



# **REQUEST FOR PROPOSALS:**

## ***Opioid/Stimulant Crisis (OSC) Beds***

**Release Date: November 13, 2024**

**Pre-Proposal Conference: November 20, 2024**

**Proposals Due: December 20, 2024 at 5:00 p.m.**

**Anticipated Award Notification: February 14, 2025**

**Anticipated Contract Start: March 1, 2025**

**Issued by:**

Behavioral Health System Baltimore, Inc.  
100 South Charles Street, Tower II, 8<sup>th</sup> Floor  
Baltimore, Maryland 21201

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# REQUEST FOR PROPOSALS

## ***Opioid/Stimulant Crisis (OSC) Beds Program***

### **II. Overview of the Project**

#### **A. Overview of BHSB**

Behavioral Health System Baltimore, Inc. (BHSB) is a non-profit organization tasked by Baltimore City to manage the city's public behavioral health system. As such, BHSB serves as the local behavioral health authority for Baltimore City. In this role, BHSB envisions a city where people live and thrive in communities that promote and support behavioral health and wellness.

BHSB is committed to enhancing the behavioral health and wellness of individuals, families, and communities through:

- The promotion of behavioral health and wellness prevention, early intervention, treatment, and recovery;
- The creation and leadership of an integrated network of providers that promotes universal access to comprehensive, data-driven services; and
- Advocacy and leadership of behavioral health-related efforts to align resources, programs, and policy.

BHSB is committed to promoting behavioral health equity in Baltimore City by ensuring that the behavioral health provider network is culturally and linguistically responsive to the diverse populations served; reducing behavioral health care access barriers for populations known to experience discrimination and marginalization; and supporting communities directly to develop services that are responsive to their unique strengths and needs.

#### **B. Overview of Program**

Opioid overdoses have been increasing due to the dramatic rise in fentanyl in Baltimore, including the co-use or mixing of fentanyl with stimulants. This program is part of Baltimore City's comprehensive strategy related to opioid and stimulant use/misuse with the aim of reducing overdose deaths in Baltimore. The program's goals include:

1. increasing access to U.S. Food and Drug Administration (FDA)-approved medications for opioid use disorder (MOUD),
2. supporting the continuum of prevention, harm reduction, treatment, and recovery support services for opioid use disorder (OUD) and other concurrent substance use disorders, and

3. supporting the continuum of care for stimulant use and misuse disorders, including those involving cocaine and methamphetamine.

Through this Request for Proposals (RFP), BHSB is seeking up to three (3) qualified organization(s) to operate opioid/stimulant crisis (OSC) beds. OSC beds provide up to four (4) days of critical short-term multi-disciplinary services to adults in crisis. The funding for this program is from the State Opioid Response program and operates on a federal fiscal year that begins on September 30 and ends on September 29 of the following year, e.g., September 30, 2025 – September 29, 2026.

- **Total program amount:** \$2,117,631 per year
- **Renewal:** Eligible for possible renewal for up to two (2) additional years if all deliverables are met
- **Total number of OSC beds available:** 12
- **# of applicants that will be selected:** Up to 3
- **Contract term:** The contract that results from this RFP is anticipated to start in March 2025. It will terminate on September 29, 2025. Contract renewals, if applicable, will have the following contract terms:
  - September 30, 2025 – September 29, 2026
  - September 30, 2026 – September 29, 2027
- **Anticipated annual contract award amount, which will be pro-rated based on the partial year:**
  - If 3 applicants are awarded 4 beds each: \$705,876
  - If 2 applicants are awarded 6 beds each: \$1,058,815
  - If 1 applicant is awarded 12 beds: \$2,117,631

BHSB reserves the right to award more or less depending on the distribution of the 12 available OSC beds, capacity of selected applicants, and available funds.

### **C. Scope of Service (including deliverables)**

The OSC beds must be housed in a Level 3.7-WM, medically-monitored residential withdrawal management program, with the addition of enhanced peer services. A total of 12 beds are available through this procurement, with the target of 750 admissions per year for all 12 beds.

