SAPTA BLOCK GRANT QUESTIONS AND ANSWERS

The Division of Public and Behavioral Health reserves the right to modify funding limits based on the quality and number of applications received.

An addendum was updated on May 27, 2020 that clarified that private entities are eligible for funds through the State Opioid Response Funds.

The due date of the application is Thursday, June 11, 2020.

Responses:

1. **My question is simple: is this one NOFO for both the Women's Set Aside Funding and also the SABG funding for detox, residential and transitional housing. In years past these have always been two separate RFAs**.

   The NOFO is a combined application that includes the SAPTA Block Grant, State Opioid Response (SOR) funding and other funding sources. This is the NOFO for the Women's Set Aside Funding for SAPTA.

2. **Are we allowed to apply for grants for more than one location for the full amount?**

   Pursuant to Section I.4, applicants may submit more than one application. However, each application must be for a different target population and/or different service area. Applicants are not permitted to submit more than one application for the same target population and/or the same service area that operate under the same business license or DUNS number.

3. **Does for Profit behavioral health okay to submit for Grant as long as they been operating for more than a year or is this specific grant is for profit only?**

   An amendment was provided on May 27, 2020, that modified Section 4 that allows profit providers to submit for the SOR funding as part of the grant application. This is in addition to non-profit and government agency applications.

4. **What is the programmatic funding constraint**

   SAPTA block grant funding is for direct service and limited to the Fee For Service Schedule as attached to the NOFO. Only the Women's Set Aside has a line item budget.

5. **How to obtain EI number? we currently have DUNS number**

   EI Numbers are business taxation numbers provided by the Internal Revenue Service, and must be provided, prior to requesting a DUNS number from grants.gov.

6. **... operates several 3.1 facilities, 1 TH facility and an Outpatient program. We have been SAPTA funded for a number of years. Did I read correctly that we will need to write 3 separate grant proposals to receive funding for ASAM 3.1, TH, and ASAM Level 1?**

   Pursuant to the NOFA, II.4, applicants may apply for Target A1 Criminal Justice Diversion, OR Target A2 Transitional Housing, OR Target A3 Community Based Treatment, OR Target A4 Residential Treatment **OR Target A5, w***hich includes at least three of the above categories for one of the three populations*. You may submit additional applications for any of the two other Target Populations for any of the above Target areas as defined.

7. **How are we supposed to complete a budget for 3.1, TH, and Level 1? Are we supposed to submit a budget based on the current rates, or on rates we would like to be paid?**

   The budget would be based on the Fee-For-Service schedule, as attached in Section X of the RFA. The budget should be the amount you expect to need for those uninsured or not insured, and not for the population eligible for third-party payor liability.

8. **As residential treatment providers, are we now able to request reimbursement for operating costs? Indirect, office supplies, etc.?**

   As noted in Section E, indirect is not allowed on direct services. However, a line item budget is permitted for women's services only as a priority target population.

9. **Are we allowed to apply for grants for more than one location for the full amount?**

   Pursuant to Section I.4, applicants may submit more than one application. However, each application must be for a different target population and/or different service area. Applicants are not permitted to submit more than one application for the same target population and/or the same service area that operate under the same business license or DUNS number.

10. **… is this one NOFO for both the Women's Set Aside Funding and also the SABG funding for detox, residential and transitional housing. In years past these have always been two separate RFAs.**

   The SAPTA NOFO is targeting both the Women's set aside funding for SAPTA services and other SAPTA services. Applicants may choose to submit more than one application, for a different target population and/or priority service area.

11. **…is currently working on a SAPTA certification for IOP and OP, ASAM levels 2.1 and 1.0. We've submitted our Policies and Procedures, Checklist and QA manual earlier this month. … we will be fully credentialed for these services by the time that NOFO funds in October. Currently we are SAPTA certified for …services. I would like to write for Target A5: Multi-Service Program Delivery that must include at least three of the four programs 1) A1: Criminal Justice Diversion, A2: Transitional Housing, 2) A3: Community-based treatment. For Youth, I'd like to write for Y1 Juvenile Justice Diversion and Y3 Youth/Adolescent Community-based treatment. …will partner with a … and providing we are state certified to provide IOP and OP, will hire licensed personnel for the clinical portion. … would you be opposed to me writing for these services since currently ….holds only the ….? Or can I proceed with the grant writing as I described?**

   Pursuant to Section 4, "the requirement for services is to have two years of experience AND the ability to become SAPTA certified within six months. Since you hold SAPTA certification, you will need to demonstrate services have been provided for two years, and the ability to add additional SAPTA certifications within six months. Under this, you would be an eligible applicant.

12. **On Page 15 of the RFP it indicates that page numbers and headings are required. I want to verify that "headings" are referring to the specific narrative sections (organization description, project design, etc) and not to an actual header on top of the entire document.**

   Yes, Headings are specific to the narrative section.

13. **In regards to the scope of work, I want to verify that we need to create a table that looks like the one in the RFP and that there is not another work plan document that we need to fil out/complete.**

   Yes, you are correct. You will need to create a table for the scope of work that looks like the one in the RFP, which is aligned with the federal forms.

