

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

REQUEST FOR PROPOSALS

**TO PROVIDE RECOVERY HOUSING SERVICES TO
ADULT CONSUMERS WITH OPIOID USE DISORDERS
WHO ARE HOMELESS OR AT RISK OF HOMELESSNESS**

March 19, 2019

Valerie Mielke, Assistant Commissioner
Division of Mental Health and Addiction Services

TABLE OF CONTENTS

I.	Purpose and Intent	3
II.	Background and Population to be Served	4
III.	Who Can Apply?.....	5
IV.	Contract Scope of Work	5
V.	General Contracting Information.....	7
VI.	Mandatory Bidders Conference	8
VII.	Required Proposal Content	9
VIII.	Submission of Proposal Requirements.....	14
IX.	Review of Proposals.....	15
X.	Appeal of Award Decisions.....	17
XI.	Post Award Required Documentation.....	17
XII.	Attachments.....	19
	Attachment A – Proposal Cover Sheet.....	19
	Attachment B – Addendum to RFP for Social Service and Training Contracts...	20
	Attachment C – Statement of Assurances	21
	Attachment D - Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions.....	23
	Attachment E -County Mental Health Administrators RFP Submission	
	Preference.....	26

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) for the provision of three (3) pilot recovery housing services, one in each region of the three regions listed below, to consumers who are ages 18 and over with opioid use disorders (OUD), are being discharged from any and all levels of substance use disorder (SUD) care into the community, including those who are homeless or at risk of homelessness.

Northern Region: Warren, Morris, Sussex, Passaic, Bergen, Essex and Hudson

Central Region: Middlesex, Monmouth, Mercer Union, Hunterdon and Somerset

Southern Region: Burlington, Ocean, Camden, Gloucester, Salem, Atlantic, Cumberland and Cape May

DMHAS is seeking bidders who are able to provide a cooperative living housing model that uses substance use specific services, peer support, and physical design features to support individuals (family support and education is part of the recovery process. Rebuilding familiar relationships is important) on a particular path to recovery from addiction. These environments must be free from alcohol, illicit drugs and non-prescribed medications. DMHAS expects the recovery residence to not only support approved medication assisted treatment (MAT) but to encourage the use of MAT. Individuals who are receiving MAT for their OUD and/or psychotropic medication for a mental illness may not be excluded because they are taking a legally prescribed medication.

DMHAS will provide annualized contract dollars in the amount of \$113,660 to each Recovery House to support the costs of the program, including the housing. This is a non-lease based, transitional housing model. One-time funding of approximately \$166,666 will be available for furnishings, staff recruitment and a vehicle purchase for each Recovery House. This contract is for 12 months (e.g. one-year contract) that will be renewed annually as funding is available. The development of innovative recovery housing services is encouraged, based on best or promising practice models, such as the National Association of Recovery Residences (NARR), US Department of Housing and Urban Development and US Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

The annualized total funding available for this initiative is up to \$340,982 subject to State appropriations.

No funding match is required however bidders will need to identify any other sources of funding, including client fees, in-kind services and monetary resources that will be used to support the program. Bidders may not fund any costs incurred for the planning

or preparing of a proposal in response to this RFP from current DHS/DMHAS contracts.

Bidders applying for more than one (1) county/catchment area must submit separate proposals for each county.

The following summarizes the RFP schedule:

March 19, 2019	Notice of Funding Availability
March 27, 2019	Mandatory Bidders' Conference
April 17, 2019	Deadline for receipt of proposals: no later than 4:00 p.m.
May 15, 2019	Preliminary award announcement
May 22, 2019	Appeal deadline
May 29, 2019	Final award announcement
June 1, 2019	Anticipated award start date

II. Background and Population to be Served

Governor Murphy committed new dollars to address the opioid epidemic in NJ, including recovery residences, the subject of the current RFP. Recovery residences proposed in this RFP will be alcohol and illicit drug-free living environments designed to provide a safe and healthy, home-like living environment to individuals who have an OUD or co-occurring OUD and mental illness. The residence will offer a supportive environment for five individuals in recovery, including individuals on MAT. The home will promote peer-to-peer recovery support and make available staff who will provide support and leadership that is culturally competent, trauma-informed and have demonstrated strong knowledge and experience in working with individuals who have an OUD.

