REQUEST FOR PROPOSALS

Community Peer Recovery Center

February 13, 2020

Valerie L. Mielke, 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 Department of Human Services (DHS), Division of Mental Health and Addiction Services (DMHAS) to develop regional Community Peer Recovery Centers (CPRC). The CPRC will be a place where individuals can access peer support, information about substance use disorder treatment, recovery support services, and information about other community resources in a supportive substance free environment. This RFP is funded through the Substance Abuse and Mental Health Services Administration’s (SAMHSA) State Opioid Response to Grants (SOR) supplemental funding. The SOR grant funding period is September 30, 2019 to September 29, 2020. Total funding is $700,000 subject to federal appropriations. DMHAS anticipates making up to seven (7) awards in the amount of $100,000 each.

This funding is for start-up of seven (7) small-scale recovery centers that will provide peer-to-peer recovery support services to prevent recurrence of substance use and promote sustained recovery. Successful applicants will provide peer-to-peer recovery support services that are responsive to community needs. All activities and services are led and driven by “peers” (i.e. individuals who have experienced addiction and recovery, either directly or indirectly as a family member or friend). The overall goal of the CPRC is to provide a safe place for recovering individuals to gather in support of one another and experience sober living in a community setting. It is the ideal place for those in recovery to receive peer-to-peer support and attain guidance in a number of life-skill areas. The CPRC will offer social support and give those in recovery a place where they feel that they belong. CPRC will be a place where those in recovery can have the opportunity to give back to their community thereby fostering senses of empowerment and independence.

No funding match is required; bidders will need to identify any other sources of funding, both in-kind and monetary, that will be used. Bidders may not fund any costs incurred for the planning or preparing a proposal in response to this RFP from current DHS/DMHAS contracts.

The following summarizes the RFP schedule:

- February 13, 2020: Notice of Funding Availability
- March 16, 2020: Deadline for receipt of proposals - no later than 4:00 p.m.
- April 15, 2020: Preliminary award announcement
- April 22, 2020: Appeal deadline
- April 29, 2020: Final award announcement
- May 20, 2020: Anticipated contract start date

II. Background and Population to be Served

SAMHSA, Center for Substance Abuse Treatment released the Fiscal Year (FY) 2018 State Opioid Response to Grants (SOR) funding opportunity for states and territories in
June 2018. Funding was made available for grants to states and territories via a formula based on unmet need for opioid use disorder (OUD) treatment and drug poisoning. The goals of the SOR are to address the opioid crisis by increasing access to medication-assisted treatment (MAT), using the three FDS-approved medications for the treatment of opioid use disorder, reducing unmet treatment needs, and reducing opioid overdose related deaths through the provision of prevention, treatment and recovery activities for OUD (including prescription opioids, heroin and illicit fentanyl and fentanyl analogs).

Substance use and misuse continues to be a serious condition that has an impact on the individual, their family members, school, work relationships, etc. Opioid use has become a pervasive problem throughout New Jersey and cannot be neatly compartmentalized by specific race, ethnicity age or socio-economic group. According to the 2015 Treatment Episode Data Set, New Jersey is fifth in the nation for primary heroin admissions for persons aged 12 and older and sixth in the nation for other opiates. The rate of admissions per 100,000 population aged 12 and older was 360 for heroin and 64 for non-heroin opiates/synthetics. The New Jersey 2017 Substance Abuse Overview indicated that heroin and other opiates were the primary drugs in 52% of treatment admissions, with 45% due to heroin and 7% for other opiates.

As the number of individuals seeking treatment continues to be on the rise with this current opioid epidemic, the need for peer run services and recovery-based centers offers individuals a supportive, environment where they can engage and get involved with the recovery community. Currently, in New Jersey there are two state-funded Recovery Centers, one located in the Northern Region and one in the Southern Region. There are very limited recovery support services for individuals after discharge from treatment.

