STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES

REQUEST FOR PROPOSALS

Involuntary Outpatient Commitment Programs
(Middlesex, Monmouth, Morris, Sussex and Warren Counties)

February 18, 2015

Lynn A. Kovich, Assistant Commissioner
Division of Mental Health and Addiction Services
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I. Purpose and Intent

This Request for Proposals (RFP) is issued by the New Jersey Division of Mental Health and Addiction Services (DMHAS) for the development of Involuntary Outpatient Commitment (IOC) program(s) to serve Middlesex, Monmouth, Morris, Sussex and Warren Counties. Total annualized funding up to $1,500,000, subject to state appropriations, is available through this initiative. Bidders may submit proposals to serve more than one (1) of these areas. A maximum of five (5) awards will be made through this RFP and no more than $300,000 will be awarded per county.

The following summarizes the RFP schedule:

February 18, 2015                      Notice of Funding Availability
February 25, 2015                      Mandatory Bidders Conference
March 25, 2015                          Deadline for receipt of proposals – no later than 5:00 p.m.
May 1, 2015                             Preliminary award announcement
May 8, 2015                             Appeal deadline
May 15, 2015                            Final award announcement
July 1, 2015                            Anticipated award start date

II. Background and Population to be Served

DMHAS, in partnership with consumers, family members, providers and other stakeholders, promotes wellness and recovery for individuals managing a mental illness, a substance use disorder or co-occurring disorders through a continuum of prevention, early intervention, treatment and recovery services delivered by a culturally competent and well-trained workforce.

DMHAS believes that people with mental illness can achieve wellness and recovery. A strong and responsive mental health care system can meet the varied needs of people as they experience the recovery process. Towards that end, it is the Division’s policy to ensure that consumers and families have access to recovery oriented services and resources that promote wellness, an improved quality of life and community inclusion.

However, there is a cohort of consumers who are not willing to use mental health services voluntarily. When these consumers exhibit dangerousness to self, other or property by reason of a mental illness, it is the responsibility of the state to ensure the safety of the consumers and the public. New Jersey’s Screening Law (N.J.S.A. 30:4-27.1 et. seq) governs involuntary commitment processes for instances when persons require involuntary care. On August 11, 2009, P.L. 2009, ch. 112 was signed, which amended the state’s civil commitment law, creating a mechanism by which persons could receive involuntary care while being supervised in the community. The intent of the law is to provide a new option: supervision in the community for a class of consumers that the legislature agreed was not well-served without this law. This population comprises those who are not willing to receive treatment voluntarily, but who
do not exhibit imminent dangerousness that requires confinement to an inpatient treatment facility.

This RFP specifically requires an assessment of the current availability of all community mental health services in the county for which the proposed service would cover. Bidders must clearly detail how the agency will coordinate or directly provide the mental health services needed by consumers who meet the standard for IOC. This must include a discussion of anticipated use of program resources internal and external to the bidder. If applicable, memoranda of agreement with other mental health providers may be necessary to ensure that the persons under IOC status have access to intensive services.

The population to be served by this program are adults 18 years of age or older who have a serious mental illness and who have been committed or presented for commitment to involuntary outpatient treatment within the identified county or counties. Typically, IOC may be initiated by the local Designated Screening Service or by an inpatient mental health provider, such as a Short Term Care Facility. An individual may also occasionally be committed to involuntary outpatient treatment via the alternate route (N.J.S. 30:4-27.10b) or by the Attorney General or County Prosecutor's submission to the court for involuntary treatment of an inmate who is scheduled for release upon expiration of maximum term of incarceration (N.J.S. 30:4-27.10c).

Individuals eligible for IOC must:
- Meet the legal standard for IOC pursuant to the screening law (the individual must be in need of involuntary commitment to treatment as defined in the statute, not be in need of inpatient treatment, and have a history of responding to treatment);
- Be assessed as able to be safely served in an outpatient setting;
- Be 18 years of age or older;
- Have the capacity to participate in their treatment and development of their individual recovery (treatment) plan, even if unwilling to do so; and
- Not be at imminent risk of a medical crisis.

III. Who Can Apply?

To be eligible for consideration for this RFP, the bidder must satisfy the following requirements:
- The bidder must be a non-profit, for-profit or governmental entity that can document its experience in successfully providing community based mental health services to persons with a serious mental illness;
- For a bidder that has a contract with DMHAS in place when this RFP is issued, that bidder must have all outstanding Plans of Correction (PoC) for deficiencies submitted to DMHAS for approval prior to submission;
- The bidder must be fiscally viable based upon an assessment of the bidder's audited financial statements;
The bidder must not appear on the State of New Jersey Consolidated Debarment Report at http://www.state.nj.us/treasury/debarred/debarsearch.htm or be suspended or debarred by any other State or Federal entity from receiving funds; the bidder shall not employ a member of the Board of Directors in a consultant capacity; pursuant to N.J.S.A. 52:32-44, a for-profit bidder and each proposed subcontractor must have a valid Business Registration Certificate on file with the Division of Revenue, i.e., this statutory requirement does not apply to non-profit organizations, private colleges and universities, or state and municipal agencies; the bidder must comply with the terms and conditions of DHS’ contracting rules and regulations as set forth in the Standard Language Document, the Contract Reimbursement Manual (CRM) and the Contract Policy and Information Manual (CPIM). These documents are available on the web at: http://www.state.nj.us/humanservices/ocpm/home/resources/manuals; and the bidder must attend the Mandatory Bidders conference as described in the RFP.

