



State of Nevada

Department of Health and Human Services

Division of Public Health and Behavioral Health

Bureau of Behavior Health Wellness and Prevention

2025 Problem Gambling Specialty Treatment Services

Request for Application

REVOLVING ACCOUNT FOR THE PREVENTION AND TREATMENT OF PROBLEM GAMBLING

NOTE: This document is available online at

[http://dpbh.nv.gov/Programs/ProblemGambling/Problem_Gambling_Services_\(PGS\)/](http://dpbh.nv.gov/Programs/ProblemGambling/Problem_Gambling_Services_(PGS)/)

CONTENTS	PAGE
Opportunity Summary: Section I	3
1.1 BACKGROUND	3
1.2 AVAILABLE FUNDING	4
1.3 GRANT PERIOD	4
1.4 PURPOSE OF FUNDING	4
1.5 REIMBURSEMENT METHOD	5
1.6 REPORTING AND OTHER REQUIREMENTS	6
1.7 ELIGIBILITY	6
1.8 EXPLANATION OF COMPETITIVE PROCESS	7
1.9 USE OF THE TERMS APPLICATION, PROPOSAL AND REQUEST	7
Application Process: Section II	8
2.1 APPLICATION QUESTIONS AND ANSWERS	8
2.2 EVALUATION AND AWARD PROCESS	8
2.3 AWARD OVERVIEW TIMELINE	11
2.4 NOTIFICATION AND AWARD PROCESS	11
2.5 UPON APPROVAL OF AWARD	12
Application: Section III	14
3.1 APPLICATION INSTRUCTIONS	14
3.2 APPLICATION FORM	16
3.3 PROPOSAL NARRATIVE	20
APPENDIX A: PROBLEM GAMBLING TREATMENT SERVICES SCORING MATRIX	24
APPENDIX B: FUNDING FORMULA FOR CURRENT GRANTEEES	25
APPENDIX C: APPLICATION CHECKLIST	26
APPENDIX D: COMPLAINTS FROM APPLICANTS NOT SELECTED	27

Opportunity Summary: Section I

This Request for Applications (RFA) is for competitive proposals to be funded through the Revolving Account for the Prevention and Treatment of Problem Gambling for State Fiscal Years (SFY) 2026 and 2027. This RFA is published and administered by the Bureau of Behavior Health Wellness and Prevention (BBHWP) Division of Public and Behavioral Health (DPBH). **This is a competitive process. Current grantees are not guaranteed funding and applicants who receive awards through this RFA are not guaranteed future funding.**

1.1 BACKGROUND

Nevada is viewed throughout the world as a leader in the casino and gaming sector with regards to regulation, technology, business strategies, and sophistication of its gaming companies. In the same manner, Nevada has sought to develop systems to reduce gambling-related harms by addressing problem gambling and developing strategies that promote safer gambling.

In 2005, the Nevada State Legislature passed Senate Bill 357 to create the Revolving Account for the Prevention and Treatment of Problem Gambling and an Advisory Committee on Problem Gambling (ACPG) to advise the Bureau of Behavioral Health Wellness and Prevention (BBHWP) in its administration of this account. At the time this Request for Applications (RFA) was written, Nevada Revised Statute (NRS) Chapter 458A, entitled “Prevention and Treatment of Problem Gambling” provided the program structure and funding mechanisms for the Revolving Account to Support Programs for the Prevention and Treatment of Problem Gambling.

Problem Gambling Treatment in Nevada is aligned with the DHHS Problem Gambling Services FY2024 - FY2027 Strategic Plan (Strategic Plan) cooperatively developed in SFY 2023 by BBHWP staff, a contracted technical expert, members of the ACPG, problem gambling grantees, and other stakeholders. The Strategic Plan includes goals followed by a brief description of ongoing activities and lists of enhancement activities intended to achieve the stated goal. The Problem Gambling Treatment Services SFY 2025 Provider Manual (Provider Manual), developed in conjunction with the Strategic Plan, delineates requirements that must be met by agencies and individual providers who wish to provide problem gambling treatment services funded by the Revolving Account for the Prevention and Treatment of Problem Gambling.

Applicants to this RFA are required to closely read and understand all the conditions described within the Provider Manual. The Provider Manual identifies BBHWP Problem Gambling Services administrative and professional policies, procedures, guidelines, and other information aimed at ensuring public safety, program efficiency, and service efficacy. The Strategic Plan and Provider

Manual may be viewed online:

[http://dpbh.nv.gov/Programs/ProblemGambling/Problem_Gambling_Services_\(PGS\)/](http://dpbh.nv.gov/Programs/ProblemGambling/Problem_Gambling_Services_(PGS)/)

For purposes of this RFA, applicants are asked to describe their service proposal based on the Problem Gambling Services Strategic Plan and Provider Manual. However, applicants should keep in mind the Strategic Plan and Provider Manual are considered living documents, thereby are regularly reviewed, and updated to meet emerging needs such as needing to correspond to modifications to align with the Bureau's Strategic Plan upon its release. When these documents are updated, a collaborative process is undertaken with discussion and input solicited from the ACPG, grantees, and other stakeholders.

