

NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS

**REQUEST FOR APPLICATIONS (RFA) SETT-23005
Outreach and Engagement Services – Clinic Model**

EXPECTED TIMETABLE FOR KEY EVENTS:

	DATE	TIME
RFA Release Date	3/3/2023	5:00 PM EST
Deadline for Submission of Applicant’s Inquiries	3/08/2023	5:00 PM EST
Anticipated Release of Inquiries & Answers by OASAS	3/10/2023	
Application Submission Due Date and Time	4/6/2023	5:00 PM EST
Anticipated Notification of Award	4/26/2023	

ALL INQUIRIES TO:

Grants@oasas.ny.gov

Subject: **RFA SETT – 23005**

EMAIL SUBMISSION OF APPLICATIONS TO:

Grants@oasas.ny.gov

Subject: **RFA - OASAS SETT-23005, “Provider Name”**

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1 INTRODUCTION

1.1 Purpose

Among New York State (NYS) residents, there were 6,037 overdose deaths in 2021, up 101% since 2015. Of those overdose deaths, 4,950 involved some kind of opioid.

The NYS Office of Addiction Services and Supports (OASAS) oversees a wide array of addiction services. On any given day, about 110,000 people are served within the OASAS treatment system and many more are reached through harm reduction, prevention, and recovery services. However, some people in need of care may be unaware that they need addiction treatment services or that they are available to them. Many are interested in improving their health and respond to outreach and engagement services (OES).

The goal of this initiative is to provide OES in the community to populations who typically have difficulty accessing harm reduction, substance use disorder (SUD) treatment, and recovery support services. These newly engaged individuals may, or may not, be aware of or interested in SUD treatment services but are screened to have substance use and/or SUD. This may include individuals served previously by the SUD treatment system but who have disengaged from treatment services. OES staff build trust with individuals over time while providing services that reduce potentially negative consequences associated with substance use and linking them to the appropriate level of care. OES providers also serve family members of individuals with substance use and/or SUD who may need support and services.

These services include but are not limited to:

- Peer services;
- Overdose prevention and intervention education;
- Harm reduction strategies including provision of harm reduction supplies (e.g., naloxone, fentanyl test strips, safer smoking supplies, safer injection supplies, safer snorting supplies, provision of syringes, or connection to a syringe exchange program);
- Provision of personal care kits that support hygiene, wound care, and protection from seasonal elements;
- Naloxone dispensing and/or prescribing;
- Drug checking techniques, including use of drug checking technology;
- Provision of low-threshold medical services (e.g., HIV and HCV testing kits);
- Individual counseling;
- Medical assessment;
- Clinical Assessment;
- Linkage to substance use treatment, including low-threshold medication for addiction treatment (MAT); and
- Care management to connect people to services for social needs.

1.2 Funding Available

Year 1 (first 12 months): Funding of \$3,200,000 is currently available to support Outreach and Engagement Services – Clinical Model for a maximum of one award for each of the eight catchment areas defined below. Each award may be up to \$400,000 to include a 12-month

operating budget that does not exceed \$325,000 and up to \$75,000 for the cost of a vehicle purchase.

Year 2 (second 12 months): The second-year anticipated budget will be for 60% of the first-year annual budget or up to \$195,000. This reduction of approximately 40% after Year 1 considers the decrease in expense for vehicle(s) as the purchase should be made in the first year and the anticipated Medicaid billing and other third-party reimbursement each program will leverage to support program operations.

OASAS seeks to award one applicant in each of the catchment areas defined here:

1. Chautauqua and Cattaraugus Counties
2. Allegany and Steuben Counties
3. Southern Delaware and Ulster Counties
4. Otsego and Northern Delaware Counties
5. St. Lawrence County
6. Franklin and Clinton Counties
7. Hamilton and Herkimer Counties
8. Essex and Warren Counties

An applicant must have a physical location that provides services in keeping with their respective qualifying applicant eligibility within the catchment area they are applying for.

Providers seeking to apply to serve more than one catchment area must submit separate applications for each catchment area.

1.3 Funding Restrictions

N/A

1.4 Eligible Applicants

Eligible applicants are a non-profit or governmental entity that meets one of the following criteria:

- Operate an Article 32 OASAS-certified 822 Outpatient Program.
- Operate an Integrated Outpatient Services program, under either OASAS or OMH certification.
- Certified Community Behavioral Health Clinics (CCBHC) recognized by NYS or providers that have received a CCBHC expansion grant through SAMHSA.
- **Licensed OMH clinics.**

OASAS-certified providers who received funding for OES (formerly known as Centers of Treatment Innovation) through State Targeted Response grants are not eligible applicants under this RFA.

1.5 Glossary of Terms

For purposes of this solicitation, the following definitions may 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.

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.

“Bidder” and “Applicant”: Terms that may be used interchangeably meaning the entity responding to this solicitation.

“Bid,” “Application,” and “Proposal”: Terms that may be used interchangeably meaning the documentation submitted by an entity in response to this solicitation.

Currently Operate: Having an operational program at the time of application submittal.

Newly Engaged: An individual who has never been engaged with the OES provider, prior from present contact or has not had any contact with the OES team in one year/365 days.

1.6 Inquiries And Clarifications:

Any inquiries or requests for clarification about this RFA must be received in writing by the Deadline for Submission of Applicant’s Inquiries Due Date and Time found on the cover page of this document **and** must be submitted by email to Grants@oasas.ny.gov and should have the subject line **“RFA SETT-23005”**.

The Applicant Inquiries and Clarifications response will be posted to the OASAS Procurement web page on or around the “Anticipated Release of Inquiries & Answers by OASAS” date found on the cover page of this document.

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

1.7 Addenda to the RFA

In the event that it becomes necessary to revise any part of the RFA, an addendum will be posted on the OASAS website.

2 OASAS PRIORITIES: INTEGRATION OF MENTAL HEALTH AND SUD AND DIVERSITY

2.1 Integration of Mental Health and Substance Use Disorder

Applicant should have the ability to provide a full range of evidence-based practices that integrate treatments for both addictions and mental health conditions. Care should be organized around the individual's presenting problem and goals. Individuals should expect and receive competent screening, assessment, and comprehensive care for addictions and mental health conditions regardless of where they access care.

Individuals often present to an addiction treatment program with goals that are driven by their addiction but who also have mental health conditions that cannot be separated from and treated independently of the addiction. Both must be addressed simultaneously for the presenting problem to resolve and patient goals to be reached. Rather than considering severity or primacy of diagnoses, treatment is organized around the patient's presenting problem, assessed and planning includes the presenting problem and all addictions or mental health conditions. Integrated care activities that should be considered include (list is not comprehensive):

- Evidence-based prevention that addresses a range of mental health, physical health, and addiction across the lifespan;
- Harm reduction strategies to reduce the harm of substance use, chronic health conditions, and behaviors associated with mental health disorders;
- A recovery orientation where all individuals are expected to thrive in their community;
- Screening for mental health and addiction conditions;
- Comprehensive Assessment including Psychosocial Evaluations in treatment settings;
- Evaluation for and management of medications to treat mental health conditions and addiction in treatment settings;
- Individual, group, and family Psychotherapy/Counseling, including the use of evidence-based treatments;
- Peer involvement;
- Skills-building group or individual counseling to manage symptoms of all presenting concerns;
- Trauma-informed care including assessment of trauma;
- Treatment of trauma including skills-building; and,
- Coordination of services.

2.2 Equity and Diversity

Applicants are expected to affirmatively address and advance justice and equity and to create and enhance diversity and inclusive practices. Decades of disinvestment coupled with historical and current inequities in access for communities of color, especially Black, Indigenous and Latinx communities, rural communities, LGBTQI+ and other underserved

communities require establishing practices that: demonstrate the entity's commitment to equity, identify efforts to reduce disparities in access to services and address opportunities to recruit and retain a diverse workforce. Since bias plagues our systems and flourishes in unexpected and unanticipated ways, progress toward equity requires a multi-faceted approach.