IV. Contract Scope of Work

Successful bidders will directly provide or coordinate a comprehensive outpatient mental health service that meets the needs of individuals committed to outpatient treatment. Bidders must demonstrate the capacity to:

1. Provide a psychiatric evaluation of each consumer who is referred from the local Designated Screening Service (DSS) or an inpatient unit, within 24 hours of the consumer’s referral;
2. Initiate court proceedings for the involuntary commitment, and to develop with the referring agency an individual treatment and recovery plan designed to address the consumer’s individual treatment needs;
3. Be responsible for providing or coordinating consumer driven treatment planning that is comprehensive and includes substance abuse treatment services when indicated;
4. Monitor treatment plan adherence;
5. Continuously evaluate the consumer’s dangerousness, willingness to voluntarily accept services, and the need for commitment;
6. Provide or assure availability of transportation to all scheduled court hearings and other appointments related to the IOC treatment plan;
7. Provide testimony at all scheduled court hearings in person when required from the treating/expert psychiatrist and other staff involved in the consumer’s care and or, if available, via video conferencing;
8. Include the consumer and family members, where appropriate and authorized by the consumer or a court, in the ongoing process of updating the treatment plan;
9. Report to the court when a consumer is not in substantial compliance with the approved plan, or when a plan is inadequate to meet the consumer’s needs;
10. Report to the County Adjuster when a consumer is no longer in need of commitment and is administratively discharged;
11. Establish policies, protocols with the appropriate County Counsel, County Adjuster’s Office for the purpose of effectuating the commitment through initiating, monitoring and managing those hearings;

12. Support the consumers’ relationship with attorneys from the Office of the Public Defender’s Division of Mental Health Advocacy or retained by the county or who will represent the consumers in commitment hearings in the identified county;

13. Train all key stakeholders about the IOC program, including consumers, family members of consumers, medical and mental health service providers, emergency personnel, police, jails and others who may be involved in referring or treating persons who are or may be subject to outpatient commitment orders;

14. Describe how peer staff and family members will be incorporated into the service delivery; and

15. Describe how referrals will be managed regardless of the individual’s insurance coverage or ability to pay for services, and the agency’s experience with and ability to access insurance or other financial resources for those consumers who have such resources.

16. For Warren County, the IOC program is currently provided by the Family Guidance Center of Warren County. As such, staff under this agency’s employ may be displaced as a result of this RFP. Bidders are expected to consider prospectively displaced employees for hire so that program continuity is maximized. Consequently, bidders must include a statement in their proposal that indicates the bidder’s willingness to consider for employment those employees who will be displaced as a result of this RFP.

Reporting requirements:
Successful bidders will be required to report quarterly on:
1. The number of consumers referred to and enrolled in IOC.
2. Pre-IOC enrollment use of acute mental health services such as Designated Screening and Short Term Facility Care
3. The number of IOC consumers referred to screening;
4. The number of IOC consumers hospitalized for psychiatric needs;
5. The number of IOC consumers arrested, charged with crimes or incarcerated during monitoring.
6. The number of IOC consumers discharged and the reasons for such;
7. The number and kind of contacts with each consumer and the types of interventions or services provided directly by the IOC program.

In addition, successful bidders will be required to submit an annual aggregation of comments from consumers to assess their reaction to the IOC process and the services provided.

Service Outcome Requirements
Successful bidders will be able to demonstrate the provision of new services, access to existing services, restructuring of existing services or enhancement of existing services. DMHAS expects the following from successful bidders:
1. To establish a program delivery model that allows for the provision of or the management of services to individuals involuntarily committed to outpatient treatment within an identified county or counties. For example, successful bidders:
   a. Are encouraged to provide letters of support from one (1) or more of the local stakeholder groups including, but not limited to, consumer, family and provider organizations.
   b. Are required to develop affiliation agreements with other mental health service providers including the Designated Screening Service and, where applicable, Intensive Outpatient and Early Intervention Programs in the identified county or counties where affiliations are necessary to ensure a sufficient number of services will be available and to maximize consumer access to the most appropriate treatment modality.
   c. Are required to demonstrate sufficient affiliations to minimize incidents of disruption of services with a provider with whom the consumer is already engaged.

2. To ensure the delivery of ongoing recovery oriented and comprehensive mental health services to individuals who are involuntarily committed to outpatient treatment within an identified county or counties in such a manner as to sustain community tenure and to promote social inclusion;

3. To ensure that individuals involuntarily committed to outpatient treatment are offered culturally and linguistically competent services, the bidder will propose a method for identifying and linking consumers with services that are culturally competent;

4. To ensure that service recipients have access to transportation to appropriate services and to scheduled court appearances which are required within their IOC status. Transportation may be coordinated via publicly available services such as bus and train routes, as well as alternative transportation for individuals who do not have reasonable access to public or private transportation;

5. Integration of involuntary treatment considerations within a recovery-oriented service, including coordinating the development of consumer centered treatment plans, such as Wellness Recovery Action Plans (WRAP) and Psychiatric Advanced Directives as well as the criteria and process for determining that an individual is ready for discharge from IOC;

6. To create rapid access to community mental health services that are adequate in intensity to meet the needs of individuals who require this level of care to remain safely in the community;

7. To maintain or enhance the quality of life of individuals who are involuntarily committed to outpatient treatment; and

8. An evaluation of program outcomes, including consumer satisfaction, family satisfaction, increased use (linkage) of mental health services, consumer quality of life, reduced psychiatric hospitalization use, reduced criminal justice involvement and attainment of consumer identified recovery goals

Awardees must adhere to all applicable State and Federal cost principles. Budgets should be reasonable and reflect the scope of responsibilities in order to accomplish the goals of this project.
V. General Contracting Information

All bidders will be notified in writing of the state’s intent to award a contract. All proposals are considered public information and as such will be made available for a defined period after announcement of the contract awardees and prior to final award, as well as through the State Open Public Records Act process at the conclusion of the RFP process.

