

**NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
REQUEST FOR APPLICATIONS
(RFA) #SUPP1013 – Statewide SUD System Support**

EXPECTED TIMETABLE FOR KEY EVENTS:

| | DATE | TIME |
|---|--------------------------------------|-------------|
| RFA Release Date | 8/22/2022 | |
| Deadline for Submission of Applicant’s Inquiries | 9/6/2022 | 5:00 PM EST |
| Anticipated Release of Inquiries & Answers by OASAS | 9/12/2022 | |
| Application Submission Deadline and Time | 10/11/2022 | 5:00 PM EST |
| Anticipated Notification of Award | Continuous until funds are exhausted | |

ALL INQUIRIES TO:

COVIDFunds@oasas.ny.gov

Bureau of Contracts & Procurements

NYS Office of Addiction Services and Supports

Subject: OASAS Project No. SUPP1013, “Provider Name”

EMAIL SUBMISSION OF APPLICATIONS TO:

COVIDFundsApplications@oasas.ny.gov

NYS Office of Addiction Services and Supports

Bureau of Contracts & Procurements

Subject: SUPP1013, “Provider Name”

**NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
REQUEST FOR APPLICATIONS
(RFA) #SUPP1013 – “Statewide SUD System Support”
Table of Contents**

| | |
|---|-----------|
| EXPECTED TIMETABLE FOR KEY EVENTS: | 1 |
| I. INTRODUCTION AND BACKGROUND: | 3 |
| A. PURPOSE OF REQUEST FOR APPLICATIONS | 3 |
| B. FUNDING AVAILABLE | 3 |
| C. SCOPE OF SERVICES | 3 |
| D. ELIGIBLE APPLICANTS | 4 |
| II. INQUIRIES AND CLARIFICATIONS: | 6 |
| III. SUBMISSION OF APPLICATIONS: | 6 |
| A. APPLICATION DEADLINE AND SUBMISSION | 6 |
| B. APPLICATION FORMAT AND CONTENT | 6 |
| 1. Proposal Cover Letter | 6 |
| 2. Attachment B - Contract Budget and Funding Summary | 6 |
| 3. Attachment C- Program Narrative/Justification | 7 |
| 4. Attachment D- Executive Order No.16 Certification | 7 |
| IV. REVIEW CRITERIA: | 7 |
| V. ADMINISTRATIVE INFORMATION: | 7 |
| A. OASAS RESERVED RIGHTS | 8 |
| B. VENDOR RESPONSIBILITY | 8 |
| C. PREQUALIFICATION REQUIREMENTS FOR NOT-FOR-PROFIT APPLICANTS | 9 |
| D. EXECUTIVE ORDER 16 REQUIREMENTS | 10 |
| E. COMPLIANCE REQUIREMENTS | 11 |
| F. REPORTING REQUIREMENTS | 11 |
| G. PAYMENT PROCESS | 11 |
| ATTACHMENT B – CONTRACT BUDGET AND FUNDING SUMMARY | 14 |
| ATTACHMENT D – CERTIFICATION UNDER EXECUTIVE ORDER NO. 16 | 15 |

I. INTRODUCTION AND BACKGROUND:

A. PURPOSE OF REQUEST FOR APPLICATIONS

Substance Use Disorder (SUD) providers sustained significant fiscal stresses during and due to the COVID-19 pandemic. To assist providers with fiscal recovery and continued safe service provision of SUD prevention, treatment, and recovery services, OASAS intends to make funds available to support programmatic stability to resume, sustain, and/or improve existing SUD program services.

B. FUNDING AVAILABLE

OASAS will make available up to \$20 million of supplemental Federal Substance Abuse Prevention and Treatment Block Grant funds awarded by the Substance Abuse and Mental Health Services Administration to support reasonable, necessary, and allowable SUD program costs incurred after March 15, 2021 that were not previously and will not otherwise be reimbursed by other funding or programs, including State Aid and other grants. Funds are available through March 14, 2023. Any extension of availability of the funds is contingent upon Federal extension of the grant period.

C. SCOPE OF SERVICES

Providers may use funding for fiscal and programmatic support necessary to address the impact of COVID-19 on existing program operations and infrastructure.