1.2 AVAILABLE FUNDING

Projected available funding for Problem Gambling Treatment Services is approximately \$1,200,000 annually for SFY2026 and SFY2027. Additional monies may be reserved and made available each fiscal year for program needs such as contract budget adjustments based on factors that include higher than projected treatment encounter billing(s) and/or other emerging needs. These potential funds projections are subject to the availability of funds as well as all changes made by the 2025 Nevada Legislature during the state budgeting process. If changes occur during this RFAs open period, an amendment to this RFA will be published.

1.3 GRANT PERIOD

Awards made under this RFA are intended to span over two State Fiscal Years – 2026 and 2027, with the possibility of extensions. As the program budgeting process takes place annually, subawards are issued for a one-year period between July 1 and June 30th. The initial project period award will begin on July 1, 2025, and end June 30, 2026. All awards are subject to funding availability and contingent on grantee performance over the course of the grant.

1.4 PURPOSE OF FUNDING

The purpose of the funding is to support a network of effective and efficient problem gambling treatment programs in Nevada and to reduce the occurrence and impact of problem gambling on individuals, families, and communities. Problem Gambling Treatment is defined as the application of services by gambling treatment qualified mental health professionals for the primary purpose of reducing or eliminating symptoms related to problem gambling. Treatment must be administered by a Certified Problem Gambling Counselor (CPGC) pursuant to NRS 641C or Certified Problem Gambling Counselor Intern (CPGC-I) pursuant to the provisions of NRS 641C or be one of the other gambling treatment qualified mental health professional pursuant

to NRS 458A.057, with no fewer than 30 hours of DPBH approved problem gambling treatment education. Certified Peer Recovery & Support Specialist (PRSS) and PRSS Interns (PRSS-I) with a Problem Gambling Endorsement by the Nevada Certification Board may also provide grant funded services when working in collaboration with a gambling treatment qualified mental health professional as defined above. Services provided under the Problem Gambling Treatment award may include:

- Inpatient and/or outpatient services;
- Individual, group therapy, family therapy, and psycho-educational groups;
- Peer delivered recovery support services.

Successful applicants who receive grant funds to provide Problem Gambling Treatment Services **must** comply with all standards and provisions detailed in the Nevada DHHS Problem Gambling Treatment Provider Manual, including the follow Appendix documents:

- Appendix A: DHHS Problem Gambling Treatment Provider Guide
 - Exhibit 1: Residential Gambling Treatment Admission Criteria
 - Exhibit 2: Gambling Treatment Provider Standards
 - Exhibit 3: Encounter Data Reporting Requirements
 - Exhibit 4: Nevada DHHS Problem Gambling Services Procedure Codes and Reimbursement Rates
 - Exhibit 5: Problem Gambling Treatment Benefit Extension Request Form
 - Exhibit 6: Nevada Telehealth Counseling Policy Statement/Guidelines
 - Exhibit 7: Responsibilities for Clinical Site Supervisors and Site for CPGC-Is

The standards and provisions detailed in the Nevada DHHS Problem Gambling Treatment Provider Manual are subject to change during the grant period. Historical common changes include adding service codes, revising data reporting requirements, and providing additional details for clarifying clauses or conditions.

1.5 REIMBURSEMENT METHOD

All applicants whose proposals are funded will be reimbursed for treatment services based on a fee-for-service system described within the Provider Manual. Encounter Data Reporting Requirements are detailed in Exhibit 3 and the Procedure Codes and Reimbursement Rates in Exhibit 4 of the Provider Manual. As the Provider Manual is conceptualized as a living document, where revisions are made to meet emerging needs, the details in the Provider Manual are subject to change. As a general practice, changes made to the Provider Manual are accomplished through a collaborative process with grantees and the ACPG.

1.6 REPORTING AND OTHER REQUIREMENTS

All applicants whose proposals are funded will be required to report as described in the Provider Manual and are required to submit to the BBHWP quarterly progress reports based on approved outcome measures no later than 15 days following the end of each quarter.

All subrecipients providing direct services to clients are required to submit organizational and service information to Nevada 2-1-1 and to update that information annually and any other directory as identified by the state. Proof of submission and/or updates will be required within the first 60 days. Further, successful applicants will be required to provide and update the Nevada Council on Problem Gambling with information relevant to listing gambling treatment services on the Nevada Problem Gambling Helpline, a service provided by the Nevada Council on Problem Gambling.

1.7 ELIGIBILITY

Outpatient Gambling Treatment: All nonprofit and public agencies (including state, local and tribal governmental agencies, universities and community colleges) and for-profit agencies can apply if (a) they will be able to meet the provider qualifications and standards described in the Problem Gambling Treatment Services Provider Manual; (b) will be able to provides services that address one or more of the funding priorities described in this RFA; and (c) currently or within 12-months will be able to utilize Medicaid funding, where allowable, for Medicaid eligible clients. Because the purpose of this RFA is to develop a network of gambling treatment providers that are geographically distributed according to need, awardees must agree to continue to provide gambling treatment services at the location described in their application throughout the grant period, unless Department pre-approval for relocation is obtained prior to relocation.