The OSC funding is intended to be an enhancement service for an ASAM 3.7WM residential treatment facility. Selected applicants are expected to bill for OSC services only when crisis services are being provided to consumers actively receiving services in a crisis bed. Providers are expected to engage in the regular practice of providing and billing for 3.7WM services at all other times. Staff who are

currently employed at the residential treatment facility should render relevant and applicable crisis services as appropriate. Reimbursement for additional staff other than an approved peer support staff is unallowable.

The OSC beds are for people who do not need emergency medical care and can be safely served in a community setting. Services are accessed via walk-in or referral by EMTs or paramedics, mobile crisis teams, crisis stabilization centers, hospital emergency department physicians, referral by 988 or other community providers. Persons served may include individuals who are experiencing homelessness and/or have multiple psychiatric and medical comorbidities.

#### Program requirements

- Admissions must be offered 24 hours/365 days through referral or walk-in
- Consumers can be served for up to 4 days in an OSC bed as long as the consumer continues to meet the medically necessity criteria
  - An additional day is allowable with sufficient documentation of clinical need and approval from the funder.
- On-going assessment and treatment leading to stabilization
- Buprenorphine initiation or other MOUD treatment as clinically indicated
- Further assessment, peer engagement, access to food and shower, laundry services
- Maintain a bed registry in the Behavioral Health Link Call Center software that the 988 Regional Helpline uses to make referrals for substance use disorder treatment.
- Maximize a welcoming, voluntary, supportive, and engaging experience for those served, evidencing the principles of harm reduction, interventions incorporating the stages of change, trauma-responsive care, low barrier care, person-centered care, and a recovery-oriented experience.

These funds may only be utilized to provide services to individuals experiencing opioid or stimulant misuse/disorders. If either an opioid or stimulant misuse problem exists concurrently with other substance use, all substance use related needs may be addressed. Individuals who have no history of or no current issues with opioids or stimulants misuse are not eligible for services through this grant and should be referred to other services to address those needs.

#### Required services

- Clinical crisis stabilization services such as counseling, de-escalation, treatment and safety planning

- Completion of a comprehensive biopsychosocial assessment to determine treatment needs, including ASAM level of care and urinalysis
- Evaluation and induction of approved medications for the treatment of opioid use disorder, such as methadone and buprenorphine products, if clinically indicated
- For individuals receiving methadone prior to admission, coordination with their Opioid Treatment Program to ensure there is no interruption in receiving medication
- Certified Peer Recovery Specialists (CPRS) to assist in recovery planning with the completion of the recovery care plan. Peer services enhance the existing services in the Level 3.7-WM, medically-monitored residential withdrawal management program and are vital to engaging individuals and assisting them in their recovery efforts. CPRS's are responsible for assisting consumers in developing their recovery care plan and linking them to the next level of care.
- Care coordination, including:
  - Linkage to ongoing care and seamless handoff to the next appropriate level of care, including the continuation of stabilization for MOUD if applicable
  - Transportation to home, service provider or other community location
  - 30-day follow up services from a CPRS

### MOUD requirements

BHSB will not select applicants or contract with providers that would deny any eligible person access to their program because of using FDA-approved medications for treatment of substance use disorders (e.g., methadone, buprenorphine products including buprenorphine/naloxone combination formulations and buprenorphine mono-product formulations, naltrexone products including extended-release and oral formulations or long-acting products such as extended-release injectable or implantable buprenorphine).

If medical withdrawal (detoxification) is performed, it must be accompanied by injectable extended-release naltrexone to protect such individuals in relapse from opioid overdose and improve treatment outcomes.

Selected applicants must ensure that consumers will not be compelled to stop MOUD as part of the conditions of any programming if stopping is inconsistent with a licensed prescriber's recommendation or valid prescription. For example, consumers must be allowed to participate in methadone treatment rendered in accordance with current federal and state methadone dispensing regulations from an Opioid Treatment Program and ordered by a physician who has evaluated the

consumer and determined that methadone is an appropriate medication treatment for their opioid use disorder. Similarly, medications available by prescription or office-based implantation must be permitted if appropriately authorized through prescription by a licensed prescriber or provider. In all cases, MOUD must be permitted to be continued for as long as the prescriber or treatment provider determines that the medication is clinically beneficial.