Allowable uses of funds include, but are not limited to:

- Program operating costs to resume, sustain, and/or improve SUD existing program services, such as:
 - Payroll expenses, including fringe benefit costs, but excluding retention incentives;
 - Staff recruitment costs, including signing bonuses;
 - Training, including the cost of ordinary registration fees for professional continuing education courses, professional conferences, and staff in-service training events;
 - Implementation of infectious disease control measures;
 - Supplies;
 - Equipment needs, such as security systems or durable medical equipment;
 - Reimbursement of all or a portion of remaining principal for loans incurred to sustain SUD program operations;
 - Agency Administration expenses, not to exceed 10% of total Personal Services, Fringe Benefits, and Other Than Personal Services costs; and,
 - Other costs which do not have any other current source of payment.

Awardees must maintain supporting documentation for all expenses including but not limited to methodologies for the calculation of any signing bonuses. Awardees must be able

to produce supporting documentation for any expenses upon request.

Funds may not be used for staff educational loan repayments and for anything related to college level fees and college tuition reimbursement.

Funds may not be used to purchase, construct, permanently improve, or change the structure of a building. This includes removing or adding walls, creating offices or rooms, etc. Funds may be used for cosmetic renovations only. Cosmetic renovations are any renovations that improve the appearance of a building without changing the existing structure or the electrical and plumbing systems. Examples of cosmetic renovations are painting, changing a light fixture, and replacing the flooring. Funds may also be used for minor maintenance such as replacing the air filters in an HVAC system but cannot be used to replace the entire HVAC system.

Funding cannot be used to supplant any existing grants or resources.

Expenditures supported by these funds must be reasonable and/or necessary for providing SUD services in both nature and amount and were not previously and will not otherwise be reimbursed by other funding or programs. Unreasonable and/or unnecessary costs are not allowable. Appendix X of the Consolidated Fiscal and Reporting (CFR) Manual lists items of expense that are considered non-allowable. In addition, Section 21 of the CFR Manual outlines additional expenses that may not be claimed for reimbursement.

*NOTE: These funds should not be used for on-going costs that cannot be supported beyond the grant period. Funds awarded under this scope of work may not be transferred or used for any other project or purpose.

D. ELIGIBLE APPLICANTS

Eligible providers:

- Voluntary agencies or local governmental units (LGU) which provide direct care SUD treatment, prevention, and/or recovery services that (1) are OASAS-Certified and/or funded by OASAS State Aid as of the date of award; (2) were operational prior to January 31, 2020; (3) are pre-qualified in the Grants Gateway; and (4) have completed a certified Vendor Responsibility questionnaire are eligible to receive funds.
 - Providers applying for Primary Prevention funds must be an OASAS State Aid funded provider of primary prevention services under program code 5520.

The following table identifies provider program types eligible to receive funding by CFR Program Types:

| Program Code | Program Type |
|---------------------|------------------------------|
| 2030 | Residential Opioid Treatment |

| Program Code | Program Type |
|---------------------|---|
| 2050 | Outpatient Opioid Treatment |
| 3039 | Medically Supervised Withdrawal Services – Residential |
| 3059 | Medically Supervised Withdrawal Services - Outpatient |
| 3510 | Medically Monitored Withdrawal |
| 3520 | Medically Supervised Outpatient |
| 3530 | Outpatient Rehabilitation |
| 3550 | Inpatient Rehabilitation Services |
| 3551 | Residential Rehabilitation Services for Youth (RRSY) |
| 3560 | Intensive Residential |
| 3570 | Community Residential |
| 3580 | Supportive Living |
| 3600 | Residential Services |
| 4045 | Specialized Services Substance Abuse Programs |
| 4480 | HIV Early Intervention Services |
| 5990 | Dual Diagnosis Coordinator |
| 6030 | Residential Opioid Treatment to Abstinence |
| 0465 | Job Placement Initiative |
| 0810 | Case Management |
| 0850 | Family Support Navigator |
| 0950 | Peer Engagement |
| 3078 | Continuum of Care Rental Assistance Case Management |
| 3270 | NY NY III: Post-Treatment Housing |
| 3370 | NY NY III: Housing for Persons at Risk for Homelessness |
| 3470 | Permanent Supported Housing |
| 3480 | Permanent Supported Housing - High Frequency Medicaid Consumers |
| 3920 | Youth Clubhouse |
| 3970 | Recovery Community Centers |
| 3980 | Recovery Community Organizing Initiative |
| 4072 | Vocational Rehabilitation |
| 3100 | Prevention Resource Centers |
| 5520 | Primary Prevention Services |
| 5550 | Other Prevention Services |

Ineligible providers/programs:

- Gambling programs/services;
- Hospitals;
- Jail-based programs/services;
- Public schools;
- Governmental entities not directly operating a SUD treatment, prevention, and/or recovery service;
- Legislative initiative funding; and
- Proprietary (for-profit) providers.