The contract awarded as a result of this RFP may be annually renewable at DMHAS’ sole discretion. Funds may only be used to support services that are specific to this award; hence, this funding may not be used to supplant or duplicate existing funding streams. Actual funding levels will depend on the availability of funds and satisfactory performance.

In accordance with DHS Policy P1.12 available on the web at http://www.state.nj.us/humanservices/ocpm/home/resources/manuals/index.html, programs awarded pursuant to this RFP will be separately clustered until the DMHAS determines, in its sole discretion, that the program is stable in terms of service provision, expenditures, and applicable revenue generation.

Should service provision be delayed through no fault of the provider, funding continuation will be considered on a case-by-case basis based upon the circumstances creating the delay. In no case shall the DMHAS continue funding when service commencement commitments are not met, and in no case shall funding be provided for a period of non-service provision in excess of three (3) months. In the event that the timeframe will be longer than three (3) months, DMHAS must be notified so the circumstances resulting in the anticipated delay may be reviewed and addressed. Should services not be rendered, funds provided pursuant to this agreement shall be returned to the Division.

The bidder must comply with all rules and regulations for any DMHAS program element of service proposed by the bidder. Additionally, please take note of Community Mental Health Services Regulations, N.J.A.C. 10:37, which apply to all contracted mental health services. These regulations can be accessed at http://www.state.nj.us/humanservices/providers/rulefees/regs/

It is expected that the providers of these services will generate income from third party entities such as Medicaid and private insurance. One-time funds are available to support necessary equipment, supplies, and other related start-up costs. All construction/renovation awards will be subject to a Capital Agreement at the discretion of the Division.

VI. Mandatory Bidders Conference

A bidder intending to submit a proposal in response to this RFP must attend a Mandatory Bidders Conference. It is the responsibility of the bidder to arrive promptly at
the beginning of the Mandatory Bidders Conference and sign in to confirm attendance. A proposal submitted by a bidder not in attendance will not be considered. The Mandatory Bidders Conference will be held as follows:

Date: February 25, 2015
Time: 1:00 PM
Location: Conference Room 3-000
Division of Mental Health and Addiction Services
New Jersey Department of Human Services
222 South Warren Street, 3rd Floor
Trenton, NJ 08625

The Mandatory Bidders Conference will provide the bidder with an opportunity to ask questions about the RFP requirements, the award process, and to clarify portions of the RFP. This ensures that all potential bidders have equal access to information. Additional questions about information not covered in the bidders’ conference may be emailed to RFP.Submissions@dhs.state.nj.us through March 4, 2015. Responses to emailed questions will be addressed in a group email to all who have attended the mandatory bidders’ conference. Any necessary response to questions posed by a potential bidder during the Mandatory Bidders Conference that cannot be answered at that time will be furnished via electronic mail to all potential bidders registered as being in attendance. Specific individual guidance will not be provided to individual bidders at any time.

Potential respondents to this RFP are requested to register for the Mandatory Bidders Conference via the registration link: https://njsams.rutgers.edu/training/IOCP/register.aspx. Additionally, if you require assistance with this registration link, please contact RFP.Submissions@dhs.state.nj.us no later than two (2) days prior to the Mandatory Bidders Conference.

The meeting room and facility is accessible to individuals with physical disabilities. Anyone who requires special accommodations should notify RFP.Submissions@dhs.state.nj.us. For sign language interpretation, please notify RFP.Submissions@dhs.state.nj.us at least five (5) business days in advance of the Mandatory Bidders Conference. Once reserved, a minimum of 48 hours is necessary to cancel this service, or else the cost will be billed to the requestor.

VII. Required Proposal Content

Proposals must address the following topics, and be submitted according to the following sections:

Funding Proposal Cover Sheet (RFP Attachment A)

Bidder History and Recent Experience/Performance (10 points)
1. A narrative describing the bidder’s history and mission, its primary purpose, current licenses and experience providing community-based services to individuals with serious mental illness.

2. The bidder's current status and history relative to debarment by any State, Federal or local government agency. If there is debarment activity, it must be explained with supporting documentation as an appendix to the bidder's proposal.

3. Description of all active litigation in which the bidder is involved, including pending litigation of which the bidder has received notice.

4. Description of the bidder’s ability to provide culturally competent services.

5. Provide detail on any DMHAS contract commitments that have not been met in the past five (5) years.

Project Description (50 points)

1. A comprehensive description of the total service package, detailing all recovery services, clinical interventions and treatment modalities that will be used to achieve the service objectives referenced above.

