

# Opioid State Targeted Response: Services Expansion RFA Informational Webinar



**STR RFA YEAR TWO**

# RFA Timeline



TASK	DUE DATE & TIME
SAPTA distributes the Request for Application Guidance with all submission forms	May 29, 2018
Q&A Written Questions due to SAPTA	June 1, 2018
Mandatory Informational Webinar to address questions	June 5, 2018 (10:00am – 11:00am) Join from PC, Mac, Linux, iOS or Android: <a href="https://zoom.us/j/944128376">https://zoom.us/j/944128376</a>
<b>Deadline for submission of applications</b>	June 13, 2018 by 4:00p.m.
Technical Review of Applications	June 14, 2018
SAPTA will notify organizations that have discrepancies within their application.	June 15, 2018
Evaluation Period: Content review of applications	June 15 - 22, 2018
Interviews with Applicants	June 26, 2018
Funding Decisions Announced – SAPTA will notify organizations via e-mail to the listed Project Director	June 29, 2018
Completion of subgrant awards for selected awardees	July 20, 2018
Grant Award Commencement of Project – Pending approved SAMHSA grant award and receipt of Notice of Award	August 1, 2018

# Eligible Categories for Application



- Service expansion for the Nevada STR project is comprised of the following categories:
  - Outpatient Clinical Treatment and Recovery Services
  - Medication Assisted Treatment Expansion of Residential and Transitional Housing Services for SAPTA-Certified Providers
  - Medication Assisted Treatment Expansion Tribal Treatment and Recovery Services
  - Criminal Justice Treatment and Recovery Services
  - Community Paramedicine
  - Neonatal Abstinence Syndrome
  - Recovery Support Services
- Applicant organizations **may** apply for one or more category areas within the application. Each category area must be specified and provide sperate budgets for each category applied for.



- **Anticipated Total Funding Available: \$4,646,000**
  - Category 1 – Outpatient Clinical Treatment & Recovery: \$832,000
  - Category 2 – MAT Expansion [Residential & Transitional Housing: \$832,000
  - Category 3 – MAT Expansion [Tribal Treatment & Recovery]: \$832,000
  - Category 4 – Criminal Justice: \$ 800,000
  - Category 5 – Community Para-medicine: \$ 450,000
  - Category 6 – Neonatal Abstinence Syndrome: \$400,000
  - Category 7 – Recovery Support Services: \$500,000

*State reserves the right to re-distribute funds within categories based upon number and quality of applications*
- **Estimated Number of Award(s): TBD**
- **Cost Sharing/Match: None**

# Eligible Applicants



- Certified Community Behavioral Health Clinics (CCBHC)
- Indian Health Centers
- Federally Qualified Health Centers (FQHC)
- Opioid Treatment Service Provider (OTP)
- Community-Based Organizations
- EMS – First Responder Organizations
- SAPTA Certified Providers
- Licensed Medical Facilities
- Medical Providers
- Specialty Courts, Jails, Prisons, Law Enforcement Organizations
- Peer Recovery Organizations

# Eligible Funding Categories



- Category 1 – Outpatient Clinical Treatment & Recovery: \$832,000
- Category 2 – MAT Expansion [Residential & Transitional Housing: \$832,000
- Category 3 – MAT Expansion [Tribal Treatment & Recovery]: \$832,000
- Category 4 – Criminal Justice: \$ 800,000
- Category 5 – Community Paramedicine: \$ 450,000
- Category 6 – Neonatal Abstinence Syndrome: \$400,000
- Category 7 – Recovery Support Services: \$500,000

*State reserves the right to re-distribute funds within categories based upon number and quality of applications*

# Category 1: Outpatient Clinical Treatment and Recovery Services



- Based upon the Patient-Centered Opioid Addiction Treatment Model (P-COAT)
  - Option A: Medical Management by a Data 2000 Practitioner
    - ✦ Includes physicians or other healthcare professional with a waiver to prescribe buprenorphine
    - ✦ Collaborative relationship with professionals in addiction medicine, psychologists, counselors, nurses, social workers, or other qualified professions licensed/certified to provide psychological or counseling services for OUD
  - Option B: Medical Management by an Addiction Specialist
    - ✦ Includes physicians who specialize in addiction medicine
    - ✦ Collaborative relationship with psychologists, counselors, nurses, social workers, or other qualified professions licensed/certified to provide psychological or counseling services for OUD
  - Option C: Comprehensive Services from an Opioid Addiction Team
    - ✦ Single organization serving as a team, employ or contract professionals with ability to prescribe medications, psychiatric, psychological, or counseling services, and provide care management internally

