

# OPIOID STATE TARGETED RESPONSE (STR)

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Integrated Opioid Treatment and Recovery Center  
Request for Application Informational Webinar

# Request for Application Timeline: updated - 10/2/2017

TASK	DUE DATE & TIME
SAPTA distributes the Request for Application Guidance with all submission forms	September 22, 2017
Q&A Written Questions due to SAPTA	September 27, 2017
Informational Webinar to address questions	October 9, 2017 (1:00p.m. – 2:00p.m.)
<b>Deadline for submission of applications</b>	October 23, 2017, by 4:00p.m.
Technical Review of Applications	October 24-25, 2017
SAPTA will notify organizations that have discrepancies within their application.	COB October 25, 2017
Evaluation Period: Content review of applications	October 26-31, 2017
Interviews with Applicants	November 1, 2017
Funding Decisions Announced – SAPTA will notify organizations via e-mail to the listed Project Director	November 3, 2017
Completion of subgrant awards for selected awardees	November 10, 2017
Grant Award Commencement of Project – Pending approved SAMHSA grant award and receipt of Notice of Award	November 15, 2017

# Introduction

- In April 2017 Nevada was awarded the State Targeted Response to the Opioid Crisis Grant
- Designed to address the opioid crisis by:
  - Increasing access to treatment.
  - Reducing unmet treatment need.
  - Reducing opioid overdose related deaths through the provision of prevention, treatment and recovery activities for opioid use disorders.

- As an Opioid STR Grantee, the State of Nevada is required to expand access to treatment and recovery services, and must:
  - Implement system design models that will most rapidly address the gaps in their systems of care;
  - Deliver evidence-based treatment interventions, including medication and psychosocial interventions;
  - Report progress toward increasing availability of treatment for OUD and reducing opioid-related overdose deaths based on measures developed in collaboration with the Department of Health and Human Services (DHHS); and
  - Improve retention in care.

# Purpose

This funding opportunity will establish a hybrid system of coordinated care for OUD in Nevada in order to increase the availability, utilization, and efficacy of Medication Assisted Treatment (MAT), and provide pathways to evidence-based recovery and support services by establishing an Integrated Opioid Treatment and Recovery Center's (IOTRC) System for Nevada residents with OUD.

# What is an IOTRC?

An Integrated Opioid Treatment and Recovery Center (IOTRC) will serve as the regional consultants and subject matter experts on opioid use disorder treatment, provide Medication Assisted Treatment (MAT) and Recovery services for adult and adolescent populations, and offer comprehensive services either in-house or through formalized care coordination agreements.

# Award Information

- Funding Opportunity Title: State of Nevada Opioid STR Integrated Opioid Treatment and Recovery Center Request for Application
- Estimated Number of Awards: Minimum 3
- Estimated Award Amount: \$700,000
- Project Period: Upon approval through April 30, 2018
- Eligible Applicants:
  - Certified Community Behavioral Health Clinics (CCBHC)
  - Federally Qualified Health Centers (FQHC)
  - Opioid Treatment Service Provider (OTP)

# Award Information - continued

- Additional Information on Eligibility
  - Eligible applicants must be enrolled as a Medicaid provider and if possible demonstrate that the organization is actively billing Medicaid.
- Clinic locations must be in at least one of the required geographical areas (counties): Carson, Churchill, Clark, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, Washoe, or White Pine
- This is a competitive process.
- Sub recipients receiving awards through this RFA are not guaranteed future funding
- All costs incurred in responding to this RFA will be borne by the applicant(s).