Individuals residing in the recovery residence are to be afforded the opportunity to engage in meaningful daily activities, such as jobs, school and volunteerism to participate in the community. Individuals who are receiving medication assisted treatment (MAT) for their OUD and/or psychotropic medication for a mental illness may not be excluded because they are taking a legally prescribed medication. In fact, DMHAS expects the recovery residence to not only support MAT but to encourage the use of MAT.

Minimally successful Bidders will operate the recovery residence in a fashion that offers peer-based support; maintains staff in-house to assist and provide guidance when needed; promotes self-participation in developing a recovery plan; promotes individuals to seek and participate in self-help groups and other self-help resources that lead to increased independence, reduced probability of relapse, promotes and assists with employment opportunities, increased family functioning and offers connection to professional clinical and medical services in the community. As the field of substance

use disorder research expands, these residences are playing an increasingly greater role in recovery-based support.

III. Who Can Apply?

To be eligible for consideration, bidders must meet the following requirements:

- The bidder must be a non-profit or for-profit entity or governmental entity;
- The bidder must be licensed by the Department of Community (DCA), Office of Code and Standards, Class F, Cooperative Sober Living Residence or commit to pursue and obtain a Class F Cooperative Sober Living Residence License issued by DCA..
- 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 <https://www.state.nj.us/treasury/debarred/debarsearch.htm> or be suspended or debarred by any other State or Federal entity from receiving funds.
- The bidder shall not employ a member of the Board of Directors, or hire them in a consultant capacity;
- Pursuant to N.J.S.A. 52:32-44, a for-profit bidder and each proposed subcontractor must have a valid Business Registration Certificate on file with the Division of Revenue, i.e., this statutory requirement does not apply to nonprofit organizations, private colleges and universities, or state and municipal agencies; and
- The bidder must attend the Mandatory Bidders conference as described in the RFP.

IV. Contract Scope of Work

DMHAS is soliciting proposals from bidders to pilot three (3) recovery housing residences (a minimum of five individuals in each residence), one in each region, for consumers with an OUD who are homeless or at risk of homelessness and are in or recently discharged from treatment. Housing provided must not be classified as a hotel, motel, rooming house, single room occupancy, a shelter or an apartment in which an individual does not have a private bedroom, an area to cook or use the bathroom. The exception to this rule is if the community partner is a social service agency. Housing provided must be licensed as a Class F, Cooperative Sober Living Residence (N.J.A.C § 5:27). Accordingly, individuals will be responsible for providing their own food and taking care of their own laundry. Treatment and counseling may not be provided in the residence; however, non-clinical recovery support services may be provided at the site

and the bidder may require, at its discretion, drug or alcohol testing of residents. (NJAC § 5:27-2.1).

This RFP calls for individualized case management and recovery housing services for fifteen individuals (a minimum of five (5) individuals in each region) who have been identified as needing a safe, healthy, peer-lead, recovery-oriented environment.

Successful bidders will be required to identify individuals in the community who have an OUD and are seeking a safe recovery living residence, that is licensed, or will be licensed, by DCA as a Cooperative Sober Living residence prior to accepting consumers. For the purposes of this RFP, recovery housing refers to housing that is augmented with flexible services for the consumer, offers peer-based support; maintains staff presence in the house to assist and provide guidance as needed to consumers; promotes self-participation of recovery plan; seeks and participates in self-help groups and other self-help resources that lead to employment. Peer-to peer recovery support must be integrated into the proposed service. Additionally, case management, including linkage to medical, behavioral health and community services is a required service. Case management will be limited to up to eight hours (32 Units) a month per consumer and must address the consumer's physical and behavioral health needs (e.g., routine care, maintaining appointments, medication compliance, medication literacy, substance use disorder treatment and mental health disorder treatment) along with other support services as appropriate.v

The successful bidder selected under this RFP must demonstrate in their proposal that they have access to a housing residence or housing units, which may be used for the sole purpose of providing Recovery Housing for the OUD population in need of housing. The bidder shall provide, at a minimum, separate housing areas that are designated for both male and female to ensure they are housed separately. Bidders must submit the Evidence Based Practice model they are using as a separate attachment along with any proof that this model is successful in their program and the community.

No capital funding is available through DMHAS for this initiative.

The bidder must comply with the Governing Room and Board Housing Regulations at N.J.A.C. § 5:27 and promote a "home-like atmosphere." This can be accomplished by protecting the health, safety and welfare of the residences in the recovery housing while also helping to maintain the individual's sense of belonging by encouraging them to contribute to the community. Although an individual with an opioid dependence may be experiencing homelessness, if they have access to treatment and supportive services such as a structured housing environment, peer-oriented groups, life skills development and safe, decent and affordable housing they can focus on their recovery knowing that housing is not a barrier.