## Category 2: Medication Assisted Treatment Expansion for SAPTA-Certified Providers



- The purpose of this programing is to expand/enhance access to medication-assisted treatment (MAT) services for persons with an opioid use disorder (OUD) seeking or receiving withdrawal management (WM) services, residential services, or transitional living services.
- Provider organizations applying under this category must already have services in place for the appropriate level of care under SAPTA certification and actively bill third party payers, including Medicaid, where applicable. Programs must also be at a minimum co-occurring capable.



## 3.7 Withdrawal Management

*Providers must be providing or seeking transition to a Medically Monitored Withdrawal Management Program*

### Required Services to be Provided by Applicant Organization

- Behavioral Health Screening/Assessment
- Medical Evaluation
- FDA Approved Medication for OUD Treatment
- Toxicology Screening
- Check Prescription Drug Monitoring Program for new patient admission under prescriber care
- Establish and implement a plan to mitigate the risk of diversion of methadone or buprenorphine and ensure the appropriate use/dose of medication by patients
- Ensure all applicable practitioners working on the grant-funded project obtain a DATA waiver
- Use telehealth services, or other innovative interventions, to reach, engage and retain clients in treatment
- Care Coordination with an IOTRC as applicable
- Establish DWSS program eligibility
- Data Collection
- Provide a Plan for Ongoing Program Sustainability
- Update organization information in Nevada 211.
- Collaborate with STR grant or Southern Nevada Health District for Naloxone Distribution\*

### Services programs may choose to offer internally or develop through formalized care coordination agreements to provide the following services/levels of care

- SAPTA certified Level 3.1 and Level 3.5 Residential Services based on ASAM and Division criteria
- SAPTA certified Level 1 Outpatient based on ASAM and Division criteria
- Office-Based Opioid prescribers for FDA Approved Medication for OUD Treatment
- Psychiatry
- Transitional Housing
- COD and other Community-based service providers
- Peer/Recovery Support Services
- Medical Care

\*Clark County applicants will need to collaborate with Southern Nevada Health District for naloxone distribution. All others will collaborate with STR Grant team.

# Residential Treatment Provider

*Programs must be established SAPTA certified residential treatment programs - ASAM Level 3.1 and currently providing or seeking to expand MAT services within residential treatment*

## Required Services to be Provided by Applicant Organization

- Behavioral Health Screening/Assessment
- Medical Evaluation
- FDA Approved Medication for OUD Treatment
- Toxicology Screening
- Check Prescription Drug Monitoring Program for new patient admission under prescriber care
- Establish and implement a plan to mitigate the risk of diversion of methadone or buprenorphine and ensure the appropriate use/dose of medication by patients
- Ensure all applicable practitioners working on the grant-funded project obtain a DATA waiver
- Use telehealth services, or other innovative interventions, to reach, engage and retain clients in treatment
- Care Coordination with an IOTRC as applicable
- Establish DWSS Program Eligibility
- Data Collection
- Provide a Plan for Ongoing Program Sustainability
- Update organization information in Nevada 211.

## Services programs may choose to offer internally or develop through formalized care coordination agreements to provide the following services/levels of care

- SAPTA certified Level 3.7 Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 1 Ambulatory Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 1 Outpatient based on ASAM and Division criteria
- Office-Based Opioid prescribers for FDA Approved Medication for OUD Treatment
- Psychiatry
- Transitional Housing
- COD and other Community-based service providers
- Peer/Recovery Support Services
- Medical Care

# Transitional Housing

*Programs must currently be established SAPTA certified transitional living programs and either currently providing or seeking to expand MAT services within transitional living*

## Required Services to be Provided by Applicant Organization

- Care Coordination with an IOTRC when applicable
- Establish DWSS program eligibility
- Data Collection
- Provide a Plan for Ongoing Program Sustainability
- Update organization information in Nevada 211.
- Collaborate with STR grant or Southern Nevada Health District for Naloxone Distribution\*

\*Clark County applicants will need to collaborate with Southern Nevada Health District for naloxone distribution. All others will collaborate with STR Grant team.

