone to respond (*e.g*., a mobile crisis team) and places to go (*e.g*., a crisis stabilization center, a short-term residential program, etc.). Crisis stabilization facilities are lacking statewide for individuals experiencing a behavioral health (BH) and/or substance use disorder (SUD) crisis with an overreliance on hospital emergency departments (ED). Even if evaluated at an ED or a community BH services provider, communities lack options for continued crisis stabilization short of inpatient hospitalization. Crisis Observation and Stabilization Services (COS) and Crisis Residential Stabilization Services (CSS) programs will decrease the dependence on emergency room care while increasing places for youth and adults to go in crisis. The *SAMHSA National Guidelines for Behavioral Health Crisis Care Best Practice Toolkit,* accessible from the following link: SAMHSA Guidelines for Behavioral Health Crisis Care notes that many individuals in crisis who are evaluated can be cared for in a crisis stabilization facility with outcomes at least as good as hospital care but with lower costs than ED care or inpatient hospitalizations. Additional benefits of COS and CSS are gained from the patient perspective because the COS and CSS environments are intended to be more comfortable (with less noise and crowding often found in hospital settings) and are staffed with providers who have specialized training in BH and/or SUD issues.

With the implementation of the 1115 Medicaid Waiver Demonstration project, crisis stabilization services were added to the Behavioral Health Continuum of Care including COS and CSS. Agencies have enrolled to provide these services, but we have yet to see a notable increase in functional crisis stabilization facilities to serve youth (age 11 and under, ages 12-18) and adults who are experiencing BH or SUD crises. This grant program supports the development of COS and/or CSS programs in Alaska's Behavioral Health & Substance Use Disorder Continuum of Care.

Applicants must provide one of the following types of services requested in this RFP. Separate proposals must be submitted for ***each service and population*** (youth or adult). A proposal must be for one service and one population and may not propose both services for one population or both populations for one service.

1. COS: Provides youth (under 21 years of age) and/or adults (21 and older) who are in crisis a safe place to go with up to 23 hours of observation and supervised care to de-escalate the individual's distress, provide prompt assessment and determine the appropriate level of care. If applying for youth services, the applicant must identify the specialized considerations including the plan for the involvement of family.
2. CSS: Provides youth (under 21 years of age) and/or adults (21 and older) a safe home-like environment, 24/7 medically monitored care, and stabilization services for a period of one to seven days to restore the

individual to a level of functioning that does not require hospitalization. If applying for youth services, the applicant must identify the specialized considerations including the plan for the involvement of family.

Proposals submitted must be in alignment with all COS or CSS service requirements as identified in the Alaska Behavioral Health Provider Service Standards and Administrative Procedures for SUD Provider Services or the Alaska Behavioral Health Provider Service Standards and Administrative Procedures for Behavioral Health Provider Services Manual (Attachment 1 & 2).

**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.

The goal of 23-hour COS is to provide the community with "no wrong door" access to 24/7 BH and SUD crisis assessment and stabilization care by accepting walk-ins, emergency medical services (EMS)/ambulance, fire, and police drop-offs and community referrals. The expectation of a COS program is to accept all first responder or walk-in referrals (with a no rejection policy for first responders); not require medical clearance prior to entry; address mental health and substance use crisis issues; demonstrate the capacity to assess physical health needs; and ensure 24/7 staffing by a multidisciplinary team (including psychiatrists or psychiatric nurse practitioners, nurses, licensed or credentialed clinicians, and peer support staff). Admissions of first responder drop-offs are ideally conducted in a dedicated first responder drop-off area. COS provides a safe, protected environment and prompt assessment (including suicide and violence risk), de-escalates the individual's distress, stabilizes the crisis, and determines the appropriate level of care or service needs with a warm hand-off if needed. Anticipated outcomes include decreased law enforcement involvement, emergency department use and inpatient hospitalization, as well as increased linkage to outpatient services, crisis planning, and follow-up to prevent future crisis situations.

Note: proposals for COS services to the community are expected to build their program to support "no wrong door" access within the first 2 years of initiating this service. Proposals must specifically address how the provider will meet this requirement.