14. **Page 5 of the RFP indicates that we must be able to provide services within 30 days of grant award. A few questions about that: Does the program(s) have to be fully operational within 30 days, or can a portion of it be fully operational within 30 days, and another portion be rolled out in a phased approach. For example, if we are proposing to offer services at two sites, but one site will not be completely operational/open until 60-90 days after NOA, can we immediately start services at one site, and then start the services at the other site when it opens?**

You may propose the above and provide a timeline and details of services provided. You must be clear in your implementation plan on how and what services would be made available and at what timeline.

15. **The RFP indicates that Criminal Justice Diversion will not be eligible to begin until October 1, 2020. If we apply for two target activities/populations, does this mean that the other one would have to start within 30 days of NOA, and the Criminal Justice Diversion one would start within 30 days of October 1, 2020?**

DPBH anticipates that programs will begin on October 1, 2020 and/or thirty days after the Notice to Proceed. If other funding becomes available, the DPBH reserves the right to work with the applicant on alternative starting dates, which may be earlier. However, applicants should submit application(s) expecting an October 1, 2020 start date and provide the application for two years.

16. **Is the scope of work for one year or two years?**

Two years. However, any continuation of funds is at the discretion of DPBH.

17. **Is the budget for one year or two years**

Two Years. However, any continuation of funds is at the discretion of DPBH.

18. **For the "target transitional age youth/children" category, do they need to have a SMI diagnosis to be eligible to be served by the program?**

The youth targeted population must have a SED to be eligible for services. Applicants should explain how they are identifying the population and will be able to report information through their electronic health record.

19. **The RFP forms are not fillable forms. When I try to complete the "Project Abstract Form" it just takes me to a signature page. I can't actually do an editing or anything in the document. Will the state be sending out a document that we can edit/fill out?**

   The project Abstract is completed by the applicant on a separate piece of paper. The project Narrative is completed by the applicant on separate pieces of paper. The project Application, Budget, and Assurances are available for your use and the Application and Budget has been provided on the website as a fillable form. The Assurances would be printed from the NOFO, signed and attached to your application.

20. **Out of curiosity, will the state be sending out a complete list of the questions and answers from everyone? Or will I just get mine?**

   As part of a public process, all questions are open to the public.

21. **Can you please let us know if the maximum allowable per award is flexible? Or would we need to apply for an award per service level/target populations? For example, we would request $$ for Residential treatment Men (ap 1), $$ Residential treatment Women Pregnant and Parenting (ap 2), $$ Transitional Housing (ap 3), etc.**

   While DPBH reserves the right to modify funding based on the application quality and quantity, all applicants are expected to stay within the funding guidelines. Any increase will be based on the needs of the state.

22. **We are a previous STR and SOR funding recipient. Our program is not a treatment program. We support pregnant women who are using opioids with linkage to care, reducing barriers, providing support and education, and care coordination. Which service area would we select on page 17?**

   Women's Set Aside

23. **Does the applying agency have to provide assessments and diagnose individual clients with SUDs or can we work with a referring agency to assess, diagnose, and treat?**

   Applicants may team with profit or for-profit entities to ensure levels of care and requirements are met. The narrative should include details on the relationship and how the program will be implemented.

24. **In addition to above, if we work with another agency, do we need to request client records from a previous or current provider to keep on file to support the clients' history?**

    Applicants and partner organizations are required to maintain the required documents of care provided.

25. **How do community based-prevention programs follow the ASAM level of care? Can that be by referrals provided appropriate to the client needs or does that have to involve the program providing the lowest level of care to be able to recommend more intensive levels of care?**

    The SAPTA Block Grant is not for prevention, but for treatment. Yes, for treatment.

26. **How do you want us to track if the health and well-being of the children and families served is being improved?**

    Applicants are required to identify how they will track the outcomes of their proposed programs. DPBH reserves the right to work with the applicant to finalize the outcome measures prior to an issuance of any award.

27. **Can these funds be used to purchase an Electronic Health Records system?**

    No.

28. **Can these funds include program oversight personnel on the project (Target Population Pregnant Women and Women with Dependent Children)?**

    The Women's Set Aside allows a line item budget. However, the other target populations do not.

29. **Third-Party Payers of Mental Health Services Does your organization or its subcontractors bill any third-party payers (e.g. insurance companies) for planning services? Is that wording correct?**

    If an eligible client has a third-party payor source (i.e. any insurance), the applicant must ensure that those funds are used prior to any grant funds for insurance eligible services.

30. **Since we are not a treatment program, how would we answer the question about organizational capacity? Can we just focus on staff**?

    Organization capacity includes your staff experience and ability to deliver the level of care you are requesting funding for.

31. **The Project Design and Implementation should provide a detailed description of the program that will be funded. Describe how the project will address the Target Population in Section II. The applicant must tie project activities/deliverables to objectives and deliverables in the program design.** *The applicant must include the 1) Number of clients that can be served, 2) the type and level of services that will be provided, and 3) the capacity of the organization to meet those goals. Information should include the size of the facility such as the number of beds, clinical room, staff, etc.*

No question asked. Applicants must respond to questions appropriate to the design of their program. There is not one set of questions or answers that will be able to respond to all programs. You must identify how many individuals you expect to serve and how you will meet those goals.