For purposes of this solicitation, the following definitions apply:

- **OASAS-Certified:** Pursuant to Article 32 of the New York State Mental Hygiene Law, possession of operating certificate(s) issued by the OASAS commissioner to engage in the provision of Outpatient and Opioid Treatment Services as defined in 14 NYCRR Part 822.
- **Local Governmental Unit:** As defined in New York State Mental Hygiene Law, section 41.03 paragraph 5, local governmental unit “means the unit of local government given authority in accordance with this chapter by local government to provide local services.”
- **Voluntary Agencies:** As defined in New York State Mental Hygiene Law, section 41.03 paragraph 11, a voluntary agency means a corporation organized or existing pursuant to the not-for-profit law for the purpose of providing local services.

II. INQUIRIES AND CLARIFICATIONS:

Any inquiries or requests for clarification about this RFA must be received in writing by **5:00PM EST on September 6, 2022** and must be submitted by email to COVIDFunds@oasas.ny.gov with a subject line “**Requests for Applications - OASAS Project No. SUPP1013**”. Answers will be posted to the OASAS Procurement web page on or around **September 12, 2022**. In the event it becomes necessary to clarify any portion of this RFA, a clarification will be posted to the OASAS website.

III. SUBMISSION OF APPLICATIONS:

A. APPLICATION DEADLINE AND SUBMISSION

Applications will be accepted on a rolling basis until funds are exhausted or until the application submission deadline date is reached.

Applications should be emailed to COVIDFundsApplications@oasas.ny.gov by **5:00 P.M. EST on October 11, 2022**. The subject of the email should read: **SUPP1013, “Provider Name”**.

B. APPLICATION FORMAT AND CONTENT

The submission must include the following:

1. Proposal Cover Letter

A cover letter will transmit the application to OASAS. It should be completed, signed, and dated by an authorized representative of the Applicant. The letter should include the Applicant’s designated contact name, phone number, and e-mail address.

2. A completed Attachment B - Contract Budget and Funding Summary

A fillable version of the Attachment B - Contract Budget and Funding Summary is available on the OASAS website.

3. A completed Attachment C- Program Narrative/Justification

Provide a Program Narrative/Justification and identify it as **Attachment C**.

The purpose of the Program Narrative/Justification is to demonstrate fiscal need to support SUD programmatic stability.

The Program Narrative should be no more than 10 pages, not including the cover letter or other attachments, double-spaced.

The Narrative should include and be organized according to the following:

- a) **Provider:** Description of provider, including current SUD services, locations served, special populations served, etc.
- b) **Background and Justification:** Explain current fiscal stresses due to the COVID-19 pandemic that have impacted service provision and how funds will assist with fiscal recovery and continued safe service provision of existing SUD prevention, treatment, and recovery services, including resuming, sustaining, and/or improving SUD program services. Justification should be based on PRU-specific needs. Include any applicable documentation to support the requested funding amount.

4. A completed Attachment D- Executive Order No.16 Certification

IV. REVIEW CRITERIA:

Funding under this application will be distributed as follows:

- Complete applications will be reviewed in order of receipt. (An application will be considered complete if it contains a cover letter, Attachment B, Attachment C, and Attachment D)
- Funding will be awarded based on:
 - A determination that the applicant is eligible for the award.
 - The Applicant is prequalified in Grants Gateway at time of application submission
 - A review by the appropriate OASAS Regional Office and/or applicable program staff of the submitted justification and that the use of funds is reasonable and necessary to support continued provision of safe SUD services.
 - Any follow-up with applicants for clarification or to request further information may impact the order in which it is reviewed.
- Awards will be made on a continuing basis until available funds are exhausted.

V. ADMINISTRATIVE INFORMATION:

A. OASAS RESERVED RIGHTS

OASAS reserves the right to:

- Reject any or all applications received in response to this Requests for Funding.
- Not make an award to any applicant who is not in good standing.
- Withdraw the RFA at any time, at OASAS's sole discretion.
- Make an award under this RFA in whole or in part.
- Make awards based on geographical or regional consideration to serve the best interests of the State.
- Make awards in a culturally humble and ethnically diverse manner as determined necessary and appropriate in the sole discretion of OASAS to serve best the interests of the State.
- Make additional awards in excess of the posted amount if additional funding is made available.
- Negotiate with the successful applicant within the scope of the RFA in the best interests of the State.
- Disqualify any applicant whose conduct and/or application fails to conform to the requirements of this RFA.
- Seek clarifications and revisions of applications.
- Use application information obtained through site visits, management interviews and the State's investigation of an applicant's or its proposed subcontractor's qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the OASAS's request for clarifying information in the course of evaluation and/or selection under the RFA.
- Amend the RFA to correct errors of oversight, or to supply additional information as it becomes available.
- Direct applicants to submit application modifications addressing subsequent RFA amendments.
- Change any of the scheduled dates.
- Eliminate any mandatory, non-material specification that cannot be met by all of the prospective applicants.
- Waive any requirement that is not material.
- Conduct contract negotiations with the next successful applicant, should the OASAS be unsuccessful in negotiating with the selected applicant.
- Utilize any and all ideas submitted in the applications received.
- Require correction of simple arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an applicant's application and/or to determine an applicant's compliance with the requirements of the solicitation.
- Accept applications after the deadline for submissions, if OASAS in its sole discretion, determines there is good cause shown for the delay in the submissions.

B. VENDOR RESPONSIBILITY

State agencies are required to ensure that contracts are awarded to responsible vendors. A determination of responsibility includes, but is not limited to, an affirmative review of an

applicant's qualifications, legal authority, financial stability, integrity and past contract performance. A vendor responsibility review, including completion of a vendor responsibility questionnaire, will be required of any successful applicant. OASAS requires a successful applicant to formally communicate any changes in its responsibility disclosure. Failure to disclose any changes provides OASAS with the right to terminate the contract for cause.

OASAS recommends that applicants file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at <http://osc.state.ny.us/vendrep/documents/system/checklist.pdf> or go directly to the VendRep System online at http://www.osc.state.ny.us/vendrep/info_vrsystem.htm.

Applicants must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at (866) 370-4672 or (518) 408-4672 or email at ciohelpdesk@osc.state.ny.us.

Applicants opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website at www.osc.state.ny.us/vendrep or via contacting OASAS or the Office of the State Comptroller's Help Desk for a copy of the paper form.

C. PREQUALIFICATION REQUIREMENTS FOR NOT-FOR-PROFIT APPLICANTS

Pursuant to the NYS Division of the Budget Bulletin H-1032 Revised, dated July 16, 2014, NYS has instituted key reform initiatives to the grant contract process, which require that **not-for-profits must register in the NYS Grants Gateway and complete a Vendor Prequalification process.**

Applicants must be pre-qualified in the NYS Grants Gateway when submitting their application. In addition, any award is contingent on the Applicant(s) being pre-qualified at the time of contract execution. (See: <http://grantsgateway.ny.gov/>)

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The Vendor User Manual in the Grants Reform Website details the requirements and can be found at <https://grantsmanagement.ny.gov/grantee-documents>.

1. Register for the Grants Gateway.

- On the Grants Reform Website, download a copy of the Registration Form for Administrator. A signed, notarized original form must be sent to the Division of Budget at the address provided in the instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway. If you have previously registered and do not know your Username, please email grantsreform@budget.ny.gov. If you do not know your Password please click the Forgot Password link from the main log in page and follow the

prompts.

2. Complete your Prequalification Application.

- Log in to the Grants Gateway. **If this is your first time logging in**, you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.
- Click the *Organization(s)* link at the top of the page and complete the required fields including selecting the State agency you have the most grants with. This page should be completed in its entirety before you SAVE. A *Document Vault* link will become available near the top of the page. Click this link to access the main Document Vault page.
- Answer the questions in the *Required Forms* and upload *Required Documents*. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Proposal.
- Specific questions about the prequalification process should be referred to your agency representative or to the Grants Reform Team at grantsreform@budget.ny.gov.

3. Submit Your Prequalification Application

- After completing your Prequalification Application, click the **Submit Document Vault Link** located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to *In Review*.
- If your Prequalification reviewer has questions or requests changes, you will receive email notification from the Gateway system.
- Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

Failure to prequalify and maintain your prequalification status will serve as a bar to grant eligibility. If you have any questions about prequalification, please go to the Grants Reform website or contact COVIDFunds@oasas.ny.gov.

D. EXECUTIVE ORDER 16 REQUIREMENTS

In accordance with Executive Order No. 16, State Entities are directed to refrain from entering into any new contract or renewing any existing contract with an entity conducting business operations in Russia. On March 24, 2022, the United States, in coordination with the European Union and the Group of Seven (G-7), imposed sanctions on an additional 400 Russian individuals and entities. The federal sanctions include efforts to block moves by Russian entities and individuals to evade the sanctions imposed or to use international reserves. While the federal sanctions seek to target specific entities and individuals within Russia, Executive Order No. 16 is intended to ensure that New York State is not entering into contracts with entities conducting business in Russia and thereby indirectly supporting

Russia's unjustified war against the Ukrainian people.