The goal of CSS is to provide individuals who are experiencing a BH and/or SUD crisis a safe home-like environment, 24/7 medically monitored care and short-term crisis stabilization services for a period of one to seven days. CSS provides assessment, crisis intervention and crisis stabilization designed to stabilize the individual to a level of functioning that does not require inpatient hospitalization (including stabilization of withdrawal symptoms if applicable) and facilitates appropriate referrals to community service providers with a warm hand-off if needed. Anticipated outcomes include decreased emergency department use and inpatient hospitalization, as well as increased linkage to outpatient services, crisis planning, and follow-up to prevent future crisis situations.

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

**1.03 Program Services/Activities**

Applicants must describe the proposed activities that support the goals and outcomes of the project. The applicant must also upload a timeline for initiating services and project activities with an estimated project start-up date. Service delivery must begin prior to the end of Quarter 2.

If applying for 23-hour COS, the applicant's proposal must include a description of how the following services will be provided within the COS program:

- Individual assessment services
- Treatment plan development
- Psychiatric evaluation services
- Nursing services
- Medication services - including medication prescription, review of medication, medication administration, and medication management
- Crisis intervention services
- Crisis stabilization services designed to stabilize and restore the individual to a level of functioning that does not require inpatient hospitalization, including stabilization of withdrawal symptoms if applicable
- Referral to the appropriate level of treatment services and follow-up to support connection
- Plan for accommodation for youth who present in crisis
- As the State of Alaska continues to develop the Crisis Response Continuum of Care, the applicant will coordinate with the Alaska Crisis Call Center, Careline, 988, or other state-identified centralized platform of crisis services to develop a communication pathway that ensures the ability to coordinate the availability and accessibility of services in the crisis continuum.

If applying for CSS, the applicant's proposal must include a description of how the following services will be provided within the CSS program:

- Individual assessment services
- Treatment plan development services
- Crisis intervention services
- Crisis stabilization services designed to stabilize and restore the individual to a level of functioning that does not require inpatient hospitalization, including stabilization of withdrawal symptoms if applicable
- Psychiatric evaluation services
- Nursing services
- Medication services - including medication prescription, review of medication, medication administration, and medication management
- Referral to the appropriate level of treatment services
- As the State of Alaska continues to develop the crisis response Continuum of Care, the applicant will coordinate with the Alaska Crisis Call Center, Careline, 988, or other state-identified centralized platform to develop a communication pathway that ensures the ability to coordinate the availability and accessibility of services in the crisis continuum.

Applicant proposals must describe the ways in which the project aligns with program intent. The submitted project proposal must identify agency resources available to the project; describe project activities; and clearly state the project's anticipated goals, outputs, and outcomes.

As a part of program delivery, the applicant's proposal must include consideration of the following SAMHSA core principles of best practices in crisis response services including:

- addressing both mental health and recovery issues,
- a significant role of peer supports in the implementation of the services,
- integration of trauma-informed care and Zero Suicide/Suicide Safer Care, and
- partnerships with first responders including law enforcement, dispatch and EMS personnel.

**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, 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**

- 1.1.1. Improve the Health Status of Alaskans

**Effectiveness Performance Measures**

23-hour Crisis Observation & Stabilization:

1. Efficiency Measure: Average length of stay. Data Collection: average of total length of stay for all clients who have utilized services. Collection Method: Alaska's Automated Information Management System (AKAIMS)
2. Effectiveness Measure: first responder drop-off time. Data Collection: average time of responder dropping off clients; time starts when first responder arrives and stops when they leave. Collection Method: Quarterly report.
3. Referral Source Measure. Data Collection: percentage in each category referral source: 1) self, 2) first responders (law enforcement, community service patrol, fire, emergency medical services), 3) Mobile crisis team, 4) ER, 5) community BH service provider, 6) community SUD service provider, 7) shelter, 8) friend/family, 9) other: please specify. Collection Method: Quarterly report.
4. Population Served Descriptive Measure: voluntary versus involuntary status. Data Collection: percentage in each category: 1) voluntary, 2) involuntary, and 3) not applicable (N/A).
5. Population Served Descriptive Measure: Insurance type per client served. Data Collection: percentage in each category: 1) Medicaid, 2) private insurance, 3) no insurance or self-pay, 4) unknown, 5) other- please specify. Collection Method: Quarterly report.
6. Discharge Disposition Measure. Data Collection: percentage in each category discharge disposition 1) home/community - no follow-up care, 2) inpatient hospitalization, 3) ER, 4) detox facility, 5) crisis residential, 6) community SUD services, 7) community BH services, 8) shelter, 9) Other: please specify. Collection Method: Quarterly report.
7. Effectiveness measure: number of readmissions within 7, 14, 30, and 90 days. Data Collection: number of readmissions in each category. Collection Method: Quarterly Report.

Crisis Residential Stabilization Services:

1. Efficiency Measure: Average length of stay. Data Collection: average of total length of stay for all clients who have utilized services. Collection Method: Alaska's Automated Information Management System (AKAIMS)
2. Efficiency Measure: occupancy rates. Data Collection: To calculate occupancy rate, use days of care and bed days available in this formula: Days of Care/Bed Days Available. Collection Method: AKAIMS
3. Referral Source Measure. Data Collection: percentage in each category referral source: 1) self, 2) first responders (law enforcement, community service patrol, fire, emergency medical services), 3) Mobile crisis team, 4) ER, 5) community BH service provider, 6) community SUD service provider, 7) shelter, 8) friend/family, 9) other: please specify. Collection Method: Quarterly report.
4. Descriptive Measure: voluntary versus involuntary status. Data Collection: percentage in each category: 1) voluntary, 2) involuntary, and 3) not applicable (N/A).
5. Descriptive Measure: Insurance type per client served. Data Collection: percentage in each category: 1) Medicaid, 2) private insurance, 3) no insurance or self-pay, 4) unknown, 5) other- please specify. Collection Method: Quarterly report.
6. Discharge Disposition Measure: Data Collection: percentage in each category discharge/disposition 1) home/community - no follow-up care, 2) inpatient hospitalization, 3) ER, 4) detox facility, 5) crisis residential, 6) community SUD services, 7) community BH services, 8) shelter, 9) Other: please specify. Collection Method: AKAIMS
7. Effectiveness measure: number of readmissions within 7, 14, 30 and 90 days. Data Collection: number of readmissions in each category. Collection Method: Quarterly Report.

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.

**Grant Reporting**

Required reporting will include:

1. Cumulative Fiscal Reports recording overall grant and match expenditures by budget line;
2. Quarterly Narrative Program Reports; and
3. AKAIMS- **For COS**: Emergency Services Module. **For CSS**: Minimal Data Set, an Encounter Note, and a Miscellaneous Note.

Applicants must affirmatively agree to comply with the requirements of the AKAIMS Minimal Data Set (Attachment 3).

**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 is individuals including either youth (Under 21 years of age) or adults (21 and older) experiencing behavioral health and/or substance use-related crises.

**Service Areas and Communities**: The service areas and communities identified for the services solicited are any community statewide.

**1.06 Program Funding**

Estimated total funding of all awards for FY24 is $500,000 in federal funds through the Substance Abuse and Mental Health Services Administration (SAMHSA) American Rescue Plan Act (ARPA) Mental Health Block Grant (MHBG) and SAMHSA Substance Abuse Block Grant (SABG) COVID-19 Supplemental. Estimated funds are broken out as follows:

- $300,000 is available from the SAMHSA SABG COVID-19 Supplemental to fund one provider of COS or CSS services for **Youth**. This funding will end March 14, 2024.
- $200,000 in remaining federal funds are intended to fund one MH provider for COS or CSS services. Please refer to section **3.05 Duration** of this RFP.

**Match Requirement**: The budget must include matching funds equal to 25% of the proposed DOH 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.

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. DOH 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 as 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. DOH 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 receipt and expenditure of all grant income.