III. Who Can Apply?

To be eligible for consideration for this RFP, the bidder must satisfy the following requirements:

- The bidder may be a non-profit or for-profit entity or governmental entity;
- 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. If a bidder is determined, in DMHAS’ sole discretion, to be insolvent or to present insolvency within the twelve (12) months after bid submission, DMHAS will deem the proposal ineligible for contract award;
- The bidder must not appear on the State of New Jersey Consolidated Debarment Report at [http://www.state.nj.us/treasury/revenue/debarment/debarsearch.shtml](http://www.state.nj.us/treasury/revenue/debarment/debarsearch.shtml) 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 as an employee or in a consultant capacity; and
• 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. This statutory requirement does not apply to non-profit organizations, private colleges and universities, or state and municipal agencies.

IV. Contract Scope of Work

The purpose of the Community Peer Recovery Center (CPRC) is to provide an environment where individuals can access peer support, information about substance use disorder treatment, recovery support services, and information about other community resources in a supportive substance free environment. No individual shall be denied full access to, participation in and enjoyment of CPRC services or activities, available or offered to others, due to the use of legitimately prescribed medications.

The CPRC will offer a warm and welcoming environment, that is a safe and sober space that allows individuals from all recovery backgrounds to come together to receive peer-to-peer support and be offered training, social, educational and recreational opportunities. Programming may include classes focused on wellness, nutrition and illness management, self-care, stress management, financial management, literacy education, job and parenting skills. Housing assistance such as finding sober living homes, apartments and roommates may also be provided as well as telephone support.

While all individuals can benefit from peer recovery support services, those individuals who did not complete treatment may find the CPRC beneficial and a gateway to treatment and/or sustained recovery. There is a group of individuals of unknown size who have never accessed formal treatment who could also benefit from recovery services.

It is anticipated that the funding for the start-up of the CPRC will expand the continuum of care to include an array of services that support individuals in their recovery from substance use and misuse. In summary, this funding will:

• Strengthen the linkage between treatment and recovery;
• Increase support for sustained recovery within the community;
• Support individuals in their recovery and provide them with a sense of hope;
• Offer resources to individuals seeking information on substance use disorder and behavioral treatment. Resources include accessing treatment information through NJ Connect, private insurance, DMHAS Interim Managing Entity (IME) Addictions Access Center, Family Support Centers, Support Team for Addiction Recovery (STAR), Medication Assisted Treatment (MAT) options, etc.;
• Help prevent recurrence of substance use;
• Inform individuals about Naloxone training and where Naloxone kits can be purchased;
• Provide recovery resources;
• Provide a trauma informed community where individuals can achieve a full and satisfying life free of trauma and its consequences;
• Help individuals in recovery to plan, create, invent, and make things happen in their lives;
• Improve life skills;
• Provide a center for community-based leadership to grow and develop; and
• Lead to improved outcomes such as:
  o Abstinence from substances;
  o Increased employment;
  o Increased enrollment education/vocational training;
  o Increased social connectedness; and
  o Reduced involvement in the criminal justice system.

It is expected that service delivery should begin as soon as possible and no later than three (3) months after grant award.

Since the intent of this award is to provide start-up costs, prospective bidders will provide services that include the following:
• Enhancing existing services to fulfill SAMHSA’s Recovery Oriented System of Care principles; and
• Encompassing the following Core Values:
  o Keeping Recovery First;
  o Participatory Process;
  o Authenticity of Peers Helping Peers;
  o Leadership Development; and
  o Cultural Diversity and Inclusion.

Bidders must provide a plan for sustainability that details how the proposed project approach will create project self-sufficiency in order to be considered for funding. This is to help ensure that the impact of the project will continue after Federal assistance has ended. The applicant may include information on plans to secure additional financial resources in their proposal.

**Budget:**

The total budget is for start-up funding for each CPRC up to approximately $100,000 to underwrite the services. Eligible expenses unique to the operation of the CPRC:

• Staff;
• Office space;
• Supplies; and
• Equipment, including a vehicle, a lap-top computer, and cell phones.

**Staffing:**

Staffing such as volunteers or paid staff may include:
• **Senior Peer Services Coordinator** who is intimately familiar with the local recovery community and knowledgeable of all local social services, businesses, faith-based organizations and neighborhoods. This individual must have two years’ experience in the guiding principles of recovery that assist individuals to improve their health and wellness, live a self-directed life, and reach their full potential. This coordinator is responsible for planning, implementing and supervising the events, activities and services that support the mission of the CPRC. For example, planning special events such as Wellness Day or a Recovery Month Event would be an activity that falls under the Senior Peer Services Coordinator’s responsibilities. This individual should also have strong fund-raising experience as well as some management experience.