### Accessibility

Proximity to OSC beds is one factor that may support increased access by people in need of the OSC bed services. In making the selection decision, BHSB may consider the geographic location of programs.

### Contract deliverables and requirements

All deliverables related to the number of individuals are for unduplicated individual information unless otherwise indicated. Reporting is monthly, but all goals are annual.

#### Process

- Number of individuals assessed
- Number of individuals enrolled into crisis beds
- Number of admissions: 750 admissions annually for all 12 beds
- Number of individuals receiving care coordination services
- Number of peer staff in the organization
- Number of individuals who received peer support services
- Number of peer encounters
- Number of individuals who received MOUD

#### Service outcomes

- Number of individuals transferred to hospital during crisis bed stay
- Number of individuals referred to:
  - ASAM level of care 3.0 or higher
  - MOUD services for continued treatment
  - Crisis services, including mobile crisis teams and other crisis stabilization services
  - Residential crisis services
  - Outpatient mental health services
  - Standard outpatient substance use treatment (This includes individuals treated by outpatient substance use treatment)

programs that do not provide MOUD, or physicians practicing in a non-ASAM clinic, such as a general practitioner.)

- Mental health or psychiatric services
- Number of individuals enrolled in crisis beds more than once in a month, in a quarter, and in a year

#### GPRRA reporting

The OSC beds program is funded by a federal grant that requires Government Performance and Results Act (GPRRA) reporting. Selected applicants will be required to conduct the following GPRRA-related activities:

- Introduce the GPRRA evaluation to all consumers receiving services.
- Complete the participation agreement with each consumer.
- Conduct the GPRRA interview(s).
- Submit the signed participation agreement and consumer contact form.
- Submit the completed interview(s) via a web-based platform.

### Focus Population

This service is offered to adults 18 years and older who:

- are experiencing an opioid or stimulant related crisis; and
- meet criteria for opioid and/or stimulant use disorder.

### D. Staffing Requirements

Requirements include:

- The program must be housed within a Level 3.7-WM, medically-monitored residential withdrawal management program.
- The program must follow the applicant's 3.7WM staffing pattern, with the addition of enhanced peer services provided by CPRS's available 24/7.
- CPRS's must be supervised by a Registered Peer Supervisor.

### E. Funding Availability

The total program funding amount is \$2,117,631 per year. Selected applicants are eligible for possible renewal for up to two (2) additional years if all deliverables are met.

#### Per diem rates

The selected applicant(s) will be reimbursed based on a per diem rate. The contract(s) will include 3 rates:

- MOUD Crisis Bed rate: \$532.32 per diem



- Contracted providers invoice at this rate when they are prescribing and dispensing MOUD to the consumer, along with assessment, counseling, support de-escalation, peer services and referrals.
- NON-MOUD Crisis Bed rate: \$448.59 per diem
  - Contracted providers invoice at this rate when they are not prescribing MOUD to the consumer but are providing the other services listed above.
- Assessment only: \$170.00
  - Contracted providers invoice at this rate when the consumer receives an assessment but does not stay overnight.

Rates are determined based on the rate for provider type 54, 3.7/3.7WM in the Public Behavioral Health System Substance Use Disorder Fee Schedule and are inclusive of the following services:

- Room and board
- A comprehensive biopsychosocial assessment and medically-monitored intensive substance-related disorder treatment
- FDA medication for MOUD
- The services of a physician, nurse practitioner (NP), physician assistant, psychiatrist or psychiatric nurse practitioner, registered nurse (RN), clinical supervisor, licensed mental health clinician, certified counselor, and peer support staff

Anticipated annual contract award amount, which will be pro-rated as applicable for a partial year

- If 3 providers are awarded 4 beds each: \$705,876
- If 2 providers are awarded 6 beds each: \$1,058,815
- If 1 provider is awarded 12 beds: \$2,117,631

BHSB reserves the right to award more or less depending on the distribution of the 12 available OSC beds, capacity of selected providers, and available funds.

## **F. Quality and Financial Review**

As part of BHSB's procurement process, internal quality and financial reviews are completed to ensure there are no significant concerns with the organization(s) being selected. Applicants should be sure to provide the most recent available versions of all requested documentation with their RFP application in order to ensure this is a smooth process.