2. Detail on the program model to be employed, such as direct service provision, brokerage, or some other model for service delivery. This must include a discussion of how the service will integrate within the continuum of services in the geographic area in which the bidder proposes service development;

3. A delineation of any partner entities and how the service package will be coordinated, clearly stating the services to be provided by each agency and program and explaining the mechanisms for coordination of care and problem resolution between agencies. Letters of intent between the bidder and any relevant program partners, inclusive of details about making services available and timely processing of referrals, should be included.

4. Assurances that all partner agency programs that comprise the total service package being proposed will be appropriately licensed, as applicable, and that all involved independent practitioners to whom consumers may be referred will be appropriately licensed by the State Division of Consumer Affairs.

5. A program schedule showing staff availability for consumers and families.

6. An explanation of how the proposed service will interface with the Designated Screening Program in regard to accepting new consumers into the outpatient commitment program as well as for consumers enrolled in the outpatient commitment program who require screening services. This must include detail on how the IOC program will provide the psychiatric evaluation (for the purpose of completing the second physician certificate) requisite to the involuntary commitment process, within 12 to 24 hours.

7. A description of how the proposed service will interface with inpatient (e.g. Short Term Care Facilities) and other referral sources. Timeframes for responding to inpatient referrals must be clearly detailed.

8. A specific, timeframe plan for phase-in and full implementation of program operations. Provide the intended plan for siting the service, office space requirements, and plan to secure needed space, including timeframes.

9. A description of the supervision methods that will be used and the procedures for monitoring the performance of staff.
10. A description of the personnel who will interact with the courts and how expert testimony of a psychiatrist will be procured for initial referrals and subsequent scheduled IOC court dates.

11. A description of the standard the bidder will use to determine that a consumer is or is not in substantial compliance with the treatment plan elements, and what objective measures will be used to determine when noncompliance renders the outpatient treatment plan to be inadequate.

12. A description of how transportation will be provided or arranged and specifically how local transportation resources will be employed.

13. A description of language and cultural barriers that must be considered in delivering services to the anticipated population, and how the proposed service addresses these issues of cultural competence and access.

14. An explanation of how the IOC services will be provided regardless of the individual consumer’s insurance coverage (or lack of coverage) or ability to pay for services.

15. A full description of the program enrollment process, including an explanation of intake, court required outpatient treatment planning and judicial system notifications, clearly outlining timeframes.

16. Discharge criteria including a description of the administrative discharge standards, discharge procedures, and linkages to ongoing support and treatment services.

17. Estimated volume of consumers to be served as an ongoing caseload, annually, and an estimated volume of service to be provided per consumer during their course of IOC. Volume must be clearly noted as either direct service from the IOC staff or as part of coordinated plan.

18. A discussion of how consumer choice will be addressed, and to the extent possible, how consumer preference to continue treatment with providers with whom they are already linked will be accommodated.

19. A description of the manner in which tangible assets, i.e., computers, phones, other special service equipment, etc., will be acquired and allocated.

20. A description of the bidder’s Americans with Disabilities Act (ADA) accessibility to its facilities and/or offices for individuals with disabilities.

Outcome(s) and Evaluation (10 points)
Provide the following information related to the projected outcomes associated with the proposal as well any evaluation method that will be used to measure program effectiveness.

1. The bidder’s approach to measurement of consumer satisfaction.

2. The specific methods to be used to evaluate all service outcomes (e.g. consumer outcomes, program outcomes) and the quality of service, including details on forms or tools which will be utilized for this purpose. Specific forms or tools may be included as an Appendix.

3. If applicable, provide details about any an outside entity planned for use to conduct the evaluation, including but not limited to the entity’s name, contact information, brief description of credentials and experience conducting program evaluation.
Staffing (10 points)
1. If applying for Warren County, the process for retention of current screening services program staff who may be affected by this RFP.
2. A specification of the number (in full-time equivalents), qualifications, professional licensure, and skills of all proposed IOC staff.
3. Name and credentials of individual(s) directly responsible (if known at application) for ensuring the achievement of the required outcomes.
4. The proposed organizational structure, including an organizational chart in an appendix to the bidder's proposal.
5. Detail on the bidder's hiring policies, related to conducting background and credential checks, as well handling of prior criminal convictions.
6. A list of the bidder's board members, including each member's professional licensure and organizational affiliation(s). The bidder's proposal must identify each board member who is also an employee of the bidder or an affiliate of the bidder. The proposal shall indicate if the Board of Directors votes on contract-related matters.
7. A list of names of consultants the bidder intends to utilize for the contract resulting from this RFP, including each consultant's professional licensure and organizational affiliation(s). Each consultant must be further described as to whether they are also a board member and, if so, whether they are a voting member. The bidder must identify all reimbursement the consultant received as a board member over the last twelve (12) months.