Residential Gambling Treatment: Entities can apply if (a) they provide a dedicated and specific gambling treatment track or program congruent with American Society of Addiction Medicine (ASAM) Level 3.5 of care that includes no less than 25 hours per week of structured interventions inclusive of a minimum of 15 hours of clinical services specifically designed to address Gambling Disorder; (b) they are within a licensed inpatient mental health facility or residential alcohol and drug treatment facility that is in good standing and certified by a DHHS recognized accreditation board; (c) they will be able to meet the provider qualifications and standards described in the most current Problem Gambling Treatment Services Provider Manual; and (d) within two years they will receive a Substance Abuse Prevention and Treatment Agency (SAPTA) State Certification Gambling Endorsement

1.8 EXPLANATION OF COMPETITIVE PROCESS

This is a competitive grant solicitation process structured to meet accepted industry standards. It is inappropriate for applicants to attempt to influence the outcome in any manner other than by submitting a strong proposal. Transparency and respect of the process are essential for a fair result.

1.9 USE OF THE TERMS APPLICATION, PROPOSAL AND REQUEST

Throughout this document, the words “application” and “proposal” may be used interchangeably. Both refer to the documents that applicants will submit to support funding for their projects. In this section, a distinction is made between those documents and the point at which the documents become a qualified “request.”

Application Process: Section II

2.1 APPLICATION QUESTIONS AND ANSWERS

Substantive questions about the application may be requested via e-mail to k.garcia@health.nv.gov through **Friday, March 14, 2025**, and will be posted to the BBHWP website [http://dpbh.nv.gov/Programs/ProblemGambling/Problem_Gambling_Services_\(PGS\)](http://dpbh.nv.gov/Programs/ProblemGambling/Problem_Gambling_Services_(PGS)) with responses, by Friday, March 7, 2025. The Q&A will remain on the website through the end of the application period. **After, Friday, March 14, 2025, no substantive questions about the application will be answered.**

Technical questions about the application submittal process may be directed via e-mail at k.garcia@health.nv.gov or via telephone at (775) 684-4057 throughout the application period. Applicants are advised not to wait until the deadline to ask submittal questions since the BBHWP cannot guarantee immediate response and applications submitted after the published deadline will be disqualified.

2.2 EVALUATION AND AWARD PROCESS

Proposals received by the published deadline of **Wednesday, March 26, 2025, at 5:00pm** will be reviewed in a three-step process.

1. Staff from the BBHWP will review applications to ensure that minimum standards are met. Applications **may** be disqualified if they:
 - Are missing any fundamental material elements (unanswered questions, required attachments);
 - Do not meet the intent of the RFA;
 - Are submitted by an entity that is financially unstable as evidenced by information gleaned from the fiscal management checklist and required fiscal documents; or
 - Are submitted by an entity whose key personnel were associated with a past DHHS funded problem gambling treatment provider who were notified of non-compliance in meeting Department standards and failed to successfully implement corrective actions.
2. Applications that meet minimum standards will be forwarded to a review team composed of BBHWP staff and business associates. Reviewers will score each application, using the Scoring Matrix in [Appendix A](#) of this document, and develop preliminary funding recommendations for consideration by the Advisory Council on Problem Gambling (ACPG).

Award recommendations will be based on a combination of reviewer scores, geographic distribution of applicants, and geographic distribution of proposed services including service type and populations served. Funding awards for applicants who are SFY25-26 Nevada Problem Gambling Treatment grantees will be determined based on an allocation formula developed by BBHWP and Problem Gambling contracted technical expert(s) (see [Appendix B: Funding Formula for Current Grantees](#)).

3. In a public meeting scheduled for April 16, 2025, ACPG members without a conflict of interest (i.e., members who have applied for funding or have affiliation with the applicant agency) will discuss results of the reviews, funding recommendations prepared by the review team, and the performance of current or past grantees. Identified ACPG members with a conflict of interest must excuse themselves from Step 3 of the process. After the committee discussion, the ACPG will recommend applicants for funding to the BBHWP. No specific grant award amounts will be recommended. At this time, the ACPG may also recommend changes in an applicant's service plan to address concerns brought forward during the reviews.

Final funding decisions will be made by the BBHWP Bureau Health Chief based on the following factors.

- Consideration of the recommendations of the ACPG, and
- BBHWP review team scores and comments, and
- Reasonable geographic distribution of available funds within the Revolving Account for the Prevention and Treatment of Problem Gambling, and
- Conflicts or redundancy with other federal, state or locally funded programs, or supplanting (substitution) of existing funding, and
- Availability of funding.

Applicants not selected for an award may submit a complaint according to details found in Appendix E. **For applicants who are selected for an award, funding decisions made by the BBHWP Bureau Health Chief are final. There is no appeals process.**

Applicants will be notified of their status after the BBHWP Bureau Health Chief decisions have been made. BBHWP staff will conduct negotiations with the applicants recommended for funding. During these negotiations, any specific issues identified by the ACPG, BBHWP, or the BBHWP Bureau Health Chief will be addressed. These issues may include, but are not limited to:

- Revisions to the Scope of Work.
- Revisions to outcomes.
- Enactment of Special Conditions (e.g., certain fiscal controls, more stringent performance requirements, more frequent reviews).

Note that not all applicants who submit a qualifying proposal or are contacted for final negotiations will necessarily receive an award. Qualifying proposals not funded during the July 1, 2025, to June 30, 2026, fiscal year remain eligible for a future award until a new Gambling Treatment RFA is issued. All questions and concerns must be resolved before a grant will be awarded. Upon successful conclusion of negotiations, BBHWP staff will complete and distribute to grantees the Notice of Sub Award (NOSA), General Conditions and Grant Assurances, and Grant Instructions and Requirements (GIRS).