## G. Contracting with BHSB

Applicants selected through this RFP will enter into a contractual agreement with BHSB. Following a notification of selection, BHSB will issue a Letter of Award that provides details about the contract and the process for executing it. The selected applicant(s) will be required to submit a new budget on BHSB's budget forms, which will be reviewed for allowable costs under the grant.

Please note that applicants may be asked to change their budgets and/or details of their proposals even if the proposal was selected for funding. Applicants new to BHSB's contract process are encouraged to review relevant forms available on our website here: <https://www.bhsbaltimore.org/for-providers/forms-for-providers>.

### Contract Type and Payment

The contract and payment type that will result from this procurement is described below. Applicants are encouraged to consider whether their organization will be able to operate with this payment mechanism before applying for these funds.

#### Fee For Service

- A set rate is charged for performing a defined service under the contract. The total cost of the contract is based on a calculation that includes the service rate and estimated number of services to be provided and/or number of consumers to be served.
- Payment is based on the costs reported for a specific period (e.g., fee rate x # of services provided).

BHSB issues payments once per month. Applicants should note that submitting required documents and reports late can result in delayed payment.

### Contract Monitoring and Technical Assistance

Selected applicants will be required to submit regular program and financial reports to BHSB using an electronic contract management system. BHSB will review these reports to monitor progress and contract compliance throughout the contract term.

**Program reports** include an update on progress toward deliverables (e.g., number of people served, number of services delivered, etc.). Some program reports may also require organizations to attach a data report with additional information (e.g., consumer demographic information, process and/or outcomes data, etc.). BHSB monitors progress on these reports throughout the contract term and may offer technical assistance and support if deliverables are not on track to be met.

**Financial reports** are required to generate payment and involve submitting actual expenditures or invoices (depending on the contract type) and to monitor spending compared to the budget or award amount. If organizations are spending more or less than expected

awarded throughout the contract term, BHSB may offer technical assistance and support to ensure the funding covers the contract term fully, and BHSB may reduce funding if all funds are not likely to be expended by the end of the contract term.

Please note that submitting program or financial reports late can result in delayed payment.

#### Verification of Services

BHSB audits all contracts to review whether the requirements set forth in the contract were completed as reported and that relevant federal, state, and local regulations were followed. This generally occurs after the conclusion of the contract period. Audits may be conducted remotely through a review of documents submitted to BHSB or on-site at the organization's location. Failure by vendors to comply with the terms of any contract with BHSB may result in denial of future contracts with BHSB.

Applicants should be aware of best practices in documenting both programmatic and financial activities to aid in an efficient audit.

### III. Overview of RFP

#### A. Purpose of RFP

The purpose of this RFP is to select up to three (3) qualified organization(s) to operate opioid/stimulant crisis (OSC) beds. OSC beds provide up to four (4) days of critical short-term multi-disciplinary services to adults in crisis.

#### B. Applicant Eligibility

Applicants must meet all of the criteria outlined below to be considered eligible to be selected through this RFP process:

- Accredited and licensed to operate as a Level 3.7-WM, medically-monitored residential withdrawal management program in Maryland for at least 2 years
- Located in Baltimore City
- In Good Standing with the Maryland Department of Assessments and Taxation

#### C. Proposal Timeline and Specifications

##### 1. Timeline

Release Date:	November 13, 2024
Pre-Proposal Conference:	November 20, 2024, at 9 a.m.
Proposal Due:	December 20, 2024, at 5:00 p.m.
Anticipated Award Notification:	February 14, 2025
Anticipated Contract Start:	March 1, 2025

##### 2. Pre-Proposal Conference

**Date:** November 20, 2024

**Time:** 9:00 am

**Location:** Microsoft Teams meeting - Join on your computer or mobile app

**Click [here](#) to join the meeting**

**Or call in (audio only):** +1 443-819-0973,,680862529#

Phone Conference ID: 680 862 529#

*Please join five minutes early to leave time to troubleshoot. If you have any problems accessing the meeting, please contact [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org).*

Questions posed during the Pre-Proposal Conference and BHSB's responses will be posted on BHSB's website at <https://www.bhsbaltimore.org/providers/funding-opportunities/> by **November 22, 2024**.

