

**NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
REQUEST FOR APPLICATIONS
#SUPP1016 – “Community Prevention and Intervention Project”**

EXPECTED TIMETABLE FOR KEY EVENTS:

	DATE	TIME
RFA Release Date	January 13, 2023	
Deadline for Submission of Applicant’s Inquiries	January 27, 2023	5:00 PM EST
Anticipated Release of Inquiries & Answers by OASAS	February 3, 2023	
Application Submission Due Date and Time	February 24, 2023	5:00 PM EST
Anticipated Notification of Award	March 22, 2023	

ALL INQUIRIES TO:

COVIDFunds@oasas.ny.gov
Bureau of Contracts & Procurements
NYS Office of Addiction Services and Supports
Subject: **OASAS Project No. SUPP1016**

EMAIL SUBMISSION OF APPLICATIONS TO:

COVIDFundsApplications@oasas.ny.gov
NYS Office of Addiction Services and Supports
Subject Line: OASAS Project No. SUPP1016, “Provider Name”

**NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
REQUEST FOR APPLICATIONS
(RFA) #SUPP1016 – “Community Prevention and Intervention Project”
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A. INTRODUCTION AND BACKGROUND:

A. PURPOSE OF REQUEST FOR APPLICATIONS

Prevention services in New York State are expanding their reach to youth, families, and communities with higher risk factors and lower protective factors for the prevention of substance use and misuse. Prevention services also aim to reach individuals across the life span to identify opportunities for early intervention to reduce misuse. This funding opportunity aims to develop localized, coordinated, culturally responsive, and comprehensive prevention services to reduce behavioral health disparities such as access to prevention in specific geographic areas in our state that are currently underserved. The initiative will support the implementation or expansion of culturally appropriate prevention into areas deemed as prevention service deserts, which can be defined as areas where substance use/misuse prevention programs and supports are difficult to find and/or access. Increasing the reach of equitable behavioral health services, specifically prevention, into underserved communities will enhance progress towards improving health outcomes for individuals and families living in those communities.

The Community Prevention and Intervention Project (CPIP) will create and coordinate, within the regional networks established under the State Opioid Response grant award, the prevention services in the identified underserved area with the intention to saturate the area with universal, selective, and indicated evidence-based prevention services across the socio-ecological levels (i.e., individual, family/relationships, community/school/community-based organizations (CBO), societal). Based on the prevention priorities identified in a needs assessment, prevention networks will organize implementation of Evidence-Based Programs, Practices and Strategies (EBPPS), including Environmental Change Strategies (ECS), from an OASAS-chosen menu of allowable EBPPS (see Menu of Allowable Prevention Programs below). The EBPPS must be implemented in collaboration with organizations that predominantly work with the high-risk populations identified in the needs assessment which may include: Criminal justice system organizations and institutions (i.e., prisons, probation); LGBTQIA+ Centers or Drop-Ins; OASAS Permanent Supportive Housing Providers; Homeless shelters; Foster care, kinship care, transient youth organizations; Refugee and immigrant organizations; Tribal organizations; local youth bureaus; veteran service organizations; and other community-based service organizations.

Within each region, OASAS selected counties with few prevention services, are considered underserved, and exhibit high need based on publicly available data compiled in the 2022 County Risk Profiles. The information gathered in the 2022 County Risk Profiles includes data on proxy measures for [OASAS' Risk and Protective Factors](#), and the profiles should be considered in the applicant's needs assessment to identify

prevention priorities in the selected county. As part of the prevention network, applicants will focus on serving at least (but not limited to) one underserved and high need county from within the respective county's Network:

(County-Wide)

1. Chautauqua & Cattaraugus (Value Network)
2. Sullivan & Ulster (Coordinated Behavioral Health)
3. Greene & Columbia (COAST)
4. Delaware, Chenango, Broome, Fulton, Montgomery & Herkimer (Mohawk Valley)
5. Jefferson, Franklin & St. Lawrence (North Country)
6. Oswego (Central)
7. Chemung (Your Health)
8. Schuyler, & Seneca (Finger Lakes)
9. Bronx (Citywide)
10. Kings (Brooklyn)
11. Nassau & Suffolk (Long Island)*
12. Richmond (Staten Island)*

* For Nassau, Suffolk and Richmond Counties, 2022 Risk Profile data should be used to identify high need communities within these counties.