• **Outreach Coordinator** may be a volunteer who can coordinate peer volunteer programs such as outreach, recruitment, retention, coaching, skill development and incentives. The Outreach Coordinator should create leadership opportunities and encourage peer volunteer participation.

• **Associate Peer Services Coordinator** to assist the Senior Peer Services Coordinator. This individual must have two years’ experience in the guiding principles of recovery that assist individuals to improve their health and wellness, live a self-directed life, and reach their full potential.

• **Volunteers** are a resource and recommended to be part of the CPRC staff. Volunteers should be representative of the community that the CPRC will serve.

• **Certified Peer Recovery Specialists (Recovery Coaches)**
  All Agency staff (paid and volunteer) who provide direct support to individuals shall:
  
  1. complete the DMHAS 3-day Ethics Training;
  2. complete the Connecticut Community for Addiction Recovery (CCAR) 5-day training; and
  3. obtain the Nationally Certified Peer Recovery Support Specialist (NCPRSS) through the National Association of Addiction Professionals (NAADAC), or the CPRS certification through the International Certification & Reciprocity Consortium (IC&RC), or a similar certification with prior, written DMHAS approval.

**Location:**

The CPRC will have a prominent, visible location, whose sole purpose is to promote recovery. It will be easily accessible to those without personal transportation. The facility must be compliant with New Jersey laws requiring a smoke-free environment and American with Disabilities (ADA) compliant.
**Hours of Operation:**

The CPRC will be open at least three days per week, one of which will be a weekend day. There will be at least three nights the CPRC will remain open until 9 p.m. It should be open at least 20 hours per week. Thus, the schedule may be flexible; it may be open from 10 a.m. to 2 p.m., close for a few hours, then reopen from 5 p.m. to 9 p.m. This example is for illustrative purposes only.

**Program Design:**

The start-up funding for the CPRC is to expand the recovery continuum through peer-to-peer recovery support services to prevent recurrence of substance use and promote sustained recovery. It is the expectation that the CPRC be volunteer-driven, member-inspired and premised on peer support. The program efforts will be overseen by the paid staff but influenced by the local recovery community.

The CPRC will be inclusive to various groups, treatment protocols, self-help affiliations, or lack thereof. It will also be sensitive to differences related to age, culture, religion/spirituality, language, gender, race/ethnicity, disabilities, mental health issues and sexual orientation. It will recognize that there are many pathways to recovery and will not discriminate against those who choose medication assisted recovery. It is the expectation that the CPRC must be inclusive of a variety of self-help groups and offer itself as a resource to a broad range of addictions self-help communities.

The CPRC organization structure should create a Recovery Center Board that is comprised with a percentage of representatives from the local recovery community. All program efforts shall be overseen by the paid staff and are influenced by the Recovery Center Board and the local recovery community. Additionally, recovery support services and/or activities may be provided such as:

- Social events and/or recreational activities
- Wellness classes
- Recovery coaching
- Telephone support
- Illness management
- Substance use disorder literacy
- Smoking cessation
- Relaxation and meditation
- Nutrition
- Creative Arts
- Other classes such as literacy, parenting skills, English as a second language, vocational/education, financial literacy and management, etc.
- Support groups
- Learning circles
- Housing, childcare, language and employment assistance
- Special programs to address special issues and concerns
Cultural appropriateness should be evident at all levels of this proposal. It is important that the CPRC paid and volunteer staff are representative of the diversity of the community that it will serve. The awardee will be expected to recruit, retain and train staff from cultural, economic, and linguistic backgrounds that complement the individuals to be served. The applicant will be required to provide a staff and volunteer orientation program with applications kept on file.

It is expected that successful bidders aggressively market the CPRC. They will need to outreach to treatment providers, community leaders, and various support groups. Materials will also be available in Spanish or other languages appropriate to the target population. Client recruitment procedures will need to be included in the proposal to this RFP.

