**DIVERSUS HEALTH NETWORK**

1795 JET WING DRIVE, COLORADO SPRINGS, CO 80916

SUD Recovery Expansion

Request for Application

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Recovery Support Services RFA (21-RSS)

# Overview and Timeline

## About Diversus Health Network

Diversus Health Network, is one of Colorado’s Managed Service Organizations. Diversus Health is responsible for providing a continuum of substance use disorder (SUD) services for Sub-State Planning Area 3, which includes Chaffee, Custer, El Paso, Fremont, Lake, Park, and Teller Counties. Additionally, Diversus Health seeks to ensure a consistent level of quality and ensure compliance with State and Federal requirements relating to services offered. Diversus Health may choose to deliver these services by subcontracting with local providers who demonstrate competency, compliance with quality standards, and positive outcomes.

## Objective

Diversus Health seeks proposals related to providing the “essential ingredients for sustained recovery.” Diversus Health is interested in evidence-based recovery supports focused on the junction of substance use treatment to the community, and equally interested in services to individuals who are not in treatment but seek support in recovery from substance use. This includes:

Diversus Health seeks services offered in Recovery Community Organizations (RCOs). A RCO is defined as: An independent, non-profit organization led and governed by representatives of local communities of recovery. Such organizations carry out recovery-focused community education and outreach programs, and/or provide peer-run recovery support services.

## Location

The services outlined in this document should be located in any or all of the following Colorado Counties: Chaffee, Custer, El Paso, Fremont, Lake, Park, and Teller.

## Submission Deadline and Instructions

Organizations interested in offering theses services should submit their proposal in Word format. Please limit the project narrative to no more than 5 pages. The associated budget should use OBH’s capacity budget protocol in Excel format. Proposals should be submitted via email to the below email address. Diversus Health will acknowledge receipt of each proposal. If no acknowledgement occurs, respondents to this request for proposal should resubmit.

[HNDeliverables@DiversusHealth.org](mailto:HNDeliverables@DiversusHealth.org)

The deadline for submission is no later than **2/28/2021**.Diversus Health will begin considering requests for funding as soon as we have received those applications and will begin funding as soon as possible.

Questions can be sent to [HNDeliverables@DiversusHealth.org](mailto:HNDeliverables@DiversusHealth.org).

## Budget

Providers must include a budget and budget narrative for the proposed project under this RFA using the State Office of Behavioral Health (OBH) capacity budget protocol worksheet. Diversus Health recognizes that this funding is only a part of the support necessary to provide the service. Additional funds may be needed, including Medicaid, other governmental sources, client fees, grants, local hospital support, and other sources. The OBH capacity protocol provides a mechanism to capture all funding sources relative to total expenses. Diversus Health’s funding can be used to cover any shortfall that may exist. If no other revenue exists to support the proposal, Diversus Health’s funds may be used to fully cover the service and expansion. Protocol documents are available on our website with this proposal document.

It is important to note that there are two forms of service expansion that can take place. Please note under this RFA all projects MUST result in an expansion of services.

1. **Increase of clients serviced:** A program could be expanded to serve more clients, a new population of clients, or a new service area.
2. **Expansion of program or facility**: A new program could be established or expansion of an existing program. Effectively, these are one-time costs associated with the expansion. While capital expenses are included in the definition of expansion, they are not covered under this funding.

## Term of agreement

Diversus Health seeks provider agencies who will offer or deploy the services outlined beginning as soon as possible, with optional renewals of the contract in subsequent years. This initial funding term will be through June 30, 2021, with renewals beyond (based on available State and Federal funding sources).

# Recovery Service Areas

Diversus Health proposes the following service domain categorization, (following the SAMHSA’s four major dimensions of recovery: Health, Home, Purpose and Community as by SAMHSA in their Strategic Plan for FY19-FY23 and other places:12,13

Respondents should use this framework to describe their service proposals.

## Health

Health is defined as overcoming or managing one’s disease(s) or symptoms and making informed, healthy choices.

### Wrap-around and Care Coordination

* **Transportation:** Linkage and resources are to be provided so that individuals seeking substance use recovery can access appointment and recovery related activities. Access to reliable and affordable transportation is a necessary link that providers must facilitate. In rural and frontier areas with acute barriers, formal transportation systems might be developed while urban areas might rely on providing access to public or private transportation systems already in place.
* **Childcare:** Childcare is often a barrier to treatment and on-going recovery. Support is required to link individuals to childcare, provide it directly or assist individuals with credit applications for reduced childcare.

## Home

Home is defined as a stable and safe place to live.

### Recovery Living Communities

* **Structure:** The structure of recovery living communities (RLC) requires governance by individuals with lived experience in substance use recovery. This can be implemented as separate organization or can be embedded within another organization, so long as there is independence of governance from that organization.
* **Outreach Staff:** Staff will engage with communities and treatment providers to build relationships that will support referrals and additional supports needed by the residents. Outreach staff are integral in making recovery living communities fully a part of the community.
* **Peer Staff:** Peers staff are key members of Recovery Living Communities (RLC). Peers, or individuals in substance use recovery, provide support of on-site groups and activities and may serve as the connection for residents for other needed supports.
* **Linkages for MAT integration:** With a legal mandate to allow access, RLC have a responsibility to support residents to allow for an ease of access to MAT. RLC through peer staff are expected to support residents with any barriers to MAT access.

