



**State of New Hampshire  
Department of Health and Human Services**

**REQUEST FOR GRANT APPLICATION  
RGA-2023-BDAS-01-ROOMA**

**FOR**

**Room and Board for Individuals with Opioid and/or Stimulant Use Disorders**

**June 23, 2022**



**Table of Contents**

**1. Request for Services ..... 3**

**1.1. Purpose and Overview..... 3**

**1.2. Grant Requirements ..... 4**

**1.3. Grant Agreement Monitoring Provisions ..... 6**

**1.4. Grant Period and Value..... 6**

**1.5. Certification and Award Process ..... 7**

    1.6. Application Process and Submission ..... 8

**1.7. Application Content ..... 8**

**1.8. Schedule of Events ..... 9**

**1.9. Applicant’s Questions and Answers ..... 10**

**1.10. Validity of Application..... 10**

**2. Notices ..... 10**

    2.1. Exceptions ..... 10

    2.2. RGA Amendment..... 11

    2.3. Compliance ..... 11

    2.4. Public Disclosure ..... 11

    2.5. Non-Commitment ..... 12

    2.6. Request for Additional Information or Materials ..... 12

    2.7. Liability..... 12

    2.8. Successful Applicant Notice and Grant Award Negotiations ..... 12

    2.9. Scope of Award and Grant Award Notice ..... 13

    2.10. Protest of Intended Award..... 13

    2.11. Contingency..... 13

    2.12. Ethical Requirements..... 13

**3. Appendices ..... 14**

    3.1. Appendix A – Grant Agreement, Form G-1 ..... 14

    3.2. Appendix B – Contract Monitoring Provisions ..... 14

    3.3. Appendix C – Standard Exhibits ..... 14

    3.4. Appendix D – Requested Number of Bed Nights ..... 14



## REQUEST FOR GRANT APPLICATIONS

### 1. Request for Services

#### 1.1. Purpose and Overview

##### 1.1.1. Purpose

This Request for Grant Applications (RGA) is published to provide payments to entities that provide room and board to individuals with a diagnosed Opioid Use Disorder (OUD) or Stimulant Use Disorder (StUD) and who are receiving residential Substance Use Disorder (SUD) treatment services paid for by Medicaid.

Qualifying Applicants must operate SUD treatment programs that are:

- Licensed as a SUD Residential Treatment Facility in accordance with New Hampshire RSA 151 and New Hampshire Code of Administrative Rules, Chapter He-P 800, Residential Care and Health Facility Rules.
- Enrolled as a New Hampshire Medicaid Comprehensive SUD program.
- Certified or accredited by a certifying and/or accrediting body recognized by the Substance Abuse and Mental Health Services Administration (SAMHSA) as listed at <https://www.samhsa.gov/medication-assisted-treatment/become-accredited-opioid-treatment-program/approved-accreditation-bodies>.

**To be considered for an award under this solicitation, Applicants must not have been awarded a contract under RFP-2022-BDAS-01-SUBST, published by the Department on July 20, 2021 or RFP-2022-BDAS-08-SUBST, published by the Department on May 27, 2022.**

##### 1.1.2. Overview

The Department of Health and Human Services' (Department) mission is to join communities and families in providing opportunities for citizens to achieve health and independence. The Bureau of Drug and Alcohol Services (Bureau) contributes to this mission, in part, by providing resources that develop, support and deliver SUD prevention, early intervention, treatment and recovery support services that are integrated with primary and behavioral health care. The aforementioned SUD supports and services are referred to as the Alcohol and Other Drug (AOD) Continuum of Care System (COC).

The State Opioid Response (SOR) grant is an award from SAMHSA to help the Department and SUD providers combat the opioid and stimulant use crisis across the AOD COC in New Hampshire. This grant program addresses unmet treatment and recovery needs, opioid and stimulant overdose deaths, and barriers to medication assisted treatment. The SOR grant allows New Hampshire to address the changing needs and complex nature of SUD in the state.

SOR funding, through these Grant Awards, will be used to expand access to residential beds for Medicaid beneficiaries who have a clinical diagnosis of an OUD or StUD who are receiving low or high intensity residential treatment services, as defined by The American Society of Addiction Medicine (ASAM) Criteria (2013) following levels of care:

- Clinically Managed Low-Intensity Residential Services, Level 3.1;



- Clinically Managed High-Intensity Residential Services Level 3.5; or
- Medically Monitored Intensive Inpatient Services, Level 3.7.