Successful bidders must have protocols and procedures linking and assisting families with accessing treatment including MAT, other treatment resources such as the IME Addictions Access Center, NJ Connect and/or other support services. Successful bidders must have protocols and procedures in linking families to other services where there may be barriers to accessing treatment, such as transportation.

**Data Collection/Evaluation:**

The successful bidder will be required to comply with DMHAS’ program evaluation by responding to data requests from DMHAS’ evaluator, participating in the data collection system and tools to be developed for this program, facilitating completion of consumer satisfaction questionnaires and any other monitoring and evaluation activities. The successful bidder will document units of service delivered using data collection forms developed by DMHAS. It is expected that clients will experience positive changes in social skills and increase social interaction in a sober setting. Data collection will be in areas of client substance use, family and living condition, employment status, social connectedness, access to treatment, retention in treatment and criminal justice status. Data will be collected at baseline, six months and one year after baseline.

Since this funding is for start-up costs for a CPRC, it will be important to collect activity information beyond client level information. A data collection system will track the volume of visitors on a weekly basis, the number of different programs offered, program attendance, informational material distributed, outreach attempts to the community, etc. The successful bidder will work with the DMHAS’ program evaluation team and other collaborative partners to identify specific program outcomes demonstrating the effectiveness of this service model.

**V. General Contracting Information**

Bidders must currently meet or be able to meet the terms and conditions of the Department of Human Services (DHS) contracting rules and regulations as set forth in the Standard Language Document (SLD), the Contract Reimbursement Manual (CRM),
and the Contract Policy and Information Manual (CPIM). These documents are available on the website at: 

Bidders are required to comply with the Affirmative Action Requirements of Public Law 1975, c. 124 (N.J.A.C. 17:27) and the requirements of the Americans with Disabilities Act of 1991 (P.L. 101-336).

Budgets should be reasonable and reflect the scope of responsibilities in order to accomplish the goals of this project.

All bidders will be notified in writing of the State’s intent to award a contract. All proposals are considered public information and will be made available for a defined period after announcement of the contract awards 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 renewable for one (1) year at DMHAS’ sole discretion and with the agreement of the awardee. 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 Policy P1.12 available on the web at http://www.nj.gov/humanservices/olra/ocpm/resources/manuals/, 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 DMHAS.

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/.
VI. Written Intent to Apply and Contact for Further Information

Bidders must email RFP.submissions@dhs.nj.gov by March 9, 2020 indicating their agency’s intent to submit a proposal. Submitting a notice of intent to apply does not obligate an agency to apply. Failure to submit a letter of intent by this deadline shall not disqualify a bidder from applying to this grant opportunity.

Any questions regarding this RFP should be directed via email to RFP.submissions@dhs.nj.gov no later than February 21, 2020. All questions and responses will be compiled and emailed to all those who submit a question and/or provide a notice of intent to apply. Bidders are guided to rely upon the information in this RFP and the responses to questions that were submitted by email to develop their proposals. Specific guidance, however, will not be provided to individual applicants at any time.

VII. Required Proposal Content

All bidders must submit a written narrative proposal that addresses the following topics, and adheres to all instructions and includes required supporting documentation noted below:

Funding Proposal Cover Sheet (RFP Attachment A)

Bidder’s Organization, History and Experience (10 points)
Provide a brief and concise summary of the bidder’s background and experience in implementing this or related types of services and explain how the bidder is qualified qualification to fulfill the obligations of the RFP. The written narrative should:

1. Describe the agency’s history, mission, purpose, current licenses and modalities, and record of accomplishments. Explain the work with the target population and the number of years’ experience working with the target population.
2. Describe the bidder’s background and experience in implementing this or related types of services. Describe why the bidder is the most appropriate and best qualified to implement this program in the target service area.
3. Summarize the bidder’s administrative and organizational capacity to establish and implement sound administrative practices and successfully carry out the proposed program and describe why the bidder is the most appropriate and best qualified to implement this program in the target service area.
4. Attach a one-page copy of the agency’s organizational chart showing the location of the proposed project and its links in the organization.
5. Describe 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.
6. Provide a description of all active litigation in which the bidder is involved, including pending litigation of which the bidder has received notice. Failure to disclose active or pending litigation may result in the agency being ineligible for contract award at DMHAS’ sole discretion.
7. Demonstrate the organization’s commitment to cultural competency and diversity (Law against Discrimination, N.J.S.A. 10:5-1et seq.) and ability to provide culturally competent services.
8. Describe the bidder’s current status and compliance with DMHAS contract commitments in regard to programmatic performance and level of service, if applicable.