The applicant(s) shall identify and implement prevention strategies to address the risk and protective factors identified through a comprehensive needs assessment that includes data from the County Risk Profile. Prevention services shall be based on the priority prevention needs identified in the assessment and not be limited to addressing opioids and stimulants; but also address alcohol, cannabis, and/or other substances in the comprehensive approach.

The approach that Prevention Networks undertake will be guided by the Federal Substance Abuse and Mental Health Services Administration's (SAMHSA) [Strategic Prevention Framework](#) (SPF). Following the SPF process with fidelity builds and sustains the necessary infrastructure for effective data-driven prevention across the targeted area.

Programs and strategies for consideration should coincide with the National Academy of Medicines' (NAM) [Continuum of care](#):

- Universal prevention programs and strategies are designed for the general public or for demographic sub-populations without assessing for levels of risk or problem behaviors in that population.

- Selective prevention programs target subsets of the total population that are deemed to be at risk for substance use behavior by virtue of their membership in a particular population segment. The selective prevention program is presented to the entire subgroup because as a whole they are at higher risk than the general population. An individual's personal risk is not specifically assessed or identified, and selection is based solely on membership in the higher risk subgroup.
- Indicated prevention programs are designed for those populations with elevated levels of individual risk factors, putting them at higher risk for developing substance use problems, and also are identified as having minimal but detectable signs or symptoms but not meeting diagnostic levels of a substance use disorder.

The chosen EBPPS for prevention should use a multi-pronged approach and need to be spread across the socio-ecological settings (Individual, Family/Relationship, Community/School/CBO, and Societal). Prevention services have the greatest reach and impact by addressing multiple contexts and the constellation of risk and protective factors that influence both individuals and population substance use/misuse behavior as identified in the needs assessment.

Examples of prevention programs and strategies at the varying levels include:

- **Individual level:** strategies that modify factors specific to the individual, such as health and psychosocial problems, which may correspond with substance use and misuse. Strategies may include but, are not limited to individual one-on-one interventions such as Teen Intervene, Screening, Brief Intervention, and Referral to Treatment (SBIRT) or Brief Alcohol Screening and Intervention for College Students (BASICS).
- **Relationship level:** strategies that modify the relationship dynamics within an individual's closest social circle (e.g., family members, peers). Strategies may include but, are not limited to small group classroom interventions that train students on peer refusal skills, or parenting-targeted programs, such as Promoting Positive Parenting (Triple P); Strengthening Families or Parenting Wisely.
- **Community level:** strategies that modify the settings where social relationships occur, such as schools, workplaces, and neighborhoods. Strategies may include but not limited to, school-wide implementation of the Positive Action or a campus-based social-norms marketing campaign.
- **Societal level:** strategies that modify broad societal factors which includes the creation or modification of health, economic, educational, and social policies;

consistent and perceived enforcement of those policies, as well as broader media campaigns.

Environmental Change Strategies for Prevention

Prevention-focused ECS impact the community, social, and economic contexts in which people access and consume alcohol and other substances. These strategies are grounded in the field of public health and emphasize changing the broader physical, social, cultural, and institutional forces that contribute to health problems in the general population. The most effective prevention ECS employs a comprehensive, coordinated three-pronged approach:

1. The enacting or improving of laws, regulations and policies;
2. Enhancing enforcement of the law, regulation, or policy; and
3. The use of the media to raise community awareness and support for the policy and enforcement activities.

Please visit the OASAS Prevention training page for instructional videos on designing and implementing ECS for substance use/misuse prevention. <https://oasas.ny.gov/applying-comprehensive-environmental-strategy-approach>

Community mobilization and promotional media are essential both to generate public support for the environmental changes and to promote their sustainability. ECS, like all effective prevention, must be selected based on a community needs assessment identifying the specific environmental factors that lead to substance misuse and gambling related negative consequences. OASAS supports the implementation of the three environmental components as a coordinated effort, and all three must be implemented conjointly to receive credit toward the evidence-based practice standard.