### Transitions to long-term affordable housing

Some individuals will choose not to live in recovery living settings and those who choose recovery living settings will ultimately move to permanent housing. Transitions to permanent affordable housing can include moves to subsidized housing such as supportive housing and tenant-based or property-based Section 8 vouchers. Assistance with housing may include starting to build a savings for a deposit on an apartment, help in applying for Section 8 vouchers, exploring therapeutic long-term subsidized housing options or locating market-based housing.

Diversus Health believes that that this should be separate from recovery living. Individuals should have a choice about participating in housing that is independent of their recovery status.

## Purpose

Purpose is defined as having meaningful daily activities.

### Vocational support

Through SAMHSA’s Recovery Support Strategic Initiative “Purpose” is one of four dimensions that support a life in recovery. Examples of Purpose are things like developing meaningful daily activities, such as a job, school, volunteer work, family caregiving, or creative endeavors, and the independence, income and resources to participate in society.

* **Partnerships with recovery-friendly employers:** These partnerships can help support IPS models and employment that is not connected with IPS. Organizations that can establish strong relationships with recovery -friendly organizations can support meaningful purpose.
* **Education and Training:** An established education and training environment can support a purpose for those in recovery. Through assessments, education and training, individuals should be allowed to investigate and pursue retraining and educational paths, especially when an individuals’ former career is not recovery friendly.

## Community

Community is defined as relationships and social networks that provide support.

### Recovery Community Organizations

* **Structure:** The structure of recovery community organizations (RCO) requires governance by individuals with lived experience with substance use. These organizations could be independent, peer-run organizations or hybrids where organizational governance is shared by peers ad professionals but the program is peer governed**.**
* **Pro-social activities:** A connection to community is key as part of an individuals’ long- term recovery. These activities can include remote, in-person, or organized activities following a standard model (12-step programs), other, non 12-step oriented mutual aid programs and informal gatherings based on interest. Activities, in order to maintain consistent participation, should be little or no cost for the participant. In addition to recreational and social support activities, access to volunteer opportunities that provide avenues to “give back” and offer meaning in addition to paid employment would be available.
* **Telehealth support:** In addition to accessing peer-led activities and coaching by remotely, RCOs could facilitate access to telehealth (both physical and behavioral health) by providing brick and mortar sites with computer access. This allows for integration of recovery support and access to formal treatment in communities where computer or internet access may be limited. In addition, the availability of remote peer support allows recovery services to be specialized to specific communities or populations such as Spanish-speaking, LBGTQ, and deaf and hard of hearing communities.

### Peer Support

### By utilizing peers to support building a community not only is there an opportunity to expand the workforce that is utilized to support those in recovery but a unique ability to create a workforce that reflects the population served including the marginalized community members as defined in the final report and blueprint resulting from the Colorado Behavioral Health Task Force. Peer support can be offered in numerous formats, including pro-social activities (as described above) and through 1-on-1 coaching sessions that allow for personalization of the support. Peer support services would likely be delivered under the organizational umbrella of RCOs, Recovery Living Communities and treatment providers.

# Response Format

## Overall Response

Respondents to this proposal request should include the following elements- please limit your response to no more than 5 pages, single spaced, Times New Roman 12pt font. Proposal should be in Microsoft Word format (except for required attachments).

1. When referencing this RFA, use RFA **#21-RSS**
2. Introduction:
   1. Please provide name of the organization, contact name and email for the proposal, total requested amount through June 30, 2021 and a sentence summary description of the proposal.
3. Business proposal, please address each of the following:
   1. Describe in detail the project/program that expands Recovery Services in the targeted community(s). Describe how you will provide this project/program, key partners and how it meets the recommendations outlined in Section 3.
   2. Describe the participant population to be served, include county(ies) that will be served and the physical location of where the service will be provided. Please keep in mind that the goal of funding is increased number of indigent participants served. Indigent participants are defined as individuals whose household income is at or below 300% Federal Poverty Level (FPL) who have no other payor source for this service.

Enumerate the specific services that will be offered to participants.

* 1. Describe how success with be measured for this project/program. Please include not only the number of individuals that will be served but also a quality measure of success.

1. Timeline, including:
   1. Project start
   2. Intermediate milestones
   3. Service delivery start (if applicable)

## Additional documentation

The following documentation is required as part of this proposal and will not count towards the 5-page limit.

### Budget

This RFA is supported using the OBH Capacity payment model. Respondent should include a budget narrative, as well. The narrative should identify any capital expenditures (not allowable for reimbursement with the funds for this offering).

Respondent will find the Colorado Office of Behavioral health capacity budget protocol documentation on Diversus Health’s website as one of the resources listed with this RFA. Offerors will find the Colorado Office of Behavioral health capacity budget template on Diversus Health’s website as one of the resources listed with this RFA. A completed budget should be included with the proposal (in Excel format).

Respondent may find the HCPF and OBH Behavioral Health Accounting and Auditing Guidelines on Signal’s website as one of the resources listed with this RFA.

### Credentialing

If you are not a current credentialed Diversus Health provider you must also complete the credentialing process.

# Evaluation and Decision

Diversus Health will review all proposals upon receipt and provide responses. Failure to provide a complete set of information requested in this document may result in exclusion from consideration.

Diversus Health may seek clarifying information as necessary to make an informed decision either from the respondent provider or from other sources.

After selection of a provider or providers for these services, Diversus Health will notify remaining respondents of the decision.

# References

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