3 SCOPE OF WORK/DELIVERABLES

OES providers are required to:

- Provide outreach services,
- Provide engagement services,
- Provide proactive linkage to services, and
- Develop Policy and Procedures.

Services may be provided through outreach in the community, in a person's home (upon request), or by referral from a human services agency, hospital, or a criminal justice entity (i.e., probation, parole, jail, drug court, etc.)

Populations who may benefit from these services include but are not limited to individuals who:

- Are disconnected from the health care system;
- Live in areas where there are limited available SUD treatment services;
- Have been discharged from a medically managed or medically supervised withdrawal services, inpatient rehabilitation services, or a residential facility, or another OASAS outpatient provider;
- Have been released from a carceral setting (i.e., jail or prison);
- Are unhoused or have unstable housing; and/or
- Have co-occurring physical and/or mental health condition that may limit ability to seek or stay connected to clinic-based services.

Decision to provide OES

OES providers will make contact with individuals in the community or via telepractice, for the purposes of determining the individual's immediate needs and determining appropriateness for outreach and engagement services. Information gathered will support the need for SUD outreach services and form the basis of a provisional diagnosis by appropriately licensed staff. OES providers will make a determination about current risk and if the individual is at imminent risk of harm to themselves or others, or if an immediate medical response is necessary.

A determination includes the individual's view of the problem, strengths, previous successes with presenting issues as well as:

- Emergency or urgent issues which require immediate interventions, (e.g., mental health crisis, housing, domestic violence/intimate partner violence, etc.)
- Assessment of family, friends, natural and/or community supports, when possible
- Risks and resources as defined by the individual.
- Obtaining and reviewing collateral information, if practical.
- History of withdrawal management and experiences (e.g., history of seizures and/or delirium tremens with alcohol withdrawal), periods of remission and recurrence

- The individual's preferences, values, beliefs, and goals.

3.1 Outreach Services

The primary goal of outreach is meeting people in the community who may use substances and/or have a substance use disorder, and typically are not engaged in substance use disorder treatment services. Over time, OES provider staff will establish a connection and build trust with individuals while familiarizing them with SUD services including harm reduction, SUD treatment, and/or recovery support services. People served may or may not ultimately engage in treatment services, however, if an individual expresses an interest in entering care, they should be linked to the appropriate level of care. If outpatient services are appropriate, the person should be admitted to outpatient care with the provider or another outpatient provider. Services can continue to be provided in the clinic, by telehealth, or in the community.

Outreach services include but are not limited to:

- Identifying individuals who may need and/or are interested in receiving harm reduction services, enrolling in SUD treatment services, or accessing recovery supports.
- Building relationships with individuals who may be in the pre-contemplation or contemplation stages of change, through shared lived experiences and evidence-based practice in a manner that is trauma-informed (e.g., motivational interviewing).
- Using engagement tools to help facilitate trust with individuals who have been disenfranchised from care.
- Providing information and navigation of the harm reduction, SUD treatment, and recovery support systems of care.

3.2 Engagement Services

Engagement services involve repeated outreach efforts over time, building trust with individuals who typically do not seek out treatment, for the purpose of engaging them in harm reduction, SUD treatment, and/or recovery supports services.

Engagement services include but are not limited to:

- Peer conversations, utilizing lived experience to make a connection;
- Provision of harm reduction supplies (i.e., naloxone, fentanyl test strips, safer smoking supplies, safer injection supplies, safer snorting supplies);
- Provision of basic necessities, (e.g., socks, t-shirts, food);
- Provision of information and assistance in navigating SUD services and supports including but not limited to: Recovery Centers, OASAS outpatient and inpatient providers, and supervised withdrawal;
- Connection and proactive linkage to human agencies when requested (e.g., social services, mental health services, food pantries); and/or
- Provision of rapid access to MAT

Once trust is established and the individual has been engaged, individuals may receive:

- Peer support services*
- Harm reduction services**
- Individual counseling

- Medical assessment: an evaluation of individuals' medical condition(s) including Low-Threshold, Rapid access to Medication for Addiction Treatment (MAT)^{***}; determining individuals' need for additional medical services
- Clinical assessment^{****}: assessment used to identify individuals' current level of functioning and to identify the appropriate type and intensity of services and supports
- Proactive linkage to needed/requested services
- Care management
- Transportation to services

**Peer Services* are provided by peers, who have a combination of lived experience and professional training, provide a natural support for individuals with substance use and/or SUD. All Peers must be either a CPRA or CRPA-P and in compliance with [Certified Peer Recovery Advocate Scope of Practice standards](#).

***Harm Reduction* is a set of practical strategies and principles aimed at reducing the potential negative consequences associated with substance use. Harm reduction tools include but are not limited to providing:

- Overdose reversal education and training services
- Overdose reversal supplies, including naloxone kits
- Substance testing kits, including fentanyl test strips
- Safer sex kits, including condoms
- Sharps disposal and medication disposal kits (i.e., Detera bags)
- Wound care supplies and education
- FDA-approved home testing kits for viral hepatitis (i.e., HBV and HCV) and HIV
- Written and educational materials on safer injection practices

Sharps Disposal

People who use drugs also need to dispose of used syringes and needles. Safe disposal of sharps is critically important to optimize health, safety, and protection of the environment and the community. The best way to ensure that people are protected from potential injury or disease transmission of blood borne diseases due to needle sticks is to follow established guidelines for the proper containment of “sharps” syringes, needles, and lancets and other safer disposal practices

****Low-Threshold, Rapid access to Medication for Addiction Treatment (MAT)*

Individuals will be offered low-threshold, rapid access to MAT, including initiation to buprenorphine when appropriate. The individual, and their family/significant other(s), will be offered overdose prevention education and training. A naloxone kit or prescription must be provided. Providers will have access to a prescriber and every effort should be made to ensure the individual is seen within 24 hours of presenting.

*****Clinical Assessment*

Individuals may express an interest in treatment; at which point, a clinical assessment should be completed by a qualified health professional (QHP). The assessment will be done in accordance with the outpatient program's standard assessment. At the time of the

assessment, the individual will be admitted to the outpatient treatment program. The provider should complete the LOCADTR as part of the assessment and link the individual to the appropriate level of care.

Services going forward may be provided at the clinic, in the community or by telepractice. Treatment planning should be person-centered and may be limited to a single goal, for example, medication initiation and monitoring.

3.3 Proactive Linkage to Services

Proactive linkage is a strategy designed to ensure individuals reach the next level of clinical care or become connected to a recovery support resource. This typically involves an in-person introduction directly to the next level of care or recovery support. Also known as a “face-to-face hand-off” or a “warm hand-off.”

If a face-to-face hand off is not possible, OES providers will make every effort to verify the individual is engaged in the treatment service to which they were referred.

Policies and procedures that support proactive linkage include, but are not limited to:

- Establishing all recommended Community partnerships and linkages to services providers in the community where the OES operates prior to the start of operations.
- Securing an appointment and connecting the individual to a provider.
- Transporting or facilitating transport of an individual to an appropriate level of care.
- When appropriate, including the provision of transportation with possible options such as agency vehicles, ride share programs, Medicaid transport, or an agreement with other transportation services.
- Proactively linking the individual to the appropriate provider, with a face-to-face hand-off when feasible.
- Verifying contact information for the individual and collaterals.
- Following up with individuals who may not have engaged in care immediately or were referred to a service where a face-to-face hand-off was not possible.

**Community Partnerships*

Partnerships and linkages to SUD treatment services and supports will include but are not limited to:

- OASAS inpatient withdrawal and stabilization certified pursuant to Part 816
- OASAS residential treatment consisting of, at a minimum, stabilization services, certified pursuant to Part 820
- OASAS-certified outpatient program
- OASAS-certified 818 programs
- OASAS state-operated Addiction Treatment Centers (ATCs)
- Emergency department and/or hospital settings
- Harm reduction providers

OES providers also will establish partnerships with other entities in the community who frequently encounter people who use drugs (PWUD), but do not provide ongoing SUD treatment, harm reduction, or recovery support services. Protocols will be established to

maintain partnerships and continuous collaboration and increase the likelihood of successful recipient engagement within the community.