Services programs may choose to offer internally or develop through formalized care coordination agreements to provide the following services/levels of care

- SAPTA certified Level 3.7 Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 3.1 and Level 3.5 Residential Services based on ASAM and Division criteria
- SAPTA certified Level 1 Ambulatory Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 1 Outpatient based on ASAM and Division criteria
- Office-Based Opioid prescribers for FDA Approved Medication for OUD Treatment
- Psychiatry
- Transitional Housing
- COD and other Community-based service providers
- Peer/Recovery Support Services
- Medical Care

## Category 3: Tribal Treatment and Recovery Services



- Services targeting tribal populations utilizing culturally appropriate treatment services to address the needs of the community including prevention, treatment and recovery. Services will be focusing on improving MAT access for tribal communities, both urban and rural.

# Tribal Organizations



## Required Services to be Provided by Applicant Organization

- Behavioral Health Screening/Assessment
- Medical Evaluation
- ASAM Level 1 Outpatient
- FDA Approved Medication for OUD Treatment
- Toxicology Screening
- Check Prescription Drug Monitoring Program for new patient admission under prescriber care
- Establish and implement a plan to mitigate the risk of diversion of methadone or buprenorphine and ensure the appropriate use/dose of medication by patients
- Culturally relevant prevention activities targeting OUD and overdose
- Ensure all applicable practitioners working on the grant-funded project obtain a DATA waiver
- Use telehealth services, or other innovative interventions, to reach, engage and retain clients in treatment
- Care Coordination with an IOTRC
- Establish DWSS program eligibility
- Data Collection
- Provide a Plan for Ongoing Program Sustainability
- Collaborate with STR grant or Southern Nevada Health District for Naloxone Distribution\*

## Services programs may choose to offer internally or develop through formalized care coordination agreements to provide the following services/levels of care

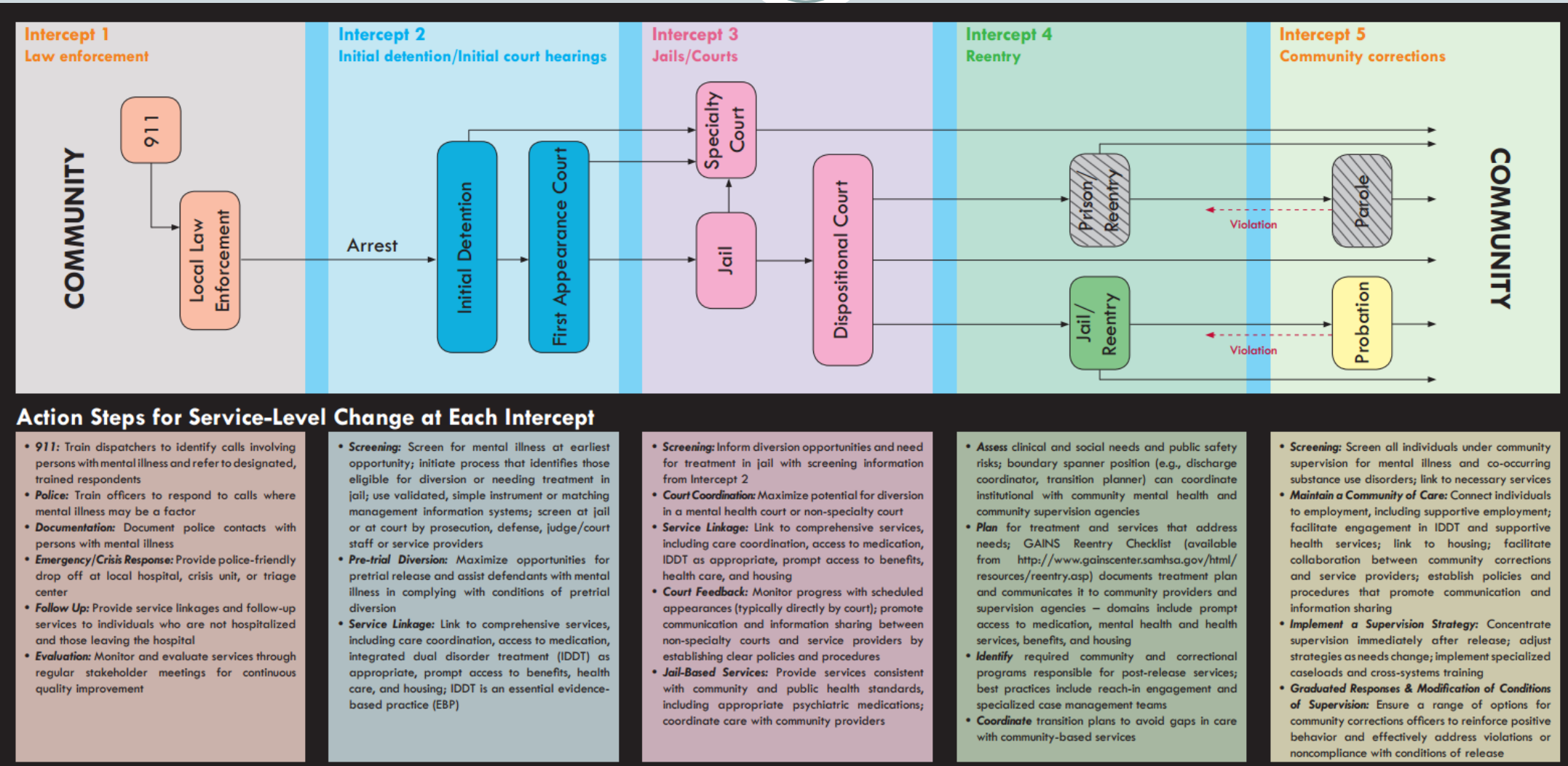
- SAPTA certified Level 3.7 Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 3.1 and Level 3.5 Residential Services based on ASAM and Division criteria
- SAPTA certified Level 1 Ambulatory Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 1 Outpatient based on ASAM and Division criteria
- Office-Based Opioid prescribers for FDA Approved Medication for OUD Treatment
- Psychiatry
- Transitional Housing
- COD and other Community-based service providers
- Peer/Recovery Support Services
- Medical Care

