Procurement Notice

State of Connecticut
Department of Social Services
Certified Community Behavioral Health Clinics (CCBHCs)
Request for Application (RFA)
CCBHC RFA 05092025

The State of Connecticut ("CT") Department of Social Services ("Department" or "DSS") in partnership with CT Department of Mental Health Services ("DMHAS") and CT Department of Children and Families ("DCF"), herein after referred as Departments are seeking applications from eligible Connecticut-based community behavioral health clinics to apply to participate in a Substance Abuse and Mental Health Administration (SAMHSA) CCBHC state Planning Grant to seek certification as CCBHC Clinic. The work term shall be one year and is anticipated to begin on 07/15/2025 through 7/14/2026. If DSS receives a SAMHSA CCBHC Demonstration Project Award, clinics that have attained CCBHC Clinic Certification will be eligible and expected to participate in the four–year Demonstration as a participating clinic.

The Request for Application ("RFA") is available in electronic format on the following websites:

- CTSource Bid Board: https://portal.ct.gov/DAS/CTSource/BidBoard
- Department of Social Services' website at: http://www.ct.gov/dss/rfp

DSS is the lead agency for this procurement The Departments reserve the right to reject all applications or cancel this procurement at any time if deemed in the best interest of the State of Connecticut ("State"). The Departments are Equal Opportunity/Affirmative Action Employer. Deaf and hearing-impaired persons may use a TYY by calling 1-800-671-0737. application

Submissions must be received no later than 06/16/2025, 04:00 PM Eastern Standard Time (EST)

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SECTION I – GENERAL INFORMATION

A. INTRODUCTION

1. **Name and Number:** Connecticut Certified Community Behavioral Health Clinics Request for Application **(CCCBHC RFA 05082025)**

2. **RFA Summary.**

The Department of Social Services ("DSS"), Department of Mental Health and Addiction Services ("DMHAS"), and Department of Children and Families ("DCF') are seeking applications from providers who wish to seek certification as a Certified Community Behavioral Health Clinic (CCBHC) and subsequent participation in the CCBHC 4-year Demonstration Program. CCBHCs represent an opportunity for states to improve the behavioral health of their citizens across their lifespan by:

- Providing community-based mental health and substance use disorder services;
- Advancing integration of behavioral health with physical health care;
- Assimilating and utilizing evidence-based practices on a more consistent basis;
- Promoting improved timely access to high-quality care, particularly for underserved groups;
- Addressing Behavioral Health Disparities in access, outcomes, and experience of care
- Providing Crisis Services;
- Serving all who seek care regardless of their insurance status, ability to pay, or where they live in the state; and
- Integrating Community feedback into governance processes and instituting/improving organizational standards related to quality improvement

3. **Commodity Codes.** The services that the Department wishes to procure through this RFA are as follows:

- 80000000: Management and Business Professionals and Administrative Services
- 85000000: Healthcare Services

B. ABBREVIATIONS / ACRONYMS / DEFINITIONS

ADA	The Americans with Disabilities Act of 1990
ASAM	American Society of Addiction Medicine
BFO	Best and Final Offer
CMAP	Connecticut Medical Assistance Program
CCBHC	Certified Community Behavioral Health Clinic
C.G.S.	Connecticut General Statutes
CHRO	Commission on Human Rights and Opportunity (CT)
CCBHC	Certified Community Behavioral Health Clinic
CONNIE	CT's State Administered Health Information Exchange
CT	Connecticut
DCF	Department of Children and Families
DCO	Designated Collaborating Organization
DMHAS	Department of Mental Health and Addiction Services
DPH	Department of Public Health
DSS	Department of Social Services (CT)
EHR	Electronic Health Records

EBPs	Evidence-Based-Practices
FQHC	Federally Qualified Health Center
FOIA	Freedom of Information Act (CT)
HIE	Health Information Exchange
HUSKY	Healthcare for Uninsured Kids and Youth (AKA the CT Medicaid and CHIP Programs)
MAUD	Medications for Alcohol Use Disorder
MCS	Mobile Crisis Services
MOUD	Medications for Opioid Use Disorder
OAG	Office of the Attorney General
OPM	Office of Policy and Management (CT)
OSC	Office of the State Comptroller (CT)
P.A.	Public Act (CT)
POS	Purchase of Service
RFA	Request for Application
SAMHSA	Substance Abuse and Mental Health Services Administration
TA	Technical Assistance
TCM	Targeted Case Management
TTY	Teletypewriter
TYY	Telecommunications Relay Services permit persons with a hearing or speech disability to use the telephone system via a text telephone or other device to call persons with or without such disabilities.
U.S.	United States

- **Application Submission("Submission"):** All material prepared and assembled by a Respondent, and which the Respondent submits in response to this RFA.

- **Applicant:** A private provider organization, not-for-profit organization with clinics located in Connecticut that has submitted an application to the Agency in response to this RFA.

- **ProspectiveApplicant :** A private provider organization, not-for-profit organization with clinics located in Connecticut that may submit an application to the Agency in response to this RFA but has not yet done so.

- **Subcontract:** Any separate agreement or contract between the Contractor and an individual, other than an employee of the Contractor or entity ("Subcontractor") to perform all or a portion of the duties and obligations that the Contractor is obligated to perform pursuant to this Contract.

- **Subcontractor:** An individual (other than an employee of the contractor) or business entity hired by a contractor to provide a specific health or human service as part of a POS contract with the Agency because of this RFA.

C. INSTRUCTIONS

1. **Official Contact.** The Department has designated the individual below as the Official Contact for purposes of this RFA. The Official Contact is the **only authorized contact** for this procurement and, as such, handles all related communications on behalf of the Department. Respondents, prospective respondents, and other interested parties are advised that any communication with any other Department employee(s) (including appointed officials) or personnel under contract to the Department about this RFA is strictly prohibited. Respondents or prospective respondents who violate this instruction may risk disqualification from further consideration.

Name: Somaya McDermott
Address: 55 Farmington Avenue, Hartford, CT 06105
E-Mail: DSS.Procurement@ct.gov

Please ensure that e-mail screening software (if used) recognizes and accepts e-mails from the Official Contact.

2. **RFA Information.** The RFA, addenda to the RFA, and other information associated with this procurement are available in electronic format from the Official Contact or from the Internet at the following locations:

   - Department's RFA Web Page at: http://www.ct.gov/dss/rfp
   - CTsource Bid Board at: https://portal.ct.gov/DAS/CTSource/BidBoard

   It is strongly recommended that any respondent or prospective respondent interested in this procurement check the CTsource Bid Board for any solicitation changes. Interested respondents may receive additional e-mails from CTsource announcing addendums that are posted on the portal. This service is provided as a courtesy to assist in monitoring activities associated with State procurements, including this RFA

3. **Registering with State Contracting Portal.** It is strongly recommended that Respondents register with the State of CT contracting portal at https://portal.ct.gov/DAS/CTSource/Registration if not already registered.

   Respondents shall submit the following information pertaining to this application to this portal (on their supplier profile), which shall be checked by the Agency contact.
   - Secretary of State recognition – Click on the appropriate response
   - Nonprofit status, if applicable
   - Notification to Bidders, Parts I-V
   - Campaign Contribution Certification (OPM Ethics Form 1)

4. **Contract awards.** The award of any contract pursuant to this RFA is dependent upon the availability of funding to the Department. The Department anticipates the following:

   a. **Number of Contracts**: Based on the number of qualified applicants and funding available with a maximum of three 1 year contract periods.