32. **Paragraph II.4 states, "For the Pregnant Women or Women with Children Cohort, budget line items may include direct staff with appropriate justification (i.e. Community Health Worker)."** *With the increased need of women with young children above and beyond the normal services covered under the FFS rates, would you consider other budget categories to support this populations needs beyond the referenced Personnel costs?*

Applicants may submit a line item budget for Women's Services, which includes other costs.

33. **Paragraph III.2.A.1 states, "Collect data, including data collected using SAMHSA approved measurement instruments, at a minimum of pre and post service on each individual client served;" Paragraph III.2.A.5 states, "Comply with submitting data and information as part of the National Outcome Measures System (NOMS) and Treatment Episode Data Set (TEDS) to the DPBH's Central Repository (CDR).** *Will we be no longer be reporting WITS data?*

Should applicant be awarded funds through the NOFO, the DPBH will verify which data reports are required based on potential funding. WITS is the current system being utilized, but applicants will be required to utilize the system identified by the DPBH. DPBH provides updates to data collection requirements based on quality assurance and compliance with federal mandates.

34. **Paragraph III.2.B states, "Grantee will submit a Performance Report no later than thirty (30) calendar days after the end of each State Fiscal Quarter; and, Paragraph V.4.B states, "Quarterly progress reports will be due by the 15th of the month following the end of the reporting quarter."** *Are these referring to the same report, and if so, what is the deliverable due date?*

Based on the NOFO targeting multiple sources of funding, the standard timeframe will be on a federal fiscal year. If there are any reporting changes to a state fiscal year, that will be identified in the grant instructions as part of the sub-award. For the application, applications should submit based on federal fiscal years. All reporting will be verified in the Notice of Subgrant and clarified prior to any Notice to Proceed, if applicable. The program reports are programmatic. The fiscal reports are monthly and identified separately.

35. **Expected Project Period is based on the Federal Fiscal Cycle and Paragraph III.2.B first example bullet states "The number of unduplicated individuals served annually (by state fiscal year).** *For the first grant year i.e. October 1, 2020 through September 30, 2021, what should be reported for the first quarter of the state fiscal year i.e. July 1, 2020 through September 30, 2020?*

   This should be aligned with the federal fiscal year and not the state fiscal year. The first quarter will be October through December 2020.

36. **Paragraph IV.1.A states the "Completed applications must be submitted via mail to the DHHS-DPBH no later than Friday, June 29, 2020 by 3:00 PM (PST). Then it states, "Proposal(s) must be delivered via email in PDF format to: SLambert@DHHS.NV.GOV.** *Are you requiring both hardcopy (e.g., paper) and electronic submissions as this implies, and can the hardcopy application delivery carrier be someone other the U.S. Postal Service mail? What address should be used for mailing the hardcopy?*

   No. Applications will only be accepted in one PDF via on-line.

37. **Paragraph IV.2.E under "Budget Funding Limitations" it states, "FFS rates are enhanced Medicaid rates to incorporate activities for data and administration related to the grant."** *Would all FFS budget requests be submitted under the "Other Expenses" category?*

   This is acceptable.

38. **Can an applicant be considered for funding for BOTH the Substance Abuse Prevention and Treatment Services Block Grant (SAPTA BG) and State Opioid Response Grant (SOR)? The NOFO says 'or' and not 'and/or'.**

   Yes

39. **Based on a SOR meeting that… attended on 5/21/20, we were informed that a separate SOR continuation grant would need to be applied for this summer. How does that tie in with this grant?**

   This is the NOFO for the SOR funds.

40. **Is there an abbreviated application for applicants who are currently receiving SAPTA or SOR funds that may want to <u>request a continuation</u> of that funding.**

   No, that would not be compliant with the federal regulations which requires an open and competitive application process.

41. **….on page 5, 1st paragraph it says the NOFA will be used for other fed funded programs such as SOR. Does that mean those grants will require another application?**

   No, this application will be reviewed for all funding sources. DPBH wanted to limit the burden on applicants by creating one comprehensive application to be considered for funding. This also maximizes DPBH's ability to ensure no supplanting of funds, compliance with Code of Federal Regulations and maximizing program dollars to meet Nevada's diverse population needs.

42. **If we currently get SOR funding for pregnant/parenting women, then if I want to continue treating them, I have to apply for it in this application?**

   Yes

43. **What does an incentivized workforce mean? (page 8)**

   An incentivized workforce is one that is engaged, supports teamwork and cooperation. Employers that have an incentivized workforce typically has lower turn-over and employees who are innovative with high levels of client satisfaction.

44. **Can we write the SOW and budget for a consolidated 2-year period, or do we need a separate SOW and budget form, 1 for each year?**

   Each year will need a separate budget. The statement of work may be the same for both years. Be sure to include the number of individuals you plan to serve in the outcomes, which may be different at end of year one and end of year two.

45. **Will you be providing an editable application template that has all the required components in it: application form, narratives, budget form, etc**?

   See Question 19