Budget (20 points)
1. A detailed budget using the Annex B standard budget categories for expenses and revenues: A. Personnel, B. Consultants and Professionals, C. Materials & Supplies, D. Facilities Costs, E. Specific Assistance to Clients, F. Other, General and Administrative Distribution, and Revenues including Client Generated Fees, Public & Private Grants and Other Agency Funds. Utilize the Excel budget template which will be emailed based on the attendance list from the Mandatory Bidders Conference. The budget must be presented in two (2) clearly labeled separate columns:
   a. One column detailing the full annualized operating costs and revenues excluding one-time costs; and
   b. One column detailing the one-time costs.
2. Budget Notes that may be useful to help explain costs and assumptions made for certain non-salary expenses and the calculations behind various revenue estimates. The State's proposal reviewers need to fully understand the bidder's budget projections from the information presented in its proposal. Failure to provide adequate information could result in lower ranking of the proposal. Budget Notes, to the extent possible, should be displayed on the budget template file itself.
3. The name and address of each organization – other than third-party payers – providing support and/or money to help fund the program for which the proposal is being made.
4. For personnel line items, staff position titles, i.e., not staff names, and hours per workweek.
5. The number of hours per clinical consultant such that cost/hour may be evaluated.
6. Staff fringe benefit expenses, which may be presented as a percentage factor of total salary costs, should be consistent with the bidder's current fringe benefit percentage.
7. If applicable, General & Administrative (G&A) expenses, otherwise known as indirect or overhead costs, should be included if attributable and allocable to the proposed program. Since administrative costs for existing DMHAS programs reallocated to a new program do not require new DMHAS resources, a bidder that currently contracts with DMHAS should limit its G&A expense projection to “new” G&A only by showing the full amount of G&A as an expense and the off-set savings from other programs’ G&A in the revenue section.
8. Written assurance that if the bidder receives an award pursuant to this RFP, it will pursue all available sources of revenue and support upon award and in future contracts, including agreement to obtain approval as a Medicaid-eligible provider.

NOTE: A hard copy of the budget must be included as an appendix with all hard copy submissions.

Appendices
The following items must be included as appendices with the bidder's proposal, limiting appendices to a total of 100 pages:
1. Bidder mission statement;
2. Organizational chart;
3. Job descriptions of key personnel;
4. Resumes of key personnel if on staff, limited to 2 pages each;
5. A description of all pending and in-progress audits, the requestor, the firm’s name and telephone number, and the audit type;
6. List of the board of directors, officers and terms of office of each;
7. Documentation of the bidder’s charitable registration status;
8. Original and/or copies of letters of commitment/support;
9. Department of Human Services Statement of Assurances (RFP Attachment C);
10. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions (RFP Attachment D);
11. Source Disclosure Certification Form; and

The documents listed below are required with the proposal, unless the bidder has a current contract with DMHAS and these documents are already on file with DMHAS.
1. Most recent single audit report (A133) or certified statements (submit only hard two copies); and
2. Any other audits performed in the last two (2) years (submit only two [2] hard copies).
VIII. Submission of Proposals

DMHAS assumes no responsibility and bears no liability for costs incurred by the bidder in the preparation and submittal of a proposal in response to this RFP. The narrative portion should be single-spaced with one (1”) inch margins, no smaller than twelve (12) point Arial, Courier New or Times New Roman font, and not exceed 25 pages in length. DMHAS will not consider any information submitted beyond the page limit for scoring purposes. Budget detail and appendix items do not count towards the narrative page limit. Proposals must be submitted no later than 5:00 p.m. Eastern Time on March 25, 2015. Five (5) copies and one (1) original of the proposal narrative, budget and appendices (six [6] total proposal packages) must be submitted to the following address:

For U.S. Postal Service delivery:

Alicia Meyer  
New Jersey Department of Human Services,  
Division of Mental Health and Addiction Services  
PO Box 700  
Trenton, NJ 08625-0700  
OR

For private delivery vendor such as UPS or FedEx:

Alicia Meyer  
Division of Mental Health and Addiction Services  
222 South Warren Street, 3rd Floor  
Trenton, NJ 08608

The bidder may mail or hand-deliver its proposal, however, DMHAS is not responsible for items mailed but not received by the due date. Note that U.S. Postal Service two-day priority mail delivery to the post office box listed above may result in the bidder's proposal not arriving timely and, therefore, being deemed ineligible for contract award. The bidder will not be notified that its proposal has been received. The State will not accept facsimile transmission of proposals.

In addition to the required hard copies, the bidder must also submit its proposal in a PDF formatted file via email to RFP.submissions@dhs.state.nj.us The email “subject” should include the bidder’s name and the proposal name.

The bidder must also submit the completed budget template file as an excel attachment to RFP.submissions@dhs.state.nj.us

Proposal(s) must also be submitted to the County Mental Health Administrator(s) for the county(ies) in which the bidder is proposing services by March 25, 2015. Please refer
to Attachment F regarding the submission preference for each of the County Mental Health Administrators, as some require hard copies while others prefer an electronic version or both methods. For those counties requiring postal mail submission, submit four (4) hard copies.

IX. Review of Proposals

Proposals received after the due date and time will not be evaluated. There will be a review process for all timely submitted proposals. DMHAS will convene a review committee of public employees to conduct a review of each proposal accepted for review.

The bidder must obtain a minimum score of 70 points out of 100 points in order to be considered eligible for funding, as well as meet the threshold score for budget and scope of work sections. Criteria scores and thresholds will become available when proposals become available for public inspection.

Award decisions will be based on such factors as the proposal scope, quality and appropriateness, as well as budget reasonableness. The review committee may choose to visit a bidder’s existing program(s) and/or review any programmatic or fiscal documents in the possession of DMHAS. The bidder is advised that contract award may be conditional upon contract negotiation. The requested changes, along with their requested implementation dates, will be communicated to the prospective awardees prior to final award.