**Project Description (40 points)**
In this section, the bidder is to provide an overview of how the services detailed in the scope of work will be implemented and the timeframes involved, specifically addressing the following:
1. How the bidder's proposed approach satisfies the requirements as stated in the RFP.
2. The bidder’s understanding of the project goals and measurable objectives.
3. Indicate the number of total (duplicated) and unduplicated individuals you will serve annually.
4. Attach a flow chart outlining the operational steps of the proposed program.
5. Description of all anticipated barriers and potential problems the bidder foresees itself and/or the State encountering in the successful realization of the initiative described herein.
6. Provide a plan to address transportation barriers.
7. Description of any other resources needed by the bidder to satisfy the requirements of the contract resulting from this RFP.
8. Describe your Recovery Center Board.
9. Provide a draft of your Code of Ethics and grievance policy/procedures.
10. Provide a draft on how you will address recurrence of substance use.
11. Provide a draft on your policy regarding individuals who do not adhere to the 12 Steps and Traditions since CPRC exists as a recovery support and not affiliated with 12-step or any other sort of recovery program.
12. Description of collaboration with other entities in the course of fulfilling the requirements of the contract resulting from this RFP; include affiliation agreements.
14. A description of the bidder's last Continuous Quality Improvement effort, identified issue(s), actions taken, and outcome(s).
15. The implementation schedule for the contract, including a detailed monthly timeline of activities, commencing with the date of award, through service initiation, to timely contract closure.
16. Describe your plan to continue the proposed project after the funding period ends. Also describe how program continuity will be maintained when there is a change in the operational environment (e.g., staff turnover, change in project leadership) to ensure stability over time.
17. Provide a plan for sustainability that details how the proposed project approach will create project self-sufficiency and help to ensure that the impact of the project will continue after Federal assistance has ended. The applicant may include information on plans to secure additional financial resources.
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 utilized to measure successes and/or setbacks associated with this project:
1. The bidder’s approach to measurement of consumer satisfaction.
2. The bidder's measurement of the achievement of identified goals and objectives.
3. Bidder’s attestation to cooperate in the DMHAS evaluation and provide required data.
4. Details about any 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 (15 points)
Bidders must determine staff structure to satisfy the contract requirements. Bidders should describe the proposed staffing structure and identify how many staff will be hired to meet the needs of the program.
1. Describe the composition and skill set of staff, including staff qualifications, competencies, and peer support and/or recovery experience.
2. Provide details for the Full Time Equivalent (FTE) and/or Part Time Equivalent (PTE) staffing required to satisfy the contract scope of work. Describe proposed staff qualifications, including certifications, competencies, trainings, professional licensing and related experience. Details should include currently on-board or to be hired staff, with details of the recruitment effort. Identify bilingual staff.
3. Provide details on recruiting volunteer staff for the program and how volunteers will be trained to provide program requirements/activities.
4. Provide copies of job descriptions or resumes as an appendix – limited to two (2) pages each – for all proposed staff.
5. Identify the number of work hours per week that constitute each staff in the bidder's proposal.
6. Describe the proposed organizational structure, including an organizational chart in an appendix to the bidder's proposal.
7. Provide the agency's hiring policies, including background and credential checks, as well as handling of prior criminal convictions.
8. Provide the approach and scheduling of supervision.
9. Provide a list of the bidder's board members and current term, 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.
10. Provide 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).
Facilities, Logistics, Equipment (5 points)
The bidder should detail its facilities where its normal business operations will be performed and identify equipment and other logistical issues, including at a minimum:
1. A description of the plan for office space, vehicle, and any needs specific to this project.
2. A description of the location in which the program will be held. Please provide information about accessibility, safety, access to public transportation, etc.
3. A description of the manner in which tangible assets, i.e., computers, phones, other special service equipment, etc., will be acquired and allocated.
4. A description of the bidder's Americans with Disabilities Act (ADA) accessibility to its facilities and/or offices for individuals with disabilities.