## **1.2. Grant Requirements**

- 1.2.1. Applicants must demonstrate current licensure as a SUD Residential Treatment Facility, enrollment as a New Hampshire Medicaid Comprehensive Substance Use Disorder program, and certification or accreditation by a body recognized by SAMHSA, as described in Paragraph 1.1.1. Purpose.
- 1.2.2. Applicants must provide SUD treatment services in accordance with:
  - 1.2.2.1. New Hampshire Administrative Rule He-P 826, Substance Use Disorder Residential Treatment Facilities;
  - 1.2.2.2. New Hampshire Administrative Rule He-W 513, Substance Use Disorder;
  - 1.2.2.3. The American Society of Addiction Medicine (ASAM) Criteria (2013);
  - 1.2.2.4. SAMHSA Treatment Improvement Protocols; and/or the SAMHSA Technical Assistance Publications; and
  - 1.2.2.5. The Department's procedures and policies regarding SUD Treatment Services.
- 1.2.3. Applicants must provide room and board services to eligible individuals who are:
  - 1.2.3.1. Receiving residential SUD treatment services paid for by Medicaid;
  - 1.2.3.2. Meet the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) criteria for an opioid and/or stimulant use disorder as determined by a:
    - 1.2.3.2.1. Licensed counselor; or
    - 1.2.3.2.2. An individual who is working toward licensure and who is under the supervision of a licensed counselor, who has completed the required coursework for licensure by the:
      - 1.2.3.2.2.1. NH Board of Alcohol and Other Drug Use Providers; or
      - 1.2.3.2.2.2. NH Board of Mental Health Practice; or
      - 1.2.3.2.2.3. NH Board of Psychology.
  - 1.2.3.3. Residents of, or individuals experiencing homelessness in, New Hampshire, regardless of where they live or work.
- 1.2.4. Selected Applicants must submit an invoice and supporting backup documentation in a form satisfactory to the Department, no later than the 15<sup>th</sup> day of the month following the month in which services were provided, which identifies and requests reimbursement for authorized expenses incurred in the prior month. Supporting documentation may include, but is not limited to:



- 1.2.4.1. Medicaid Provider ID.
- 1.2.4.2. Medicaid Client ID.
- 1.2.4.3. Client Name.
- 1.2.4.4. Service Start date.
- 1.2.4.5. Service End Date.
- 1.2.4.6. Diagnosis Cod (DX).
- 1.2.4.7. Medicaid Procedure Code.
- 1.2.4.8. Number of Bed Nights.
- 1.2.5. Selected Applicants must prepare and submit ad hoc data reports and respond to periodic surveys, and other data collection requests as requested by the Department and/or SAMHSA.
- 1.2.6. SOR Grant Standards
  - 1.2.6.1. Selected Applicants must establish formal information sharing and referral agreements with the Doorways in compliance with all applicable confidentiality laws, including 42 CFR Part 2 in order to receive payments for services funded with SOR resources.
  - 1.2.6.2. Selected Applicants must ensure all referrals of individuals to the Doorways are:
    - 1.2.6.2.1. Completed and documented in the individual's file; and
    - 1.2.6.2.2. Available to the Department as requested and as needed for payment of invoices for services provided through SOR-funded initiatives.
  - 1.2.6.3. Selected Applicants must ensure individuals receiving services, rendered from SOR funds, have a documented history or current diagnoses of OUD or StUD or are at risk for such.
  - 1.2.6.4. Selected Applicants must coordinate completion of Government Performance Results Act (GPRA) initial interview and associated follow-ups at six (6) months and discharge for individuals referenced above with Doorways.
  - 1.2.6.5. Selected Applicants must ensure that SOR grant funds are not used to purchase, prescribe, or provide marijuana or for providing treatment using marijuana. The Applicant shall ensure:
    - 1.2.6.5.1. Treatment in this context includes the treatment of OUD or StUD.
    - 1.2.6.5.2. Grant funds are not provided to any individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental health disorders.
    - 1.2.6.5.3. This marijuana restriction applies to all subcontracts and Memorandums of Understanding that receive SOR



funding.