Example of a Comprehensive Environmental Approach:

Policy, enforcement, and media strategies should work together toward a common goal. The overall approach should be guided by problem behaviors, consequences, or risk and protective factors identified in community-based needs assessment. For example, if data indicate that the majority of underage youth are accessing alcohol through informal social events, such as house parties, then a sequence of strategies that address social access seems warranted, and this course of action could include a Social Host Ordinance (Policy), Underage AOD Party Dispersal/Party Patrols (Enforcement), and a “Parents who Host Lose the Most” Social Marketing Campaign (Media) as well as

training and engagement of local law enforcement on this community focused approach to reduce alcohol use amongst youth.

B. FUNDING AVAILABLE:

Up to twelve applicants will be awarded up to \$300,000 each per year until September 30, 2025.

C. SCOPE OF SERVICES:

The Prevention approach taken by the network must be guided by SAMHSA's SPF Model. Following the SPF process with fidelity will help build and sustain the necessary infrastructure for effective prevention across the targeted area.

- Each prevention network will focus on a specific area of the state identified by OASAS. The geographic areas that can be covered include choosing from these county areas: Chautauqua & Cattaraugus (Value Network), Sullivan & Ulster (Coordinated Behavioral Health), Greene & Columbia (COAST), Delaware, Chenango, Broome, Fulton, Montgomery & Herkimer (Mohawk Valley), Jefferson, Franklin & St. Lawrence (North Country), Oswego (Central), Chemung (Your Health), Schuyler, & Seneca (Finger Lakes), Bronx (Citywide), Kings (Brooklyn), Nassau & Suffolk (Long Island), and Richmond (Staten Island).
- The SPF must serve as the planning model for this initiative. All funded applicants will use the 5-step SPF process to implement data-driven decision-making processes to develop a Logic Model for prevention and an action plan while infusing the SPF's guiding principles of cultural responsiveness and sustainability.
- Each prevention network will engage the selected health disparate, vulnerable, or underserved community and engage key stakeholders to plan and implement sustainable prevention strategies to address the priority Risk and Protective factors. Funded networks will need to gather input from the community and include them as a strong voice in making fiscal, program, and evaluation decisions.
- Funded networks will establish partnerships with agencies and local service organizations that predominantly work with high-risk populations and who are experienced in addressing the health disparities within the intended community to ensure community buy in, maximize resources, and develop a plan for sustainability. These organizations may include: Criminal justice system organizations and institutions (i.e., prisons, probation); LGBTQIA+ Centers or Drop-Ins; OASAS Permanent Supportive Housing Providers; Homeless shelters; Foster care, kinship care, transient youth organizations; Refugee and immigrant organizations; Tribal organizations; local youth bureaus; veteran service organizations; and other community-based service organizations for delivery of prevention services in the

identified communities. The lead agency will also formally collaborate with the other OASAS funded prevention providers that cover the geographic area (if applicable).

- The prevention network lead agency may hire a Network Prevention Coordinator.
- Each network will choose from a menu of approved programs/strategies. The applicant must identify which level of the National Academy of Medicine (IM) Continuum of Care Model the selected strategy or program meets (universal, selective, indicated) AND which social-ecological setting (individual, family/relationship, community/school/CBO, societal) is targeted. This will help situate the service as part of a comprehensive prevention approach. (See below for menu)
- All programs and strategies will be chosen based on identified prevention gap. The program/strategy must be selected from the Menu of Allowable Prevention Programs listed below. *NOTE: There may be crossovers from the lists. For example, Positive Action could count as a Universal program as well as School-based/Community level programs.*
- Networks will be required to collect both survey and archival data that demonstrate need in the selected community, use a logic model to align need with responsive strategies and outcomes, and evaluate all strategies implemented.
- Each network will have a set of deliverables which will include creation of:
 - A Collaboration Plan to build a Prevention Committee Advisory Board that includes OASAS funded prevention providers, substance use prevention community coalitions, and other necessary service providers to ensure service coordination and to provide a comprehensive prevention approach. The plan will need to describe an institutionalized process for information and resource sharing across prevention providers and other necessary service systems. It should also include signed memoranda of understanding (MOUs) among all parties.
 - A Health Disparity Impact Statement that uses data from the Needs and Capacity Assessment as a guide to addressing disparities of the area. This statement will describe how the Network's approach will address behavioral health disparities and enhance prevention equity, and how the approach will respond to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.
 - A Logic Model and an Action Plan which highlights the prevention priorities to be addressed, and programs and strategies the project will implement. Strategies and programs will be selected based on identified prevention need and gaps in services as described in the Needs and Capacity Assessment. If the approach calls for the expansion of services in school-based settings, the services cannot be directed to a school district that already receives OASAS funded prevention services.
 - An Evaluation Plan that provides a clear description of the evaluation method being employed to monitor implementation and measure associated