      Anticipated Contract term: The term of the contract shall be for 1 year and is anticipated to begin on 07/15/2025 to 07/14/2026.

      If DSS receives a SAMHSA CCBHC Demonstration Project Award, clinics that have achieved CCBHC Clinic Certification will be eligible and expected to participate in the four-year Demonstration, the contract is expected to end on 7/14/2030.

5. **Eligibility:**

   a. Must be a Private, Not-for-profit organization with clinics located in Connecticut
   b. Enrolled in the Connecticut Medical Assistance Program ("CMAP") network as a freestanding mental health/substance abuse clinic (50/50) or a Federally Qualified Health Center ("FQHC"), with at least one (1) physical location in operation before April 1, 2024.
   c. Must be in good standing with the Departments (DSS, DCF, DMHAS, & DPH) with no unresolved or outstanding financial auditing or quality assurance concerns.

6. **Minimum Qualifications of Respondents**. To qualify for a contract award, a Respondent must have the following minimum qualifications:
    a. Must utilize an electronic health record to document, report on, and improve services provided.
    b. Must be accredited as a provider of behavioral health services by The Joint Commission ("TJC") Commission on the Accreditation of Rehabilitation Facilities ("CARF"), or the Council on Accreditation ("COA")
    c. Must currently submit electronic health record data to the State's Health Information Exchange ("HIE"), CONNIE, or agree to begin submission within six months of obtaining certification as a CCBHC.

   The Department reserves the right to reject the submission of any Respondent in default of any current or prior contract.

7. **Procurement Schedule.** Dates after the due date for submissions ("Submission Due") are target dates only (*). The Department may amend the schedule, as needed. Any change shall be made by means of an addendum to this RFA and shall be posted on the State Contracting Portal and the Department's RFA Web Page.

Milestones	Ending Dates
RFA Released	05/09/2025
RFA Conference	05/13/2025;11:00 AM EST
Deadline for Questions **Due 4:00 PM EST**	05/16/2025
(*)Responses to Questions	05/22/2025
Applications Due by **4:00 PM EST**	06/16/2025
(*) Start of Contract (Implementation)	07/15/2025

8. **RFA Conference.** The Department will hold an optional virtual RFA conference on **May 13, 2025 at 11:00 AM EST** to answer clarifying questions from Prospective Respondents about this RFA. Prospective Respondents interested in attending the RFA Conference must submit an email at DSS.Procurement@ct.gov to the Official Contact, on or before **May 12, 2028, and not later than 1:00 PM EST** with the name(s), title(s) and email address of the RFA Conference participants. Only interested participants that meet the criteria identified in Section I.C.8 are able to have access to **this RFA Conference link.** Attendance at the virtual conference is optional but is strongly encouraged. Please click the link here to follow **Instructions Attending Microsoft Teams Meeting.** At the conference, attendees will be provided an opportunity to ask questions, which the Agency's representatives may (or may not) answer at the conference. Any oral answers given at the conference by the Agency's representatives are tentative and not binding on the Agency. All questions submitted will be answered in a written amendment to this RFA, which will serve as the Agency's official response to questions asked at the conference. If any answer to any question constitutes a material change to the RFA, the question and answer will be placed at the beginning of the amendment and duly noted as such. The agency will release the amendment on the date established in the Procurement Schedule. The Agency will publish any and all amendments to this RFA on the State Contracting Portal and, if available, on the Agency's RFP Web Page.

9. **Inquiry Procedures.** All questions regarding this RFA or the Department's procurement process must be directed, in writing, to the Official Contact before the deadline specified in the Procurement Schedule. The early submission of questions is encouraged.

Questions shall not be accepted or answered verbally – neither in person nor over the telephone. All questions received before the deadline shall be answered. However, the Department shall not answer questions when the source is unknown (i.e., nuisance or anonymous questions). Questions deemed unrelated to the RFA or the procurement process shall not be answered. At its discretion, the Department may or may not respond to questions received after the deadline. The Department may combine similar questions and give only one answer. All questions and answers shall be compiled into a written addendum to this RFA. If any answer to any question constitutes a material change to the RFA, the question and answer shall be placed at the beginning of the addendum and noted as such. The agency shall release the answers to questions on the date established in the Procurement Schedule. The Department shall publish all amendments and addenda to this RFA on the State Contracting Portal and on the Department's RFA Web Page. **Submissions must include a signed Addendum Acknowledgement, which shall be placed at the end of all addenda to this RFA.**

10. **Submission Due-Date and Time.**

The Official Contact is the only authorized recipient of application submitted in response to this RFA. Application **must** be received by the Official Contact on or before the due date and time

- **Due Date:** 06/16/2025
- **Time:** 4:00 PM EST

The submission of the electronic copy of the application must be emailed to the Official Agency Contact for this RFA to **DSS.Procurement@ct.gov**.

The subject line of the email must read: **CCBHC RFA 05092025**

Submissions received after the due date and time shall be ineligible and shall not be evaluated. The Departments, through DSS shall send an official letter alerting late respondents of ineligibility.

THIS IS AN ELECTRONIC SUBMISSION. Please be aware of the amount of time it may take for an electronic submission to be sent from one server and accepted by another server. Each file sent to the Official Contact, shall not be larger than 35 MB per e-mail.

An acceptable submission must include the following:

An acceptable application submission must include the following: One (1) conforming electronic submission of the original application. The application submission via email must be complete, properly formatted and outlined, and ready for evaluation by the Evaluation Committee. Unsigned submissions shall not be evaluated.

The electronic copy of the application must be compatible with Microsoft Office Word.. Only the documents specified in Section IV.H and Sections IV.I.2. are required to be submitted in Portable Document Format (PDF).

11. **Multiple Applications.**The submission of multiple applications is not an option with this procurement.

12. **Claim of Exemption from Disclosure.** Respondents are advised that all materials associated with this request, procurement or contract are subject to the terms of the

Freedom of Information Act, Conn. Gen. Stat. §§ 1-200 et seq. (FOIA). Although there are exemptions in the FOIA, they are permissive and not required. If a Respondent believes that certain information or documents or portions of documents required by this request, procurement, or contract is exempt from disclosure under the FOIA, the Respondent must mark such information or documents or portions of documents as EXEMPT. In Section IV of its submission, the Respondent must indicate the documents or pages where the information labeled EXEMPT is in the application.

For information or documents so referenced, the Respondent must provide a detailed explanation of the basis for the claim of exemption. Specifically, the Respondent must cite to the FOIA exemption that it is asserting as the basis for claim that the marked material is exempt. In addition, the Respondent must apply the language of the statutory exemption to the information or documents or portions of documents that the Respondent is seeking to protect from disclosure. For example, if a Respondent marks a document as a trade secret, the Respondent must parse the definition in Section 1 210(b)(5)(A) and show how all the factors are met. Notwithstanding this requirement, DSS shall ultimately decide whether such information or documents are exempt from disclosure under the FOIA.

13. **Conflict of Interest - Disclosure Statement.** Respondents must include a disclosure statement concerning any current business relationships (within the past three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the respondent and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a respondent tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. The Department shall determine whether any disclosed conflict of interest poses a substantial advantage to the respondent over the competition, decreases the overall competitiveness of this procurement, or is not in the best interests of the State. In the absence of any conflict of interest, a respondent must affirm such in the disclosure statement*: "[name of respondent] has no current business relationship (within the past three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."*

D. APPLICATION FORMAT

1. **Required Outline.** All applications must follow the required outline presented in Section IV. Application Outline. Applications that fail to follow the required outline shall be deemed, at the discretion of the Department, non-responsive and not evaluated.