Applicants must complete and upload the Grant Service and Service Type form in support of their application (Attachment 4)

## 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 DOH 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 the same or similar services as those proposed. The description must clearly identify the time period over which services were provided and the target population served.

### 2.02 Project Staffing

Program staffing levels must be commensurate with meeting the program goals, anticipated outcomes, and activities/strategies for service delivery appropriate to the proposed project.

Position descriptions for all required personnel including vacant positions, resumes for current employees in positions, and professional credentials for 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.

Applicants must submit a description of staffing patterns that include identification of the credentials of staff responsible for overseeing and providing the COS or CSS. Examples of staffing patterns and credentials may be found in the Alaska Administrative Services Standards Manual (Attachment 1 & 2).

23-hour COS may be staffed by an interdisciplinary team of qualified professionals, which may include any of the following:

- Licensed physicians
- Licensed physician assistants
- Advanced registered nurse practitioners
- Licensed registered nurses
- Licensed practical nurses

- Community health aides
- Psychologists
- Mental health professional counselors
- Behavioral health clinical associates
- Substance use disorder counselors
- Behavioral health aides
- Peer support specialists

CSS may be staffed by an interdisciplinary team of qualified professionals, which may include:

- Licensed physicians
- Licensed physician assistants
- Licensed advance nurse practitioners
- Licensed registered nurses
- Community health aides
- Licensed psychologists
- Mental health professional clinicians
- Substance use disorder counselors
- Behavioral health clinical associates
- Behavioral health aides
- Peer support specialists

**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.

The applicant must ensure procedures are in place to protect client confidentiality compliant with State and federal standards. 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.

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

To apply for the SUD awards (SABG funding), the applicant must upload documentation demonstrating DBH Departmental Approval for 1115 SUD waivered services and must obtain department approval for the identified 1115 SUD waiver service in the proposal within 180 days of initiation of the grant.

To apply for the Mental Health awards (MHBG funding), the applicant must upload documentation demonstrating DBH Departmental Approval for 1115 Behavioral Health waivered services must obtain department approval for the identified 1115 BH waiver service in the proposal within 180 days of initiation of the grant

**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

DOH Program Audit Requirements: All DOH 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**

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 describe the facility planned to be used, number of recliners for COS or number of beds if providing CSS, existing use, whether the organization has current site control (ownership, lease) and if not, a plan to acquire it. There must also be a detailed description of any alterations/renovations planned, see 7 AAC 78.160.Costs.
2. The applicant must address potential safety concerns for clients and staff in the management of services proposed in response to this RFP.
3. All applicants for DOH grants must have 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.
4. The applicant must describe client accessibility to services and the way in which that will enhance project success.
5. The applicant must provide a copy of a Board approved sliding scale policy and a copy of the sliding fee schedule.

**The provider will need to be in compliance with all applicable facility licensing requirements.**

Please note the following guidance document related to Clients Ages 18 to 21 in Adolescent Programming:

September 17, 2021

SFY 2022 – DBH Guidance Document #1 - CORRECTED

Guidance Document for 1115 Substance Use Disorder Providers Treatment for Clients Ages 18 to 21 in Adolescent Programming

Background

The Division of Behavioral Health (DBH) 1115 SUD service ASAM Level 3.5 Clinically Managed Residential Services has two categories:

- ASAM Level 3.5 Clinically Managed High-Intensity Residential Services Adult
  - Reported using procedure code H0047 TG, V1
  - For clients aged 18 years and over
- ASAM Level 3.5 Clinically Managed Medium-Intensity Residential Services Adolescents
  - Reported using procedure code H0047 HA, V1, TF
  - For clients aged 12 through 17 years

DBH acknowledges some clients between the ages of 18 and 21 may be best served in a Level 3.5 Adolescent setting.

Purpose

The following information is intended to provide guidance for reporting services for clients between the ages of 18 and 21 receiving Level 3.5 services in an adolescent program.