- outcomes for prevention services. The plan will include the Logic Model that outlines the overall goals, objectives, inputs, outputs, and anticipated short- and long-term outcomes for Prevention services. They must also identify indicators which will be used to measure the identified short- and long-term outcomes. Measurement must be completed pre- implementation, and 6-month, and 12-month post initial implementation.
- If an OASAS-approved evaluation survey or process exists for a selected program, practice or strategy, i.e., a developer's pre- and post-test, OASAS' ECS reporting system, the funded Networks must use that evaluation process.
 - Report submission of monthly process and outcome data as instructed by OASAS.

Example of Prevention Committee functions within the prevention network

In County two, there will be four OASAS-certified Prevention Providers (Providers A-D) engaging in this initiative. Provider A will be the lead agency as they have thirty years of experience engaging in substance misuse prevention, which is more experience than Providers B-D. An introduction meeting occurs with these providers in to discuss their prevention experience and to develop a workplan. During this meeting the following is discussed:

- Provider A has a strong background in engaging in elementary school aged children. Provider A reports success in engaging in Early Risers for Success, PAX Good Behavior Game, and Life Skills Training (LST) – Elementary.
- Provider B has a strong background working with at-risk Hispanic families and young adults. Provider B reports success in engaging in *Familias Unidas* and providing BASICS on local college campuses.
- Provider C is a newer provider and has a strong background working with the aging adult population. Provider C reports success in engaging in WISE/SBIRT programming and community based ECS.
- Provider D has a strong background in working with LGBTQIA+ populations and families. Provider D reports success in engaging in Triple P, Parenting Wisely, and Active Parenting.

While the providers were meeting, a discussion occurred regarding their county risk profile. The following was discussed.

- Higher than average rates of family dysfunction.
- Higher than average rates of young adult (18-24) binge drinking.
- Higher than average rates of DWI arrest rates among adults.
- Higher than average rates of youth arrests for violent crime.

A workplan was developed to intervene with the findings of their counties risk profile.

- Regarding the statistic of higher-than-average family dysfunction, Provider D will engage in parenting based EBPPS.
- Regarding the statistic of higher-than-average rates of youth adults (18-24) binge-drinking, Provider B will engage with college based EBPPS (i.e., BASICS) as well as ECS around the campuses.
- Regarding the statistic of higher-than-average rates of DWI arrest rates among adults, Provider C will engage in ECS in the community.
- Regarding the statistic of higher-than-average rates of youth arrests for violent crimes, Provider A will engage with classroom based EBPPS that focus on social emotional development for young children, and Too Good for Drugs and Violence for high school children.

After the workplan was discussed. Provider A (lead agency) requests that prevention provider (B-D) submits a budget to them based upon the services that they will be offering, and the meeting ends.

D. ELIGIBLE APPLICANTS:

An OASAS-funded prevention provider or a non-profit community agency that demonstrates experience and/or knowledge of implementing evidence-based substance use and misuse prevention services based on the Strategic Prevention Framework (SPF) can serve as the lead Prevention agency for the network. One award will be made in each of the twelve regions established under the State Opioid Response grant and defined in the scope of services in this RFA.

For purposes of this solicitation, the following definitions may apply:

- **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.
- **In Good Standing:** All of a provider’s operating certificates which are subject to a compliance rating must have a current compliance rating of partial (2 years) or

substantial (3 years) compliance.