2. **Cover Sheet.** The Cover Sheet is Page 1 of the application. Respondents must complete and use the **Cover Sheet** orm, which is embedded in this section as a hyperlink.

3. **Table of Contents.** All applications must include a Table of Contents that conforms to the required application outline. (See Section IV.)

4. **Executive Summary.** Applications must include a high-level summary not exceeding two pages of the main application and cost application. The executive summary must provide a summarization of the services being offered to meet the Department's needs, the Respondent's approach to providing these services, and why this approach is in the best interest of the Department. The summary must also include the organization's eligibility and qualifications to respond to this RFA.

5. **Attachments.** Attachments other than the required Appendices or Forms identified in Section IV are not permitted and shall not be evaluated. Further, the required Appendices

or Forms must not be altered or used to extend, enhance, or replace any component required by this RFA. Failure to abide by these instructions shall result in disqualification.

6. **Style Requirements.** **THIS IS AN ELECTRONIC SUBMISSION.** Submitted applications **must** conform to the following specifications:

Paper Size:	Generally, 8½" x 11" in "portrait" orientation. Optionally key graphics, diagrams and flow charts can use 11" x 17" in "landscape" orientation.
Page Limit:	Based on Section IV. Application Outline = 22 pages
Print Style:	1 sided.
Font Size:	Minimum of 11-point.
Font Type:	Arial or Tahoma.
Margins:	The binding of all edge margin (top, bottom, right, and left) of all pages shall be a minimum of one inch (1").
Line Spacing:	Single-spaced

7. **Pagination.** The respondent's name must be displayed in the header of each page. All pages, from the Cover Sheet through the required Appendices and Forms, must be numbered consecutively in the footer.

E. EVALUATION OF SUBMISSIONS

1. **Evaluation Process.** It is the intent of the Department to conduct a comprehensive, fair, and impartial evaluation of applications received in response to this RFA. When evaluating applications, negotiating with successful respondents, and offering the right to negotiate a contract, the Department shall conform with its written procedures for POS procurements (pursuant to C.G.S. § 4-217) and the State's Code of Ethics (pursuant to C.G.S. §§ 1-84 and 1-85). Final funding allocation decisions shall be determined during contract negotiation.

2. **Evaluation Committee.** The Department shall designate an Evaluation Committee to evaluate applications submitted in response to this RFA. The Evaluation Committee shall be composed of individuals, Department staff or other designees as deemed appropriate. The contents of all submitted applications, including any confidential information, shall be shared with the Evaluation Committee. Only applications found to be responsive (that is, complying with all instructions and requirements described herein) shall be reviewed, rated, and scored. Applications that fail to comply with all instructions shall be rejected without further consideration. The Evaluation Committee shall evaluate all applications that meet the Minimum Submission Requirements by score and rank ordered and make a recommendation for an award. The Commissioner of DSS, shall make the final selection. Attempts by any Respondent (or representative of any Respondent) to contact or influence any member of the Evaluation Committee may result in disqualification of the Respondent.

3. **Minimum Submission Requirements.** All applications must comply with the requirements specified in this RFA. To be eligible for evaluation, submissions must (1) be received on or before the due date and time; (2) meet the Submission Format requirements; (3) follow the required Application Outline; and (4) be complete. Applications that fail to follow instructions or satisfy these minimum submission requirements shall not be reviewed further. The Department shall reject any application that deviates significantly from the requirements of this RFA.

4. **Evaluation Criteria and Weights.** Application submissions meeting the Minimum Submission Requirements shall be evaluated according to the established criteria. The criteria are the objective standards that the Evaluation Team shall use to evaluate thesubmisisions . The weights of all requirements are below. Only the criteria listed below shall be used to evaluate application submissions:

- Service Site - 5 points
- Staffing- 5 points
- Service Availability and Access – 5 points
- Care Coordination Services – 5 points
- Service Population – 5 points
- Comprehensiveness of Service Offerings – 10 points
- Crisis Services – 10 points
- Provision of MOUD/MAUD – 5 points
- Peer Services and Counseling - 5 points
- BH Screening and Monitoring – 5 points
- Primary Care Screening and Monitoring – 5 points
- Service to Armed Forces and Veterans – 5 points
- Evidence-Based Practice Provision - 5 points
- Targeted Case Management – 5 points
- Psychiatric Rehabilitation Services – 5 points
- Data, Information Technology, and CQI – 10 points
- Governance – 5 points

5. **Respondent Selection.** Upon completing its evaluation of applications, the Review Committee shall submit the rankings of all applications to the Commissioner or Agency Head. The final selection of a successful respondent is at the discretion of the Commissioner or Agency Head. Any respondent selected shall be so notified and awarded an opportunity to negotiate a contract with the Agency. Such negotiations may, but shall not automatically, result in a contract. Any resulting contract shall be posted on the State Contracting Portal. All unsuccessful respondents shall be notified by e-mail or U.S. mail, at the Agency's discretion, about the outcome of the evaluation and respondent selection process. The Agency reserves the right to decline to award contracts for activities in which the Commissioner or Agency Head considers there are not adequate respondents.

6. **Debriefing.** Within ten (10) days of receiving notification from the Agency, unsuccessful respondent s may contact the Official Contact and request information about the evaluation and respondent selection process. The e-mail sent date or the postmark date on the notification envelope shall be considered "day one" of the ten (10) days. If unsuccessful respondents still have questions after receiving this information, they may contact the Official Contact and request a meeting with the Agency to discuss the evaluation process and their applications. If held, the debriefing meeting shall not include any comparisons of unsuccessful applications with other applications. The Agency may schedule and hold the debriefing meeting within fifteen (15) days of the request. The Agency shall not change, alter, or modify the outcome of the evaluation or selection process as a result of any debriefing meeting.

7. **Appeal Process.** Respondent s may appeal any aspect the Agency's competitive procurement, including the evaluation and respondent selection process. Any such appeal must be submitted to the Agency head. A respondent may file an appeal at any time after the application due date, but not later than thirty (30) days after an agency notifies unsuccessful respondent s about the outcome of the evaluation and respondent selection process. The e-mail sent date or the postmark date on the notification envelope shall be considered "day one" of the thirty (30) days. The filing of an appeal shall not be deemed sufficient reason for the Agency to delay, suspend, cancel, or terminate the procurement process or execution of a contract. More detailed information about filing an appeal may be obtained from the Official Contact.

8. **Contract Execution**. Any contract developed and executed as a result of this RFA is subject to the Department's contracting procedures, which may include approval by the

Office of the Attorney General. Fully executed and approved contracts shall be posted on State Contracting Portal and the Agency website.

SECTION II – MANDATORY PROVISIONS

A. POS/PSA STANDARD CONTRACT, PARTS I AND II

By submitting a application in response to this RFA, the respondent implicitly agrees to comply with the provisions of Parts I and II of the State's "standard contract" for POS:

Part I of the standard contract is maintained by the Department and shall include the scope of services, contract performance, quality assurance, reports, terms of payment, federal provisions related to the funding, budget, and other program-specific provisions of any resulting POS contract. A sample of Part I is available from the Department's Official Contact upon request.