Partnerships will include but are not limited to:

- Local law enforcement (i.e., Sheriff departments, local police, and State Police)
- Specialty courts (i.e., drug court, opioid court, family court, mental health court, etc.)
- Probation and parole departments
- Emergency medical services (EMS)
- Mental health mobile crisis teams
- Homeless shelters
- Domestic violence organizations
- Crisis stabilization centers (CSC)
- Department of Social Services (DSS)
- Child Protective Services (CPS)
- County providers who provide services to people who are unhoused
- Health Home Care Management Agencies
- Transportation services (*to arrange ongoing transportation services once referred*)

Additionally, OES providers will establish partnerships and incorporate technology to facilitate connections to care with providers and community programs, including but not limited to civil and criminal justice entities, insurance payors, Directors of Community Services, Department of Social Services (DSS), community support services, schools, and local agencies who offer specialized services to diverse populations (i.e., children and youth, young adults, LGBTQIA+, people of color, people with disabilities, etc.). The following are examples of an OES using partnerships and technology to facilitate connections to care:

- Establishing MOUs with partners to allow access to shared calendars for appointments to provide the date/time of an appointment before the recipient is discharged.
- Knowing local pharmacies' hours of operations and informing pharmacies ahead of time of common medications that might be prescribed to ensure pharmacies have sufficient stock.
- Establishing a point of contact or direct messaging system for law enforcement to ask questions related to transportation and the appropriateness of OES.

3.4 Policy and Procedures

OES providers must develop policy and procedures prior to delivering services, OES providers, must submit program policies and procedures addressing the unique features of these services to OASAS for approval.

OES provider outreach policy and procedures will include, but are not limited to:

- Outreach staff must focus encounters with people who use substances for the purpose of engaging them in harm reduction, SUD treatment, and recovery support services.
- During these encounters, outreach staff make hygiene kits, food, clothing, blankets, sleeping bags, harm reduction supplies, and/or other resources available.

- Outreach services are done with people who have expressed an interest in speaking with staff. At any time, an individual may decline services and that declination should be respected.
- Outreach teams may offer services in the future to the person who previously has declined service offers.
- Staff will always be equipped with a cell phone when providing outreach or engagement services, or in community assessment or treatment.
- Outreach staff will have access to a laptop or tablet for the purposes of data entry into their EHR, case notes, email, and maintaining knowledge of available resources for the individuals they serve.
- It is recommended that outreach staff provide services in the community in teams of two.

OES providers are required to develop policies and procedures describing partnerships and linkages to services providers in their community. These policies and procedures will help support a streamlined, person-centered approach that will promote continuity of care. They also will illustrate how partnerships will maintain continuous collaborations over time.

OES providers' policy and procedures will indicate clearly how it will be determined that the individual requires services from another community partner or from a higher level of care. Plans also will describe the process by which individuals will be linked to appropriate care in situations that require:

- Immediate crisis services
- Immediate medical attention
- Response to an imminent risk for harm to self or others.
- Services outside of the OES providers' scope of services

4 APPLICATION REQUIREMENTS AND SUBMISSION

Applications should be emailed to Grants@oasas.ny.gov. The subject of the email should read: **SETT-23005, "Provider Name."**

Complete applications must be received by OASAS by the Application Submission Due Date and Time found on the cover page of this proposal.

APPLICATION FORMAT AND CONTENT

A. Administrative/Fiscal Application:

Each Bidder should submit a complete Administrative/Fiscal Application. The Administrative/Fiscal Application must include all of 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
 - Include the Applicant's designated contact name, phone number, e-mail, and physical address
 - Include the catchment areas as defined in Section 1.2 Funding Availability your organization is applying under
 - Identify which eligibility category from the list in Section 1.4 Eligible Applicants your organization is applying under:
 - Article 32 OASAS-certified
 - Operate an Integrated Outpatient Services program (OASAS)
 - Operate an Integrated Outpatient Services program (OMH)
 - CCBHC
- 2. ATTACHMENT 3** – Budget
 - Column A: Equipment can be up to \$75,000 to cover the cost of purchasing a Vehicle
 - Column B: should total up to \$325,000 to cover the initial annual operating budget.
 - Attach the Budget Notes section to this attachment to respond to the requirements in section 5.4 of this RFA.
- 3. ATTACHMENT 4** – Vendor Assurance of No Conflict of Interest or Detrimental Form
- 4. ATTACHMENT 8** – Executive Order 177 Certification
- 5. ATTACHMENT 9** – §139-I Statement on Sexual Harassment
- 6. ATTACHMENT 10** – Executive Order 16
- 7. ATTACHMENT 11** – Integration of Mental Health and SUD Response
- 8. ATTACHMENT 12** – Equity and Diversity Response

B. Application Narrative

The Application 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 Application Narrative should address all the questions found in section 5.3 Detailed Program Narrative.

Narrative cannot exceed 15 pages. This limit does not include the budget narrative which should be included as part of the Administrative/Fiscal Application.

5 EVALUATION OF APPLICATIONS AND SELECTION

5.1 Completeness Review/Non-Responsive Applications

Applications submitted in response to this RFA shall first undergo a completeness review. Those determined to be responsive and complete shall continue in the evaluation process. Conversely, those submissions deemed as incomplete and non-responsive shall be removed from further consideration.

To pass the completeness review, an application must meet the mandatory requirements as follows:

- A.** Was the Application received by OASAS by the submission deadline date as set forth in the RFA or is there good cause for the delay?
- B.** Is the bidder entity eligible to apply as set forth in “Eligible Applicants” section of this RFA?
- C.** Was the bidder prequalified in Grants Gateway on the submission due date?
- D.** The Bidder included an Administrative/Fiscal Application, and all required sections as defined in the Administrative/Fiscal Application section of this opportunity.
- E.** The Bidder included an **Application Narrative**.

5.2 Evaluation Process

Applications passing the Completeness Review will be separated by eligible applicant group and evaluated and ranked in order of highest score based on an evaluation of each applicant’s submission, and awards will be made to the highest successful application in each group.

If a provider submitted multiple applications and wins more than one catchment area, OASAS may award their second catchment area to the next highest bidder. OASAS reserves the right to determine which is awarded in this instance based upon the best interest of the state.

If a provider applied to both RFA **SETT-23005** and **SETT-23006**, OASAS reserves the right to limit the vendor to only one award. This approach would be used to increase the total number of different providers awarded.

Scoring:

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 Application Narrative. Scoring will be as follows:

1. Program Narrative - Outreach and Engagement Experience (6 points)
2. Program Narrative - Project Description (26 points)
3. Program Narrative - Outcome(s) and Evaluation (10 points)
4. Program Narrative - Staffing (10 points)

- 5. Program Narrative - Facilities, Logistics, Equipment – (8 points)
- 6. Attachment 3 - Budget (20 points)
 - a. Includes attached Budget Notes
- 7. Attachment 11 - Integration of Mental Health and SUD Response (10 points)
- 8. Attachment 12 - Equity and Diversity Response (10 points)

TOTAL: 100 Points

If two or more Applications have the same highest overall final score the following tie breaker criteria will be applied to determine which Application will be ranked highest:

- A. The Application(s) with the highest Budget Score will be ranked highest.
- B. If the Budget score is tied, the Application(s) with the highest total Program Narrative “Project Description” score will be ranked highest.
- C. If the above scores are tied, The Application(s) with the highest Attachment 12 - Equity and Diversity Response score will be ranked highest.

All provisions of this RFA and the resulting contract award are contingent upon the availability of NYS funds.

5.3 Detailed Program Narrative

1. Outreach and Engagement Experience	
1.a	<p>Describe providing serves in the community that are similar to outreach and engagement, as defined by the OES scope of work. Please reference the scope of work (SOW) definition for any and all bolded words.</p> <p>Responses should include the following:</p> <ul style="list-style-type: none"> • Populations served (e.g., unhoused, recently released from jail or prison, recently discharge for inpatient treatment) • Describe the provider’s experience of proactively linking individuals to new SUD treatment and other support service. Include how many years proactive linkage (e.g., face-to-face handoff) has been provided. • Describe the provider’s experience of providing outreach services. Include how many years outreach services have been provided. • Describe the provider’s experience of providing engagement services. Include how many years engagement services have been provided. • Describe the types of services that will be provided in the community and the time period in which they will be implemented.