Guidance

Providers may serve clients aged between 18 (18 years, 0 days) and 21 (20 years, 364 days) in a Level 3.5 treatment program provided the following criteria are met:

- Provision of services in the adolescent program is medically necessary
- Is in accordance with an individualized treatment plan
- The individualized treatment plan demonstrates clinical justification as to why the client is best served in adolescent programming

**Providers must submit and a licensing variance application and receive approval for the variance prior admitting a client aged between 18 (18 years, 0 days) and 21 (20 years, 364 days) into an adolescent treatment program. Variance requests are processed by the Residential Licensing Unit at the Division of Health Care Services.**

**A copy of the Residential Licensing General Variance Application is included with this notice.**

To report ASAM Level 3.5 Clinically Managed Medium-Intensity Residential Services provided to a client between the ages of 18 and 21 in an adolescent program:

- Use procedure code H0047 CG, V1, HA, TF

Providers may not report procedure code H0047 CG, V1, HA, TF for clients between the ages of 18 and 21 in the absence of medical necessity and clinical justification for the services. Providers should instead report the appropriate procedure code for ASAM Level 3.5 Clinically Managed High-Intensity Residential Services Adult

All other provisions for providing Level 3.5 services described in the Alaska Behavioral Health Provider Service Standards & Administrative Procedures for SUD Provider Services remain in effect.

The allowance for this configuration will be retroactively allowed to May 21, 2020. Providers who rendered services to a client between the ages of 18 and 21 in an adolescent program during that time should contact MPASS for assistance in reprocessing impacted claims. Requirements for clinical documentation as indicated above must be in the clinical record for all services being reprocessed.

Incorrect billing may result in overpayments and could lead to provider recoupment actions as well as the imposition of sanctions in accordance with 7 AAC 105.400 – 7 AA 105.490.

Questions regarding this guidance may be directed to mpassunit@alaska.gov. In the Subject Line please note: Level 3.5 Adolescent Treatment

### 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. Community support where services are proposed;
2. Involvement of the public and potential service recipients in the planning process;
3. Partnerships and collaborations specific to the proposed project;
4. **If the proposal is for COS**, a memorandum of agreement (MOA) signed with law enforcement and first responders must be attached; and
5. Coordination with necessary referring agencies and the role of each described.

## 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; non-profit organizations and consortia of non-profits; 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 non-profit entities or the US Internal Revenue Service's register of tax-exempt organizations. Non-profit subsidiaries of non-profit corporations must also provide a letter from the parent organization confirming non-profit 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 U.S. Government spending. 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 U.S. 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.

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 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, from 7/1/2023 through 6/30/2024, for the SAMHSA ARPA MHBG . The youth award(s) ($300,000 SABG COVID 19 Supplemental) are for FY24 for 8.5 months from July 1, 2023 to March 14, 2024. 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 must 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. DOH 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), DOH 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**. DOH 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 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 an 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

In the proposed State fiscal year 2023 budget, the Department of Health and Social Services was reorganized into two distinct executive branch Departments: the Department of Health and the Department of Family and Community Services. This re-organization was effective July 1, 2022 which was the first day of State fiscal year 2023.

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:**

**Heidi Hedberg, Commissioner**
Department of Health
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. DOH 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 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, confirmed at State 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 at 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 (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 as 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 Alaska Business Licenses Search. | ☑ | |
| **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. | ☑ | |

***8 In the upload field below, insert certification or other evidence (such as an MPASS email) of DBH Departmental Approval for 1115 SUD or Behavioral Health waivered services (provisional or full) according to whether providing SUD or BH services.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | Agency has uploaded documentation clearly demonstrating DBH Departmental Approval for 115 SUD or Behavioral Health waivered services. | ☑ | |

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

***1 Previous recipients of DOH awards will confirm the following criteria pertaining to past performance and compliance are met, as 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. DOH 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 specifically how the project will achieve the program goals and anticipated outcomes stated in this RFP. Please identify if applying for 1) 23-hour COS or 2) CSS, and whether applying for youth or adult services. Separate proposals must be submitted for each service and population (youth or adult).***

| ***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. | ☐ | 120 |
| **b** | Proposal clearly identifies a service category. | ☐ | 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, is cohesive, attainable, and includes a service delivery start date in the second Quarter of the grant cycle. | ☐ | 100 |