Part II of the standard contract is maintained by OPM and includes the mandatory terms and conditions of the POS contract. Part II is available on OPM's website at: https://portal.ct.gov/OPM/Fin-POS/Standards/POS-Standard-Contract-Part-II

Note:Included in Part II of the standard contract is the State Elections Enforcement Commission's notice (pursuant to C.G.S. § 9-612(g)(2)) advising executive branch State contractors and prospective State contractors of the ban on campaign contributions and solicitations. If a respondent is awarded an opportunity to negotiate a contract with the Department and the resulting contract has an anticipated value in a calendar year of $50,000 or more, or a combination or series of such agreements or contracts has an anticipated value of $100,000 or more, the respondent must inform the respondent 's principals of the contents of the SEEC notice.

Part I of the standard contract may be amended by means of a written instrument signed by the Department, the selected respondent contractor, and, if required, the Attorney General's Office. Part II of the standard contract may be amended only in consultation with, and with the approval of, the Office of Policy and Management and the Attorney General's Office.

B. ASSURANCES

By submitting a application in response to this RFA, a respondent implicitly gives the following assurances:

1. **Collusion.** The respondent represents and warrants that the respondent did not participate in any part of the RFA development process and had no knowledge of the specific contents of the RFA prior to its issuance. The respondent further represents and warrants that no agent, representative, or employee of the State participated directly in the preparation of the respondent 's application. The respondent also represents and warrants that the submitted application is in all respects fair and is made without collusion or fraud.

2. **State Officials and Employees.** The respondent certifies that no elected or appointed official or employee of the State has or shall benefit financially or materially from any contract resulting from this RFA. The Agency may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the aforementioned officials or employees from the respondent, contractor, or its agents or employees.

3. **Competitors.** The respondent assures that the submitted application is not made in connection with any competing organization or competitor submitting a separate application in response to this RFA. No attempt has been made, or shall be made, by the respondent to induce any other organization or competitor to submit, or not submit, a application for the purpose of restricting competition. The respondent further assures that the proposed costs have been arrived at independently, without consultation, communication, or agreement with any other organization or competitor for the purpose of restricting competition. Nor has the respondent knowingly disclosed the proposed costs on a prior basis, either directly or indirectly, to any other organization or competitor.

4. **Validity of Application.** The respondent certifies that the application represents a valid and binding offer to provide services in accordance with the terms and provisions described in this RFA and any amendments or attachments hereto. The application shall remain valid for a period of 180 days after the submission due date and may be extended beyond that time by mutual agreement. At its sole discretion, the Agency may include the application, by reference or otherwise, into any contract with the successful respondent.

5. **Press Releases.** The respondent agrees to obtain prior written consent and approval of the Agency for press releases that relate in any manner to this RFA or any resultant contract.

C. TERMS AND CONDITIONS

By submitting a submission in response to this RFA, a respondent respondent implicitly agrees to comply with the following terms and conditions:

1. **Equal Opportunity and Affirmative Action.** The State is an Equal Opportunity and Affirmative Action employer and does not discriminate in its hiring, employment, or business practices. The State is committed to complying with the Americans with Disabilities Act of 1990 (ADA) and does not discriminate on the basis of disability in admission to, access to, or operation of its programs, services, or activities.

2. **Preparation Expenses.** Neither the State nor the Agency shall assume any liability for expenses incurred by a respondent in preparing, submitting, or clarifying any application submitted in response to this RFA.

3. **Exclusion of Taxes.** The Agency is exempt from the payment of excise and sales taxes imposed by the federal government and the State. Respondents are liable for any other applicable taxes.

4. **Proposed Costs.** No cost submissions that are contingent upon a State action shall be accepted. All proposed costs must be fixed through the entire term of the contract.

5. **Changes to Application.** No additions or changes to the original application shall be allowed after submission. While changes are not permitted, the Agency may request and authorize respondents to submit written clarification of their applications, in a manner or format prescribed by the Agency, and at the respondent's expense.

6. **Supplemental Information.** Supplemental information shall not be considered after the deadline submission of applications, unless specifically requested by the Agency. The Agency may ask a respondent to give demonstrations, interviews, oral presentations or further explanations to clarify information contained in a application. Any such demonstration, interview, or oral presentation shall be at a time selected and in a place provided by the Agency. At its sole discretion, the Agency may limit the number of respondent s invited to make such a demonstration, interview, or oral presentation and may limit the number of attendees per respondent.

7. **Presentation of Supporting Evidence.** If requested by the Agency, a respondent must be prepared to present evidence of experience, ability, data reporting capabilities, financial standing, or other information necessary to satisfactorily meet the requirements set forth or implied in this RFA. The Agency may make onsite visits to an operational facility or facilities of a respondent to evaluate further the respondent 's capability to perform the duties required by this RFA. At its discretion, the Agency may also check or contact any reference provided by the respondent.

8. **RFA Is Not An Offer.** Neither this RFA nor any subsequent discussions shall give rise to any commitment on the part of the State or the Agency or confer any rights on any respondent unless and until a contract is fully executed by the necessary parties. The contract document shall represent the entire agreement between the respondent and the Agency and shall supersede all prior negotiations, representations or agreements, alleged or made, between the parties. The State shall assume no liability for costs incurred by the respondent or for payment of services under the terms of the contract until the successful respondent is notified that the contract has been accepted and approved by the Agency and, if required, by the Attorney General's Office.

D. RIGHTS RESERVED TO THE STATE

By submitting a application in response to this RFA, a respondent implicitly accepts that the following rights are reserved to the State:

1. **Timing Sequence.** The timing and sequence of events associated with this RFA shall ultimately be determined by the Agency.

2. **Amending or Canceling RFA.** The Agency reserves the right to amend or cancel this RFA on any date and at any time, if the Agency deems it to be necessary, appropriate, or otherwise in the best interests of the State.

3. **No Acceptable Applications.** In the event that no acceptable applications are submitted in response to this RFA, the Agency may reopen the procurement process, if it is determined to be in the best interests of the State.

4. **Award and Rejection of Applications.** The Agency reserves the right to award in part, to reject any and all applications in whole or in part, for misrepresentation or if the application limits or modifies any of the terms, conditions, or specifications of this RFA. The Agency may waive minor technical defects, irregularities, or omissions, if in its judgment the best interests of the State shall be served. The Agency reserves the right to reject the application of any respondent who submits a application after the submission date and time.

5. **Sole Property of the State.** All applications submitted in response to this RFA are to be the sole property of the State. Any product, whether acceptable or unacceptable, developed under a contract awarded as a result of this RFA shall be the sole property of the State, unless stated otherwise in this RFA or subsequent contract. The right to publish, distribute, or disseminate any and all information or reports, or part thereof, shall accrue to the State without recourse.

6. **Contract Negotiation.** The Agency reserves the right to negotiate or contract for all or any portion of the services contained in this RFA. The Agency further reserves the right to contract with one or more respondent for such services. After reviewing the scored criteria, the Agency may seek Best and Final Offers (BFO) on cost from respondent s. The Agency may set parameters on any BFOs received.

7. **Clerical Errors in Award.** The Agency reserves the right to correct inaccurate awards resulting from its clerical errors. This may include, in extreme circumstances, revoking the awarding of a contract already made to a respondent and subsequently awarding the contract to another respondent. Such action on the part of the State shall not constitute a breach of contract on the part of the State since the contract with the initial respondent is deemed to be void *ab initio* and of no effect as if no contract ever existed between the State and the respondent.