1. Outreach and Engagement Experience	
1.b	<p>Describe the provider's outpatient program efforts to implement harm reduction and/or harm reduction tools.</p> <p>Responses should include the following</p> <ul style="list-style-type: none"> • What harm reduction strategies the program using currently? • If there is a syringe service program or harm reduction provider in your region, and if the provider has a partnership?

2. Project Description	
Provide an overview of how the services, detailed in the SOW, will be implemented and the timeframe necessary for this process.	
2.a	<p>Provide an overview of the OES plan and relevant policies, described by the SOW, that will be implemented within the provider's existing program.</p> <p>Plan overview should include but are not limited to:</p> <ul style="list-style-type: none"> • Location and address of the outpatient program that supports the OES team. (NOTE: The OES staff and vehicle should be housed at the same location as the PRU address for the outpatient program) • Describe the population being served. • Hours and days of operation for each county served. • Briefly describe an overview outreach, engagement, and proactive linkage to care services • Staffing model and workflow (i.e., how will staff provide face-to-face hand off without disrupting daily outreach and engagement efforts) • Providing rapid MAT access • Plan and policies to ensure safety staff
2.b	<p>Describe the OES provider's plan for implementing outreach services including but not limited to:</p> <ul style="list-style-type: none"> • Identifying locations/entities in the community that would most benefit from outreach services, as describe by the OES SOW • Identify individuals interested in receiving harm reduction services, enrolling in SUD treatment services, and/or accessing recovery supports • Building relationships with individuals in the pre-contemplation or contemplation stages of change • Providing information and navigation of harm reduction, SUD treatment programs, and recovery support systems of care.

2. Project Description

Provide an overview of how the services, detailed in the SOW, will be implemented and the timeframe necessary for this process.

- 2.c Describe the OES provider's plan for implementing **engagement services** including but not limited to:
- Peers connecting and conversing with individuals, through shared lived experiences
 - Educating and distributing harm reduction tools
 - Distributing items that assist with basic needs
 - Providing information and assistance in navigating SUD services and supports, including but not limited to: Recovery Centers, OASAS outpatient and inpatient providers, other MAT providers, and supervised or managed withdrawal programs
 - Connection and linkage to human services agencies upon request (e.g., social services, mental health services, food pantries)

NOTE: prescriber for MAT may include entities outside of OASAS-certified program (e.g., hospital, FQHC, private practice, etc.)

- 2.d When an individual expresses interest in a treatment program or with MAT provider, how will OES ensure the individual can access a same day appointment? Describe how the applicant will ensure same day medication access.

- 2.e List the names of community partnerships that facilitate referrals to OES, offer engagement opportunities, and/or facilitate linkage to care. See below (under "Required Partnership").

For each partnership listed provide:

- County where the provider is located
- If the provider can provide services via telehealth
- Name of the organization
- Organization type
- Primary contact person
- Is this entity a referral source to the OES provider, a service an individual may be linked to, or both?
- Is your partnership: currently active, new/very recently established, or do you plan to reach out to this organization in the future?
- What is your contractual relationship: Legal contract, MOU, informal agreement, or have not discussed a partnership yet with this provider?

Required SUD services partnerships

Partnerships and linkages to SUD treatment services and supports may include but are not limited to:

- OASAS inpatient withdrawal and stabilization certified pursuant to Part 816
- OASAS residential treatment consisting of, at a minimum, stabilization services, certified pursuant to Part 820
- OASAS-certified outpatient program
- OASAS-certified Part 818 programs
- OASAS state-operated Addiction Treatment Centers (ATC)

2. Project Description

Provide an overview of how the services, detailed in the SOW, will be implemented and the timeframe necessary for this process.

- Emergency department and/or hospital settings
- Harm reduction providers

Additional require partnerships may include but are not limited to:

- Local law enforcement (i.e., Sheriff departments, local police, and State Police)
- Specialty courts (i.e., drug court, opioid court, family court, mental health court, etc.)
- Probation and parole departments
- Emergency medical services (EMS)
- Mental health mobile crisis teams
- Homeless shelters
- Domestic violence organizations
- Crisis stabilization centers (CSC)
- Department of Social Services (DSS)
- Child Protective Services (CPS)
- County providers who provide services to people who are unhoused
- Home Health Home Care Management Agencies
- Transportation services (*to arrange ongoing transportations services once referred*)

Please use this narrative section to highlight partnerships that are not possible including but not limited to:

- Service provider/entity **does not exist** in the counties being served.
- Service provider/entity **exist** the counties being served, but the OES was **unable to establish a partnership**. If so, please explain why this partnership was **unable to establish a partnership**.

If a partnership is unavailable for a specific service, how will the provider accommodate individuals in need of a service?

2.g As defined by the OES scope of work, describe what harm reduction training and/or tools will be implemented and utilized, as part of OES.

2.h Describe the plan and process for determining when it is appropriate to discontinue OES services. Please include how the provider will address the scenarios below:

- An individual is admitted to OASAS inpatient or residential program and has fully transitioned to receiving services.
- An individual expresses they are not interested receiving on-going SUD treatment

3. Outcome(s) and Evaluations	
3.a	<p>Describe how the provider will track individuals, monthly/quarterly/yearly, who are receiving OES services and how this process will be implemented.</p> <p>Tracking data will include but is not limited to:</p> <ul style="list-style-type: none"> • Number of unique new individuals encounter • Number of unique new individuals provided services in the community • Number of unique new individuals linked to OASAS treatment providers and other SUD treatment services • Number of individuals linked to harm reduction services, recovery services, transportation services, and other human services providers. • Number of individuals who discontinue OES services and reasons why the services was discontinued <p><i>NOTE: Someone is considered new if the individual never interacted with provider in the field or has not had any contact with the OES team in one year or 365 days.</i></p>
3.b	<p>Describe how the provider will track type of OES services that are provided on a monthly, quarterly, and yearly basis</p> <p>Number of services provided, total and by type</p> <ul style="list-style-type: none"> • Peer connection (conversations, shared experience, and navigation of services) • Care coordination (connecting an individual with services outside SUD treatment and support) • Harm reduction tools (outside of peer conversations and care coordination) • Connecting to MAT only • Connecting to SUD treatment • Connecting to recovery support centers • Other (should describe new category of service) <p><i>Please note: Ongoing medical and non-medical transportation is not a service that can be offered on an ongoing basis.</i></p>
3.c	<p>Describe how the provider will calculate overall gross and net unit cost for the OES services as distinct from normal outpatient clinic operations.</p> <p>Include how the applicant will track</p> <ul style="list-style-type: none"> • the number of hours of unbillable staff time • activities completed that are not billable • Administrative costs associated with OES as distinct from overall operations of the outpatient program.
3.d	<p>Describe how the provider will track mileage, fuel, and other vehicle expenses (reported monthly/quarterly/yearly)</p>

4. Staffing

Describe the staffing plan to satisfy all contract requirements, described in the SOW. Include proposed staffing structure, workflow and identify how many staff will be hired to meet the needs of the program.