Awards will be based on a “not to exceed” grant amount that may be increased or decreased during the grant year, depending on utilization patterns of all treatment grantees and other conditions as detailed in the Provider Manual, Section IV.A.20.

BBHWP is not responsible for any costs incurred in the preparation and/or negotiation of the application and/or the award process. All applications become the property of BBHWP. BBHWP, in coordination with the ACPG, reserves the right to accept or reject any or all applications. Projects awarded funding are those deemed to be in the best interest of the people of the State of Nevada.

ALL FUNDING IS CONTINGENT UPON AVAILABILITY OF FUNDS.

2.3 AWARD OVERVIEW TIMELINE

	Applications for Problem Gambling Programs
Wednesday March 5, 2025	Publish Request for Applications (RFA)
Friday, March 14, 2025	Deadline for submission of substantive questions about RFA
Tuesday, March 18, 2025	BBHWP posts final Q & A for RFA on website
Wednesday, March 26, 2025, 5:00 pm	Deadline for submission of applications
Friday March 28, 2025	Applications are forwarded to reviewers
Monday, April 7, 2025	Reviewers return results of evaluations to BBHWP
Friday April 11, 2025	BBHWP staff provides ACPG with results of reviews and recommendations
Wednesday April 16, 2025	ACPG Meeting- BBHWP staff award recommendations and committee discussion
Friday May 2, 2025	BBHWP Health Bureau Chief makes final funding decisions
Monday May 5, 2025 – Monday June 30, 2025	BBHWP staff conducts final negotiations with funded agencies and issues grant awards
Tuesday July 1, 2025	Effective date for funds awarded to agencies

2.4 NOTIFICATION AND AWARD PROCESS

Applicants will be notified of their status with a Letter of Intent after decisions have been made in June 2025.

BBHWP staff will conduct negotiations with the applicants regarding the recommendation for funding to address any specific issues identified by the BBHWP, ACPG, or review panel.

All related issues must be resolved before a grant will be awarded. These issues may include, but are not limited to:

- Revisions to the project budget;
- Revisions to the Scope of Work; and/or
- Enactment of Special Conditions (e.g., certain fiscal controls, more stringent performance requirements or more frequent reviews).
- If not currently eligible to bill Medicaid, an approved plan to utilize Medicaid funds to support gambling treatment for Medicaid eligible clients.

Upon successful conclusion of negotiations, BBHWP staff will complete a written grant agreement in the form of a Notice of Subaward (NOSA). The NOSA documents and Grant Instructions and Requirements (GIRs) will be distributed to the subrecipient upon approval of the subaward.

2.5 UPON APPROVAL OF AWARD

A. Monthly Financial Status and Request for Funds Report filing

BBHWP requires the awardees of this RFA to submit individual-level service delivery activity (encounter data) each month as detailed in the Provider Manual, under Exhibit 3.

The data collection process is intended to create as minimal a burden on Providers as possible, while creating a sound documentation trail for necessary fiscal auditing that will occur at least once each year for all Providers. The system is designed to provide optimal flexibility for Providers to facilitate minimum changes to local procedures. All Providers will be required to comply with BBHWP and federal procedures for HIPAA compliance.

On the date this RFA was released, the UNLV International Gaming Institute was the BBHWP designee to manage the encounter data collection process. Should a different entity be designated in the future, BBHWP will amend the Provider Manual and communicate the change to Providers.

The UNLV International Gaming Institute has created an online data management system, to submit intake, encounter, and discharge data electronically, for use by all Providers. Data entry must be completed monthly by Providers in order to receive compensation for services provided. Please note that the claims reporting, review, and payment process may result in payment for a given service taking up to 90 days post-service.

B. Performance Report

Applicants who receive an award must collaborate with BBHWP in completing the department approved “Scope of Work” form upon receipt of letter of intent and reporting quarterly on progress in meeting the deliverables as described on the Scope of Work. Additionally, other performance reports may be requested and instructed by BBHWP. Quarterly progress reports will be due by the 15th of the month following the end of the reporting quarter. Failure to meet defined performance standards may result in corrective actions, funding reductions, and/or loss of grant award and/or loss of future awards

C. Recipient Monitoring

Approximately once per year, BBHWP Problem Gambling Service staff and/or their designees, will conduct a problem gambling treatment program review that will include an audit of at least one month of encounter claims and a sampling of client file reviews. The purpose of the program review is to ensure recipients are knowledgeable and compliant with the conditions of the grant award, including the most current Problem Gambling Treatment Services Provider Manual. Gambling treatment grant recipients must make reasonable accommodations for DBWP to conduct program reviews. Recipients are not reimbursed for their time in preparing for and meeting with BBHWP staff during program reviews, which may take up to 16 hours for multi-site and large programs. More commonly, the onsite portion of the program reviews are completed within 6 hours.

D. Compliance with Changes to Federal and State Laws

As federal and state laws change and affect either the DBPH process or the requirements of recipients, successful applicants will be required to respond to and adhere to all new regulations and requirements.

E. Nevada 2-1-1 and the Nevada Problem Gambling Helpline

All successful applicants will be required to add or update their agency’s profile on Nevada’s 2-1-1 website located at www.nevada211.org within 60 days after receiving notification of award and provide verification of enrollment. Nevada 2-1-1 is a statewide resource for individuals looking for assistance, services, and programs. Further, successful applicants will be required to provide and update the Nevada Council on Problem Gambling with information relevant to listing gambling treatment services on the Nevada Problem Gambling Helpline, a service provided by the Nevada Council on Problem Gambling.