Individuals who attended the Pre-Proposal Conference will be notified by email when questions and answers are posted on BHSB's website.

*Questions received after this conference cannot be answered.*

### **3. Proposal Due Date, Time, and Location**

BHSB uses Survey Monkey Apply (SM Apply) to manage applications. All proposals must be submitted through this system. Applicants must register with the system ahead of time and submit narrative and supporting documents directly through the system. You are able to save your application and continue working on it before submitting it. BHSB encourages all applicants to test this system well in advance of submitting proposals.

Applicants can access SM Apply here: <https://bhsb.smapply.org/>

All proposals must be received no later than **5:00 pm EST on December 20, 2024**. All submitted proposals become the property of BHSB. If you are having technical troubles related to submitting your proposal, contact BHSB before the due date/time at [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org).

*Proposals submitted after the due date/time cannot be considered.*

### **5. Authorized Contact**

Applicants are advised that the authorized contact person for all matters concerning this RFP is Lynn Mumma, whose contact information is listed below.

Lynn Mumma, Procurement Lead

Email: [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org)

**6. Anticipated Service Term:** March 1, 2025 – September 29, 2025, with options to renew annually for up to 2 years depending on availability of funding and performance.

### **D. Award of Contract**

The submission of a proposal does not, in any way, guarantee an award. BHSB is not responsible for any costs incurred related to the preparation of a proposal in response to this RFP. BHSB reserves the right to withdraw an award prior to execution of a contract with a selected applicant in BHSB's sole and absolute discretion.

BHSB will select the most qualified and responsive applicants through this RFP process. BHSB will enter into a contract with selected applicants following the

notification of award. All selected applicants must comply with all terms and conditions applicable to contracts executed by BHSB.

#### **E. RFP Postponement/Cancellation**

BHSB reserves the right to postpone or cancel this RFP, in whole or in part.

#### **F. Applicant Appeal Process**

Applications must be complete and fully responsive to the below Proposal Narrative Outline and must include all required appendices. Applicants may file an appeal within five days of notification of non-selection. BHSB will not review new proposal materials that were not included in the application. BHSB will review the appeal letter and respond to the non-selected applicant within ten working days of receipt of the appeal.

#### **G. Governing Law and Vaccination Mandates**

The applicant acknowledges and agrees that BHSB is a federal contractor for purposes of Executive Order 14042, Ensuring Adequate COVID Safety Protocols for Federal Contractors (the "Order"). The applicant and its subcontractors shall comply with the Order and all other applicable mandates, rules, laws, and regulations (collectively, the "Requirements"). Upon request by BHSB, selected applicants shall promptly provide evidence of compliance with the Requirements and shall promptly take such further actions as may be requested by BHSB with respect to the Requirements and/or the resulting contract. The applicant and all of its subcontractors shall, for the duration of the resulting contract, comply with all guidance for contractor and subcontractor workplace locations published by the Safer Federal Workforce Task Force. These requirements shall be incorporated into all subcontracts of the sub-vendor.

## IV. Format and Content of Proposal

### A. Proposal Instructions

- Applicants must submit all required information using Survey Monkey Apply (SM Apply) accessible here: <https://bhsb.smapply.org/>. We recommend you start your application early so you know what to expect with the system.

***Late proposals will not be considered.***

- Generative artificial intelligence (AI) tools are becoming increasingly prevalent. While AI is a helpful administrative tool, it is important to ensure that proposals reflect authentic responses and realistic service delivery plans.
- It is the policy of BHSB to adhere to the rules and regulations in the Health Insurance Portability and Accountability Act (HIPAA), which require appropriate safeguards to protect the confidentiality, integrity and security of all protected health information. No proposals submitted in response to this RFP should include individually identifiable health information.

For more information, please refer to the Guide to IT Privacy and Security of Electronic Health Information: <https://www.healthit.gov/topic/privacy-security-and-hipaa/health-it-privacy-and-security-resources-providers>.