In order to comply with Executive Order No. 16, State Entities must obtain a certification from applicants as part of a solicitation for a new contract or extension of an existing contract. Such Applicant certification shall be made utilizing **Attachment D**.

E. COMPLIANCE REQUIREMENTS

All activities performed with funds from this solicitation must be carried out in a manner that complies with all applicable federal and New York State laws and regulations.

F. REPORTING REQUIREMENTS

Applicants will be required to submit expense reports ("claims") for the specified budget period. Such claims shall be for allowable, State aid-reimbursable SUD-related program costs as identified in the scope of work. Such claims shall be on the form identified by the State Agency. Records and documentation must be maintained by the Contractor to support all expenses incurred.

OASAS may add additional reporting based on SAMHSA and OASAS needs for information.

G. PAYMENT PROCESS

1. Advance Payment and Recoupment Language:

- a. The State agency will make one advance payment to the Contractor, in the amount of fifty percent (50%), for each program of the budget as set forth in the most recently approved applicable Attachment B form (Budget) within thirty (30) days of State Agency approval of the initial contract or any amendment thereafter.
- b. Recoupment of any advance payment shall be recovered by crediting subsequent reimbursement claims until the advance is fully recovered within the contract period.
- c. If upon completion or termination of this contract, all advance payments have not been fully liquidated, the balance of such payments shall be paid by the Contractor to the State upon demand.

2. Interim and/or Final Claims for Reimbursement:

Claims for reimbursement may not be submitted more often than monthly for allowable costs. All invoices shall be submitted using the form identified by the State Agency and submitted to COVIDFundsVOUCHERS@oasas.ny.gov.

**Attachment B – Contract Budget and Funding Summary
INSTRUCTIONS – Statewide SUD System Support**

A separate fillable version of the budget form is available on the SAPT procurement page under this initiative

| | | |
|-------|-------------------------------------|--|
| 1 | Initiative | Enter the name of the initiative for this budget submission. |
| 2 | Printed Legal Name of Entity | Print the incorporated or legal name of the agency submitting the request. Do not enter the common name or acronym. |
| 3 | SFS Supplier ID | Enter the unique 10-digit number that identifies the agency/vendor in the Statewide Financial System (SFS). |
| 4 | OASAS Provider Number | Enter the unique five-digit number that identifies the agency and that is used for reporting purposes to OASAS. This number is the same as the Agency Code number used when submitting Consolidated Fiscal Report documents. |
| 5-7 | Address | Enter the mailing address, including zip code, where the administrative office of the applicant is located. |
| 8-11 | Contact Person | Enter the printed name and title, telephone number (including area code), and email of the person who can answer questions concerning the information provided on the Budget form. |
| 12-17 | Requested Budget | <p>Applicants should refer to the Consolidated Fiscal Reporting Manual for a more detailed general description of the following expense items which should be entered in Columns A-Primary Prevention and B-All Other Services (see table below).</p> <ul style="list-style-type: none"> 12) Personal Services; 13) Fringe Benefits; 14) Other Than Person Services/Non-Personal Services; 15) Equipment; 16) Property/Space; and 17) Agency Administration. <p>Enter a zero (0) in those categories for which no costs are anticipated. All requested amounts should be rounded to the nearest dollar. Agency administration costs may not exceed 10% of the total Personal Services, Fringe Benefits, and Other Than Personal Services costs.</p> <p>Funds may not be used to purchase, construct, permanently improve, or change the structure of a building. This includes removing or adding walls, creating offices or rooms, etc. Funds may be used for cosmetic renovations only. Cosmetic renovations are any renovations that improve the appearance of a building without changing the existing structure or the electrical and plumbing systems. Examples of cosmetic renovations are painting, changing a light fixture, and replacing the flooring. Funds may also be used for minor maintenance such as replacing the air filters in an HVAC system but cannot be used to replace the entire HVAC system.</p> |

| | |
|----------|--|
| Column A | Primary Prevention – Include all anticipated allowable expenses as defined by the scope of work related to Primary Prevention services as defined by Federal 45 CFR § 96.125 - Primary prevention (e.g., activities reported under Consolidated Fiscal Reporting program code 5520). See also the OASAS Prevention Guidelines for OASAS Funded and/or Certified Prevention Services . |
| Column B | All Other Services – Include all anticipated allowable expenses as defined by the scope of work that DO NOT meet the criteria defined above as Primary Prevention, including expenses related to certified treatment services, treatment support, program support, and recovery services. |

| | | |
|-------|---------------------------|---|
| 18-19 | Agency Official | Enter the printed name and title of the agency representative authorized to submit this application on the agency's behalf, signed and dated. |
| 20-21 | Signature and Date | The agency representative must sign and date the funding request. |