Application: Section III

3.1 APPLICATION INSTRUCTIONS

- A. Completed application are due no later than **Wednesday, March 26, 2025, by 5:00 PM**. Application must be submitted online by emailing all required documents in a single email to k.garcia@health.nv.gov In the subject line of the email place the RFA title, "Problem Gambling Treatment RFA Response from [name of applicant]".

If a single email is too large to be accepted for transmittal or delivery by an email system used in the transmittal of the application then more than one email may be sent by indicating in the email subject line that the application has been emailed in parts (e.g., "Part 1 of 3").

If you do not receive an acknowledgement of application receipt with 72 hours, please contact Kim Garcia via e-mail at k.garcia@health.nv.gov or via telephone at (775) 684-4057.

- B. A complete application will require the following list of items to be included in the proposal. **Convert all items into PDF document format:**
- Application Form / Description of Applicant Organization
 - Service Description /Proposal Narrative (*20-page max, 1.0" margins, 11-pt Arial font*)
 - Proof of agency liability insurance
 - Proof of workers' compensation insurance
 - Most recent Single Audit and Management Letter (if agency receives more than \$1,000,000 annually in federal funds) OR most recent year-end financial statements (if federal audit is not applicable.)
 - Copy of treatment clinician(s) licenses, certifications, and resumes
 - As applicable, copy of agency's IRS 501(c)(3) Letter of Determination
 - As applicable, Letters of Agreement or Memorandums of Understanding
 - As applicable, Draft Agreements with Sub-awardees
 - As applicable, Board of Directors or Other Governing Board Roster, including member affiliations and terms of office
 - As applicable, copy of agency licenses and certifications
- C. There is no option to attach unsolicited materials to the online application. Any unsolicited materials mailed, delivered, or e-mailed to BBHWP will **not** be accepted. This includes support letters, cover pages, cover letters, brochures, newspaper clippings, photographs, media materials, etc.
- D. Complete the Application Checklist located in Appendix C prior to scanning/submitting. The Application Checklist is for the benefit of the applicants and is not required to be included in the submission packet.

- E. Once the application is submitted, no corrections or adjustments may be made prior to the negotiation period.

3.2 APPLICATION FORM

Note: A completed Application Form is mandatory. If the Application Form is not completed in full the application may be rejected or for minor deficiencies may receive a 5-point reduction in the scoring total.

Instructions: Complete each item. Add extra rows if more space is needed to provide complete response.

A. Type(s) of Proposed Gambling Treatment Service Outpatient Residential

B. Organization Type For-Profit 501(c)(3) Nonprofit Government Agency

C. Geographic Area of Service (list all locations where in-person services will be provided)

Address(es)	
-------------	--

D. Applicant Organization

Name		
Mailing Address		
Physical Address		
City & State		Zip (9-digit)
Federal Tax ID #		
State Vender ID #		
Unique Entity ID#		

E. Program Point of Contact

Name		
Title		
Phone		
Email		
Same mailing address as section B? <input type="checkbox"/> Yes <input type="checkbox"/> No, use below address information		
Address		
City		Zip (9-digit)

F. Fiscal Officer

Name & Title	
Phone & Email	

G. Subcontracting of Services

Does your organization subcontract its services? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Subcontractor	
Mailing Address	
Physical Address	
City	Zip (9-digit)
Federal Tax ID #	

H. Key Personnel

Name	Title	Licensed/Certified? <i>If yes, include copy of licenses/certifications in application</i>
		<input type="checkbox"/> Yes, CGAC or CGAC-I <input type="checkbox"/> Yes, other <input type="checkbox"/> No
		<input type="checkbox"/> Yes, CGAC or CGAC-I <input type="checkbox"/> Yes, other <input type="checkbox"/> No
		<input type="checkbox"/> Yes, CGAC or CGAC-I <input type="checkbox"/> Yes, other <input type="checkbox"/> No
		<input type="checkbox"/> Yes, CGAC or CGAC-I <input type="checkbox"/> Yes, other <input type="checkbox"/> No
		<input type="checkbox"/> Yes, CGAC or CGAC-I <input type="checkbox"/> Yes, other <input type="checkbox"/> No
		<input type="checkbox"/> Yes, CGAC or CGAC-I <input type="checkbox"/> Yes, other <input type="checkbox"/> No

I. Medicaid Payers of Services

Does your organization or its subcontractors bill Medicaid for services? <input type="checkbox"/> Yes <input type="checkbox"/> No	
List the names of Nevada Medicaid Enrolled Providers employed or contracted by your organization that would be eligible to bill Medicaid for gambling treatment services.	
If "No" is marked above, do you plan to be able to bill Medicaid for services within the next 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No	

J. Third-Party Payers of Services

Does your organization or its subcontractors bill any third-party payers (e.g., insurance companies) for services? <input type="checkbox"/> Yes, specified below <input type="checkbox"/> No			
Third-Party Payers	Period	Billables Received (\$)	Percentage of Operating Income (%)

K. Current Funding

Funding	Type	Project Period End Date	Amount Awarded (\$)

L. Certification by Authorized Official

As the authorized official for the applying agency, I certify that the proposed project and activities described in this application meets all requirements detailed within the Problem Gambling Treatment Services Provider Manual and of the legislation governing the grant as indicated by DHWP and the certifications in the Application Instructions; that all the information contained in the application is correct; that the appropriate coordination with affected agencies and organizations, including subcontractors, took place; that this agency agrees to comply with all provisions of the applicable grant program and all other applicable federal and state laws, current or future rules, and regulations. I understand and agree that any award received as a result of this application is subject to the conditions set forth in the Notice of Subaward and accompanying documents.