The bidder must adhere to all applicable State and Federal cost principles. Budgets should be reasonable and reflect the scope of responsibilities in order to accomplish the goals of this project.

V. General Contracting Information

Bidders must currently meet or be able to meet the terms and conditions of 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 DHS website at: <https://www.state.nj.us/humanservices/olra/ocpm/resources/manuals/>

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 award 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 will be structured as a cost-based, deficit funded contract for a twelve (12) month term. Renewal of this contract will be evaluated on an annual basis and is contingent on availability of funds. 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, satisfactory performance.

Contract commitments will be negotiated based upon representations made in response to the RFP. Failure to deliver commitments may result in termination of the contract.

In accordance with DHS Policy P1.12 available on the web at <https://www.state.nj.us/humanservices/olra/ocpm/resources/manuals/>, programs awarded pursuant to this RFP will be separately clustered until 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 DMHAS be required to 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 can be reviewed and addressed. Should services not be rendered, funds provided pursuant to this agreement shall be returned to DMHAS.

VI. Mandatory Bidders Conference

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

Date: March 27, 2019
Time: 10:00 am
Location: 5 Commerce Way, Hamilton, NJ 08691
Conference room 199B

The Mandatory Bidders Conference will provide the bidder with an opportunity to ask questions about the RFP requirements, the award process, and to clarify technical aspects of the RFP. This ensures that all potential bidders have equal access to information. Questions regarding intent or allowable responses to the RFP, outside the Mandatory Bidders Conference, are not permitted. Any necessary response to questions posed by a potential bidder during the Mandatory Bidders Conference that cannot be answered at that time will be furnished via electronic mail to all potential bidders registered as being in attendance. Specific individual guidance will not be provided to individual bidders at any time.

Potential bidders are requested to register for the Mandatory Bidders Conference via the registration link: <https://njsams.rutgers.edu/training/tsrhs/Register.aspx>

Additionally, if the bidder requires assistance with this registration link, please contact alicia.meyer@dhs.nj.gov no later than two (2) days prior to the Mandatory Bidders Conference.

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

VII. Required Proposal Content

All Proposal submissions will be evaluated based on the elements indicated below. At a minimum, all facets of the proposal must comply fully with the relevant standards, delineated in N.J.A.C. 10:37. The proposal must not exceed 20 pages (not inclusive of appendices and required attachments.) All Proposals must include responses that clearly correspond to each category as delineated below.

Funding Proposal Cover Sheet: (See Attachment A)

Bidder's Organization, History and Experience: (5 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 to fulfill the obligations of the RFP. The written narrative should:

1. Describe the agency's history in providing recovery housing services, mission as it relates to recovery, recovery living services, purpose, current DCA 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 recovery housing 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;
4. 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;
5. 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; Include a description of the bidder's ability to provide culturally competent services;
6. Describe the bidder's plan to bring the initiative to a conclusion at the end of the contract;
7. Document that the bidder's submissions are up-to-date in New Jersey Substance Abuse Management System (NJSAMS), Unified Service Transaction Form (USTF), Quarterly Contract Monitoring Report (QCMR), Bed Enrollment Data System (BEDS), and New Jersey Mental Health Application for Payment Processing (NJMHAPP); and
8. Describe the bidder's current status and compliance with contract commitments regarding 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. Mission and Vision of the proposed program.
2. The number of individuals that will be enrolled by the program as a result of this initiative. The current contracted caseload capacity and proposed caseload capacity must be clearly stated. Describe the individuals to be served in the program and provide the inclusionary and exclusionary admission criteria. Include in the description how the applicant will work with individuals who are being released from a correctional facility. Identify the applicant's policy on MAT for an OUD and psychotropic medication. How will the applicant work with individuals who are receiving MAT and/or are prescribed psychotropic medication(s). How will the applicant work with individuals who are not receiving MAT at the time of admission but are interested in commencing treatment once admitted to the residence.
3. Describe the full range of services to be provided and how these services will address the individual's opioid use disorder service needs. Describe how these services will be tailored to individuals from a variety of cultural backgrounds including how services will be provided to individuals whose language of preference is not English.
4. Anticipated length of stay for individuals served in housing and how applicant will prepare individuals for discharge into permanent housing.
5. Describe fee and charges for which individuals served will be responsible.
6. Describe how applicant will work with residents who relapse, including length of time applicant will hold a bed for an individual who relapses and needs to seek treatment to stabilize.
7. Describe how the agency will ensure that the housing environment will be conducive to each individual's recovery (including the physical plant, safety of staff and residents and milieu).
8. Detail the monthly timeline of activities for engagement and enrollment of the target population.
9. Identify the strategies that will be used for engaging the targeted individuals.
10. Detailed description of the daily level of recovery housing service that will be available to consumers upon discharge, including any discharge follow up.
11. Describe how the applicant will address consumers' opioid use disorder treatment needs.
 - a. Description of how the proposed service will integrate the following principles as evidenced by specific program considerations;
 - b. Promotion of long-term recovery through recovery supports;
 - c. Creation of a safe and healthy, home-like recovery environment; and
 - d. Reinforcement of an alcohol and/or illicit drug free.
12. The level of effort for full time equivalent (FTE) staff and the percentage of face-to-face hours to be provided in the proposed service (e.g., a bidder may identify that one (1) FTE consists of a 40 hour work week and 50% (or