4.a	<p>Using the budget worksheet to describe the composition of OES staff including but not limit to:</p> <ul style="list-style-type: none"> • Number of staff • Staff roll and credentialing/licensure (CRPA/CRPA-P, CASAC, LMHC/LCSW, nurse, prescribers) • Percentage of the FTEs • On-call/per diem status <p>Services provided by each staffing role (e.g., Peers, QHPs, medical staff, etc.)</p>
4.b	<p>Estimate the number of individuals that will be served per peer and clinical staff hired. Describe how that estimation was determined.</p>
4.c	<p>Provide copies of job descriptions – limited to two (2) pages each – for proposed staff. Job duties and job descriptions do not count against the 15-page limit.</p>

5. Facilities, Logistics, and Equipment

5.a	<p>Describe the vehicle that will be purchased for outreach and engagement, including type, make, model, and year. List any other vehicle that the provider already owns that will be used when providing OES, including type, make, model, age, any other purpose of vehicle, and warranty status.</p> <p><i>Only one vehicle may be purchased under this RFA.</i></p>
5.b	<p>Describe how the provider will maintain and store vehicle.</p> <p><i>Note: the provider is expected to park the vehicle close to their brick-and-mortar location</i></p>
5.c	<p>Describe how the existing programs will integrate the OES into the outpatient services structure. Include all outpatient sites with OES.</p> <p>Examples include splitting time of direct services staff and/or supervisors, utilizing the same administrative resources/overhead, shared reporting responsibilities, and staff training opportunities.</p>
5.d	<p>Describe the process for obtaining harm reduction tools such as fentanyl test strips, naloxone, and Deterra bags.</p>

5.4 Budget Notes

Total annualized funding is \$400,000 in the first year to include \$75,000 to support the purchase of a vehicle. Additional years of funding are subject to annual state appropriations and will not include funding for vehicle purchase of up to \$75,000 and will not exceed \$195,000 per year in operational costs. OASAS will consider the cost efficiency of the proposed budget as it relates to the scope of work. Therefore, applicants should clearly indicate how funding will be used to meet the program goals and/or requirements. In addition to the required budget, applicants are asked to provide budget notes.

The budget should be reasonable and reflect the scope of responsibilities required to accomplish the goals of this project. All costs associated with the completion of the project should be delineated and the budget notes clearly should articulate budget items, including a description of miscellaneous expenses and other costs.

1. A detailed budget using the template provided is required (Attachment 3). The budget should include the following: fully annualized operating costs to satisfy the scope of work detailed in the RFA and revenues, and proposed one-time costs of vehicle purchase only, if any.
2. Describe the applicant's sustainability plan for the project at the end of the contract. Include a timeline indicating how the program will transition from this grant funding to sustainability through any other types of income that are available.
3. Budget notes that detail and explain the proposed budget methodology and estimates and assumptions made for expenses and the calculations/computations to support the proposed budget. The State's proposal reviewers need to understand fully the applicant's budget projections from the information presented in its proposal. Failure to provide adequate information could result in lower ranking of the proposal.
4. For all proposed personnel, the budget should identify the staff position titles and only staff names for current staff being allocated; and total hours per work week.
5. Identify the number of hours per clinical provider.
6. Staff fringe benefit expenses, which may be presented as a percentage factor of total salary costs, should be consistent with the applicant's current fringe benefit package.
7. If applicable, General and Administrative (G&A) expenses, otherwise known as indirect or overhead costs, should be included if attributable and allocable to the proposed project.
8. Written assurance that if the applicant receives an award pursuant to the RFA, it will pursue all available sources of revenue and support upon award and in future contracts.

Note – Detailed responses to questions 2-8 in this section should be attached to and submitted with the Attachment 3: Budget.

6 ADMINISTRATIVE INFORMATION

6.1 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 or who proposes to subcontract with an entity that is not in good standing at the time a contract is awarded.

- Not make an award to any applicant who proposes to subcontract with any entity that OASAS determines does not meet the criteria of a responsible vendor.
- 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.
- Make additional awards in excess of the posted amount if additional funding is made available.
- 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.

6.2 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.

6.3 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.

6.4 Reporting Requirements

Applicants will be required to report a series of data elements that will enable OASAS to determine the impact of the program on opioid use, and opioid-related morbidity and mortality. Applicants will be required to report client-level data on elements including but not limited to: diagnoses, demographic characteristics, substance use, services received, types of MAT received; length of stay in treatment; employment status, criminal justice involvement, and housing. Additional data elements will be provided after award. Applicants are required to ensure all data reported are accurate.

7 CLAUSES AND REQUIREMENTS

7.1 MWBE and EEO Requirements

Business Participation Opportunities for NYS Certified Minority-and Women-Owned Business Enterprises and Equal Employment Opportunities for Minority Group Members and Women Requirements and Procedures

NEW YORK STATE LAW

Pursuant to New York State Executive Law Article 15-A and Parts 140-145 of Title 5 of the New York Codes, Rules and Regulations, the New York State Office of Addiction Services and Supports (NYS OASAS) is required to promote opportunities for the maximum feasible participation of New York State-certified Minority and Women-owned Business Enterprises (“MWBEs”) and the employment of minority group members and women in the performance of NYS OASAS contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, the NYS OASAS hereby establishes an overall goal of 0% for MWBE participation (based on the current availability of MBEs and WBEs). Bidders/Contractors are however strongly encouraged and expected to consider MWBEs in the fulfillment of the requirements of the Contract. Such participation may be as subcontractors or suppliers, as protégés, or in other partnering or supporting roles. The directory of MWBEs can be viewed at: <https://ny.newnycontracts.com>. For guidance on how NYS OASAS will evaluate a Contractor’s “good faith efforts,” refer to 5 NYCRR § 142.8.

Equal Employment Opportunity Requirements

By submission of a bid or Application in response to this solicitation, the respondent agrees with all of the terms and conditions of Appendix A – Standard Clauses for All New York State Contracts including Clause 12 - Equal Employment Opportunities for Minorities and Women (https://ogs.ny.gov/system/files/documents/2019/10/AppendixA_0.pdf). The respondent is required to ensure that it and any subcontractors awarded a subcontract over \$25,000 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work"), except where the Work is for the beneficial use of the respondent, shall undertake or continue programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation. This requirement does not apply to: (i) work, goods, or services unrelated to the Contract; or (ii) employment outside New York State.

Further, pursuant to Article 15 of the Executive Law (the “Human Rights Law”), all other State and Federal statutory and constitutional non-discrimination provisions, the Contractor and sub-contractors will not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.

Please Note: Failure to comply with the foregoing requirements may result in a finding of non-responsiveness, non-responsibility and/or a breach of the Contract, leading to the withholding of funds, suspension or termination of the Contract or such other actions or enforcement proceedings as allowed by the Contract.

7.2 New York State Certified Service-Disabled Veterans

PARTICIPATION OPPORTUNITIES FOR NEW YORK STATE CERTIFIED SERVICE-DISABLED VETERAN-OWNED BUSINESSES

Article 17-B of the New York State Executive Law provides for more meaningful participation in public procurement by certified Service-Disabled Veteran-Owned Businesses (“SDVOBs”), thereby further integrating such businesses into New York State’s economy. NYS OASAS recognizes the need to promote the employment of service-disabled veterans and to ensure that certified SDVOBs have opportunities for maximum feasible participation in the performance of NYS OASAS contracts.

In recognition of the service and sacrifices made by service-disabled veterans and in recognition of their economic activity in doing business in New York State, Bidders/Contractors are strongly encouraged and expected to consider SDVOBs in the fulfillment of the requirements of the Contract. Such participation may be as subcontractors or suppliers, as protégés, or in other partnering or supporting roles.

For purposes of this procurement, NYS OASAS conducted a comprehensive search and determined that the Contract does not offer sufficient opportunities to set specific goals for participation by SDVOBs as subcontractors, service providers, and suppliers to Contractor. Nevertheless, Bidder/Contractor is encouraged to make good faith efforts to promote and assist in the participation of SDVOBs on the Contract for the provision of services and materials. The directory of New York State Certified SDVOBs can be viewed at: <https://ogs.ny.gov/veterans/>.

Bidder/Contractor is encouraged to contact the Office of General Services’ Division of Service-Disabled Veterans’ Business Development at 518-474-2015 or VeteransDevelopment@ogs.ny.gov to discuss methods of maximizing participation by SDVOBs on the Contract.

7.3 NYS Vendor Responsibility

The OSC has issued Vendor Responsibility Standards, Procedures and Documentation requirements, which are intended to provide reasonable assurance that a proposed contractor is a responsible vendor. Consistent with these requirements, a Vendor Responsibility Questionnaire must be completed prior to the execution of a contract.