E. INQUIRIES AND CLARIFICATIONS:

Any inquiries or requests for clarification about this RFA must be received in writing by 5:00PM EST on **January 27, 2023** and must be submitted by email to COVIDFunds@oasas.ny.gov with a subject line “**Requests for Applications - OASAS Project No. SUPP1016**”. Answers will be posted to the OASAS Procurement web page on or around **February 3, 2023**.

In the event it becomes necessary to clarify any portion of this RFA, a clarification will be posted to the OASAS website.

F. SUBMISSION OF APPLICATIONS:

Applications should be emailed to COVIDFundsApplications@oasas.ny.gov by 5:00 P.M. EST on February 24, 2023. The subject of the email should read: SUPP1016, “Provider Name.”

Complete applications must be received by NYS OASAS **by 5:00 P.M. EST on February 24, 2023**.

APPLICATION FORMAT AND CONTENT

The submission should include the following:

1. Attachment B - Contract Budget and Funding Summary
2. Attachment C- Executive Order No.16 Certification
3. Attachment D- Program Narrative

The Proposal Narrative should be typed, double-spaced, single sided on 8 ½ x 11-inch paper. Pages should be paginated, and font should be 12-point Times New Roman, and all margins should be .5 inch wide. The Proposal Narrative should address all the following sections, in order:

G. REVIEW CRITERIA:

Funding will be awarded based on determination that an applicant is eligible for an award; and has the highest score among applicants according to the Program Narrative per each network by each of the 12 regions.

Scoring will be as follows:

Lead Agency Capacity (10 points):

- Describe the lead agency's experience and capacity in following SAMHSA's Strategic Prevention Framework, implementing EBPS, collaborating with other agencies to serve underserved communities, and successfully managing similar projects.
- Identify the member(s) of the lead agency that will oversee the initiative and their experience and approach to effectively monitoring and managing an Initiative like the one proposed.

Statement of Need (20 points):

- Describe the focused area within the Prevention Network where the Prevention services will occur. It must be selected from one of the areas listed above.
- Using quantitative and qualitative data collected from the past 3 years, use data to describe the geographic area in terms of risk and protective factors associated with substance use disorders, substance use patterns, and consequences/outcomes. Using these data, identify the high-risk populations in the area toward which to target services, such as:
 - Individuals with co-occurring mental health/medical needs;
 - LGBTQIA+ identifying individuals
 - Veterans
 - Older adults
 - Significant others (including children, siblings, family members) of people who are incarcerated;
 - Foster care, kinship care, transient youth;
 - Native American/American Indian populations;
 - Refugee and immigrant populations;
 - Rural populations.
- Describe the leverageable resources in the community and gaps where resources are missing or desired. Identify current prevention services available in the region as well as current collaborations and resource sharing among providers. Describe how these collaborative relationships will expand access to services and increase opportunities to further share resources and

invest resources in such a way that it benefits the targeted area. For example, regarding prevention, the applicant should include a description of current prevention programs being implemented, all substance use disorder prevention community coalitions in the region, as well as the organizations associated with substance use prevention.

Project Goals (20 points)

- Identify at least three (3) specific Prevention goals and objectives for your Prevention Network target area using data highlighting the prevention gaps from the Statement of Need. When creating objectives make sure that they are specific, measurable, achievable, relevant, and time bound. For additional guidance: <https://www.samhsa.gov/sites/default/files/nc-smart-goals-fact-sheet.pdf>

NOTE: Not all the gaps identified in the application need to be addressed in the proposal, but the needs assessment should describe the gaps and prioritize what gaps the proposal addresses and the rationale for this prioritization. When creating goals and objectives, the Network should also remain mindful of the need to expand services across the NAM continuum and socio-ecological model.

Program Description (10 points):

- Collaborative Approach (7 points)– Describe the current and planned collaborations with other agencies in the area. Describe the process and approach to partners that will address the prevention needs of the Prevention Network’s target area, assure buy-in, and establish engagement.
- Prevention Services (3 points):
Describe how you will address the service delivery gaps identified in the above needs assessment by implementing programs and strategies across the lifespan, NAM continuum of care, and Socio-Ecological Model (SEM) (see Menu below).

Prevention Collaborative (30 points) – Please describe:

- The Network leadership group, prevention and other necessary service provider representation and their roles in the project, include a staffing plan and organizational chart of the Network.