20 hours per week) of the staff time will be spent in direct face-to-face contact with consumers).

14. Identify the provider agency's linkages with appropriate not-for profit agencies or service providers in the community in which the proposed program will be located or readily accessible through public transportation, and who could serve as resources for and/or provide off-site services to tenants.

Outcome(s) and Evaluation: (15 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. The evaluation of contract outcomes.
4. Description of all tools to be used in the evaluation.
5. 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.
6. Tools and activities the bidder will implement to ensure fidelity to the evidence-based practice.

Staffing: (15 points)

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 the proposed program team (at least one FTE Peer Recovery Specialist & one FTE Case Manager), including staff qualifications, credentials and clinical licensure.
2. Provide details of the Full Time Equivalent (FTE) staffing required to satisfy the contract scope of work. Describe proposed staff qualifications, including 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 copies of job descriptions or resumes as an appendix – limited to two (2) pages each – for all proposed staff.
4. Identify the number of work hours per week that constitute each FTE in the bidder's proposal. If applicable, define the Part Time Equivalent (PTE) work hours.
5. Description of the proposed organizational structure, including the submission of an organizational chart as an appendix to the bidder's proposal.
6. The bidder's hiring policies, including background and credential checks, as well as handling of prior criminal convictions.
7. The approach for supervision and training of staff.
8. 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 vote on contract-related matters.

9. A list of names of consultants the bidder intends to utilize for the contract resulting from this RFP, including each consultant's professional licensure and organizational affiliation(s). Each consultant must be further described as to whether they are also a board member and, if so, whether they are a voting member. The bidder must identify all reimbursement the consultant received as a board member over the last twelve (12) months.

Facilities/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 a minimum:

1. A description of the manner in which tangible assets, i.e., computers, phones, other special service equipment, etc., will be acquired and allocated.
2. A description of the bidder's Americans with Disabilities Act (ADA) accessibility to its facilities and/or offices for individuals with disabilities.
3. A description of how the facility will be an inviting environment for residents and one that is supportive and conducive to their recovery, safe and meets with quality standards.

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 the details of all proposed budget items including a description of miscellaneous expenses and other costs.

1. A detailed budget using the Annex B Excel template is required. 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 Excel budget template will be emailed to all attendees from the Mandatory Bidders Conference. The budget must include two (2) separate, clearly labeled columns: a. Column 1 – Six months of operating costs to satisfy the scope of work detailed in the RFP and revenues excluding one-time costs; and b. Column 2 - Proposed one-time 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 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:
 - a. Pursue all available sources of revenue and support upon award and in future contracts, including agreement to pursue Medicaid certification. Failure to obtain approval and maintain certification as a Medicaid-eligible provider may result in termination of the service contract;
 - b. Work in cooperation with the regional and central offices of DMHAS, the regional offices of the Division of Developmental Disabilities, County Mental Health Boards and State psychiatric hospitals to identify consumers to be served, meet data collection requirements, and participate in any standardized affiliation agreements that may be developed;
 - c. Comply with DMHAS reporting requirements specific to this initiative; and
 - d. Provide the full range of services delineated in the DMHAS and related regulations to all enrolled consumers.

Appendices

The following items must be included as appendices with the bidder's proposal, limiting appendices to a total of 40 pages. Please note that if items 9-12 are not submitted, the proposal will not be considered.