# Nevada Integrated Opioid Treatment and Recovery Center

Eligible Organization	IOTRC to provide at a minimum	Formal Written Care Coordination Agreements to Provide (IOTRC may choose to offer these services internally)
Certified Community Behavioral Health Clinic (CCBHC)	<ul style="list-style-type: none"> <li>• Behavioral Health Screening/ Assessment</li> <li>• Medical Evaluation</li> <li>• FDA Approved Medication for OUD Treatment</li> <li>• ASAM Level 1 Ambulatory Withdrawal Management</li> <li>• Toxicology Screening</li> <li>• ASAM Level 1 Outpatient</li> <li>• Overdose education and naloxone distribution</li> <li>• Psychiatry</li> <li>• Mobile Recovery</li> <li>• Peer/Recovery Support Services</li> <li>• Care Coordination</li> <li>• Supported employment</li> <li>• Enrollment into Medicaid, TANF, SNAP, WIC</li> <li>• Engagement with criminal justice entities (e.g. police, judicial, correction)</li> </ul>	<ul style="list-style-type: none"> <li>• Opioid Treatment Provider for Methadone</li> <li>• ASAM Level 3.2 and Level 3.7 Withdrawal Management</li> <li>• OB/Perinatal providers</li> <li>• Office-Based Opioid prescribers</li> <li>• ASAM Level 3.1 and Level 3.5 Residential Services</li> <li>• Transitional Housing per SAPTA Division Criteria</li> <li>• COD and other Community-based service providers</li> <li>• Wellness Promotion</li> <li>• FQHC partnership</li> <li>• HIV/Hep C Testing</li> </ul>

# Nevada Integrated Opioid Treatment and Recovery Center

Eligible Organization	IOTRC to provide at a minimum	Formal Written Care Coordination Agreements to Provide (IOTRC may choose to offer these services internally)
Federally Qualified Health Center (FQHC)	<ul style="list-style-type: none"> <li>• Behavioral Health Screening/ Assessment</li> <li>• Medical Evaluation</li> <li>• FDA Approved Medication for OUD Treatment</li> <li>• ASAM Level 1 Ambulatory Withdrawal Management</li> <li>• Toxicology Screening</li> <li>• ASAM Level 1 Outpatient</li> <li>• Overdose education and naloxone distribution</li> <li>• Psychiatry</li> <li>• Mobile Recovery</li> <li>• Peer/Recovery Support Services</li> <li>• Care Coordination</li> <li>• Enrollment into Medicaid, TANF, SNAP, WIC</li> <li>• Engagement with criminal justice entities (e.g. police, judicial, correction)</li> </ul>	<ul style="list-style-type: none"> <li>• Opioid Treatment Provider for Methadone</li> <li>• ASAM Level 3.2 and Level 3.7 Withdrawal Management</li> <li>• ASAM Level 3.1 and Level 3.5 Residential Services</li> <li>• OB/Perinatal providers</li> <li>• Office-Based Opioid prescribers</li> <li>• Transitional Housing per SAPTA Division Criteria</li> <li>• COD and other Community-based service providers</li> <li>• Vocational rehab</li> <li>• Wellness Promotion</li> <li>• CCBHC partnership</li> <li>• HIV/Hep C Testing</li> </ul>

# Nevada Integrated Opioid Treatment and Recovery Center

Eligible Organization	IOTRC to provide at a minimum	Formal Written Care Coordination Agreements to Provide (IOTRC may choose to offer these services internally)
Opioid Treatment Service Provider	<ul style="list-style-type: none"> <li>• Behavioral Health Screening/ Assessment</li> <li>• Medical Evaluation</li> <li>• FDA Approved Medication for OUD Treatment, including Methadone</li> <li>• ASAM Level 1 Ambulatory Withdrawal Management</li> <li>• Toxicology Screening</li> <li>• ASAM Level 1 Outpatient</li> <li>• Overdose education and naloxone distribution</li> <li>• Mobile Recovery</li> <li>• Peer/Recovery Support Services</li> <li>• Care Coordination</li> <li>• Enrollment into Medicaid, TANF, SNAP, WIC</li> <li>• Engagement with criminal justice entities (e.g. police, judicial, correction)</li> </ul>	<ul style="list-style-type: none"> <li>• ASAM Level 3.2 and Level 3.7 Withdrawal Management</li> <li>• ASAM Level 3.1 and Level 3.5 Residential Services</li> <li>• OB/Perinatal Providers</li> <li>• Psychiatry</li> <li>• Office-Based Opioid prescribers</li> <li>• Transitional Housing per SAPTA Division Criteria</li> <li>• COD and other Community-based service providers</li> <li>• Vocational rehab</li> <li>• Wellness Promotion</li> <li>• CCBHC and FQHC partnerships</li> <li>• HIV/Hep C Testing</li> </ul>