8. **Key Personnel.** When the Agency is the sole funder of a purchased service, the Agency reserves the right to approve any additions, deletions, or changes in key personnel, with the exception of key personnel who have terminated employment. The Agency also reserves the right to approve replacements for key personnel who have terminated employment. The Agency further reserves the right to require the removal and replacement of any of the respondent 's key personnel who do not perform adequately, regardless of whether they were previously approved by the Agency.

E. STATUTORY AND REGULATORY COMPLIANCE

By submitting a proposal in response to this RFA, the respondent implicitly agrees to comply with all applicable State and federal laws and regulations, including, but not limited to, the following:

1. **Freedom of Information, C.G.S. § 1-210(b)** The Freedom of Information Act (FOIA) generally requires the disclosure of documents in the possession of the State upon request of any citizen, unless the content of the document falls within certain categories of exemption, as defined by C.G.S. § 1-210(b). Respondents are generally advised not to include in their proposals any confidential information. If the Respondent indicates that certain documentation, as required by this RFP, is submitted in confidence, the State will endeavor to keep said information confidential to the extent permitted by law. The State has no obligation to initiate, prosecute, or defend any legal proceeding or to seek a protective order or other similar relief to prevent disclosure of any information pursuant to a FOIA request. The Respondent has the burden of establishing the availability of any FOIA exemption in any proceeding where it is an issue. While a Respondent may claim an exemption to the State's FOIA, the final administrative authority to release or exempt any or all material so identified rests with the State. In no event shall the State or any of its employees have any liability for disclosure of documents or information in the possession of the State and which the State or its employees believe(s) to be required pursuant to the FOIA or other requirements of law.

2. **Contract Compliance, C.G.S. § 4a-60 and Regulations of CT State Agencies § 46a-68j-21 through 43, inclusive.** Connecticut statute and regulations impose certain obligations on State agencies (as well as contractors and subcontractors doing business with the State) to ensure that State agencies do not enter into contracts with organizations or businesses that discriminate against protected class persons.

3. **Consulting Agreements, C.G.S. § 4a-81(a) and 4a-81(b).** Pursuant to section 4a-81 of the Connecticut General Statues, the person signing this Contract on behalf of the Contractor represents, to their best knowledge and belief and subject to the penalty of false statement as provided in section 53a-157b of the Connecticut General Statues, that the Contractor has not entered into any consulting agreements in connection with this Contract, except for the agreements listed below or in an attachment to this Contract. "Consulting agreement" means any written or oral agreement to retain the services, for a fee, of a consultant for the purposes of (A) providing counsel to a contractor, vendor, consultant or other entity seeking to conduct, or conducting, business with the State, (B) contacting, whether in writing or orally, any executive, judicial, or administrative office of

the State, including any department, institution, bureau, board, commission, authority, official or employee for the purpose of solicitation, dispute resolution, introduction, requests for information, or (C) any other similar activity related to such contracts. "Consulting agreement" does not include any agreements entered into with a consultant who is registered under the provisions of chapter 10 of the Connecticut General Statues as of the date such contract is executed in accordance with the provisions of section 4a-81 of the Connecticut General Statutes.

4. **Limitation on Use of Appropriated Funds to Influence Certain Federal Contracting and Financial Transactions, 31 USC § 1352.** A responsive proposal shall include a **Certification Regarding Lobbying Form**, which is embedded in this section as a hyperlink, attes, which is embedded in this section as a hyperlink, attesting to the fact that none of the funds appropriated by any Act may be expended by the recipient of a Federal contract, grant, loan, or cooperative agreement to pay any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the: (A) awarding of any Federal contract; (B) making of any Federal grant; (C) making of any Federal loan; (D) entering into of any cooperative agreement; or (E) extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

5. **Campaign Contribution Restriction**. For all State contracts, defined in section 9-612 of the Connecticut General Statutes as having a value in a calendar year of $50,000 or more, or a combination or series of such agreements or contracts having a value of $100,000 or more, the authorized signatory to this Contract represents that they have received the State Elections Enforcement Commission's notice advising state contractors of state campaign contribution and solicitation prohibitions, and will inform its principals of the contents of the notice, as set forth in "SEEC Form 10: Notice to Executive Branch State Contractors and Prospective State Contractors of Campaign Contribution and Solicitation Limitations."

6. **Nondiscrimination Certification** Pursuant to subsection (c) of section 4a-60 and subsection (b) of section 4a-60a of the Connecticut General Statutes, the Contractor, for itself and its authorized signatory of this Contract, affirms that it understands the obligations of this section and that it will maintain a policy for the duration of the Contract to assure that the Contract will be performed in compliance with the nondiscrimination requirements of such sections. The Contractor and its authorized signatory of this Contract demonstrate their understanding of this obligation by (A) having provided an affirmative response in the required online bid or response to a proposal question which asks if the contractor understands its obligations under such sections, (B) signing this Contract, or (C) signing this nondiscrimination affirmation on the following line:_____

8. **Large State Contract Representation for Contractor (if applicable).** Pursuant to section 4-252 of the Connecticut General Statutes and Acting Governor Susan Bysiewicz's Executive Order 21-2, the Contractor, for itself and on behalf of all of its principals or key personnel who submitted a bid or proposal, represents:

    (a) That no gifts were made by:

        (1) the Contractor,

        (2) any principals and key personnel of the Contractor, who participate substantially in preparing bids, proposals or negotiating State contracts, or

(3) any agent of the Contractor or principals and key personnel, who participates substantially in preparing bids, proposals or negotiating State contracts, to:

i. any public official or State employee of the State agency or quasi- public agency soliciting bids or proposals for State contracts, who participates substantially in the preparation of bid solicitations or requests for proposals for State contracts or the negotiation or award of State contracts, or

ii. any public official or State employee of any other State agency, who has supervisory or appointing authority over such State agency or quasi-public agency;

(b) That no such principals and key personnel of the Contractor, or agent of the Contractor or of such principals and key personnel, knows of any action by the Contractor to circumvent such prohibition on gifts by providing for any other principals and key personnel, official, employee or agent of the Contractor to provide a gift to any such public official or State employee; and

(c) That the Contractor submitted bids or proposals without fraud or collusion with any person.

9. **Iran Energy Investment Certification.** Pursuant to C.G.S. § 4-252(a), the successful contracting party shall certify the following: (a) that it has not made a direct investment of twenty million dollars or more in the energy sector of Iran on or after October 1, 2013, as described in Section 202 of the Comprehensive Iran Sanctions, Accountability and Divestment Act of 2010, and has not increased or renewed such investment on or after said date. (b) If the resulting Contractor makes a good faith effort to determine whether it has made an investment described in subsection (a) of this section it shall not be subject to the penalties of false statement pursuant to section 4-252a of the Connecticut General Statutes. A "good faith effort" for purposes of this subsection includes a determination that the Contractor is not on the list of persons who engage in certain investment activities in Iran created by the Department of General Services of the State of California pursuant to Division 2, Chapter 2.7 of the California Public Contract Code. Nothing in this subsection shall be construed to impair the ability of the State agency or quasi-public agency to pursue a breach of contract action for any violation of the provisions of the resulting contract.

10. **Access to Data for State Auditors**. The resulting Contractor shall provide to OPM access to any data, as defined in Conn. Gen Stat. Sec. 4e-1, concerning the Contract and OPM that are in the possession or control of the Contractor upon demand and shall provide the data to OPM in a format prescribed by the Client Agency and the State Auditors of Public Accounts at no additional cost.