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 the board of directors, officers, and terms;
7. Copy of documentation of the bidder's charitable registration status;
8. Original and/or copies of letters of commitment/support;
9. Department of Human Services Statement of Assurances (RFP Attachment C);
10. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions (RFP Attachment D);
11. Disclosure of Investment in Iran (www.nj.gov/treasury/purchase/forms.shtml); and
12. Statement of Bidder/Vendor Ownership Disclosure (www.nj.gov/treasury/purchase/forms.shtml).

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.**

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 20 pages, be single-spaced with one (1") inch margins, and no smaller than twelve (12) point Arial, Courier or Times New Roman font. For example, if the bidder's narrative starts on page 3 and ends on page 23 it is 21 pages, not 20 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 April 17, 2019. 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 U.S. Postal Service delivery:

Alicia Meyer, RFP Coordinator
 Department of Human Services
 Division of Mental Health and Addiction Services
 PO Box 362
 Hamilton, NJ 08691

or

For private delivery vendor such as UPS or FedEx:

Alicia Meyer, RFP Coordinator
 Recovery Housing Services for Adult Consumers with Opioid Use Disorders
 who are Homeless or At Risk of Homelessness

Department of Human Services
Division of Mental Health and Addiction Services
5 Commerce Way, Suite 100
Hamilton, NJ 08691

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 budget, budget notes, and appendices) electronically 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 and budget files 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

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

IX. Review of Proposals

There will be a review process for all timely submitted proposals. DMHAS will convene a review committee of public employees to conduct a review of each proposal accepted for review.

The bidder must obtain a minimum score of 70 points out of 100 points 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 DHS Policy

Circular

P1.04

<http://www.state.nj.us/humanservices/olra/ocpm/resources/manuals/>

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

DMHAS will notify all bidders of contract awards, contingent upon the satisfactory final negotiation of a contract, by May 15, 2019.

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 May 22, 2019. The written appeal must clearly set forth the basis for the appeal.

Appeal correspondence should be addressed to:

Valerie L. Mielke, MSW, Assistant Commissioner
Department of Human Services
Division of Mental Health & Addiction Services
5 Commerce Way
PO Box 362
Hamilton, NJ 08691

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

DMHAS will review all appeals and render a final decision by May 29, 2019. 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: https://www.state.nj.us/treasury/revenue/dcr/programs/ann_rpt.shtml);
3. A list of all current contracts and grants as well as those for which the bidder has applied for from any Federal, state, local government or private agency during the contract term proposed herein, including awarding agency name, amount, period of performance, and purpose of the contract/grant, as well as a contact name for each award and the phone number;
4. Proof of insurance naming the State of New Jersey, Department of Human Services, Division of Mental Health and Addiction Services, PO Box 362, Hamilton, NJ 08601- 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;
7. Current Personnel Manual or Employee Handbook;
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;
14. Affirmative Action 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. Master lease agreements, evidence of all State (non-DMHAS), federal and local housing subsidies and resources.
19. Current State of New Jersey Business Registration;

20. Procurement Policy;
21. 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.);
22. All subcontracts or consultant agreements, related to the DHS contract, signed and dated by both parties;
23. Business Associate Agreement (BAA) for Health Insurance Portability Accountability Act of 1996 compliance, if applicable, signed and dated;
24. Updated single audit report (A133) or certified statements, if differs from one submitted with proposal;
25. 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 <https://www.nj.gov/treasury/revenue>);
26. Source Disclosure (EO129) (www.nj.gov/treasury/purchase/forms.shtml); and
27. Chapter 51 Pay-to-Play Certification (www.nj.gov/treasury/purchase/forms.shtml).

XII. Attachments

Attachment A – Proposal Cover Sheet

_____ Date Received

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

Name of RFP _____

Incorporated Name of Bidder: _____

Type: Public _____ Profit _____ Non-Profit _____ Hospital-Based _____

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

Address of Bidder: _____

Contact Person Name and Title: _____

Phone No.: _____ Email Address: _____

Total dollar amount requested: _____ Fiscal Year End: _____

Funding Period: From _____ to _____

Total number of unduplicated consumers to be served: _____

County in which 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: _____

Attachment B – Addendum to RFP for Social Service and Training Contracts

STATE OF NEW JERSEY DEPARTMENT OF HUMAN SERVICES

ADDENDUM TO REQUEST FOR PROPOSAL FOR SOCIAL SERVICE AND TRAINING CONTRACTS

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

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

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 Health, 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 RFI, including development of specifications, requirements, statement of works, or the evaluation of the RFI 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 Health.
- 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.