- 1.2.6.6. Selected Applicants must ensure Naloxone kits are available to individuals utilizing SOR funding.
- 1.2.6.7. If the selected Applicant(s) intend to distribute Fentanyl test strips, the selected Applicant(s) must provide a Fentanyl test strip utilization plan to the Department for approval prior to implementation. The selected Applicant(s) must ensure the utilization plan includes, but is not limited to:
  - 1.2.6.7.1. Internal policies for the distribution of Fentanyl strips;
  - 1.2.6.7.2. Distribution methods and frequency; and
  - 1.2.6.7.3. Other key data as requested by the Department.
- 1.2.6.8. Selected Applicant(s) must provide services to eligible individuals who:
  - 1.2.6.8.1. Receive Medication Assisted Treatment (MAT) services from other providers, including the individual's primary care provider;
  - 1.2.6.8.2. Have co-occurring mental health disorders; or
  - 1.2.6.8.3. Are on medications and are taking those medications as prescribed regardless of the class of medication.
- 1.2.6.9. Selected Applicant(s) must ensure individuals who refuse to consent to information sharing with the Doorways do not receive services utilizing SOR funding.
- 1.2.6.10. Selected Applicant(s) must ensure individuals who rescind consent to information sharing with the Doorway do not receive any additional services utilizing SOR funding.

### **1.3. Grant Agreement Monitoring Provisions**

- 1.3.1.1. All Applicants must complete Appendix B, Contract Monitoring Provisions.
- 1.3.1.2. The Department will use Applicant responses to conduct a risk assessment to determine if enhanced contract monitoring is necessary if the Applicant is awarded an Agreement. The risk assessment will not be used to disqualify or score Applications.

### **1.4. Grant Period and Value**

- 1.4.1. Grant Agreement Period
  - 1.4.1.1. Grant agreement(s) resulting from this RGA will be effective upon approval of the Governor and Executive Council, through September 29, 2022.
  - 1.4.1.2. Grant agreement terms may be extended up to an additional two (2) years, subject to the continued availability of funds, satisfactory



grantee performance, agreement of the parties, and approval from the Governor and Executive Council.

1.4.2. Grant Agreement Value

1.4.2.1. The total available funding for all grants awarded through this RGA is anticipated to be **\$600,000**.

1.4.2.2. All funding awarded must be expended or incurred between the dates of Governor and Executive Council approval through September 29, 2022.

**1.5. Certification and Award Process**

1.5.1. Upon certification by the Department that Applicants meet all qualifications for funding, the Department will notify Applicants of their selection and send a Grant Agreement to the Applicant.

1.5.2. In order to meet qualifications for certification by the Department, Applicants must provide documentation of:

1.5.2.1. Certification or accreditation by a certifying and/or accrediting body recognized by SAMHSA; and

1.5.2.2. Enrollment as a New Hampshire Medicaid Comprehensive SUD program; and

1.5.2.3. Licensure as a SUD Residential Treatment Facility in accordance with New Hampshire RSA 151 and New Hampshire Code of Administrative Rules, Chapter He-P 800 Residential Care and Health Facility Rules.

1.5.3. The Department has determined that 6,000 total bed nights are available between the Grant Agreement Effective Date and Completion Date. The per night bed amount is \$100.

1.5.4. Applicants must provide the requested number of bed nights anticipated to be provided to individuals through September 29, 2022, by completing Appendix D, Requested Number of Bed Nights.

1.5.5. Funding amounts per Applicant will be determined based on the proposed number of beds, per month, to be provided as detailed below.

1.5.6. If the total amount of bed nights requested among all qualifying vendors exceeds the amount of funding available, the Department will apply the following formula to funding amounts requested to all applications received:

1.5.6.1. Total Amount of Bed Nights Available (TABNA) divided by Total Number of Bed Nights Requested from all qualifying Applicants (TNBNR) = Vendor Factor (VF). VF multiplied by the Vendor Bed Nights Requested (VBNR) = Preliminary Bed Night Award (PBNA). The PBNA rounded down to the nearest whole number = Final Vendor Award (FVA).