11. **State Business-Related Call Center and Customer Service Work(if applicable).** Pursuant to subsection (h) of section 31-57aa of the Connecticut General Statutes, the resulting Contractor shall perform all required state business-related call center and customer service work entirely within the State of Connecticut. If Contractor performs work outside of the State of Connecticut and adds customer service employees who will perform work pursuant to this Contract, then Contractor shall employ such new employees within

the State of Connecticut prior to any such employee performing any work pursuant to this Contract.

12. **Consumer Data Privacy and Online Monitoring.** Pursuant to section 4e-72a of the Connecticut General Statutes, the resulting Contractor shall at all times comply with all applicable provisions of sections 42-515 to 42-525, inclusive, of the Connecticut General Statutes, as the same may be revised or modified.

SECTION III – SCOPE OF WORK

A. DEPARTMENTS OVERVIEW

A.1 Department of Social Services

The Department of Social Services ("DSS") delivers and funds a wide range of programs and services as Connecticut's multi-faceted health and human services agency. DSS serves about 1.3 million residents of all ages in all 169 Connecticut cities and towns. DSS supports the basic needs of children, families, older and other adults, including persons with disabilities. Services are delivered through 12 field offices, central administration, and online and phone access options. With service partners, DSS: Provides federal/state food and economic aid, health care coverage, independent living and home care, social work, child support, home-heating aid, protective services for older adults, and more vital service areas.

Supports the health of over 1,000,000 residents through HUSKY Health (Medicaid & Children's Health Insurance Program) in 2021, including medical, dental, behavioral health, prescription medications, long-term services and supports. Helps over 400,000 residents afford food and supports Connecticut's economy with federally funded Supplemental Nutritional Assistance Program (SNAP).

The Department is headed by the Commissioner of Social Services and there are three Deputy Commissioners.

Vision
We envision a Connecticut where all are healthy, secure, and thriving.

Mission
To make a positive impact on the health and well-being of Connecticut's individuals, families, and communities.

Values

- Pride in Public Service
- Excellence and Integrity
- Compassion and Empathy
- Equity and Inclusion
- Racial Justice
- Collaboration and Communication Learning and Innovation

A.2 Department of Mental Health Services

The Department of Mental Health and Addiction Services (DMHAS) promotes and administers comprehensive, recovery-oriented services in the areas of mental health treatment and substance abuse prevention and treatment throughout Connecticut.

While the Department's prevention services serve all Connecticut citizens, its mandate is to serve adults (over 18 years of age) with psychiatric or substance use disorders, or both, who lack the financial means to obtain such services on their own. DMHAS also provides collaborative programs for individuals with special needs, such as persons with HIV/AIDS infection, people in the criminal justice system, those with problem gambling disorders,

substance abusing pregnant women, persons with traumatic brain injury or hearing impairment, those with co-occurring substance abuse and mental illness, and special populations transitioning out of the Department of Children and Families.

DMHAS operates on the belief that most people with mental illnesses and/or substance use disorders can and should be treated in community settings, and that inpatient treatment should be used only when absolutely necessary to meet the best interests of the patient. Effective care requires that services such as residential, supportive, rehabilitative and crisis intervention programs are available within their local communities. DMHAS is responsible for providing a wide range of services to adults in each of the five human service regions in Connecticut.

Vision

DMHAS envisions a recovery system of high quality behavioral health care that will offer Connecticut residents choices from among an array of accessible services and supports that will be effective in addressing their health concerns. These services and supports will be culturally responsive, attentive to trauma, built on personal, family, and community strengths, and focus on promoting persons' recovery and wellness. Through a focus on cultivating inclusive social contexts in which individuals' contributions will be valued, the DMHAS system will also foster a sense of full citizenship among persons with behavioral health needs. Finally, services and supports will be integrated, responsive, and coordinated within the context of a locally managed system of care in collaboration with the community, thereby ensuring continuity of care both over time and across organizational boundaries. As a result, each person will have maximal opportunities for establishing, or reestablishing, a safe, dignified, and meaningful life in the communities of their choice.

MISSION

The Connecticut Department of Mental Health and Addiction Services is a health care agency whose mission is to promote the overall health and wellness of persons with behavioral health needs through an integrated network of holistic, comprehensive, effective, and efficient services and supports that foster dignity, respect, and self-sufficiency in those we serve.

Core Values

Afford all persons Dignity and Respect

- Compassion
- Genuineness
- Professionalism

Treat all persons with Equity and Fairness

- Inclusiveness
- Cultural Responsiveness
- Social and Economic Justice

Lead with a sense of Urgency and Accountability

- Flexibility
- Resourcefulness
- Strategic Thinking

A.3 Department of Children and Families

The Department's mission is: "*Partnering with communities and empowering families to raise resilient children who thrive*." The Department seeks to sharpen the safety lens through primary prevention across the child welfare system through 5 strategic goals:

- Keep children and youth safe, with focus on the most vulnerable populations
- Engage the workforce through an organizational culture of mutual support
- Connect systems and processes to achieve timely permanency
- Contribute to child and family wellbeing by enhancing assessments and interventions
- Eliminate racial and ethnic disparate outcomes within the Department

The mission and vision are grounded in a core set of beliefs that encompass the Department's vision for how to provide services to Connecticut's children and families.

The Department is aligning all of its efforts to these core set of 7 Key Performance Indicators to ensure that the best outcomes are reached for all children. These key indicators drive the Department's strategic goals for how to best meet the needs and serve Connecticut's children and families. The Department believes that children do best when living safely at home with their family of origin. When living at home with a parent is not reasonably safe, the best alternative is to live with relatives, kin, or someone who they know who can provide a safe and nurturing home. If no family member can provide a suitably safe home that meets the child's needs, the child should receive care and services in an appropriate foster home or a setting that is able to meet their needs, while concurrently working towards a timely permanency outcome. Foster care should only be used as a short-term intervention. The Department believes that when foster care is necessary, while in foster care, regular and ongoing contact with parents and siblings should be maintained. Congregate care, such as group homes and residential treatment centers, should not be used for most children. If absolutely required, children who need to be in congregate care settings should be placed there for a brief a time as possible and these settings should be designed to address specific treatment needs rather than serve as long term placement options. For older youth, treatment in congregate care is expected to be used in a targeted manner with extensive family involvement built into the treatment process. All youth are to exit the Department's care with legal and/or relational permanency.

The Department of Children and Families was instituted by the Connecticut General Assembly as the Department of Children and Youth Services in May 1969. In 1974, child welfare services were transferred to the Department, with children's mental health services and a unified school district for children in the Department's care and custody added one year later and substance abuse

services for children and youth 13 years after that (in 1988). The Department's name (Children and Families) was officially changed through legislation in 1993, to reflect the Department's still-evolving mission of providing child-centered, family focused, community-based programs and services throughout Connecticut.

In 1987, the Department instituted a regional management model, strengthening community-based services through grants and child-centered social work practice. Fourteen Area Offices, comprising six Regions began managing grants and contracted services within assigned geographical locations, thus cementing the Department's partnerships with local, area community service providers. Since that time, the Department's contracted service milieu has grown to encompass approximately 80 contracted service types overseen by 100 community service agencies providing 350 individual programs to Connecticut's children and their families.