# Program Funding

- Program funds may support staff salaries, training opportunities, technical assistance, and residential services.
- Funds cannot be used to supplant existing positions.
- ***The expectation is that staff supported by these funds cannot bill 3<sup>rd</sup> party payers for services rendered by grant funded positions. By no later than the end of the grant cycle (4/30/18), all grant funded positions will be converted to 3<sup>rd</sup> party billing options (e.g. Medicaid, SAPTA).***

# Allowable Budget Items/Activities

- *Salary Support*
  - Allowable funds for the onboarding of new staff positions:
    - Nevada Licensed Healthcare professionals
    - Nevada Licensed / Certified Behavioral Health Professionals
    - Care Coordinators
    - Peer Support Specialists
- *Training and Technical Assistance (No more than 10% of your budgeted costs)*
  - Allowable funds for:
    - Training and technical assistance to increase provider competencies specifically related to the treatment, care coordination, and recovery support of individuals with OUD.

# Allowable Budget Items

- Residential Services (No more than 20% of your budgeted costs)
- Allowable funds for:
  - Level 3.2 or Level 3.7 Residential Withdrawal Management services based on ASAM Criteria and Division Criteria.
  - Level 3.1 or Level 3.5 Residential treatment services for MAT clients based on ASAM Criteria and Division Criteria.
- Transitional Housing services for MAT clients based on Division Criteria.
- Reimbursement of services within this category must be consistent with Division established rates of reimbursement **for room and board only as established by SAPTA** and must demonstrate all applicable licenses through Health Care Quality and Compliance (if applicable) and Division Certification for the level of care provided. ***All ASAM residential/transitional services that can be reimbursable under Medicaid or 3<sup>rd</sup> party payers must be billed to those payers.***

***To promote sustainability of services designed under this RFA, a sustainability plan for uninterrupted continuation of services must be included in this submission and be in place no later than the end of the grant cycle (4/30/18).***

# Non-allowable Budget Items

- Supplanting of existing positions.
- Individual provider purchase of naloxone.
- The purchasing of property, the construction of new structures, and the addition of a permanent structure, capital improvements of existing properties or structures.
- Bus passes / transportation.

# Technical Requirements

- **Certification required to receive funding from the Division of Public and Behavioral Health, hereafter referred to as the Division. ([NRS 439.200](#), [458.025](#))**
  - A program must be certified by the Division through SAPTA to be eligible for any state or federal money for alcohol and drug abuse programs administered by the Division pursuant to [chapter 458](#) of NRS for the prevention or treatment of substance-related disorders. For currently non-certified applicants refer to the Certification Process below.
- Organizations must be enrolled as a Medicaid Provider at the time of application submission.
- **Excluded Parties** – DPBH requires that no sub-recipients of federal funding are to be found on the Lists of Parties Excluded from Federal Procurement or Non-procurement Programs accessible at <https://www.sam.gov>.
  - (Added to NAC by Bd. of Health by R120-04, eff. 10-5-2004)



# Division Certification Process through SAPTA

The following steps describe the process to submit a Certification Application along with the funding application:

1. Contact J'Amie Frederick from SAPTA via email at [jfrederick@health.nv.gov](mailto:jfrederick@health.nv.gov) to obtain the Division Certification Application and checklist.
2. In addition to the application checklist materials requirements, please include the following items with your Certification Application Packet and submit per the instructions on the Certification Application.
  - a. A copy of the manual containing the policies and procedures of the program per NAC 458/ Division Criteria <https://www.leg.state.nv.us/NAC/NAC-458.html>;
  - b. Health Care Quality & Compliance (HCQC) license if applicable, this would include a Narcotic Treatment Center in which Methadone maintenance is provided, if applicable.
  - c. Also, copies of FDA Waiver for Physicians, Physician Assistants and Nurse Practitioners approved to prescribe medications for OUD treatment.

# Medicaid Enrollment Requirements

- Organizations must be enrolled in both Fee For Service (FFS) Medicaid and with each Managed Care Organization to the extent they have open networks in order to maximize all Medicaid billing opportunities.
- If possible, the applicant organization must demonstrate that they are actively billing Medicaid for services at time of application submission.