Name (type/print)

Phone

Title

Email

Signature

Date

3.3 PROPOSAL NARRATIVE

Instructions: Content defined in this section must be submitted by each applicant. Applicants applying for both outpatient and residential services are required to submit separate proposal narratives for each service category. The outpatient service category encompasses all outpatient gambling treatment services modeling American Society for Addiction Medicine (ASAM) Level 0.5 through Level 2.1. The residential gambling service category is specific to modeling ASAM Level 3.5. The applicant is limited to a total of 20 pages to address the below six proposal narrative sections. Pages must be formatted to use 1.0” margins and 11-point Arial font. The page limits exclude the Application Form (3.2), and attachments required under section 3.1.

Refer to the Nevada Problem Gambling Treatment Services Provider Manual for details about provider standards and expectations. Note only those treatment services with a code and rate within Exhibit 4 of the Provider Manual are eligible for reimbursement with these funds then answer the following questions.

I: Executive Summary (0 points)

Provide an overview of the proposed program or project.

II: Services Provided (40 points)

(a) Describe the services you will provide that fit within the “Nevada Problem Gambling Services Continuum of Care” (as described within the Strategic Plan).

(b) Describe the proposed program’s treatment models and processes from the first point of contact with potential clients through discharge and continued recovery support. (i) Include details about your use of evidence-based practices.

(ii) Describe specific recovery support services, tools, and collateral used within your proposed program.

(iii) Describe measures to assure screening, assessment, and treatment or referral for possible co-occurring substance use disorders, mental health disorders, or physical health issues.

(iv) For individuals receiving assistance from sources outside your program, describe how your program will coordinate care.

(c) If you plan to provide multiple levels of care, estimate the percentage of your clients whose primary course of problem gambling treatment will consist of ASAM Level 1 outpatient care, ASAM Level 2.1 intensive outpatient care, and ASAM Level 3.5 residential treatment.

(d) For Residential Gambling Treatment Applicants Only: Prior experience with Residential Gambling Treatment in Nevada suggests three core program challenges: 1. Difficulty maintaining sufficient staffing levels to support a dedicated and specific gambling treatment track or program; 2. Maintaining a daily client census large enough to hold therapy groups with individuals with a Gambling Disorder primary diagnosis; and 3. Relying on within agency transfers from Residential Substance Use Disorder Treatment into Residential Gambling Disorder Treatment to maintain the program. (a) Describe how your proposed Residential Gambling Treatment Program will address these challenges to create a sustainable service for those in need of residential gambling treatment at an ASAM Level 3.5, and (b) provide details on how your proposed program will meet the Eligibility criteria described on page 6.

III: Population to be Served (15 points)

(a) What geographical area will you serve? Provide service location addresses and indicate whether you will be providing statewide services and if so, explain how. Describe your primary treatment catchment area (Where do you expect most of your clients will come from?), include information about this area such as demographics of the area. As the Las Vegas Metro area is large and populous, if your program is based in the Las Vegas area describe what regions within the metro area you anticipate will form your client base.

(b) Provide a statement of need for the catchment area you propose to serve including current gambling treatment availability and any gaps you propose to fill within the proposed program's catchment area.

(c) Do you plan to target any special populations (e.g., veterans, seniors, traditionally underserved ethnic populations, persons with disabilities, youth)? If so, describe the populations and specific efforts and resources/partners that suggest those efforts will be successful. What led you to target your services in this manner?

IV: Organization and Staff (20 points)

(a) Provide an overview of your organization. How long have you been in business? How has the organization grown through the years? Is there a business plan in place?

(b) Provide a list of key staff members including the executive director, program manager, fiscal manager and program staff. For counselors, indicate whether they are a Certified Problem Gambling Counselor, Certified Problem Gambling Counselor Intern (CPGC-I), or hold other certifications, licensures, credentials, or experience that demonstrates their ability to succeed as a treating clinician for individuals with gambling disorders. If you intend to utilize peer recovery support services, describe your vision for how peer recovery support services will be

incorporated into your program. For all staff, indicate the length of time they have worked in the problem gambling field and for the organization.

(c) To what extent will you use CPGC-I(s) in the provision of service to State subsidized clients? If you will use CPGC-I(s), describe the supervision they will receive.

(d) Does your organization hold any certifications, licenses, or letters of approval as a treatment agency? If so, please provide details. Has your organization ever had disciplinary or legal action taken against it for ethical, legal, or contract violations? If so, please explain.

(e) Provide any additional details about your organization that you believe adds to its credibility as a viable candidate to provide state support gambling treatment services.

V: Support of DHHS Problem Gambling Services FY2024 - FY2027 Strategic Plan’s Treatment System Goals and Enhancement Activities (15 points)

The Strategic Plan includes sections on Nevada’s Problem Gambling Services Framework (Section III) and “Priorities, Goals, Tactics” (Section IV). Describe how the proposed gambling treatment program will contribute to advancing Nevada’s Problem Gambling Service System’s stated goals described under the Section IV headings: advance equity, expand service, engage partners, foster excellence, and promote sustainability.