B. PROGRAM OVERVIEW

The purpose of this RFA is to select community outpatient clinics to participate in a SAMHSA CCBHC Planning Grant. Under the Planning Grant awarded to the state, selected clinics will receive technical assistance and support from SAMHSA, the National Council for Mental Wellbeing, the Center for Medicaid and Medicare Services (CMS), state contracted agencies, and the state to achieve certification as a CCBHC. Clinics will also work with the National Committee on Quality Assurance (NCQA) to provide documentation and other evidence of compliance with CCBHC certification standards. The final determination regarding the achievement of CCBHC certification will rest with the state, which will utilize the information and assessments obtained by NCQA in making certification decisions. Organizations that obtain certification during the planning year will be invited to participate in a four-year SAMHSA CCBHC Demonstration Program contingent on the state applying for and receiving a Demonstration Award. Clinics participating as a CCBHC under the demonstration will be provided technical assistance to further develop CCBHC services and will be compensated for services provided via a Prospective Payment System representing the costs of services provided.

C. SCOPE OF WORK

Services: During the Planning Grant, selected clinics will be expected to work towards achieving certification as a CCBHC, participate in TA) establish systems for submitting data to the state and SAMHSA, and develop the capacity to fully comply with all CCBHC requirements.

Funding: There will be no funding awarded to clinics under this RFA or the Planning Grant unless the state decides to seek and obtain additional funding from other sources.

Geographic Area/Distribution: Application submissions must articulate the geographic area that shall be covered.

Target Population: The target population is individuals residing in the state of Connecticut who are in a behavioral health crisis and/or in need of outpatient behavioral health services, regardless of insurance status, location in the state, or ability to pay. Comprehensive mental health and substance use disorder services must be provided to the full age spectrum of children, adolescents, and adults, with the capacity to serve those who have been traditionally underserved, as well as specialty populations, including Veterans, and others identified by the Planning Grant Steering Committee during the planning year.

SECTION IV - REQUIRED APPLICATION SUBMISSION OUTLINE & REQUIREMENTS

A. Cover Sheet

See RFA Section I.D.2 for information.

B. Table of Contents

See RFA Section I.D.3 for information.

C. Claim of Exemption from Disclosure

See RFA Section I.C.12 for information.

D. Conflict of Interest - Disclosure Statement

See RFA Section I.C.13 for information.

E. Executive Summary

See RFA Section I.D.4 for information.

F. Terms and Conditions Declaration

The respondent must state that they can comply and are willing to enter into an agreement under the Terms and Conditions referenced by this RFA.

Any proposed changes to the Terms and Conditions must be specific and described here for them to be considered during contract negotiations. The State shall not accept broad or open-ended statements. It should be noted that if the State determines the proposed changes to be material, it can deem a application to be non-compliant and therefore not evaluate it further.

G. Minimum Qualifications of Respondents

The purpose of this subsection is to validate that the respondent meets the minimum criteria for a respondent as per Section I. C. 6. The respondent should list each requirement from Section I. C. 6 and attest their compliance or otherwise and then provide the Department with a way to verify the information, e.g., list projects with references, link to published records to confirm experience.

H. Attachments Forms

- **Certification Regarding Lobbying Form**
  See RFP, Section II.E.4 for information
- **Addendum Acknowledgement(s) (if applicable)**
  An addendum acknowledgement form is included with each posted addendum.
- **Exhibit(s) If applicable**

I. Main Application Submission Requirements To Submit A Responsive Application Submisison.

	Adult MH
	Child MH
	Adult SUD
	Child/Adolescent SUD
	Services to Veterans
	Mobile Crisis Services
	Homeless Services/Supports
	Services to Tribal Nations
	Medications for Opioids and/or Alcohol use disorders.
	Other (please describe)
	Other (please describe)
	Other (please describe)

Numbering of Responses. The Respondent must answer all questions and must include all items requested in the order requested for the Application to be considered responsive. Please number each response so that it corresponds to the question number. The response must begin with a brief summary of the question followed by the Respondent's response. A reference to another section shall not suffice, instead, each answer must stand alone.

Attachments. Attachments must be labeled and tabbed and the question number to which it responds must be indicated.

1. Technical Application

(1) Organization Qualifications

Provide a general overview of your organization and qualifications in response to the questions 1. (a) through 1. (q) that follow.

a. Service Site (5 points)

Please describe the proposed site you seek to be certified as a CCBHC under this program. Include the address, the number of unduplicated individuals served in the calendar year 2023, including number served by town and the total population of the covered service areas, licensure and accreditation status, including any licensing actions or significant accreditation survey findings in the last three years, and identify the population(s) directly served by your clinic by selecting from thetable to the right. If your are seeking certification of satellite sites in addition to your main clinic site, please provide all the same information for each satellite site in an attachment as part of Exhibit A Satellite sites must be approved and registered as satellites under the Connecticut Medical Assistance Program ("CMAP") and be operated under the governance and financial control of the parent organization, and provide the following servicers: crisis services; screening, diagnosis, and risk assessment; person and family centered treatment planning; and outpatient mental health and substance use services as specified in CCBHC certification criteria Program Requirement #4. In order to be eligible to receive payments under the CCBHC Demonstration Program, satellite sites must have been established prior to April 1, 2014.

b. Staffing (5 points)

For the proposed site under this RFA (including satellites), please provide a staff roster for each position title including the number, title, FTE, vacancy status, licensure status, and minimum professional credential required for each, including clinical, peer, care coordination, supervisors, nursing, physician, specialty care, and administration including management, information technology (IT), human resources (HR), and Quality Management (QM). Provide a demographic of your staff by position of each position noting the gender, age, race, ethnicity, capacity to serve those with limited English proficiency with

the percentages for each demographic. Include a comparison to the demographics of the population served and list any goals and or programs you may have to better align staffing with population characteristics.

c. Site Availability, and Accessibility (5 points)

Please describe the accessibility and availability of the services provided at your site. Please provide the average time to service for crisis care, initial assessment, and first treatment session. Also describe the accessibility of the service site in terms of location within the community, availability of public transportation, the extent of telehealth services provided if any, as well as the capacity to deliver services in-home or at other sites in the community (e.g. schools, community centers, etc.). Please indicate if your EHR can calculate the time to service for reporting purposes and that information can be electronically shared with the State, SAMHSA, or an approved program evaluator (in accordance with HIPAA).

d. Care Coordination (5 points)

Please describe your organization's experience and capacity to coordinate person- and family-centered care. Include in your description how you coordinate care across the full spectrum of health services, including physical or primary healthcare, behavioral health, social services, housing, educational systems, and employment.

e. Population to be Served (5 points)

Please provide an overview of the demographics (race, ethnicity, age, gender, preferred language and language proficiency) and health and behavioral health, social, educational, economic, and special needs of the population that resides within your service area. Please also indicate any gaps in services available in your coverage area that you are aware of.