# Application Submission

- Applications must be completed on the forms included in the application packet provided by SAPTA. The application packet must be emailed to Dennis Humphrey in original files (Word, Excel) and five required hard copies must be received **on or before the deadline of October 23, 2017, by 4:00 p.m.**

Deliver hard copies to:

Dennis Humphrey, Program Manager  
Nevada Department of Health and Human Services,  
Division of Public and Behavioral Health  
Opioid STR, Integrated Opioid Treatment and Recovery  
Center, Request for Application Grant  
4126 Technology Way, Second Floor  
Carson City, NV 89706

# Grant Objectives

- **Goal I:** Implementation of the Integrated Opioid Treatment and Recovery Center (IOTRC) System to provide treatment and recovery services for Nevadans with an opioid use disorder (OUD) in the proposed service area.
- **Goal II:** Establish the infrastructure and staffing for an IOTRC System in the proposed service area.
- **Goal III:** Evaluate process and outcomes measures for the IOTRC for treatment and recovery services for Nevadans with an OUD. *Specific forms for data collection will be finalized and distributed to awardees.*

# Organizational Strength & Description

In no more than three pages, single spaced, please describe:

- The clinic/agency's history, client population and levels of service provided, along with the mission and purpose of the agency and how it aligns with this project,
- The proposed geographical service area based on the identified counties where services will be provided,
- Clinic/Agency experience in the community, to include knowledge and familiarity with the level of need for services within your selected service area and what group or groups of individuals will be targeted for services by the program,
- Describe the services to be provided and outreach methods that will be used to effectively reach the target population
- The qualification and tenure of staff members providing the proposed services (if staff is not currently hired, include a plan to onboard new staff, type of staff and timeline in which this will occur),
- The structure of the agency including the Board of Directors (if applicable), hours of operation, and number of locations and,
- Discuss whether your program and activities will have a local, regional or statewide impact.

# Collaborative Partnerships

In no more than two pages, single spaced, please describe:

- Ongoing collaborative efforts with community-based organizations ;
- The types of identified collaborating partners and their roles within this project (include formalized care coordination agreements if already in place, or letter of agreement if formal agreement is not yet finalized, and
- If the project is to be accomplished through a sub-awardee, list the name and address of each sub-awardee, and
- The Plan to monitor the sub-awardee to ensure adherence to the provisions of the final award agreements and terms.

*\*Please note that any sub-awardees must be certified by SAPTA and an approved vendor for the state of Nevada-DPBH.*

# Service Delivery

In no more than three pages, single spaced, please describe:

- The organization's proposed structure and layout of the Integrated Opioid Treatment and Recovery Center (IOTRC) System per the applicable eligible organization listed in Part 1, Table 1, on Page 9, and
- The organization's ability to fulfill the scope of work deliverables as outlined in Part 2, Table 1, and
- Description of the evidence-based practices to be utilized for treatment of OUD patients, rationale for selecting the evidence based practices, and any anticipated adjustments needed to address specific needs of your population [see National Registry of Evidence-based Programs and Practices (NREPP) <https://knowledge.samhsa.gov/ta-centers/national-registry-evidence-based-programs-and-practices>]. If adjustments are needed to an evidence based practice discuss how you will ensure primary elements of the practice will not impact effectiveness.

# Service Delivery, cont.

- Proposed plan to expand access to treatment and recovery services, to include number of new, unduplicated number of patients with an OUD to be served and how new OUD patients will be engaged, and
- Describe your organizations proposed Mobile Outreach Recovery Team, to include team staffing and how the team will provide linkages and referrals back and forth to the local IOTRC System for engagement, treatment, and/or recovery support for treatment transition.
- Description of MAT-FDA Waiver Approved Prescribers (if staff is not currently hired, include a plan to onboard new staff, type of staff and timeline for implementation of prescribing).



# Cost Effectiveness & Leveraging of Funds

In no more than one page, single spaced, please describe:

- The organizations existing grants and projects and services dedicated to addressing OUD, prevention overdose and recovery activities and how such funding, project, and/or services will be leveraged, and
- The organizations ability for reimbursement of applicable services, including the sources of reimbursement.