VI: Funding Request (10 points)

(a) For Current Grantees: Funding for treatment will be allocated based on a formula developed by the BBHWP staff and used in previous years (See Appendix B of the RFA.) Apply this allocation formula by completing the table below for your agency. If you do not have the data available, request the information from your DHHS grant administrator.

Draws from July 2023 through June 2024*	Performance Rating Adjustment** (7/7 performance standards = 10% increase, 6/7 = 5% increase, 5/7 = 0%, 4/7 = (-10%), 3/7= (-20%)	Projected Need for FY26 Award***

*SFY2024 encounter claims data will be utilized in the funding formula for FY2026.

**Performance rating adjustment based on SFY2024 findings as reported in the UNLV International Gaming Institute, Nevada Problem Gambling Study, Annual Report, Fiscal Year 2024.

***This formula will be used as a basis to provide beginning of the year allocations. Recognizing significant program changes may have occurred in SFY2025, other considerations may be factored in

during the post-award budget negotiation period. At least one adjustment each fiscal year will be made to best match available funding with updated grantee claims data. Allocation adjustments may increase or decrease award amounts over the course of the grant period based on grantee claim totals, systemwide claim totals, and available funding.

(a) For New Applicants / Applicants who are Not a Current Grantee: Sharing principles with the funding formula for current grantees, new applicants must base their funding requests on two primary factors; projected number of clients to be served and average cost per problem gambler treatment episode. To calculate funding request, complete the below table:

Funding Request Formula: Applicants who were not gambling treatment grantees in SFY2025

Enrollment Category	Projected Number of Enrollments in SFY 2026	Average Case Cost	Total
Outpatient Gambling Treatment		\$1,596	
Outpatient Concerned Other		\$1,270	
Residential Gambling Treatment		\$2,033	
Total Funds Requested			

Note: Average case cost based on actual data from SFY2024 and were calculated from all enrollments including those who left treatment early against staff advice and successful completers.

Provide a detailed justification for the projected number of clients to be served and how that projection was formulated including assumptions. Cite any applicable historical data, research, or other supporting information.

(b) All Applicants: Grantees are encouraged to support their problem gambling treatment services from multiple funding streams including Medicaid, private insurance, charitable fund raising, corporate sponsorship, etc. List sources of income, financial support, donated services, or any collaborative projects your organization is engaged in, that will help sustain and grow services for problem gamblers and their concerned others should funding from this RFA’s resulting grants be insufficient to meet treatment demand or other identified needs.

APPENDIX A: PROBLEM GAMBLING TREATMENT SERVICES SCORING MATRIX

Accepted proposals will be evaluated based on the following criteria:

- A. All parts of each section are included and addressed.
- B. Descriptions and details are clear, organized and understandable.
- C. Descriptions are responsive to the intent of the RFA objectives.
- D. The overall ability of the applicant, as judged by the evaluation committee, to successfully provide services in accordance with the Problem Gambling Prevention Guidelines.
- E. Proposals with an average reviewer score lower than 70 may be excluded from further consideration. Proposal with an average reviewer score lower than 60 will be deemed unqualified for any rewards resulting from this RFA.

Points will be assigned for each item listed as follows:

- 80% - 100% of Maximum Points:** Applicant’s proposal or capability is superior and exceeds expectations for this criterion.
- 70% - 79% of Maximum Points:** Applicant’s proposal or capability is satisfactory and meets expectations for this criterion.
- 60% - 69% of Maximum Points:** Applicant’s proposal or capability is unsatisfactory and contains numerous deficiencies for this criterion.
- 0 – 59% of Maximum Points:** Applicant’s proposal or capability is not acceptable or applicable for this criterion.

The maximum points to be awarded for each proposal section are as follows:

Proposal Component	Potential Maximum Score
I. Executive Summary	Not Scored
II. Services Proposed/ Program Description	40
III. Population to be Served	15
IV. Organization and Program Staff	20
V. Support of DHHS Problem Gambling Services 2024 & 2027 Strategic Plan’s Treatment System Goals and Enhancement Activities	15
VI. Funding Request	10
Total*	100

**A completed Application Form (Section 3.2) is mandatory. If the Application Form is not completed in full the application may be rejected or for minor deficiencies may receive a 5-point reduction in the scoring total.*

APPENDIX B: FUNDING FORMULA FOR CURRENT GRANTEES

Problem Gambling Treatment Funding Awards for SFY2026 Based on Draws in SFY24

Draws from July 2023 through June 2024*	Performance Rating Adjustment** (7/7 performance standards = 10% increase, 6/7 = 5%, 5/7 = 0%, 4/7 = (-10%), 3/7= (-20%)	Projected Need for FY26 Award***

BBHWP Problem Gambling Treatment Grantee Performance Standards

Access: The amount of time between a problem gambling affected individual’s request for outpatient services and the first offered service appointment must be five business days or less for at least 90% of all individuals receiving services funded through this Agreement.

Retention: The percent of problem gambling affected individuals receiving services funded through this Agreement who actively engage in problem gambling treatment for at least 10 clinical contact sessions must not be less than 50%.