DMHAS reserves the right to reject any and all proposals when circumstances indicate that it is in its best interest to do so. DMHAS’ best interests in this context include, but are not limited to, loss of funding, inability of the bidder(s) to provide adequate services, an indication of misrepresentation of information and/or non-compliance with State and federal laws and regulations, existing DHS contracts, and procedures set forth in DHS Policy Circular P1.04 (http://www.state.nj.us/humanservices/ocpm/home/resources/manuals/index.html).

DMHAS recognizes the invaluable perspective and knowledge that consumers, family members and County Mental Health Boards possess. Input from these groups is an integral component of a system that holds wellness and recovery principles at its core. Consequently, DMHAS will convene an advisory group consisting of consumers and family members to provide input to the review committee regarding the proposals submitted.

County Mental Health Boards recommendations must be submitted to the DMHAS, John Verney, Acute Care Coordinator, at John.Verney@dhs.state.nj.us no later than April 22, 2015. This input will be incorporated in the final deliberations of the review committee.
DMHAS will notify all bidders of awards, contingent upon the satisfactory final negotiation of a contract, by **May 1, 2015**.

### X. Appeal of Award Decisions

An appeal of any award decision may be made only by a respondent to this RFP. All appeals must be made in writing and received by DMHAS at the address below no later than 5:00 p.m. Eastern Standard Time on **May 8, 2015**. The written request must clearly set forth the basis for the appeal.

**Appeal correspondence should be addressed to:**

Lynn A. Kovich, Assistant Commissioner  
Division of Mental Health & Addiction Services  
222 South Warren Street, 3rd Floor  
PO Box 700  
Trenton, NJ 08625-0700

Please note that all costs incurred in connection with appeals of DMHAS decisions are considered unallowable cost for the purpose of DMHAS contract funding.

DMHAS will review all appeals and render a final decision by **May 15, 2015**. Contract award(s) will not be considered final until all timely appeals have been reviewed and final decisions rendered.

### XI. Post Award Required Documentation

Upon award announcement, the successful bidder(s) must be prepared to submit, at a minimum, one (1) copy of the following documentation (if not already submitted with the proposal) in order to process the contract in a timely manner, as well as any other documents required by DMHAS.

1. Most recent IRS Form 990/IRS Form 1120, and Pension Form 5500 (if applicable) (submit only hard two [2] copies);
2. Copy of the Annual Report-Charitable Organization (for information visit: [http://www.state.nj.us/treasury/revenue/dcr/programs/ann_rpt.shtml](http://www.state.nj.us/treasury/revenue/dcr/programs/ann_rpt.shtml));
3. A list of all current contracts and grants as well as those for which the bidder has applied for from any Federal, state, local government or private agency during the contract term proposed herein, including awarding agency name, amount, period of performance, and purpose of the contract/grant, as well as a contact name for each award and the phone number;
4. Proof of insurance naming the State of New Jersey, Department of Human Services, Division of Mental Health and Addiction Services, PO Box 700, Trenton, NJ 08625-0700 as an **additional** insured;
5. Board Resolution authorizing who is approved for entering into a contract and signing related contract documents;
6. Current Agency By-laws;
8. Copy of Lease or Mortgage;
9. Certificate of Incorporation;
10. Co-occurring policies and procedures;
11. Policies regarding the use of medications, if applicable;
12. Policies regarding Recovery Support, specifically peer support services;
13. Conflict of Interest Policy;
15. Affirmative Action Certificate of Employee Information Report, newly completed AA302 form, or a copy of Federal Letter of Approval verifying operation under a federally approved or sanctioned Affirmative Action program. (AA Certificate must be submitted within 60 days of submitting completed AA302 form to Office of Contract Compliance);
16. A copy of all applicable licenses;
17. Local Certificates of Occupancy;
18. Current State of New Jersey Business Registration;
19. Procurement Policy;
20. Current Equipment inventory of items purchased with DHS funds (Note: the inventory shall include: a description of the item, a State identifying number or code, original date of purchase, date of receipt, location at the Provider Agency, person(s) assigned to the equipment, etc.);
21. All subcontracts or consultant agreements, related to the DHS Contracts, signed and dated by both parties;
22. Business Associate Agreement (BAA) for Health Insurance Portability Accountability Act of 1996 compliance, if applicable, signed and dated; and
23. Updated single audit report (A133) or certified statements, if differs from one submitted with proposal.

XII. Attachments
STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
Division of Mental Health and Addiction Services
Proposal Cover Sheet

Name of RFP: 

Incorporated Name of Bidder: 

Type: Public ______ Profit ______ Non-Profit____ Hospital-Based____

Federal ID Number: ___________ Charities Reg. Number (if applicable) ______________

Address of Bidder: 

Contact Person Name and Title: 

Phone No.: ________________ Email Address: __________________

Total dollar amount requested: ___________ Fiscal Year End: ______________

Funding Period: From ________________ to ________________

Total number of unduplicated consumers to be served: __________________

County in which service is to be provided: __________________

Brief description of services by program name and level of service to be provided:

Authorization: Chief Executive Officer (printed name): __________________

Signature: __________________ Date: __________________
Attachment B – Addendum to RFP for Social Service and Training Contracts

STATE OF NEW JERSEY DEPARTMENT OF HUMAN SERVICES

ADDENDUM TO REQUEST FOR PROPOSAL FOR SOCIAL SERVICE AND TRAINING CONTRACTS

Executive Order No. 189 establishes the expected standard of responsibility for all parties that enter into a contract with the State of New Jersey. All such parties must meet a standard of responsibility that assures the State and its citizens that such parties will compete and perform honestly in their dealings with the State and avoid conflicts of interest.