NYS Agencies are required to undertake an affirmative review of the responsibility of any Contractor to whom they propose to make a contract award. Such review is designed to provide reasonable assurances that the proposed Contractor is responsible. A responsibility determination will involve a review of the following four major categories: legal authority, integrity, financial and organizational capacity, and previous contract performance.

NYS OASAS recommends that Contractors file the required Vendor Responsibility Questionnaire online via the NYS VendRep System. To enroll in and use the NYS VendRep System, see the VendRep System Instructions available at https://www.osc.state.ny.us/vendrep/info_vrsystem.htm or go directly to the VendRep System online at <https://onlineservices.osc.state.ny.us/Enrollment/login?0>

Contractors must provide their NYS 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 by email at: ciohelpdesk@osc.state.ny.us.

Contractors opting to file a paper questionnaire can obtain the appropriate questionnaire from the VendRep website http://www.osc.state.ny.us/vendrep/forms_vendor.htm or may contact NYS OASAS or OSC's Help Desk for a copy of the paper form.

If paper format is chosen, the printed Vendor Responsibility Questionnaire must be signed and returned with this Bid. The online format may be submitted electronically through the VendRep System. Regardless of which format is chosen, the questionnaire will be used by NYS OASAS to make a responsibility determination for the purposes of this Bid.

The Successful Bidder agrees that if it is found by the State that the Bidder's responses to the Questionnaire were intentionally false or intentionally incomplete, on such finding, NYS OASAS may terminate the Contract. In no case, shall such termination of the Contract by the State be deemed a breach thereof, nor shall the State be liable for any damages for lost profits or otherwise, which may be sustained by the Successful Bidder as a result of such termination.

7.4 Ethics Compliance

The Successful Bidder and its Subcontractor(s) and their employees must comply with the requirements of §§73 and 74 of the Public Officers Law, other state codes, rules, regulations, and executive orders establishing ethical standards for the conduct of business with New York State. In signing the Contract, the Successful Bidder certifies full compliance with those provisions for any present or future dealings, transactions, sales, contracts, services, offers, relations, etc., involving New York State and/or its employees. Failure to comply with those provisions may result in disqualification from the bidding process, termination of contract, and/or other civil or criminal proceedings as required by law.

The Successful Bidder and its Subcontractor(s) shall not engage any person who is, or has been at any time, in the employ of the State to perform services in violation of the provisions of the New York Public Officers Law, other laws applicable to the service of State employees, and the rules, regulations, opinions, guidelines or policies promulgated or issued by the New York State Joint Commission on Public Ethics, or its predecessors (collectively, the "Ethics Requirements"). The Successful Bidder certifies that all of its employees and those of its subcontractor(s) who are former employees of the State and who are assigned to perform

services under the Contract shall be assigned in accordance with all Ethics Requirements. During the term of the Contract, no person who is employed by the Successful Bidder or its subcontractor(s) and who is disqualified from providing services under the Contract pursuant to any Ethics Requirements may share in any net revenues of the Successful Bidder or its Subcontractor(s) derived from the Contract.

The Successful Bidder shall identify and provide the State with notice of those employees of the Successful Bidder and its subcontractor(s) who are former employees of the State that will be assigned to perform services under the Contract, and make sure that such employees comply with all applicable laws and prohibitions. The State may request that the Successful Bidder provide it with whatever information the State deems appropriate about each such person's engagement, work cooperatively with the State to solicit advice from the New York State Joint Commission on Public Ethics, and, if deemed appropriate by the State, instruct any such person to seek the opinion of the New York State Joint Commission on Public Ethics. The State shall have the right to withdraw or withhold approval of any subcontractor if utilizing such subcontractor for any work performed hereunder would be in conflict with any of the Ethics Requirements. The State shall have the right to terminate the Contract at any time if any work performed hereunder is in conflict with any of the Ethics Requirements.

7.5 Indemnification

The Successful Bidder shall assume all risks of liability for its performance, or that of any of its officers, employees, or agents, of any contract resulting from this solicitation and shall be solely responsible and liable for all liabilities, losses, damages, costs or expenses, including attorney's fees, arising from any claim, action or proceeding relating to or in any way connected with the performance of this contract and covenants and agrees to indemnify and hold harmless the State of New York, its agents, officers and employees, from any and all claims, suits, causes of action and losses of whatever kind and nature, arising out of or in connection with its performance of any contract resulting from this solicitation, including negligence, active or passive or improper conduct of the Successful Bidder, its officers, agents, or employees, or the failure by the Successful Bidder, its officers, agents, or employees to perform any obligations or commitments to the State or third parties arising out of or resulting from any contract resulting from this solicitation. Such indemnity shall not be limited to the insurance coverage herein prescribed.

7.6 Worker's Compensation and Disability Benefits Certifications

Sections 57 and 220 of the New York State Workers Compensation Law (WCL) provide that NYS OASAS shall not enter into any contract unless proof of workers' compensation and disability benefits insurance coverage is produced. Prior to entering into a contract with NYS OASAS, Successful Bidder will be required to verify for NYS OASAS, on forms authorized by the NYS Workers' Compensation Board, the fact that they are properly insured or are otherwise in compliance with the insurance provisions of the WCL. The forms to be used to show compliance with the WCL are listed below. The Successful Bidder must submit the following documentation before a contract may take effect.

ONE of the following forms as Proof of Workers' Compensation Coverage:

- **C-105.2 – Certificate of Workers’ Compensation Insurance;** contractors insured through the New York State Insurance Fund should send form **U-26.3**;
- **SI-12 – Certificate of Workers Compensation Self-Insurance;** or
- **GSI-105.2 – Certificate of Participation in Workers’ Compensation Group Self-Insurance;** or
- **CE-200, Certificate of Attestation for New York Entities With No Employees and Certain Out of State Entities.**

ONE of the following forms as Proof of Disability Insurance Coverage:

- **DB-120.1 – Certificate of Disability Benefits Insurance;**
- **DB-120.2 – Certificate of Participation in Disability Benefits Group Self Insurance;**
or
- **DB-155 – Certificate of Disability Benefits Self Insurance;**
- **CE-200, Certificate of Attestation for New York Entities With No Employees and Certain Out of State Entities.**

7.7 Public Officers Law

Contractors, consultants, vendors, and subcontractors may hire former State Agency or Authority employees. However, as a general rule and in accordance with New York Public Officers Law, former employees of the State Agency or Authority may neither appear nor practice before the State Agency or Authority, nor receive compensation for services rendered on a matter before the State Agency or Authority, for a period of two years following their separation from State Agency or Authority service. In addition, former State Agency or Authority employees are subject to a “lifetime bar” from appearing before the State Agency or Authority or receiving compensation for services regarding any transaction in which they personally participated, or which was under their active consideration during their tenure with the State Agency or Authority. Any questions about the appropriateness of employing or utilizing a former State Agency or Authority employee should be resolved by obtaining an advisory opinion from the NYS Joint Commission on Public Ethics (JCOPE) which can be contacted at <https://jcope.ny.gov>.

7.8 Conflict of Interest

The Bidder shall submit, as part of the bid, a completed **Vendor Assurance of No Conflict of Interest or Detrimental Effect Form (Attachment 4)** signed by an authorized representative providing an attestation that its performance of the services outlined in this RFA does not and will not create a conflict of interest with nor position the Bidder to breach any other contract currently in force with the State of New York. Furthermore, the Bidder shall attest that it will not act in any manner that is detrimental to any State project on which the Bidder is rendering services.

7.9 Executive Order 177

In accordance with Executive Order (EO) No. 177, the Bidder shall certify that it does not have institutional policies or practices that fail to address the harassment and discrimination of individuals on the basis of their age, race, creed, color, national origin, sex, sexual orientation, gender identity, disability, marital status, military status, or other protected status under the Human Rights Law. Such certification shall be made utilizing **Attachment 4**.

Executive Order No. 177 does not affect institutional policies or practices that are protected by existing law, including but not limited to the First Amendment of the United States Constitution, Article 1, Section 3 of the New York State Constitution, and Section 296(11) of the New York State Human Rights Law.