(2) Scope of Services

a. Comprehensiveness (10 points)

Please describe your agency's experience providing comprehensive outpatient mental health and substance use disorder services to children, adolescents, and adults. If your agency currently does not provide services to children, adolescents, or adults or does not provide substance use disorder or mental health services, please describe your agency's plan for developing the capacity to provide both mental health and substance use disorder services to the full age spectrum of children, adolescents, and adults. If your agency plans to utilize a Designated Collaborating Organization ("DCO") for any of these services or child, adolescent, or adult populations, please indicate the type of service (MH or SUD), the population (child or adult or both), the organization your agency is planning to work with, and an attestation from the organization to enter into a DCO for this service if your agency receives CCBHC certification.

b. Crisis Services (10 points)

Please describe your experience providing services along the crisis services continuum, including Mobile Crisis (for children and adults), Urgent Crisis Centers, and Subacute Crisis Stabilization Centers. Please indicate if your agency is currently a state-contracted mobile, urgent care, or crisis stabilization service provider. If so, please provide details regarding your agency's history and performance for each service your agency offers. Please also describe the routine crisis services your agency provides to individuals receiving care at the proposed site(s). If your agency does not currently provide mobile crisis services or do not provide services to the entire age spectrum (children, adolescents, and adults), please describe your agency's plan for achieving full age spectrum crisis coverage. If your agency has or plans to establish an agreement with an existing mobile crisis provider as a

DCO for crisis services, please provide the name of the organization and an attestation from them that they have an intention to enter into a DCO with your organization for crisis services if your agency achieves CCBHC certification.

c. Medications for Opioid Use Disorder and Medications for Alcohol Use Disorder (5 points)

Please describe your agency's experience providing medications for opioid use disorder ("MOUD") and alcohol use disorders ("MAUD") to adults and adolescents. Please include in your response the number of individuals served with MOUD and MAUD over 2023 at the proposed site(s). Please also describe the number and credentials of providers with training and experience in providing MOUD/MAUD. If your agency has not been providing MOUD/MAUD, please provide your agency's plan for developing the capacity to deliver these services if your agency receives certification. If your agency plans to establish a DCO to meet this requirement, please provide the name of the organization you plan to work with and an attestation from them that they intend to enter into a DCO with your organization for MOUD/MAUD services if you achieve CCBHC certification.

d. Peer, Family Support, and Counselor Services (10 points)

Please describe your agency's experience providing person- and family-centered treatment planning, and describe how you ensure that clinic services and those of any DCOs are family-centered, youth-guided, developmentally appropriate, and responsive to the race, ethnicity, sexual orientation, and gender identity of those you serve. Please add any examples of peer or family support services provided by your agency.

e. Behavioral Health Screening, Assessment, and Diagnosis (5 points)

Describe and provide evidence that your clinic provides comprehensive and timely CCBHC screening, assessment, diagnosis, and risk assessment for all individuals served. Evidence, such as intake forms, policy statements, standardized and home-grown screening instruments, and licensing or accreditation reviews pertinent to screening assessment and diagnosis, may be included in Exhibit. Please also describe how your agency will ensure that any DCO you utilize complies with these standards.

f. Outpatient Primary Care Screening and Monitoring (5 points)

Describe and provide evidence (e.g. examples of physical health screening questions, symptom checklists, or standardized screening questionnaires and submit them in Exhibit C) of your proposed site(s) provision of screening and monitoring for HIV and viral hepatitis, people receiving services for chronic diseases, and other key health indicators of children, adults and older adults receiving services as determined by your medical director. If your agency does not currently provide this type of physical health screening and monitoring, please describe your plan for meeting this CCBHC requirement either through developing the capacity to provide this yourself or through a DCO. If your agency plans to establish a DCO to meet this requirement, please give the name of the organization you plan to work with and an attestation from them that they intend to enter into a DCO with your organization for primary care screening and monitoring if you achieve CCBHC certification.

g. Community-Based Mental Health Care for Veterans (5 points)

Please describe your agency's experience and expertise in serving veterans, including the number of veterans served in the calendar year 2023. Please describe your knowledge of the special needs, issues, and barriers to treatment that veterans in need of behavioral health services typically face. Describe any relationships or contacts with the Veterans Administration or veterans' services in your area of the state, including veterans' programs funded or coordinated by DMHAS or private organizations. If your agency has not served the veteran population, provide an overview of your plan to develop the expertise and capacity to serve them. If your agency plans to establish a DCO to meet this service

requirement, please provide the name of the organization and an attestation from them that they intend to enter into a DCO with your organization for veteran's services if you achieve CCBHC certification.

h. Evidence-Based Practice (EBP) (5 points)

Please describe your agency's experience and expertise in providing evidence-based practices at your organization's proposed clinic or other sites. Provide a list of all EBPs implemented with the following fidelity supports: standardized initial training and periodic training updates by the model developer or model-approved trainer, collection of key indicators, and ongoing fidelity monitoring. Describe the challenges/obstacles you have faced in implementing EBPS and your efforts to mitigate these challenges/obstacles.

i. Targeted Case Management (TCM) (5 points)

Please describe your agency's experience and expertise in providing targeted case management to assist individuals receiving services in accessing needed medical, social, legal, educational, housing vocational, or other services and supports. Please describe your process and criteria for determining who receives TCM and how you prioritize individuals at high risk, such as those at high risk for suicide, overdose, or other high-risk conditions. If you have not provided TCM, please describe your plan for developing the systems, processes, and expertise to implement TCM at the proposed site or to provide this service through a DCO. If you plan to establish a DCO to meet this service requirement, please give the name of the organization you plan to collaborate with and an attestation from them that they intend to enter into a DCO with your organization for TCM if you achieve CCBHC certification.

j. Psychiatric Rehabilitation Services (PRS) (5 points)

Please describe your agency's experience and expertise in providing PRS, including supported employment programs or programs that assist individuals in improving their educational status, social inclusion, community engagement, self-management, self-care, medication education, and family caregiver education. If you have not provided PRS, please describe your plan for developing the systems, processes, and expertise to implement PRS at the proposed site or to provide this service through a DCO. If you plan to establish a DCO to meet this service requirement, please give the name of the organization you plan to collaborate with and an attestation from them that they intend to enter into a DCO with your organization for PRS if you achieve CCBHC certification.

(3) Data, Information Technology (IT), Quality, and Other Reporting Infrastructure (10 Points)

a. Data, IT and Quality and other reporting. (10 points)

First, describe your agency's technology infrastructure, applications, and data systems for capturing patient health information. Please include in your description 1) which HIE platforms you participate with and what data you provide to them (CCD, ADT, Lab, other), 2) the EHR system you utilize and its capacity to integrate with other clinical and administrative systems, 3) data, system, and network security polices and procedures, 4) access controls and user management, 5) data integrity and quality assurance, and 6) the data transfer methods used such as Managed File Transfer ("MFT") or Secure File Transfer Protocol ("SFTP"). If you do not yet have the capacity for any of the indicators (1-6) listed above, please describe your plan for developing that capacity within the planning year.

Please also describe your capacity and expertise in quality management of clinic services and operations and the use of standardized quality measures such as the Healthcare Improvement Data and Information Set ("HEDIS"). Please also provide an overview of your Continuous Quality Improvement ("CQI") Plan.

b. Governance (5 Points)

CCBHCs must integrate meaningful participation in leadership and decision-making in their governance by individuals with lived experience of mental health and or substance use disorders and their families, including youth. Please describe your agency's current efforts to incorporate persons with lived experience into your clinic and organizational governance and how you may further develop that capacity to meet criterion 6.B: Governance (Certified Community Behavioral Health Clinic (CCBHC) Certification Criteria Updated March 2023), of the CCBHC Certification Requirements.

2. Financial Requirements

(a) Audited Financial Statements

Submit one (1) copy of the Respondent's two (2) most recent annual financial statements prepared by an independent Certified Public Accountant and reviewed or audited in accordance with Generally Accepted Accounting Principles ("GAAP"). The copies shall include all applicable financial statements, auditor's reports, management letters, and any corresponding reissued components. If audited financial statements for each of the last two (2) fiscal years are not available, the Respondent shall provide comparable statements that shall document the financial stability of the Respondent and include an explanation of the submission of documents other than audited financial statements. The Departments reserve the right to reject the application of any Respondent that is not financially viable based on the Department's assessment of the Respondent's annual financial statements.