As used in this document, "provider agency" or "provider" means any person, firm, corporation, or other entity or representative or employee thereof that offers or proposes to provide goods or services to or performs any contract for the Department of Human Services.

In compliance with Paragraph 3 of Executive Order No. 189, no provider agency shall pay, offer to pay, or agree to pay, either directly or indirectly, any fee, commission, compensation, gift, gratuity, or other thing of value of any kind to any State officer or employee or special State officer or employee, as defined by N.J.S.A. 52:13D-13b and e, in the Department of the Treasury or any other agency with which such provider agency transacts or offers or proposes to transact business, or to any member of the immediate family, as defined by N.J.S.A. 52:13D-13i, of any such officer or employee, or any partnership, firm, or corporation with which they are employed or associated, or in which such officer or employee has an interest within the meaning of N.J.S.A. 52:13D-13g.

The solicitation of any fee, commission, compensation, gift, gratuity or other thing of value by any State officer or employee or special State officer or employee from any provider agency shall be reported in writing forthwith by the provider agency to the Attorney General and the Executive Commission on Ethical Standards.

No provider agency may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment, contract or other agreement, express or implied, or sell any interest in such provider agency to, any State officer or employee or special State officer or employee having any duties or responsibilities in connection with the purchase, acquisition or sale of any property or services by or to any State agency or any instrumentality thereof, or with any person, firm or entity with which he is employed or associated in which he has an interest within the meaning of N.J.S.A. 52:13D-13g. Any relationships subject to this provision shall be reported in writing forthwith to the Executive Commission on Ethical Standards, which may grant a waiver of this restriction upon application of the State officer or employee or special State officer or employee upon a finding that the present or proposed relationship does not present the potential, actuality or appearance of a conflict of interest.

No provider agency shall influence, or attempt to influence or cause to be influenced, any State officer or employee or special State officer or employee in his official capacity in any manner which might tend to impair the objectivity or independence of judgment of said officer or employee.

No provider agency shall cause or influence, or attempt to cause or influence, any State officer or employee or special State officer or employee to use, or attempt to use, his official position to secure unwarranted privileges or advantages for the provider agency or any other person.

The provisions cited above shall not be construed to prohibit a State officer or employee or special State officer or employee from receiving gifts from or contracting with provider agencies under the same terms and conditions as are offered or made available to members of the general public subject to any guidelines the Executive Commission on Ethical Standards may promulgate.
Attachment C – Statement of Assurances

Department of Human Services
Statement of Assurances

As the duly authorized Chief Executive Officer/Administrator, I am aware that submission to the Department of Human Services of the accompanying application constitutes the creation of a public document that may be made available upon request at the completion of the RFP process. This may include the application, budget, and list of applicants (bidder’s list). In addition, I certify that the applicant:

- Has legal authority to apply for the funds made available under the requirements of the RFP, and has the institutional, managerial and financial capacity (including funds sufficient to pay the non-Federal/State share of project costs, as appropriate) to ensure proper planning, management and completion of the project described in this application.

- Will give the New Jersey Department of Human Services, or its authorized representatives, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with Generally Accepted Accounting Principles (GAAP). Will give proper notice to the independent auditor that DHS will rely upon the fiscal year end audit report to demonstrate compliance with the terms of the contract.

- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. This means that the applicant did not have any involvement in the preparation of the RLI, including development of specifications, requirements, statement of works, or the evaluation of the RLI applications/bids.

- Will comply with all federal and State statutes and regulations relating to non-discrimination. These include but are not limited to: 1) Title VI of the Civil Rights Act of 1964 (P.L. 88-352; 34 CFR Part 100) which prohibits discrimination based on race, color or national origin; 2) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794; 34 CFR Part 104), which prohibits discrimination based on handicaps and the Americans with Disabilities Act (ADA), 42 U.S.C. 12101 et seq.; 3) Age Discrimination Act of 1975, as amended (42 U.S.C. 6101 et. seq.; 45 CFR part 90), which prohibits discrimination on the basis of age; 4) P.L. 2975, Chapter 127, of the State of New Jersey (N.J.S.A. 10:5-31 et. seq.) and associated executive orders pertaining to affirmative action and non-discrimination on public contracts; 5) federal Equal Employment Opportunities Act; and 6) Affirmative Action Requirements of PL 1975 c. 127 (NJAC 17:27).

- Will comply with all applicable federal and State laws and regulations.

- Will comply with the Davis-Bacon Act, 40 U.S.C. 276a-276a-5 (29 CFR 5.5) and the New Jersey Prevailing Wage Act, N.J.S.A. 34:11-56.27 et seq. and all regulations pertaining thereto.

- Is in compliance, for all contracts in excess of $100,000, with the Byrd Anti-Lobbying amendment, incorporated at Title 31 U.S.C. 1352. This certification extends to all lower tier subcontracts as well.
• Has included a statement of explanation regarding any and all involvement in any litigation, criminal or civil.

• Has signed the certification in compliance with federal Executive Orders 12549 and 12689 and State Executive Order 34 and is not presently debarred, proposed for debarment, declared ineligible, or voluntarily excluded. The applicant will have signed certifications on file for all subcontracted funds.