Successful Completion: The percent of all individuals receiving services funded through this Agreement who successfully complete treatment must not be less than 50%. A successful problem gambling treatment completion is defined as the individual’s: (a) achievement of at least 75% of short-term treatment goals, (b) completion of a continued wellness plan (i.e., relapse prevention plan), and (c) lack of engagement in problem gambling behaviors for at least 30 days prior to discharge from services.

Client Satisfaction: The percent of problem gambling affected individuals receiving services funded through this Agreement who complete a problem gambling client satisfaction survey would positively recommend the Provider to others must not be less than 85%.

Long-term Outcome: The percent of problem gambling affected individuals receiving services funded through this Agreement who successfully complete treatment whose responses to a problem gambling follow-up survey suggest maintained improvement at twelve months after intake must not be less than 50%.

Consent for Follow-Up Evaluation: The percentage of problem gambling affected individuals receiving services funded through this Agreement at each clinic consenting for follow-up evaluation should be no less than 80% of the average percentage of clients consenting system wide.

Documentation Accuracy: A comparison of documented clinical services provided within client files and client sign-in sheets with encounters entered the UNLV Problem Gambling Treatment Data Management System must have a correspondence rate of 95% or greater for any period of 28 consecutive calendar days or longer.

APPENDIX C: APPLICATION CHECKLIST

Complete this checklist prior to scanning/submitting.

Section I: Application Form

- All boxes are checked to indicate the correct answer.
- All fields are completed according to instructions.
- Certification is signed.

Section II: Narrative

- Section 3.3-I: Executive Summary*
- Section 3.3-II: Services Proposed/ Program Description*
- Section 3.3-III: Population to be Served*
- Section 3.3-IV: Organization and Program Staff*
- Section 3.3-VI: Support of DHHS Problem Gambling Services 2022 & 2023 Strategic Plan's Treatment System Goals and Enhancement Activities*
- Section 3.3-VI: Funding Request*
- Page limits have not been exceeded.
- Arial 11-point font has been retained.
- One-inch margins have been retained.

Application Submission

Include copies of the following:

- Proof of agency liability insurance
- Proof of workers' compensation insurance
- Most recent Single Audit and Management Letter (if agency receives more than \$1,000,000 annually in federal funds) OR most recent year-end financial statements (if federal audit is not applicable.)
- Copy of treatment clinician(s) licenses, certifications, and resumes
- As applicable, copy of agency's IRS 501(c)(3) Letter of Determination
- As applicable, Letters of Agreement or Memorandums of Understanding
- As applicable, Draft Agreements with Sub-awardees
- As applicable, Board of Directors or Other Governing Board Roster, including member affiliations and terms of office
- As applicable, copy of agency licenses and certifications
- A PDF will be emailed to K.GARCIA@HEALTH.NV.GOV with all required documentation no later than March 26, 2025, by 5pm.

APPENDIX D: COMPLAINTS FROM APPLICANTS NOT SELECTED

The Bureau of Behavioral Health Wellness and Prevention (BBHWP) is responsible for the development, release, review, and accountability of Grants. Due to various Grant funding sources, there are various regulation and authorities in which BBHWP must abide by, both federal and state.

The BBHWP is required to abide by the [Nevada State Administrative Manual](#) (SAM) and stay apprised on any revisions. Section 3000 – Federal Grant Procedures, outlines additional information related to Grants, including the related Nevada Revised Statutes (NRS) related to compliance. Section 3020 – Grant Awards specifically identifies the guidelines in which BBHWP may award grants. Below is cited from Section 3020 of the SAM:

The procedures must include:

- 1. Written guidelines which help applicants determine whether and how to apply for the grant.*
- 2. A method to publicize grant opportunities.*
- 3. A structured applicant review process using pre-established criteria and a scoring system. (Note: a scoring system is not required if the grant specifies the entity who shall receive the funds and how the funds will be allocated.)*
- 4. A procedure for dealing with complaints from applicants who were not selected for award. These complaints should be investigated by someone of authority.*
- 5. A written grant agreement to be used upon issuing the award.*
- 6. Guidelines that address conflicts of interest.*
- 7. Procedures for reporting fraud and waste.*

Section 3020 for the SAM further states:

Agencies must have a procedure for responding to complaints from applicants who were not selected for award. At a minimum, these complaints should be investigated by someone of authority. The results of the investigation must be documented.

In accordance with the SAM manual requiring a procedure to deal with complaints from Applicants who were not selected for award, the BBHWP has developed and utilizes the following procedure for addressing complaints.

If an Applicant was not selected, they may request a meeting either in writing or verbally within ten (10) business days of receipt of the notice to k.garcia@health.nv.gov. A follow up email will

be sent within five (5) business days to schedule a meeting that is convenient to all involved parties. The following information will be shared and may be provided in writing upon request:

- Review of the scores utilizing the pre-established scoring outlined in the grant application.
- Strengths and weaknesses of the application based on the outlined goals and/or objectives of the grant.

The Applicant may choose to include outside parties not affiliated to their agency to participate in the meeting.

If the Applicant is not satisfied with the results of the Strengths and Weaknesses meeting, they may request in writing an additional review within three (3) business days of the meeting to k.garcia@health.nv.gov and it will be reviewed within five (5) business days with a written response. This will be conducted by the Bureau Health Chief or designee, not included in the selection and has authority to overturn a decision made.

The BBHWP will provide any additional suggestions for other opportunities, if available, as well as provide any known resources to assist the applicant in pursuing their goals as outlined in the applications.