**Example for Reference Only:**



The Department receives five (5) applications. The total number of bed nights requested (TNBNR) among all qualifying vendors is as follows:

Vendor A = 1000 bed nights requested

Vendor B = 1500 bed nights requested

Vendor C = 500 bed nights requested

Vendor D = 3000 bed nights requested

Vendor E = 500 bed nights requested

TABNA = 6000

TNBNR = 6500

VF = TABNA/TNBNR

VF = 0.953076 Used to Award as Follows:

Vendor A:  $1000 * 0.953076 = 923.08$  (rounded down to the nearest PBNA) = 923  
= \$92,300 FVA

Vendor B:  $1500 * 0.953076 = 1384.62$  (rounded down to the nearest PBNA) = 1384 = \$138,400 FVA

Vendor C:  $500 * 0.953076 = 461.54$  (rounded down to the nearest PBNA) = 461 = \$46,100 FVA

Vendor D:  $3000 * 0.953076 = 2769.23$  (rounded down to the nearest PBNA) = 2769 = \$276,900 FVA

Vendor E:  $500 * 0.953076 = 461.54$  (rounded down to the nearest PBNA) = 461 = \$46,100 FVA

**Total Distribution = \$599,800**

## 1.6. Application Process and Submission

1.6.1. Applications must be submitted electronically to [contracts@dhhs.nh.gov](mailto:contracts@dhhs.nh.gov) and the Contract Specialist at the email address specified in Paragraph 1.8.2.

1.6.1.1. The subject line must include the following information RGA-2023-BDAS-01-ROOMA.

1.6.1.2. The maximum size of file attachments per email is 10 MB. Attachments that exceed this limit must be submitted via multiple emails with the subject line indicating the number of emails X of XX.

1.6.2. Applications will be accepted until the date and time indicated in the Schedule of Events in Paragraph 1.8.1., Schedule of Events, below.

## 1.7. Application Content

1.7.1. A **Transmittal Cover Letter** on the Applicant's letterhead that must:

1.7.1.1. Reference, RGA-2023-BDAS-01-ROOMA;

1.7.1.2. Agency/organization name;





- 1.7.1.3. Identify the name, title, mailing address, telephone number and email address of the person authorized by the Applicant to obligate the agency/organization;
- 1.7.1.4. Acknowledge that the Applicant has read this RGA, understands it, and agrees to be bound by its requirements;
- 1.7.1.5. Be signed by an individual who is authorized to bind the Applicant to all statements, including services and prices contained in this Request for Application;
- 1.7.1.6. Completed Appendix B – Grant Agreement Monitoring Provisions; and
- 1.7.1.7. Completed Appendix D - Requested Number of Bed Nights.
- 1.7.2. **Mandatory Documentation Confirming Qualifications** as specified below:
  - 1.7.2.1. Certification or accreditation by a certifying and/or accrediting body recognized by SAMHSA;
  - 1.7.2.2. Enrollment as a New Hampshire Medicaid Comprehensive Treatment SUD program; and
  - 1.7.2.3. Licensure as a SUD Residential Treatment Facility in accordance with New Hampshire RSA 151 and New Hampshire Code of Administrative Rules, Chapter He-P 800 Residential Care and Health Facility Rules.

**1.8. Schedule of Events**

1.8.1. Schedule of Events

Item	Action  (All times are according to Eastern Standard Time. The Department reserves the right to modify these dates at its sole discretion.)	Date
1.	Release RGA (NH DHHS website)	June 23, 2022
2.	RGA Questions Submission Deadline	June 28, 2022 12:00 PM
3.	Department’s Response to Questions Published	July 6, 2022
4.	Application Submission Deadline	July 11, 2022 12:00 PM

1.8.2. All questions and applications must be submitted electronically to:

State of New Hampshire  
 Department of Health and Human Services  
 Shannon Y. Judd, Contract Specialist  
 Bureau of Contracts & Procurement



129 Pleasant Street  
Concord NH 03301  
Email: [Shannon.y.judd@dhhs.nh.gov](mailto:Shannon.y.judd@dhhs.nh.gov)  
Phone: (603) 271-9685

- 1.8.3. From the date of release of this RGA until an award is made and announced regarding the selection of an Applicant, all communication with personnel employed by or under contract with the Department regarding this RGA is prohibited unless first approved by the RGA Point of Contact listed in Paragraph 1.8.2., herein. Department employees have been directed not to hold conferences and/or discussions concerning this RGA with any potential grantee during the selection process, unless otherwise authorized by the RGA Point of Contact. Applicants may be disqualified for violating this restriction on communications.