7.10 Executive Order 16

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 10**.

7.11 State Finance Law, Article 9- §139-I Statement on Sexual Harassment

In accordance with New York Consolidated Laws, State Finance Law, Article 9- §139-I Statement on Sexual Harassment, Bidder shall certify that it has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees. Such policy shall, at a minimum, meet the requirements of section two hundred one-g of the labor law. Such certification shall be made utilizing **Attachment 9**.

A bid shall not be considered for award nor shall any award be made to a bidder who has not complied with subdivision one of §139-I; provided, however, that if the bidder cannot make the foregoing certification, such bidder shall so state and shall furnish with the bid a signed statement which sets forth in detail the reasons therefor.

Any bid hereafter made to the state or any public department, agency or official thereof, by a corporate bidder for work or services performed or to be performed or goods sold or to be sold, where such bid contains the statement required by subdivision one of this section, shall be deemed to have been authorized by the board of directors of such bidder, and such authorization shall be deemed to include the signing and submission of such bid and the inclusion therein of such statement as the act and deed of the corporation.

8 REQUIRED ATTACHMENTS AT BID SUBMITTAL

All attachments in this section will be required to be completed and submitted with all bid proposals. All attachments in this section will have a fillable version of these forms available on the OASAS website under this opportunity.

Missing or skipped numbered attachments indicate that a particular attachment will not be required by this particular procurement and was therefore omitted.

8.1 Attachment 3: Budget

REQUEST FOR APPLICATIONS OASAS PROJECT NO. SETT-23005

A separate fillable version of this form is available under this opportunity

(Start-up and Annual Operating Budgets)

1. Printed Legal Name of Bidder Entity:		
2. Bidder's OASAS Provider or OMH License Number:		
3. Bidder's Street Address/P.O. Box:		
4. Bidder's City/Town/Village:	5. Postal Zip Code:	6. Date Prepared:
7. Printed Name of Bidder Contact Person:		8. Contact Telephone #:
9. Printed Title of Contact:		10. Contact Email:

~~PART II - OPERATIONAL FUNDING REQUEST~~

REQUESTED OPERATING BUDGET FOR APPLICATION	(Column A) PROPOSED START- UP OPERATING BUDGET	(Column B) PROPOSED ANNUAL OPERATING BUDGET
1. Gross Expense Budget (see instructions for details): Round amounts to the nearest \$1 (no cents)		
Personal Services		
Fringe Benefits		
Non-Personal Services		
Equipment		
Property/Space		
Agency Administration		
TOTAL GROSS EXPENSE BUDGET		
2. Revenue Budget (see instructions for details): Round amounts to the nearest \$1 (no cents)		
Patient Fees		
SSI and SSA		
Public Assistance (Safety Net & TANF)		
Medicaid		
Medicare		
Third Party Insurance/Private Pay		
Food Stamps		
Closely Allied Entity Contributions		
Donations		
Other: Specify:		
Specify:		
Specify:		
TOTAL REVENUE BUDGET		
3. NET OPERATING COST		
4. OASAS State Aid Funding Requested		
5. Full-Time Equivalent (FTE) Staff Requested:		
Bidder Official:		
Printed Name:	Printed Title:	
Signature:	Date:	

**Instructions for Completing the Initiative Funding Request Form (IFR)
(Start-up and Annual Operating Budgets)**

PART 1 - PROVIDER INFORMATION

1. **Printed Legal Name of Bidder Entity** – Print the incorporated or legal name of the agency submitting the Initiative Funding Request on the IFR and on any additional pages that are attached. **Do not enter the common name or acronym.**
2. **Bidder's 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 (CFR) documents.
- 3-5. **Bidder Address** – Enter the mailing address, including zip code, where the administrative office of the bidder entity is located.
6. **Date Prepared** – Enter the date the IFR was prepared.
- 7-10. **Bidder Contact Person** – Enter the printed name and title, the telephone number (including area code), and email address of the person who can answer questions concerning the information provided on the IFR.

PART II – OPERATIONAL FUNDING REQUEST

Anticipated Operating Budget for Proposals

Requested operating budget amounts must represent:

Column A – **PROPOSED START-UP OPERATING BUDGET**: The start-up or part year costs, net deficit and OASAS State aid funding requested for one-time costs necessary to start the program effort. Start-up costs are one-time expenses only and must be reasonable and necessary for program implementation. The start-up budget is limited to one quarter (1/4) of the full annual State Aid. Start-up costs may include but are not limited to the following: equipment; office supplies; furniture; rental deposits/securities; and staff recruitment. Agency administration is not an allowable expense for start-up.

Column B – **ANNUAL OPERATING BUDGET**: The 12-month, full annual costs, revenues, net deficit and OASAS State aid funding requested. Awards to the selected bidders will be prorated for the first fiscal period based on the initiative start date identified above.

ALL AMOUNTS REQUESTED FOR INITIATIVE FUNDING MUST BE ROUNDED TO THE NEAREST DOLLAR (\$1.00)

1. **Gross Expense Budget** – Bidders should refer to the Consolidated Fiscal Reporting (CFR) Manual for a more detailed general description of the following expense items which should be entered in Columns A and B:

➤ Personal Services

- Fringe Benefits
- Non-Personal Services (i.e. Other than Personal Services (OTPS))
- Equipment
- Property/Space
- Agency Administration (**not allowable for start-up budget**)

2. **Revenue Budget** – Bidders should refer to the CFR Manual for an explanation of each revenue category, and enter applicable start-up and annual projected amounts that they anticipate receiving to offset costs attributable to the initiative in Columns A and B.

If the bidder does not anticipate receiving any additional revenue to offset costs of its proposal it should so indicate by entering \$0 for each category in Columns A and B.

3. **Net Operating Cost** - Enter the amount obtained by subtracting **Total Revenue Budget** from **Total Gross Expense Budget in Column A and B**.
4. **OASAS State Aid Funding Requested** – Enter the amount of OASAS State aid Start-Up funding being requested for the initiative in Column A. This amount **should equal** the Start-Up **Operating Budget Net Deficit** amount.
5. **Number of Direct Service Full-Time Equivalent (FTE) Staff** – Enter the total number of direct service FTE staff. A direct service FTE is defined as: a minimum of 35 hours depending on your agency’s established work week.

Bidder Official – Enter the printed name and title of the bidder agency representative submitting the IFR application.

Signature and Date – The IFR should be signed and dated by the bidder agency representative.

8.2 Attachment 4: Vendor Assurance of No Conflict of Interest or Detrimental Effect

A separate fillable version of this form is available under this opportunity

The Bidder offering to provide services pursuant to this RFA, as a contractor, joint venture contractor, subcontractor, or consultant, attests that its performance of the services outlined in this RFA does not and will not create a conflict of interest with nor position the Bidder to breach any other contract currently in force with the State of New York.

As such, the Bidder will disclose any existing or contemplated relationship with any other person or entity, including relationships with any member, shareholders of 5% or more, parent, subsidiary, or affiliated Contractor, which would constitute an actual or potential conflict of interest or appearance of impropriety, relating to other clients/customers of the Bidder or former officers and employees of the Bidder or their Affiliates, in connection with your rendering services pursuant to this RFA.

If a conflict does or might exist, describe how the Bidder would eliminate or prevent it.

Indicate what procedures will be followed to detect, notify OASAS of, and resolve any such conflicts.

In addition, the Bidder must disclose whether it, or any of its members, shareholders of 5% or more, parents, affiliates, or subsidiaries, have been the subject of any investigation or disciplinary action by the New York State Commission on Public Integrity or its predecessor State entities (collectively, "Commission"), and if so, a brief description must be included indicating how any matter before the Commission was resolved or whether it remains unresolved.