• Understands that this provider agency is an independent, private employer with all the rights and obligations of such, and is not a political subdivision of the Department of Human Services.

• Understands that unresolved monies owed the Department and/or the State of New Jersey may preclude the receipt of this award.

Applicant Organization ________________________________  Signature:  CEO or equivalent

Date ________________________________  Typed Name and Title

6/97
**Attachment D - Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions**

READ THE ATTACHED INSTRUCTIONS BEFORE SIGNING THIS CERTIFICATION. THE INSTRUCTIONS ARE AN INTEGRAL PART OF THE CERTIFICATION.

**Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions**

1. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by an Federal department or agency.

2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

__________________________________
Name and Title of Authorized Representative

__________________________________  ________________
Signature                            Date

This certification is required by the regulations implementing Executive order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510.
Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion
Lower Tier Covered Transactions

Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of facts upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled “Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transaction,” without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Non-Procurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
Attachment E – Disclosure of Investment Activities in Iran

Applicant / Bidder: ___________________________________________

PART 1: CERTIFICATION

APPLICANT / BIDDER MUST COMPLETE PART 1 BY CHECKING EITHER BOX. FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE.

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that the person or entity, or one of the person or entity's parents, subsidiaries, or affiliates, is not identified on a list (on the web at http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf) created and maintained by the New Jersey Department of the Treasury as a person or entity engaging in investment activities in Iran. If the Director finds a person or entity to be in violation of the principles which are the subject of this law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the person or entity.

☐ I certify, pursuant to Public Law 2012, c. 25, that neither the bidder listed above nor any of the bidder's parents, subsidiaries, or affiliates is listed on the NJ Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

OR

☐ I am unable to certify as above because the bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as nonresponsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

PART 2: PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

Using attached sheets, provide a detailed, accurate and precise description of the activities of the bidding person/ entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above.

Certification: I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity. I acknowledge that the State of New Jersey is relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the answers of information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreement(s) with the State of New Jersey and that the State at its option may declare any contract(s) resulting from this certification void and unenforceable.

Full Name (print): ___________________________________________

Signature: _________________________________________________

Title: _____________________________________________________

Date: _____________________________________________________

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## Attachment F - County Mental Health Administrators RFP Submission Preference (as of 12/2014)

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<th>County</th>
<th>Mental Health Administrator</th>
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<td>Email: <a href="mailto:williams_sally@aclink.org">williams_sally@aclink.org</a></td>
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<tr>
<td>Bergen</td>
<td>Michele Hart-Loughlin, Program Coordinator</td>
<td>Email</td>
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<tr>
<td></td>
<td>Email: <a href="mailto:mhartlo@co.bergen.nj.us">mhartlo@co.bergen.nj.us</a></td>
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<tr>
<td>Burlington</td>
<td>Barbara Biglin, Mental Health Administrator</td>
<td>Email</td>
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<td></td>
<td>Email: <a href="mailto:bbiglin@co.burlington.nj.us">bbiglin@co.burlington.nj.us</a></td>
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<tr>
<td>Camden</td>
<td>Rashid M. Humphrey, Mental Health Services</td>
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<tr>
<td>Cape May</td>
<td>Patricia Devaney, Mental Health Administrator</td>
<td>Email</td>
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<tr>
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<td>Juanita Nazario, Mental Health Administrator</td>
<td>Email</td>
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<tr>
<td></td>
<td>Email: <a href="mailto:juanitana@co.cumberland.nj.us">juanitana@co.cumberland.nj.us</a></td>
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<td>Essex</td>
<td>Joseph Scarpelli, D.C., Administrator</td>
<td>Email + Postal Mail</td>
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<td></td>
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<tr>
<td>Hudson</td>
<td>Robin F. James, Mental Health Administrator</td>
<td>Email</td>
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<td>Hunterdon</td>
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<td>Department of Human Services</td>
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8 Gauntt Place - PO Box 2900
Flemington NJ 08822-2900
Email: czahn@co.hunterdon.nj.us

**Mercer**
**Michele Madiou, Administrator**
Division of Mental Health
640 South Broad Street
PO Box 8068
Trenton NJ 08650

**Middlesex**
**Penny Grande, Administrator**
Email: penny.grande@co.middlesex.nj.us

**Monmouth**
**Barry W. Johnson, Administrator**
Email: barry.johnson@co.monmouth.nj.us

**Morris**
**Laurie Becker, Mental Health Administrator**
Email: lbecker@co.morris.nj.us

**Ocean**
**Jamie Busch, Assistant Mental Health Administrator**
Email: JBusch@co.ocean.nj.us

**Passaic**
**Francine Vince, Director**
Email: francinev@passaicipcountynj.org

**Salem**
**Kathy Spinosi, Mental Health Administrator**
Department of Mental Health
94 Market Street
Salem NJ 08079
Email: kspinosi@co.gloucester.nj.us

**Somerset**
**Pam Mastro, Mental Health Administrator**
Email: mastro@co.somerset.nj.us

**Sussex**
**Christine Florio, Mental Health Administrator**
Email: cflorio@sussex.nj.us

**Union**
**Sara Thode, Mental Health Administrator**
Email: sthode@ucnj.org

**Warren**
**Shannon Brennan, Mental Health Administrator/Youth Services Administrator**
Email: sbrennan@co.warren.nj.us

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