\*Clark County applicants will need to collaborate with Southern Nevada Health District for naloxone distribution. All others will collaborate with STR Grant team.



# Category 4: Criminal Justice

Eligible entities can be linked to programming along the Sequential Intercept Model addressing individuals with OUD. The Intercept points of the model include:



# Criminal Justice



## Required Services to be Provided by Applicant Organization

- Behavioral Health Screening/Assessment
- Peer/Recovery Support Services
- Interventions based upon evidenced based practice including MAT
- Establish and implement a plan to mitigate the risk of diversion of methadone or buprenorphine and ensure the appropriate use/dose of medication by patients
- Care Coordination with community care providers and/or IOTRC as applicable
- Care coordination with probation and parole
- Data Collection
- Establish DWSS program eligibility
- Provide a Plan for Ongoing Program Sustainability

## Services programs may choose to offer internally or develop through formalized care coordination agreements to provide the following services/levels of care

- Outreach and screen to identify incarcerated individuals who are within four months of release and may benefit from MAT services
- SAPTA certified Level 3.7 Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 3.1 and Level 3.5 Residential Services based on ASAM and Division criteria
- SAPTA certified Level 1 Ambulatory Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 1 Outpatient based on ASAM and Division criteria
- Office-Based Opioid prescribers for FDA Approved Medication for OUD Treatment
- Psychiatry
- Transitional Housing
- COD and other Community-based service providers
- Use telehealth services, or other innovative interventions, to reach, engage and retain clients in treatment

# Correctional Facilities



## Required Services to be Provided by Applicant Organization

- Interventions using evidenced based practices including MAT for incarcerated individuals up to 4 months prior to release
- Re-entry care coordination with probation and parole
- Peer/Recovery Support Services following reentry
- Re-entry care Coordination with community care providers and/or IOTRC as applicable
- Re-entry care coordination with Third Party Payer
- Establish DWSS program eligibility
- Data Collection
- Provide a Plan for Ongoing Program Sustainability
- Collaborate with STR grant or Southern Nevada Health District for Naloxone Distribution\*