- Network members, their roles, and how they will be engaged in creating project outcomes;
- How service providers will be engaged in coordinating among prevention services;
- Other entities (medical, mental health, transportation, education, etc.) to be engaged in the Network and how it will enlist their participation.

Evaluation (10 points)

- Describe approach used to monitor programmatic fidelity and how that data are used in practice.
- Describe previous experience with conducting outcome program evaluation including how data collection was conducted, analyses that were computed, and how data were used to improve program implementation.

H. ADMINISTRATIVE INFORMATION:

1. 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.
 - 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 due date for submissions, if OASAS in its sole discretion determines there is good cause shown for the delay in the submissions. •Make additional awards in excess of the posted amount if additional funding is made available.

2. 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.

3. PREQUALIFICATION REQUIREMENTS FOR NOT-FOR-PROFIT BIDDERS

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.

4. 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**.

5. 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.

6. REPORTING REQUIREMENTS

Applicants will be required to provide monthly implementation status reports and service delivery statistics once program is operational. OASAS may add additional reporting based on SAMHSA and OASAS needs for information.

7. PAYMENT PROCESS

1. Advance Payment and Recoupment Language:

a. The State agency will make one advance payment to the Contractor, in the amount of twenty-five percent (25%), 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 Master 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.

NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
Supplemental Substance Abuse Prevention & Treatment Block
Grant Initiative Funding Request
ATTACHMENT B – CONTRACT BUDGET AND FUNDING SUMMARY
INSTRUCTIONS – Community Prevention and Intervention Project

1	Initiative	Enter the name of the initiative for this budget submission. Enter the regional network you are located in.
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 bidder entity 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	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): <div style="text-align: center;"> <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. </div> Enter a zero (0) in those categories for which no costs are anticipated. Some categories are not allowable for some initiatives in which case the entry will be blacked out on the budget form. Agency administration costs may not exceed 10% of the total Personal Services, Fringe Benefits, and Other Than Personal Services costs. All requested amounts should be rounded to the nearest dollar.
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.

NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
Supplemental Substance Abuse Prevention & Treatment Block Grant Initiative Funding Request
ATTACHMENT B - CONTRACT BUDGET AND FUNDING SUMMARY

1) **Initiative:** Community Prevention and Intervention Project SUPP1016
Regional Network: _____

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 ANNUAL BUDGET (rounded to the nearest dollar)	Primary Prevention (A)
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:

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: _____

Initiative Name: _____

APPENDIX A: MENU OF ALLOWABLE PREVENTION PROGRAMS

<p>UNIVERSAL:</p> <ul style="list-style-type: none"> • Positive Action; • Promoting Alternative Thinking Strategies (PATHS); • PAX GBG; • Strong African American Families (SAAF); • Familias Unidas Preventive Intervention • Environmental Strategies (Media, Enforcement, Policy) <i>(If chosen must include all three interlocking components)</i> <p>SELECTIVE:</p> <ul style="list-style-type: none"> • Preventure; • Support for Students Exposed to Trauma (SSET); • Triple P: Positive Parenting Program [Level 3 or 4]; • Strengthening Families Program: For Parents and Youth 10 – 14; • Parenting Inside Out <p>INDICATED:</p> <ul style="list-style-type: none"> • Teen Intervene; • BASICS; SBIRT (adults) 	<p>INDIVIDUAL:</p> <ul style="list-style-type: none"> • Teen Intervene; • BASICS; • SBIRT <p>FAMILY/ RELATIONSHIP:</p> <ul style="list-style-type: none"> • Triple P: Positive Parenting Program [Level 3 or 4] • Strengthening Families Program: For Parents and Youth 10 – 14; • Strong African American Families (SAAF); • Familias Unidas Preventive Intervention; • Family Spirit; • Parenting Wisely; • Parenting Inside Out <p>COMMUNITY/ SCHOOL/CBO:</p> <ul style="list-style-type: none"> • Positive Action; • Preventure; • Promoting Alternative Thinking Strategies (PATHS); • Support for Students Exposed to Trauma (SSET) <p>SOCIETAL:</p> <p>Environmental strategies (media, enforcement, policy - <i>must include all three components</i>)</p>
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