Furthermore, the Bidder attests that it will not act in any manner that is detrimental to any State project on which the Bidder is rendering services. Specifically, the Bidder attests that:

The fulfillment of obligations by the Bidder, as proposed in the response, does not violate any existing contracts or agreements between the Bidder and the State;

1. The fulfillment of obligations by the Bidder, as proposed in the response, does not and will not create any conflict of interest, or perception thereof, with any current role or responsibility that the Bidder has with regard to any existing contracts or agreements between the Bidder and the State;

2. The fulfillment of obligations by the Bidder, as proposed in the response, does not and will not compromise the Bidder's ability to carry out its obligations under any existing contracts between the Bidder and the State;
3. The fulfillment of any other contractual obligations that the Bidder has with the State will not affect or influence its ability to perform under any contract with the State resulting from this RFA;
4. During the negotiation and execution of any contract resulting from this RFA, the Bidder will not knowingly take any action or make any decision which creates a potential for conflict of interest or might cause a detrimental impact to the State as a whole including, but not limited to, any action or decision to divert resources from one State project to another;
5. In fulfilling obligations under each of its State contracts, including any contract which results from this RFA, the Bidder will act in accordance with the terms of each of its State contracts and will not knowingly take any action or make any decision which might cause a detrimental impact to the State as a whole including, but not limited to, any action or decision to divert resources from one State project to another;
6. No former officer or employee of the State who is now employed by the Bidder, nor any former officer or employee of the Bidder who is now employed by the State, has played a role with regard to the administration of this contract procurement in a manner that may violate section 73(8)(a) of the State Ethics Law; and
7. The Bidder has not and shall not offer to any employee, member or director of the State any gift, whether in the form of money, service, loan, travel, entertainment, hospitality, thing or promise, or in any other form, under circumstances in which it could reasonably be inferred that the gift was intended to influence said employee, member or director, or could reasonably be expected to influence said employee, member or director, in the performance of the official duty of said employee, member or director or was intended as a reward for any official action on the part of said employee, member or director.

Bidders responding to this RFA should note that the State recognizes that conflicts may occur in the future because a Bidder may have existing or new relationships. The State will review the nature of any such new relationship and reserves the right to terminate the contract for cause if, in its judgment, a real or potential conflict of interest cannot be cured.

Name _____, Title: _____

Signature: _____, Date: _____

This form must be signed by an authorized executive or legal representative.

8.3 Attachment 8: EO 177 Certification

A separate fillable version of this form is available under this opportunity

The New York State Human Rights Law, Article 15 of the Executive Law, prohibits discrimination and harassment based on age, race, creed, color, national origin, sex, pregnancy or pregnancy-related conditions, sexual orientation, gender identity, disability, marital status, familial status, domestic violence victim status, prior arrest or conviction record, military status or predisposing genetic characteristics.

The Human Rights Law may also require reasonable accommodation for persons with disabilities and pregnancy-related conditions. A reasonable accommodation is an adjustment to a job or work environment that enables a person with a disability to perform the essential functions of a job in a reasonable manner. The Human Rights Law may also require reasonable accommodation in employment on the basis of Sabbath observance or religious practices.

Generally, the Human Rights Law applies to:

- all employers of four or more people, employment agencies, labor organizations and apprenticeship training programs in all instances of discrimination or harassment;
- employers with fewer than four employees in all cases involving sexual harassment; and,
- any employer of domestic workers in cases involving sexual harassment or harassment based on gender, race, religion or national origin.

In accordance with Executive Order No. 177, the Bidder hereby certifies that it does not have institutional policies or practices that fail to address the harassment and discrimination of individuals on the basis of their age, race, creed, color, national origin, sex, sexual orientation, gender identity, disability, marital status, military status, or other protected status under the Human Rights Law.

Executive Order No. 177 and this certification do not affect institutional policies or practices that are protected by existing law, including but not limited to the First Amendment of the United States Constitution, Article 1, Section 3 of the New York State Constitution, and Section 296(11) of the New York State Human Rights Law.

Contractor: _____

Signature: _____

Name: _____

Title: _____

Date: _____, 20__

8.4 Attachment 9: Statement on Sexual Harassment Certification

(New York Consolidate Laws, State Finance Law, Article 9–§139-I)

A separate fillable version of this form is available under this opportunity

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that the bidder has and has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees. Such policy shall, at a minimum, meet the requirements of section two hundred one-g of the labor law.

Any bid hereafter made to the state or any public department, agency or official thereof, by a corporate bidder for work or services performed or to be performed or goods sold or to be sold, where such bid contains the statement required by §139-I, shall be deemed to have been authorized by the board of directors of such bidder, and such authorization shall be deemed to include the signing and submission of such bid and the inclusion therein of such statement as the act and deed of the corporation.

Contractor: _____
Signature: _____
Name: _____
Title: _____
Date: _____, 20__

If the bidder cannot make the foregoing certification, such bidder shall so state and shall furnish with the bid a signed statement which sets forth in detail the reasons therefor.

8.5 Attachment 10: Executive Order 16

A separate fillable version of this form is available under this opportunity

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 anynew contract or renewing any existing contract with an entity conducting business operations in Russia.” Thecomplete 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 institutionor 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: _____

Initiative Name - Outreach and Engagement Services – Clinical Model

Date: _____

8.6 Attachment 11: Integration of Mental Health and Substance Use Disorder Response

RFA SETT – 23005

Outreach and Engagement Services – Clinical Model

**A separate fillable version of this form is available under this opportunity
If additional space is required write “see attached” and attach additional documents.**

1. Describe how your program incorporates the principles of harm reduction into mental health and substance use disorder services as detailed in Section 2.1 of this RFA. Identify the care that the program provides to patients to utilize harm reduction approaches, incorporate peers and recovery principles, screen, assess, directly provide or coordinate care for individuals.
2. Describe how program ensures comprehensive services to address the holistic needs of persons served.
3. Describe how program provides a full continuum of services for addiction, mental health or physical health needs of persons served either directly or through coordination with other providers.
4. Describe training on assessment of co-occurring conditions and referral to care.

8.7 Attachment 12: Equity and Diversity Response

RFA SETT – 23005

Outreach and Engagement Services – Clinical Model

A separate fillable version of this form is available under this opportunity

1. Describe the population in the catchment area served by this initiative including the demographic composition of the population (race, ethnicity, gender and gender identity, sexual orientation, language, disability, etc.).
2. Describe how your agency meets the cultural and linguistic needs of the population(s) to be served by your agency as part of this initiative.
3. Describe any efforts your agency has taken to reduce disparities in access to services for marginalized and/or underserved individuals/communities.
4. Does your agency mission statement, vision statement and/or values statement reflect a commitment to serving marginalized or underserved communities and/or regions? Provide the statement(s).
5. Identify the staff person responsible for addressing justice, equity, diversity and inclusion within your agency, including their name, title, background/education and contact information.
6. Describe any committees or workgroups developed within your agency to address justice, equity, diversity and inclusion, as well as the staff and/or patients/clients who participate in those committees, including how often they meet and impact on the agency. A general description of the participants is satisfactory, do not name patients or clients participating any specific committees or workgroups.
7. Provide information on any external committees or workgroups related to justice, equity, diversity and inclusion that your staff participate in. Provide the name of the committee or workgroup, including a general description of the focus, attendees and how often the group meets.
8. Supporting diversity in the workforce:
 - a. Describe agency efforts to recruit, hire and retain staff representative of, or experienced in working with, the dominant cultural groups of the individuals served by your agency and the community in which your agency is located.
 - b. Describe the leadership structure of your agency and how leadership are representative of, or experienced in working with, the dominant cultural groups of the individuals served by your agency and the community in which your agency is located.
9. Describe staff training requirements related to justice, equity, diversity and inclusion.

9 REQUIRED ATTACHMENTS BEFORE CONTRACT EXECUTION

All Attachments in this section will be required to be completed by successful applicants only. They may be included as part of the application submission or applicants may choose to submit them only after receiving an award and before contract execution.

Missing or skipped roman numerals indicate that a particular attachment will not be required by this particular procurement/contract.

N/A

10 APPENDIXES

All Appendixes are informational and do not have to be completed by the applicant.

Missing or skipped letters indicate that a particular appendix is not relevant to this particular procurement/contract.

N/A

End of RFA SETT-23005