Services programs may choose to offer internally or develop through formalized care coordination agreements to provide the following services/levels of care

- Outreach and screen to identify incarcerated individuals who are within four months of release and may benefit from MAT services
- SAPTA certified Level 3.7 Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 3.1 and Level 3.5 Residential Services based on ASAM and Division criteria
- SAPTA certified Level 1 Ambulatory Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 1 Outpatient based on ASAM and Division criteria
- Office-Based Opioid prescribers for FDA Approved Medication for OUD Treatment
- Psychiatry
- Transitional Housing
- COD and other Community-based service providers
- Use telehealth services, or other innovative interventions, to reach, engage and retain clients in treatment



## Category 5: Community Paramedicine



- Community Paramedicine allows emergency health care providers including paramedics and emergency medical technicians (EMTs) to integrate with and support existing treatment resources to bridge gaps in the current health care system. Community Paramedics (CPs) will be tasked with the responsibility of providing services to individuals that have recently experienced an overdose. To be eligible, Community Paramedicine programs must meet criteria to be an eligible Medicaid provider and be enrolled as a provider.

# Community Paramedicine



## Required Services to be Provided by Applicant Organization

- Post-hospital release follow-up care for opioid overdose
- Overdose education and naloxone distribution
- Post-discharge follow-up including home visits care to ensure that a patient understands discharge instructions, have sufficient support and support systems, have scheduled needed follow-up services, and evaluate for additional support service needs
- Establish and implement a plan to mitigate the risk of diversion of methadone or buprenorphine and ensure the appropriate use/dose of medication by patients
- Use telehealth services, or other innovative interventions, to reach, engage and retain clients in treatment
- Transportation
- Care Coordination with an IOTRC, local hospitals, and SAPTA certified treatment providers as applicable
- Data Collection
- Provide a Plan for Ongoing Program Sustainability
- Collaborate with STR grant or Southern Nevada Health District for Naloxone Distribution\*

\*Clark County applicants will need to collaborate with Southern Nevada Health District for naloxone distribution. All others will collaborate with STR Grant team.

## Services programs may choose to offer internally or develop through formalized care coordination agreements to provide the following services/levels of care

- SAPTA certified Level 3.7 Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 3.1 and Level 3.5 Residential Services based on ASAM and Division criteria
- SAPTA certified Level 1 Ambulatory Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 1 Outpatient based on ASAM and Division criteria
- Toxicology screening
- Office-Based Opioid prescribers for FDA Approved Medication for OUD Treatment
- Psychiatry
- Transitional Housing
- COD and other Community-based service providers
- Peer/Recovery Support Services
- Ensure all applicable practitioners working on the grant-funded project obtain a DATA waiver

## Category 6: Neonatal Abstinence Syndrome (NAS)



- Services and referrals will follow the recommendations set forth by the Council of Patient Safety in Women's Health Care (2018) in providing wrap-around care services to assist both the parent and infant.
  - <http://safehealthcareforeverywoman.org/patient-safety-bundles/obstetric-care-for-women-with-opioid-use-disorder/>

# Neonatal Abstinence Syndrome



## Required Services to be Provided by Applicant Organization

- Behavioral Health Screening/Assessment
- Medical Evaluation
- Toxicology screening
- Medication management with FDA approved medication (including tapering and discontinuation of medication)
- Prenatal intervention and monitoring
- Post-discharge follow-up to ensure or assist a patient in family planning, including wrap around services such as breastfeeding, pain management, comforting and swaddling techniques, nutrition, infant care counseling, and education about ongoing needs
- Collaborate with Nevada Early Intervention Services, Child Welfare and Departments of Family Services
- Establish and implement a plan to mitigate the risk of diversion of methadone or buprenorphine and ensure the appropriate use/dose of medication by patients
- Compliance with Nevada Plan of Safe Care requiring multi-disciplinary collaboration across all intervention stages
- Use telehealth services, or other innovative interventions, to reach, engage and retain clients in treatment
- Care Coordination with an IOTRC, local hospitals, and treatment providers
- Establish DWSS Program Eligibility
- Data Collection
- Provide a Plan for Ongoing Program Sustainability
- Collaborate with STR grant or Southern Nevada Health District for Naloxone Distribution\*

