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**Peer Support Services:**

Request for Application (RFA)

Issued: 5/17/2024





**DIVERSUS HEALTH NETWORK**

**Peer Support Services**

## summary

The purpose of this project is to provide Recovery Support Service for substance use disorder (SUD) treatment providers, allied health organizations and other contracted/sub-contracted entities to deliver peer delivered recovery support services.

SAMHSA defines recovery as, “A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.” These peer-delivered services may address any of the following pillars of recovery; health, home, purpose or community. The peers selected have been through recovery themselves and are experts in the pillars below.

**Health**: overcoming or managing one’s disease(s) or symptoms—for example, abstaining from use of alcohol, illicit drugs, and non-prescribed medications if one has an addiction problem—and, for everyone in recovery, making informed, healthy choices that support physical and emotional well-being.

**Home**: having a stable and safe place to live.

**Purpose**: conducting meaningful daily activities, such as a job, school volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society and community.

**Community**: having relationships and social networks that provide support, friendship, love, and hope.

*Diversus Health Network* will manage the contracts for region SSPA 3: Colorado Springs Metro and Surrounding Counties. It seeks applications from local governments (including Indian tribal reservations), municipalities, counties, schools, law enforcement agencies, and primary care or substance use disorder treatment providers within or outside of the managed service organization's network of providers to provide services.

## Acronyms & Definitions

**RFA** – Request for Application

**Application** – A complete and appropriately submitted response to the RFA

**Peer Support Services** - In behavioral health, a Peer refers to someone who shares the experience of living with a psychiatric disorder and/or addiction. A Peer may have the experience either directly or as family members or significant others.

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**Recovery Community Organization (“RCO”)** - "Recovery Community Organization” means an independent, nonprofit organization led and governed by representatives of local communities of recovery that organize recovery-focused policy advocacy activities, carry out recovery-focused community education and outreach programs, or provide peer-run recovery support services.

**Recovery Supports** - Recovery supports include an array of services intended to manage mental health symptoms; increase housing to support recovery; reduce barriers to employment, education, and other life goals; and secure necessary social supports in their chosen community.

**Treatment Providers -** Providers with expertise in substance use disorder care are able to ensure that all services provided in the treatment centers include recovery-focused attention to substance use disorder prevention, assessment, and treatment. These providers are licensed agencies under the approved and licensed under these rules by the Department of Human Services to provide substance use disorder treatment.

**Target population:** Coloradans living with Substance Use Disorder and/or co-occurring conditions.

**Peer Support Providers or Coaches:** A Colorado Peer and Family Specialist through the Colorado Providers’ Association or eligible within one year of hire, and that are trained in culturally appropriate peer support programming or given additional culturally relevant training.

## Timeline

The following timeline includes more details about the application process and will be implemented in support of these activities:

|  |  |
| --- | --- |
| **Activity** | **Deadline** |
| Application Published | **5/17/2024** |
| Application Questions Due | **5/29/2024** |
| Application Due | **6/21/2024** |
| Projected Start Date | **7/1/2024** |

## Budget

*Diversus Health Network* recognizes that this funding is only a part of the support necessary to provide the services submitted in the application. Additional funds may be needed, including Medicaid, other governmental sources, client fees, third-party grants, local hospital support, and other sources.

It is important to note that there are two general ways by which a service expansion can take place. Under this RFA, all projects **must** result in an expansion of services.

* **Increase of Clients Served:** A program could be expanded to serve more clients, a new population of clients, or a new service area.
* **Expansion Program or Facility:** A new program needs to be established or expansion of an existing program. Capacity based invoicing will be used for this funding.

Applicants are to submit a budget in accordance with the Behavioral Health Administration’s (BHA) Capacity Budget. Proposed budgets must follow the Behavioral Health Accounting and Auditing Guidelines published collectively by Colorado Healthcare Policy and Finance (HCPF) and BHA.

An important requirement of the capacity budget format is that the applicant should project and include other revenue sources (for example, Medicaid) that can be obtained to support the operation of the service.

In general, budgets should show a clear understanding of costs associated with the program operation, and descriptions of work should be included in all provided line items. Line items must reflect the content in the applicant’s proposal.

## Eligible applicants/Locations

Eligible applicants include the following: local governments (including Indian tribal reservations), municipalities, counties, schools, law enforcement agencies, and primary care or substance use disorder treatment providers within or outside of the managed service organization's network of providers to provide services.

The services outlined in this document should be administered in any or all the following Colorado Counties:

|  |  |  |
| --- | --- | --- |
| **MSO** | **Region** | **Eligible Counties** |
| Diversus Health Network | Region 3 | El Paso, Teller, Park, Lake, Chaffee, Fremont, Custer |

## Project standards/requirements

Applicants must use the following template to complete their proposals and compose a response to this application.

### Executive Summary

* Provide an executive summary of the proposed project. Include the name of the entity submitting the proposal, the primary contact's name, amount requested, and three to four sentences about the project and how it will increase capacity.

### Service Area

* List associated counties or municipalities where access to a continuum of substance use disorder treatment services will be increased. These can include but are not limited to: medical or clinical detoxification, residential treatment, recovery support services, and intensive outpatient treatment.
* Describe the populations to be served in explicit detail, including any subpopulations. The narrative must highlight all experience working with the relevant target populations. Demonstration through examples is strongly encouraged.
* Identify all organizations in the region that currently provide substance use treatment similar in scope to the proposed project, the types of services provided, hours, and current challenges and gaps.