Please note:

Expenditures supported by these funds must be reasonable and/or necessary for providing SUD services in both nature and amount and have not previously and will not otherwise be reimbursed by other funding or programs. Unreasonable and/or unnecessary costs are not allowable. Appendix X of the Consolidated Fiscal and Reporting Manual lists items of expense that are considered non-allowable. In addition, Section 21 of the CFR Manual outlines additional expenses that may not be claimed for reimbursement. These funds should not be used for on-going costs that cannot be supported beyond the grant period.

ATTACHMENT B – CONTRACT BUDGET AND FUNDING SUMMARY

A separate fillable version of this form is available on the SAPT procurement page under this initiative

1) Initiative: Statewide SUD System Support

| | |
|------------------------------------|------------------------------|
| 2) Printed Legal Name of Entity: | |
| 3) SFS Supplier ID: | 4) OASAS Provider Number: |
| 5) Street Address/P.O. Box: | |
| 6) City/Town/Village: | 7) Postal Zip Code: |
| 8) Printed Name of Contact Person: | 9) Printed Title of Contact: |
| 10) Contact Telephone #: | 11) Contact E-Mail: |

| REQUESTED BUDGET (rounded to the nearest dollar) | Primary Prevention (A) | All Other Services (B) |
|--|------------------------|------------------------|
| 12) Personal Services | | |
| 13) Fringe Benefits | | |
| 14) Other Than Personal Services/Non-Personal Services | | |
| 15) Equipment | | |
| 16) Property/Space | | |
| 17) Agency Administration (if applicable) | | |
| TOTAL GROSS EXPENSE BUDGET | | |

| | |
|--|------------------------------|
| | Total Funds Requested |
|--|------------------------------|

| | |
|--------------------------------------|--------------------|
| 18) Printed Name of Agency Official: | 19) Printed Title: |
| 20) Signature: | 21) Date: |

ATTACHMENT D- Certification Under Executive Order No. 16 Prohibiting State Agencies and Authorities from Contracting with Businesses Conducting Business in Russia

Executive Order No. 16 provides that “all Affected State Entities are directed to refrain from entering into any new contract or renewing any existing contract with an entity conducting business operations in Russia.” The complete text of Executive Order No. 16 can be found [here](#).

The Executive Order remains in effect while sanctions imposed by the federal government are in effect. Accordingly, vendors who may be excluded from award because of current business operations in Russia are nevertheless encouraged to respond to solicitations to preserve their contracting opportunities in case the sanctions are lifted during a solicitation or even after award in the case of some solicitations.

As defined in Executive Order No. 16, an “entity conducting business operations in Russia” means an institution or company, wherever located, conducting any commercial activity in Russia or transacting business with the Russian Government or with commercial entities headquartered in Russia or with their principal place of business in Russia in the form of contracting, sales, purchasing, investment, or any business partnership.

Is Vendor an entity conducting business operations in Russia, as defined above? Please answer by checking one of the following boxes:

1. No, Vendor does not conduct business operations in Russia within the meaning of Executive Order No. 16.

- 2.a. Yes, Vendor conducts business operations in Russia within the meaning of Executive Order No. 16 but has taken steps to wind down business operations in Russia or is in the process of winding down business operations in Russia. (Please provide a detailed description of the wind down process and a schedule for completion.)

- 2.b. Yes, Vendor conducts business operations in Russia within the meaning of Executive Order No. 16 but only to the extent necessary to provide vital health and safety services within Russia or to comply with federal law, regulations, executive orders, or directives. (Please provide a detailed description of the services being provided or the relevant laws, regulations, etc.)

3. Yes, Vendor conducts business operations in Russia within the meaning of Executive Order No. 16.

The undersigned certifies under penalties of perjury that they are knowledgeable about the Vendor’s business and operations and that the answer provided herein is true to the best of their knowledge and belief.

Vendor Name: _____
(legal entity)

By: _____
(signature)

Name: _____

Title: _____

Date: _____

Provider Number: _____