Services programs may choose to offer internally or develop through formalized care coordination agreements to provide the following services/levels of care

- SAPTA certified Level 3.7 Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 3.1 and Level 3.5 Residential Services based on ASAM and Division criteria
- SAPTA certified Level 1 Ambulatory Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 1 Outpatient based on ASAM and Division criteria
- Toxicology screening
- Office-Based Opioid prescribers for FDA Approved Medication for OUD Treatment
- Psychiatry
- COD and other Community-based service providers
- Peer/Recovery Support Services
- Ensure all applicable practitioners working on the grant-funded project obtain a DATA waiver

\*Clark County applicants will need to collaborate with Southern Nevada Health District for naloxone distribution. All others will collaborate with STR Grant team.

## Category 7: Recovery Support Services



- Recovery Community Organizations are currently limited in Nevada. Expanding such organizations is needed to further the participation of peer support specialists within behavior health and healthcare settings.
- All Recovery Support Services funded under this announcement must provide services in accordance with principles that support stage of change, harm reduction, patient engagement, and the use of Medication Assisted Recovery Services. Recovery Support Services are intended to complement, supplement, and extend formal behavioral health services throughout the continuum of care.
- Organizations that are Medicaid eligible (e.g. qualify for provider type 14, 17, 82) providing peer recovery support under this award must be capable to provide services within Medicaid.

# Recovery Support Services



## Required Services to be Provided by Applicant Organization

- Organized support groups and social networks
- Provide training to assist with clarity and understanding related to culture, leadership and mentoring
- Provide assistance and resources to recruit and train new peer support specialists
- Provide cultural and linguistic appropriate recovery support services
- Transportation, as applicable
- Establish and implement a plan to mitigate the risk of diversion of methadone or buprenorphine and ensure the appropriate use/dose of medication by patients
- Care Coordination with an IOTRC and SAPTA certified treatment providers as applicable
- Data Collection
- Provide a Plan for Ongoing Program Sustainability

Services programs may choose to offer internally or develop through formalized care coordination agreements to provide the following services/levels of care

- SAPTA certified Level 3.7 Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 3.1 and Level 3.5 Residential Services based on ASAM and Division criteria
- SAPTA certified Level 1 Ambulatory Withdrawal Management based on ASAM and Division criteria
- SAPTA certified Level 1 Outpatient based on ASAM and Division criteria
- Toxicology screening
- Office-Based Opioid prescribers for FDA Approved Medication for OUD Treatment
- Psychiatry
- COD and other Community-based service providers
- Use telehealth services, or other innovative interventions, to reach, engage and retain clients in treatment
- Ensure all applicable practitioners working on the grant-funded project obtain a DATA waiver
- Crisis Call Center

# Submission Requirements



- **Narrative**
  - Organizational Strength and Description (3 pages @ 11 point font, single spaced)
  - Collaborative Partnerships (2 pages @ 11 point font, single spaced)
  - Service Delivery (3 pages @ 11 point font, single spaced @ 11 point font, single spaced)
  - Cost Effectiveness and Leveraging of Funds (1 page @ 11 point font, single spaced)
  - Outcomes and Sustainability (3 pages @ 11 point font, single spaced)
- **Scope of Work with Outcome Objectives**
- **Budget and Budget Justification**
- **Attachments**
- **National, State, and Division Certification through SAPTA Documents**



# Organizational Strength (Appendix C)



- Service area(s) applying for and P-COAT Option, if applicable
- Agency history, client population and levels of service, and experience in the community to include knowledge of local needs;
- Project alignment with agency mission and goals;
- Geographic Service Area;
- Qualifications and tenure of staff providing proposed services;
- The structure of the agency including Board of Directors (if applicable), hours of operation, and number of locations
- Location(s) where service that you are applying for will be provided.