### Approach

* Increase capacity and access to Peer Support Providers or Coaches that will provide culturally appropriate outreach and/or outpatient, re-entry, or other level of care services to community members that are at increased risk of Co-Occurring or Substance Use Disorders.
* The programs shall provide activities for individuals suffering from Substance Use Disorder or Co-Occurring Disorders to enhance their wellness within the pillars of Recovery.
* The programs shall provide guidance and support services to family members & support systems as well as individuals suffering from Substance Use Disorder or Co-Occurring on navigating treatment, social services, and recovery support systems.
* The programs shall establish and sustain an environment that promotes and supports a social and physical environment of recovery.
* Provides local and state recovery resources to participants and their support system.
* For RCOs, the Contractor shall adhere to the following:
  + Program outlines the capacity to deliver recovery support services to meet the needs of diverse racial, cultural, income, ability, and other underserved groups, including the delivery of recovery support services by culturally responsive and trauma-informed professionals. Provide Peer Support Providers or Coaches with clinical supervision and support.
* The Contractor shall provide the subcontractor with a mission and experience serving the behavioral health needs of the targeted population in the subcontractor's community.
* Share a project design, implementation plan, and data tracking and reporting plan.
  + The plan shall describe program goals, design and/or strategy to increase capacity and availability to Peer Support Providers or Coaches.
  + The plan shall be community-driven and culturally adapted or culturally appropriate in design.
  + The plan shall include clinical supervision and support for peers in the proposal. Describe these components as they relate to your program.
  + Describe services to be provided if granted this contract including:
    - Additional outreach services to be performed.
    - Additional services to be provided.
    - Additional populations to be served.

### Quality Assurance

* Provide projections of clients that will be served if the project is funded along with current participant numbers for comparison.
* Describe in detail the organization’s quality assurance plan to monitor project performance, deliverable timelines, quality improvement, and other relevant measures.
* Proposals must address the following: how performance indicators were determined, how data will be collected and analyzed, what methodologies are incorporated into quality assurance initiatives, and how program evaluation will be conducted at the various stages of the project.

### Organizational Capacity

* Describe the organization’s structure and management.
* Highlight the organization’s experience with working in underserved communities that need substance use treatment.
* Identify any partnering agencies and their roles in the implementation of this project.
* Describe the organization’s experience with developing and maintaining community partnerships, specifically including any partners that serve marginalized communities.
* **Provide a list of staff and short biographies of required and other staff assigned to this project.**
* If applicable, please detail important information related to any subcontractors involved in the project and how they will be monitored.

### Sustainability Plan

* Describe how the organization will continue services after the funding has ended.
* Discuss explicitly any sustainability planning, including revenue offsets, and other strategies toward this end. Demonstration through specific examples is strongly encouraged.

## Program Outcomes

Selected applicants will be required to report the following participant data to *Diversus Health Network* on a to be determined basis:

1. Total Individuals Served
2. Number of Locations
3. Counties Served
4. Total Expenditures
5. Other Outcome Measures as Applicable

## Non-discrimination

All providers of services shall not discriminate against any client based on color, race, gender, sexual orientation, age, religion, national origin, handicap, health status, or source of payment in provider services under this agreement.

## Submission Deadline & Instructions

Applicants interested in offering these services must submit their proposal by email to [hndeliverables@diversushealth.org](mailto:hndeliverables@diversushealth.org).

Proposals **must** meet the following initial criteria to proceed to full review. Failure to meet any of the below will result in **immediate exclusion with no exceptions**:

* Proposal submitted by deadline.
* Narrative submitted in a separate **Microsoft Word** document with normal margins.
  + Meets 10-page limit and font requirements.
    - **Times New Roman; 12-Point**
* Budget submitted in Microsoft Excel utilizing BHA’s Capacity Worksheet Tracker and its associated protocols.
* Must respond to all required sections as outlined in the above application.

*Diversus Health Network* will acknowledge receipt of each application. If no acknowledgement occurs, applicants should resubmit their proposals. The deadline for submission is no later than **June 21, 2024, by 5:00 p.m.**

*Diversus Health Network* will begin considering applications through a formal scoring process. Funding successful applications will begin as soon as possible.

## Term of agreement

*Diversus Health Network* 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 based on available State and Federal funding sources. The contract year for this grant funding is **July 1, 2024, through June 30, 2025.**

## Evaluation & Decision

*Diversus Health Network* will review all proposals upon receipt and provide confirmation. Failure to submit a complete set of information requested in this request may result in exclusion from consideration.

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

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

## Fiscal Documentation

Applicants will find the Colorado Behavioral Health Administration capacity budget protocol documentation on the *Diversus Health Network* website as one of the resources listed with this Grant Application, or use the following link: <https://diversushealth.org/mso-resources/>

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## credentialing

Substance Use treatment agencies licensed by the State of Colorado are required to complete a Health Network Organizational application. Non-licensed entities are also required to complete an Organizational Information application.  In addition to the application, applicable insurance and certifications will be collected.

All contractors are also required to complete the Attestation Questionnaire to verify current professional liability insurance, claims history, license sanctions, active license for the level of care being provided, NPDB status, and OIG status.

All contractors are required to provide a W9 form and to complete Electronic Funds Transfer (EFT) agreements for reimbursement.  All contracts between *Diversus Health Network* and contractors will use the name on the provided W9 form or a Trade Name registered with the Colorado Secretary of State’s Office.

## resources

A grant writing assistance program was approved as part of Senate Bill 2019-228, which allocated funds for it and designated the University of Colorado, Center for Prescription Drug Abuse Prevention as the program administrator.

Information regarding Colorado Consortium for Prescription Drug Abuse Prevention’s Grant Writing Assistance Program is located at the following web page: <https://corxconsortium.org/grant-assistance/>