### **1.9. Applicant's Questions and Answers**

- 1.9.1. All questions about this RGA, including but not limited to requests for clarification, additional information or any changes to the RGA must be made in writing citing the RGA page number and part or subpart, and submitted by email to the Contract Specialist identified in Paragraph 1.8.2.
- 1.9.2. The Department may consolidate and/or paraphrase questions for efficiency and clarity. Questions that are not understood will not be answered. Statements that are not questions will not receive a response.
- 1.9.3. Questions must be received by the deadline provided in Paragraph 1.8.1., Schedule of Events.
- 1.9.4. Written answers to questions received will be published on the Department's website on or about the date indicated in Paragraph 1.8.1., Schedule of Events.

### **1.10. Validity of Application**

Applications must be valid for one hundred eighty (180) days following the deadline for submission in the Procurement Timetable above, or until the Effective Date of any resulting Grant Agreement, whichever is later.

## **2. Notices**

### **2.1. Exceptions**

- 2.1.1. To the extent that an Applicant believes that exceptions to the standard form Grant Agreement, General Provisions, which is attached as Appendix A, will be necessary for the Applicant to enter into an Agreement, the Applicant must note those issues during the RGA question period identified Paragraph 1.8.1., Schedule of Events. The Department will review requested exceptions and accept, reject or note that it is open to negotiation of the



proposed exception at its sole discretion. If the Department accepts an Applicant's exception the Department will, at the conclusion of the RGA Question Period, provide notice to all potential Applicants of the exceptions that have been accepted and indicate that exception is available to all potential Applicants by publication of the Department's responses on or about the date indicated in Paragraph 1.8.1, Schedule of Events. Any exceptions to the standard form Grant Agreement and standard exhibits that are not raised by an Applicant during the RGA Question Period may not be considered. In no event is an Applicant to submit its own standard grant terms and conditions as a replacement for the Department's terms in response to this solicitation.

## **2.2. RGA Amendment**

The Department reserves the right to amend this RGA, as it deems appropriate, prior to the Application submission deadline on its own initiative or in response to issues raised through Applicant questions. In the event of an amendment to the RGA, the Department, at its sole discretion, may extend the Application submission deadline. The amended language will be posted on the Department's website.

## **2.3. Compliance**

Applicants must be in compliance with applicable federal and state laws, rules and regulations, and applicable policies and procedures adopted by the Department currently in effect, and as they may be adopted or amended during the grant agreement period. Applicants must comply with all Exhibits D-K, which are attached hereto as Appendix E.

## **2.4. Public Disclosure**

- 2.4.1. Pursuant to RSA 21-G:37, all responses to this RGA shall be considered private until the award of a grant agreement. The content of an Applicant's application must remain confidential until the Governor and Executive Council have approved a grant agreement(s) as a result of this RGA. An Applicant's disclosure or distribution of the contents of its application, other than to the State, will be grounds for disqualification at the State's sole discretion.
- 2.4.2. The content of each Application and addenda thereto will become public information once the Governor and Executive Council have approved a grant agreement. Any information submitted as part of an Application in response to this RGA may be subject to public disclosure under RSA 91-A. In addition, in accordance with RSA 9-F:1, any grant agreement entered into as a result of this RGA will be made accessible to the public online via the website Transparent NH ([www.nh.gov/transparentnh/](http://www.nh.gov/transparentnh/)). Accordingly, business financial information and proprietary information such as trade secrets, business and financials models and forecasts, and proprietary



formulas may be exempt from public disclosure under RSA 91-A:5, IV.