# Outcomes & Sustainability

In no more than three pages, single spaced, please describe:

- Based on the applicant's responses within the Feasibility and Readiness Tool please address areas of concern and identify strategies to increase feasibility and readiness of your organization to operate as a IOTRC, and
- The organization's sustainability plan, including timeline, identified 3<sup>rd</sup> party payers, existing contracts with Managed Care Organizations, as well as any applicable Certification, Licensing, or Accreditation to ensure continuation of services once grant funding expires, and
- Data collection and management plan for required submission of process and outcome measures in a timely manner.

# Data Collection & Performance Measures

## Required Performance Measures:

- The Subgrantee shall collect all data elements for the Nevada OUD patients identified below. These data elements shall be collected and reported quarterly to the DPBH.
  - Treatment Episode Data (TEDs);
  - Number of people who receive OUD treatment by race and ethnicity;
  - Number of people who receive OUD recovery services by race and ethnicity;
  - Number of providers implementing MAT; Contractor's Name Number of coordinated care agreements in place
  - Number of OUD prevention and treatment providers trained, including nurse practitioners, physician assistants, physicians, nurses, counselors, social workers, and care coordinators; and
  - Naloxone data including the number of prescriptions provided to patients or family members, number of units distributed, and overdose reversals.

# Data Collection & Performance Measures Cont.

- In addition to collecting the data identified above, the Subgrantee shall identify and track additional metrics aimed at quality improvements of patient care as designated by the Division.
- The Subgrantee shall report on the identified measures and the quality improvement activities aimed at improving performance on these measures in the quarterly reports for submission to SAPTA or assigned Project Manager.

# Budget

- All proposals must include a detailed project budget for the first year of the grant. The budget should be an accurate representation of the funds needed to carry out the proposed Scope of Work and achieve the projected outcomes. If the project is not fully funded, SAPTA and STR project staff will work with the applicant to modify the budget, the Scope of Work and the projected outcomes.

# Feasibility & Readiness Tool

- Must be completed and submitted with application packet
- It is important to note that the Integrated Opioid Treatment and Recovery Center (IOTRC) is a new certification for the State of Nevada. The feasibility and readiness tool will assist in determining your individual organizations readiness to provide the services outlined in the charts we discussed earlier in this presentation and in Part I [pages 7-8] of the RFA.

# Question & Answer

Question: Can grant funding be used to pay for leasing new clinic locations in rural areas, including purchasing of equipment necessary for opening?

Answer: No, not at this time.

Question: Can funds be used for the lease of a van for a mobile outreach team?

Answer: Yes, funds can be used for the lease of a van for the mobile outreach team, however the applicant organization must include a plan for how this will be sustained after the funding period ends.



Question: Under the Proposed Staff Resume, is this for the existing staff that we plan on using for expansion? Am I to have proposed hires ready? Am I to submit a resume for all existing staff? Please explain in more detail.

Answer: Fill out and submit a proposed staff resume for all key personnel that will be working on the expansion project.

If the staff person has not been hired/identified, provide a job description for all positions anticipated being hired for.

Question: We are in the process of becoming a Medicaid provider but I am guessing that process won't be complete before the application deadline. Would we be able to apply if we can prove we are pursuing becoming a provider?

Answer: Applicant Organizations must be a CCBHC, FQHC, or an Opioid Treatment Program. The applicant organization must also already be fully enrolled as a Medicaid provider and if possible, verify the organization is actively billing Medicaid (page 10 of the RFA).

Question:

In the past, the federal block grant for SA treatment stated that the provider must be a non-profit, however, they later opened the funding to private agencies. Is this funding opportunity open for for-profit agencies?

Answer: on page 9 of the RFA it states non-profits with 501(c)(3) status with the IRS or for-profit organizations are eligible to apply for funding under this announcement.

All grant related documents can be accessed on the following website:

<http://dpbh.nv.gov/Programs/ClinicalSAPTA/dta/Grants/SAPTAGrants/>

# Additional Resources

<http://dpbh.nv.gov/Resources/opioids/Opioid-Info/>

- Review Opioid Surveillance Packet