Budget (20 points)
DMHAS will consider the cost efficiency of the proposed budget as it relates to the scope of work. Therefore, bidders must clearly indicate how this funding will be used to meet the program goals and/or requirements. In addition to the required Budget forms, bidders 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 must be delineated and the budget notes must clearly articulate budget items including a description of miscellaneous expenses and other costs.

1. A detailed budget using the Annex B Excel template is required. The Excel budget template will be emailed to those who submit a written intent to apply. The Annex B Excel template must be uploaded as an Excel file onto the file transfer protocol site described in VIII. Submission of Proposal Requirements. Failure to submit the budget as an Excel file may result in a deduction of points. The standard budget categories for expenses include: A. Personnel, B. Consultants and Professionals, C. Materials & Supplies, D. Facility Costs, E. Specific Assistance to Clients, and F. Other. Supporting schedules for Revenue and General and Administrative Costs Allocation are also required. The budget must include two (2) separate, clearly labeled sections:
   a. Section 1 – Full annualized operating costs to satisfy the scope of work detailed in the RFP and revenues, including one-time costs; (which by formula will be included in total award) and
   b. Section 2 - Proposed one-time costs if any, which will be included in the Total Gross Costs.
2. 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 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 Excel template 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 submitted.

4. For all proposed personnel, the template should identify the staff position titles and staff names for current staff (only if being allocated to this program) and total hours per workweek.

5. Identify the number of hours per clinical consultant.

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 package.

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.

Appendices
The following items must be included as appendices with the bidder's proposal, limiting appendices to a total of 50 pages. **Omission of items #7-11 with proposal will exclude proposal from review.**

1. Bidder mission statement;
2. Organizational chart;
3. Job descriptions of key personnel;
4. Resumes of proposed personnel if on staff, limited to two (2) pages each;
5. A description of all pending and in-process audits identifying the requestor, the firm’s name and telephone number, and the type and scope of the audit;
6. List of the board of directors, officers and terms;
7. Copy of documentation of the bidder’s charitable registration status (www.njconsumeraffairs.gov/charities);
8. Department of Human Services Statement of Assurances (RFP Attachment C);
9. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions (RFP Attachment D);
10. Disclosure of Investment in Iran (www.nj.gov/treasury/purchase/forms.shtml);
11. Statement of Bidder/Vendor Ownership Disclosure (www.nj.gov/treasury/purchase/forms.shtml); and
12. Original and/or copies of letters of commitment/support.

Additional attachments that are requested in the written narrative section and not listed in items #1-12 under Appendices do not count towards the 50-page limit for appendices. Appendix information exceeding 50 pages will not be reviewed.
The documents listed below are also required with the proposal unless the bidder has a current contract with DMHAS and these documents are current and on file with DMHAS. Audits do not count towards appendices 50-page limit.

1. Most recent single audit report (A133) or certified statements (submit only two [2] copies); and
2. Any other audits performed in the last two (2) years (submit only two [2] copies).

VIII. Submission of Proposal Requirements

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 of the proposal should not exceed 15 pages, be single-spaced with one (1”) inch margins, and no smaller than twelve (12) point Arial, Courier New or Times New Roman font. For example, if the bidder's narrative starts on page 3 and ends on page 18 it is 16 pages long, not 15 pages. DMHAS will not consider any information submitted beyond the page limit for RFP evaluation purposes.

The budget notes and appendix items do not count towards the narrative page limit. Proposals must be submitted no later than 4:00 p.m. on March 16, 2020. All bidders are required to submit one (1) original and five (5) copies of the proposal narrative, budget and appendices (six [6] total proposal packages) to the following address:

For private delivery vendor such as UPS or FedEx:

Helen Staton  
Department of Human Services  
Division of Mental Health and Addiction Services  
120 South Stockton Street, 3rd Floor  
Trenton, NJ 08611

OR

For U.S. Postal Service delivery:

Helen Staton  
Department of Human Services  
Division of Mental Health and Addiction Services  
PO Box 362  
Trenton, NJ 08625-0362

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 RFP evaluation.
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 (including narrative, budget, budget notes, and appendices) electronically. The proposal must be uploaded as a PDF file and the Excel budget template as an Excel file by the deadline using a file transfer protocol site. Username and password are case sensitive and must be typed exactly as shown below. Once logged in, the upload button is on the upper left side. Upload the proposal PDF file and budget Excel file separately, including the bidder’s name in both file names. Click on the green check mark in order to submit the files. Once the upload is complete, click the red logout button at the top right of the screen.