# Collaborative Partnerships (Appendix C)



- List current and planned collaboration with external community resources;
  - Roles of collaborating partners including sub-awardees (if any);
  - Plan how to monitor sub-awardees to ensure adherence to award agreements and terms; and
  - Formalized care coordination agreements that are in place.
- \*Please note that any sub-awardees must be certified by SAPTA and an approved vendor for the state of Nevada-DPBH.*

# Service Delivery (Appendix C)



- Proposed Project Service System;
- Scope of Work Deliverables;
- Proposed plan to expand access to treatment and recovery services to include number of new, unduplicated patients to be served;
- Evidence-Based Practice to be utilized in OUD overdose education, treatment and recovery supports, if applicable;
- Plan to align with Nevada Plan of Safe Care, if applicable
- Patient engagement activities, if applicable; and
- Description of MAT Services to be provided and FDA Waiver Approved Providers (if-applicable).

# Cost Effectiveness and Leveraging of Funds (Appendix C)

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- Agencies need to provide information on existing grants and projects they are currently receiving/participating in addressing OUD, overdose prevention, and recovery activities
- Provide a list of current sources of reimbursement including Medicaid, contracted MCOs, Sliding Fee Scale, private pay, etc.

# Outcomes and Sustainability (Appendix C)



- All agencies will be required to participate in data collection including TEDS and STR specific data
- Management Plan to include submission of required reports in a timely manner (reports are due monthly)
- Provide a Sustainability Plan to include transition from grant funds to 3<sup>rd</sup> party payers upon conclusion of grant funding
- Impact of services to patients
- Outcome Objectives Worksheet

# Scope of Work (Appendix D)



- Complete an individual scope of work for each category being applied for
- Describe the purpose of the proposed project, including its goals and measurable objectives
- Objectives should be simple, measurable, achievable, realistic, and time limited.

# Scope of Work: Example



## Provider Name: Second Chances, Inc.

**Purpose/Title:** Women's Housing; to increase beds in Nevada for women

**Brief Description of program:** A SAPTA certified and licensed residential facility designed for women and children which supports abstinence from alcohol and other drugs.

**Problem Statement:** Second Chances continually carries a waitlist of an average of 5 women.

**Goal 1:** To add beds to a stable residential care **facility** providing therapy for substance abuse, mental illness, other behavioral problems and other wrap around services.

<b>Outcome Objective 1a:</b> Second Chances, located in Washoe County, will increase the number of women’s beds from 6 to 12.		<b>% Funding:</b>	<b>60%</b>
<b>Activities</b>		<b>Date due by</b>	<b>Documentation</b>
1.	Secure residential location, licensing, inspections, and certifications.	2/28/2019	Contracts, licenses, certification certificates
1.	Hire support staff for the program; therapy, maintenance, etc.	2/19/2019	Job Announcements, work performance standards, interviewing and hiring packets, personnel records.
1.	Work with law enforcement, prosecutors. the judiciary and other agencies to identify, enroll and place clients.	3/5/2019	Meeting minutes, opinion surveys, newspaper articles to influence public opinion, local law enforcement records, any memoranda of understanding
1.	Purchase operating supplies, equipment, furniture, etc.	2/28/2019	Purchase orders, invoices, AP receipts.
1.	Identify and implement advertising, outreach, fundraising, and other financial support mechanisms to support future sustainability.	3/31/2019	Meeting minutes, public opinion surveys, Copies of flyers, public service announcements, advertisements on radio, tv & social media
<b>Evaluation:</b> Successful execution of a building lease/contract. Obtaining licenses and required certifications. Getting the building ready for admissions. Securing and placing adolescent females (admissions tracking).			

# Budget Plan (Appendix E)



- Each category that is applied for requires an individual budget and budget narrative
- Will cover the award period of 10 months (August 1, 2018- May 30, 2019)
- Unspent funding will be returned to the state. No exceptions.
- All funding is subject to the availability of funding.

# Program Funding



- All budgets will be reviewed in conjunction with program objectives and will be approved prior to award.
- ***Funds requested 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 (4/30/2019), all grant funded positions must be converted to 3<sup>rd</sup> party billing options (e.g. Medicaid, SAPTA).***
  - Program funds may support staff salaries, training opportunities, technical assistance, transitional housing and residential services.
  - Funds are intended to establish infrastructure, support program implementation, and promote sustainability.



# Funding: Allowable Activities



- **Salary Support**
  - Allowable funds for the onboarding of new staff positions:
    - ✦ Nevada Licensed Healthcare professionals
    - ✦ Nevada Licensed / Certified Behavioral Health Professionals
    - ✦ Nevada Licensed EMT I or EMT II
    - ✦ 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.
    - ✦ Travel required to obtain requested training.
- **Residential/Transitional Living MAT Expansion Services**
  - This does **NOT** include room and board reimbursement
  - Allowable funds for:
    - ✦ 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.