- 2.4.3. Insofar as an Applicant seeks to maintain the confidentiality of its confidential commercial, financial or personnel information, the Applicant must clearly identify in writing the information it claims to be confidential and explain the reasons such information should be considered confidential. This must be done by separate letter identifying by page number and Application section the specific information the Applicant claims to be exempt from public disclosure pursuant to RSA 91-A:5.
- 2.4.4. Each Applicant acknowledges that the Department is subject to the Right-to-Know Law New Hampshire RSA Chapter 91-A. The Department shall maintain the confidentiality of the identified confidential information insofar as it is consistent with applicable laws or regulations, including but not limited to New Hampshire RSA Chapter 91-A. In the event the Department receives a request for the information identified by an Applicant as confidential, it will notify the Applicant and specify the date it intends to release the requested information. Any effort to prohibit or enjoin the release of the information shall be the Applicant's responsibility and at the Applicant's sole expense. If the Applicant fails to obtain a court order enjoining the disclosure, the Department may release the information on the date specified in its notice to the Applicant without incurring any liability to the Applicant.

## **2.5. Non-Commitment**

Notwithstanding any other provision of this RGA, this RGA does not commit the Department to award a grant. The Department reserves the right to reject any and all Applications or any portions thereof, at any time and to cancel this RGA and to solicit new Applications under a new Application process.

## **2.6. Request for Additional Information or Materials**

The Department may ask any Applicant to provide additional information or materials needed to clarify information presented in the Application. Such a request will be issued in writing and will not provide an Applicant with an opportunity to change, extend, or otherwise amend its Application in intent or substance.

## **2.7. Liability**

By submitting an Application in response to this RGA, an Applicant agrees that in no event shall the State be either responsible for or held liable for any costs incurred by an Applicant in the preparation or submittal of or otherwise in connection with an Application, or for work performed prior to the Effective Date of a resulting grant agreement.

## **2.8. Successful Applicant Notice and Grant Award Negotiations**

If an Applicant(s) is selected, the Department will notify the successful Applicant(s)



in writing of their selection and the State's desire to enter into grant award negotiations. Until the Department successfully completes negotiations with the selected Applicant(s), all submitted Applications remain eligible for selection by the Department. In the event negotiations are unsuccessful with the selected Applicant(s), the evaluation team may recommend another Applicant(s). The Department will notify Applicant(s) that are not initially selected to enter into negotiations.

## **2.9. Scope of Award and Grant Award Notice**

- 2.9.1. The Department reserves the right to award a service, part of a service, group of services, or total services and to reject any and all Applications in whole or in part. A grant award is contingent on approval by the Department.
- 2.9.2. If a grant is awarded, the Applicant must obtain written consent from the Department before any public announcement or news release is issued pertaining to any grant award.

## **2.10. Protest of Intended Award**

Any challenge of an award made or otherwise related to this RGA shall be governed by RSA 21-G:37, and the procedures and terms of this RGA. The procedure set forth in RSA 21-G:37, IV, shall be the sole remedy available to challenge any award resulting from this RGA. In the event that any legal action is brought challenging this RGA and selection process, outside of the review process identified in RSA 21-G:37, IV, and in the event that the State of New Hampshire prevails, the challenger agrees to pay all expenses of such action, including attorney's fees and costs at all stages of litigation.

## **2.11. Contingency**

Aspects of the award may be contingent upon changes to state or federal laws and regulations.

## **2.12. Ethical Requirements**

From the time this RGA is published until a grant agreement is awarded, no Applicant shall offer or give, directly or indirectly, any gift, expense reimbursement, or honorarium, as defined by RSA 15-B, to any elected official, public official, public employee, constitutional official, or family member of any such official or employee who will or has selected, evaluated, or awarded an RFA, or similar submission. Any Applicant that violates RSA 21-G:38 shall be subject to prosecution for an offense under RSA 640:2. Any Applicant who has been convicted of an offense based on conduct in violation of this section, which has not been annulled, or who is subject to a pending criminal charge for such an offense, shall be disqualified from submitting an application to this RGA, or similar request for submission and every such applicant shall be disqualified from responding to any RFA or similar request for submission issued by any state agency. An Applicant that was disqualified under



this section because of a pending criminal charge which is subsequently dismissed, results in an acquittal, or is annulled, may notify the Department of Administrative Services, which shall note that information on the list maintained on the state's internal intranet system, except in the case of annulment, the information, shall be deleted from the list.

### **3. Appendices**

#### **3.1. Appendix A – Grant Agreement, Form G-1**

#### **3.2. Appendix B – Contract Monitoring Provisions**

#### **3.3. Appendix C – Standard Exhibits**

#### **3.4. Appendix D – Requested Number of Bed Nights**