***3*** ***In the text box below, describe the ways in which the project aligns with program intent. Identify project resources, activities, and clearly state the project's anticipated goals, outputs, and outcomes. Additionally, provide a written statement demonstrating adherence to the SAMHSA core principles of best practices in crisis response services.***

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

| | | | |
|---|---|---|---|
| **b** | The response identifies project resources and activities, and clearly states the project's anticipated goals, outputs, and outcomes. | ☐ | 40 |
| **c** | The applicant has clearly described how they will meet all program requirements and services listed in section 1.03 of the RFP, including adherence to the SAMHSA core principles of best practices in crisis response services. | ☐ | 100 |

***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 to comply with the requirements of the AKAIMS Minimal Data Set.***

| *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** | A statement to comply with the requirements of the AKAIMS Minimal Data Set (Attachment #2) has been provided. | ☑ | 0 |

***5 In the text box below, describe the target population and service area(s) of the proposed project.***

| *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 |

***6 Provide the proposed budget for the first year of the project. Include detail and supporting narrative as shown in the DOH 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. | ☑ | |
| **j** | The attached template for the FY23 Contact and Service Type form has been completed and uploaded to this criterion. | ☑ | |

**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 as 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: DOH staff review will also include DOH 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 and staffing patterns. Scan the following documents as a single file and upload in the space provided below: 1) Position descriptions for 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 position descriptions, resumes, and professional credentials. | ☐ | 120 |
| **b** | Staffing patterns are well described. | ☐ | 80 |
| **c** | Staffing levels are sufficient to support the requirements of the proposed project and compliant with all identified program mandates. | ☐ | 80 |
| **d** | Position descriptions support the intent of the RFP and the project proposed. | ☐ | 60 |
| **e** | Administrative staff is qualified as demonstrated by the resumes provided. | ☐ | 80 |
| **f** | 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.***

| ***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 |

***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. Please include a written plan for emergency response and recovery. Additionally, please scan and upload as a single file the Board-approved sliding scale policy and a copy of the sliding fee schedule.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | The applicant clearly describes the facility planned to be used, existing use, number of recliners for COS or number of beds if providing CSS, whether the organization has current site control (ownership, lease) and if not, a plan to acquire it. There must also be a detailed description of any alterations/renovations planned. | ☐ | 120 |
| **b** | The facilities described are safe and appropriate to the purpose of the program. | ☐ | 80 |
| **c** | Access to the locations will enhance delivery of services to the targeted populations. | ☐ | 60 |
| **d** | Proposal includes a written plan for emergency response and recovery as requested in the solicitation. | ☑ | |
| **e** | A copy of the Board approved sliding scale policy and a copy of the sliding fee schedule has been attached. | ☑ | |

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

***1 In the upload field below, provide a single-file scan of documented community support for the proposed project.***

| *Evaluation/Review Criteria* | | Review | Points |
|---|---|---|---|
| **a** | Appropriate documentation of support is provided from each community in which the applicant proposes to provide services. | ☐ | 60 |

***2 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 involvement of the public and potential recipients of services in planning the proposed project is well-described. | ☐ | 40 |

***3*** ***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. If the proposal is for COS, include a signed Memorandum of Agreement (MOA) with local law enforcement and first responders.***

| ***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. For COS applicants only, a signed MOA with local law enforcement and first responders is provided. | ☐ | 100 |

***4*** ***In the text box below, describe the in-place or planned coordination with the State or other providers for referrals necessary to project success. Identify the project staff involved as well as the responsible positions at the referring agencies.***

| ***Evaluation/Review Criteria*** | | **Review** | **Points** |
|---|---|---|---|
| **a** | The applicant's description demonstrates a clear understanding of the roles that must be performed by the applicant and by referring agencies for the effective delivery of services to the targeted population. | ☐ | 60 |