# Funding: Non-Allowable Activities



- **Non-allowable budget items:**
  - Supplanting of funding for existing positions.
  - Individual provider purchase of naloxone.
  - Individual provider purchase of MAT (i.e. Buprenorphine, Suboxone, Methadone, Naltrexone, Vivitrol).
  - The purchasing of property, the construction of new structures, and the addition of a permanent structure, capital improvements of existing properties or structures.
  - The purchasing of vehicles or lease of a vehicle.
  - Bus passes / transportation.
  - Incentives.

# Budget Building



- Develop a line item budget for the project. For each itemized category, specify the total project costs (including subcontracting cost), description of expense, and the amount requested from Nevada Division of Public and Behavioral Health (DPBH) funding. A line item expense under a category **must** include a description of the line item expense in the detail description

# Attachments to include



- Assurances
- Signed Conflict of Interest Policy Acknowledgement
- Proposed Staff Resume(s)
- Formal Care Coordination Agreements/MOUs currently in place
- 501 © 3 tax exempt where applicable
- Latest Audit Letter

# Certification Documents



- National, State, and Division Certification through SAPTA Documents

# Submission Date



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 must be received **on or before the deadline of June 13, 2018, by 4:00 p.m.**

Dennis Humphrey, Program Manager

Must be submitted to: [opioidstrgrant@health.nv.gov](mailto:opioidstrgrant@health.nv.gov) and  
[dhumphrey@health.nv.gov](mailto:dhumphrey@health.nv.gov)

with **RFA Opioid State Targeted Response: Service Expansion** in the subject line of the email.

Attachments are required to be in Microsoft Word or Excel format.

# Q&A



- Is there a particular reason the turn around time is so quick?
  - It is to recognize programs that are already ready to go
  - To be able to get the subgrants completed to be released by August 1





- What is the funding amount?
  - Estimated about \$4.6 million total
  - Threshold per category- proposals not to exceed:
    - ✦ Category 1- \$832,000
    - ✦ Category 2- \$832,000
    - ✦ Category 3- \$832,000
    - ✦ Category 4- \$800,000
    - ✦ Category 5- \$450,000
    - ✦ Category 6- \$400,000
    - ✦ Category 7- \$500,000
  - State reserves the right to re-distribute funds within categories based upon number and quality of applications



- How many awards are anticipated?
  - Awards will be granted based upon quality of application
- Can one group apply for multiple categories?
  - Yes, a scope of work and budget needs to be completed independently for each category applied for



- Does COD stand for co-occurring disorders? It is identified several times in the document, but never spelled out.
  - Yes, COD stands for co-occurring disorders
- For category 7, the grant states that “transportation” is a required service to provide, however, it is also listed under “Non-allowable budget items” as “bus passes/transportation” – can you please clarify?
  - Transportation is being removed as a required service



- Categories listed can be fulfilled by various agencies, however the positions listed under “allowable expenses” for salary support are very narrowly defined. Has any consideration been made to expand this to criminal justice or public health credentialed positions?
  - Yes, this may include other credentialed positions as long as it is a new position that is not currently already funded in your organization.
  - It is important to note how both your project and positions can be sustainable over the long term by identifying alternative funding methods once the grant cycle concludes
  - If an agency would like to employ individuals not otherwise reimbursable, the application needs to make clear long term support



- Are those possessing a valid NBHA Prevention Specialist Certification included as “allowable expenses” for salary support?
  - Yes, if salaries are already being preexisting then grant funds cannot support existing position
  - This grant is not for primary prevention efforts and any applicant needs to articulate why they want to fund the position
  - Emphasize in the application how the position will remain sustainable upon the conclusion of grant funding



- How we access the required Excel files?
  - The documents will be posted online on the SAPTA webpage along with RFA
- Do I understand correctly that there are just two (2) pages requiring signatures to be submitted with the application?
  - Yes these are the only two documents that require a signature
  - The Conflict of Interest Policy is being posted on the SAPTA webpage along with the RFA