Go to:  https://ftpw.dhs.state.nj.us.  
Username - xbpupload  
Password - Network1!  
Directory - /ftp-dmhas/xbpupload

**IX. Review of Proposals**

There will be a review process for all responsive 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 for the proposal narrative and budget sections in order to be considered eligible for funding.

DMHAS will award up to 20 points for fiscal viability, using a standardized scoring rubric based on the audit, which will be added to the average score given to the proposal from the review committee. Thus, the maximum points any proposal can receive is 120 points, which includes the combined score from the proposal narrative and budget as well as fiscal viability.

In addition, if a bidder is determined, in DMHAS’ sole discretion, to be insolvent or to present insolvency within the twelve (12) months after bid submission, DMHAS will deem the proposal ineligible for contract award.

Contract award recommendations will be based on such factors as the proposal scope, quality and appropriateness, bidder history and experience, as well as budget reasonableness. The review committee will look for evidence of cultural competence in each section of the narrative. The review committee may choose to visit a bidder's existing program(s), invite a bidder for interview, and/or review any programmatic or fiscal documents in the possession of DMHAS. The bidder is advised that the contract award may be conditional upon final contract and budget negotiation.

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 Policy Circular P1.04 (http://www.nj.gov/humanservices/olra/ocpm/resources/manuals/).

DMHAS will notify all bidders of contract awards, contingent upon the satisfactory final negotiation of a contract by April 15, 2020.

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 be received by DMHAS at the address below no later than 4:00 p.m. on April 22, 2020. The written appeal must clearly set forth the basis for the appeal.

Appeal correspondence should be addressed to:

Valerie L. Mielke, Assistant Commissioner
Division of Mental Health and Addiction Services
5 Commerce Way
PO Box 362
Hamilton, NJ 08691-0362

Or via email: Helen.Staton@dhs.nj.gov

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 April 29, 2020. Contract award(s) will not be considered final until all timely filed appeals have been reviewed and final decisions rendered.

XI. Post Award Required Documentation

Upon final contract award announcement, the successful bidder(s) must be prepared to submit (if not already on file), one (1) original signed document for those requiring a signature or copy of the following documentation (unless noted otherwise) in order to process the contract in a timely manner, as well as any other contract documents required by DHS/DMHAS.

1. Most recent IRS Form 990/IRS Form 1120, and Pension Form 5500 (if applicable) (submit 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);
3. A list of all current contracts and grants as well as those for which the bidder has applied 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 362, Trenton, NJ 08625-0362 as an additional insured;

5. Board Resolution identifying the authorized staff and signatories for contract actions on behalf of the bidder;

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 AA 302 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 [make, model], a State identifying number or code, original date of purchase, purchase price, 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 contract, 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;
23. Updated single audit report (A133) or certified statements, if differs from one submitted with proposal;
24. Business Registration (online inquiry to obtain copy at https://www1.state.nj.us/TYTR_BRC/jsp/BRCLoginJsp.jsp; for an entity doing business with the State for the first time, it may register at http://www.nj.gov/treasury/revenue);

25. Source Disclosure (EO129) (www.nj.gov/treasury/purchase/forms.shtml); and

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

Name of RFP: Community Peer Recovery Center

Incorporated Name of Bidder: ________________________________

Type: Public ______  Profit ______  Non-Profit____  Hospital-Based ____

Federal ID Number: ________________ Charities Reg. Number (if applicable) ________________

DUNS Number: ____________________________

Address of Bidder: __________________________________________

__________________________________________________________________________

Chief Executive Officer Name and Title: ____________________________

Phone No.: _________________________  Email Address: ____________________________

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 services are 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: ____________________________
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 or 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 RFP, including development of specifications, requirements, statement of works, or the evaluation of the RFP 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.