### B. Proposal Narrative Outline and Rating Criteria

The outline below shows the information being requested for applications and how points will be awarded during the review. Use SM Apply to submit your responses. See the instructions for more information about how to submit proposals.

#### 1. Organizational Background and Capacity (15 points)

- a. Provide an overview of your organization, including how long it has been licensed as a Level 3.7-WM, medically-monitored residential withdrawal management program. Attach all relevant licenses for 3.7WM and accreditations by uploading them to your application in SM Apply.
- b. Describe your organization's experience managing programs similar to this project, meeting contractual deliverables and obligations (including any contracts with BHSB), and your capacity to manage the programmatic and financial requirements of this grant.
- c. Describe the organization's history and experience, including length of time delivering services, providing peer services, and any evidence-based practices used.

- d. Provide the address of your Level 3.7-WM, medically-monitored residential withdrawal management program.

**Question d will not be scored.** It is included because proximity to OSC beds is one factor that may support increased access by people in need of the OSC bed services, and BHSB may consider the geographic location of the programs in making the final selection decision.

- e. How many beds are you willing to accept if selected?

**Question e will not be scored.** It is included because BHSB may need this information in making the final selection decision. Please be very specific. For example, if you would accept an award of 6 or more beds but not 5 or fewer, please state that clearly.

## **2. Principles and Values (15 points)**

- a. Describe how your organization's current practices ensure services are delivered in a culturally and linguistically competent manner, responsive to the diverse communities served, including individuals for whom English is a second language.
- b. Describe your organization's commitment to and understanding of the principles of a [Recovery-Oriented System of Care \(ROSC\)](#) consumer self-determination and multiple pathways of recovery.
- c. Describe how you will integrate principles of equity and anti-racism into this work.

## **3. Service Delivery (35 points)**

- a. Describe your organization's ability to successfully implement evidence-based trauma-responsive services and how you will use these interventions within the program and maintain fidelity to the standards model.
- b. Describe your organization's ability to successfully implement evidence-based harm-reduction services and how you will use these interventions within the program and maintain fidelity to the standards model.
- c. Describe how your organization will facilitate effective transitions from one level of care to another.
- d. Describe other behavioral health services your organization provides and what structure/process you will use to avoid conflicts of interest and inappropriate self-referral.



- e. Describe your approach to providing a competent integrated, holistic “whole health” approach to addressing substance use, mental health, and medical health.
- f. Describe how this program would function as a low barrier “safe space” that is welcoming, non-stigmatizing, and affirming to the population to be served.
- g. Describe how you will integrate these Opioid/Stimulant Crisis Beds into your existing 3.7WM program, starting from the admissions process through discharge. How will they fit into the program space? Describe what benefit these beds will bring to your existing program.

#### **4. Staffing Plan (10 points)**

- a. Describe your proposed staffing pattern, including supervisors, and how it will fulfill the staffing requirements in this RFP. Include an organizational chart that shows how this program will fit into your organization’s overall structure.
- b. Describe your proposed training plan for staff assigned to this program and indicate any relevant expertise, training, and/or skills staff already possess.

#### **5. Effectively Serving the Focus Population (5 points)**

- a. Describe how your organization is uniquely qualified and designed to address known disparities experienced by people who use opioids and stimulants.

#### **6. Program Evaluation and Quality Assurance (10 points)**

- a. Describe how your organization obtains and incorporates feedback from people served and other stakeholders into the development, implementation, operation, and improvement of program services.
- b. Describe your willingness and ability to participate in the data collection, including GPRA data, described in the RFP.

#### **7. Use of Funds (5 points)**

- a. Explain how you will use the enhanced fee for service rates provided through this award to provide enhanced peer services and 24/7 admissions.

#### **8. Implementation Timeline (5 points)**

- a. Provide a detailed timeline for implementation that includes all of the activities that you have committed to perform in your proposal. Show an outline of all the steps necessary to fully operationalize this project

and by when each step would be completed. Contracts are anticipated to start on March 1, 2025.

## **9. Appendices**

- Documentation that your program has been accredited and licensed to operate as a Level 3.7-WM, medically-monitored residential withdrawal management program in Maryland for at least 2 years.
- Most recent site visit report from the ASO, Accrediting Organization, and/or the Office of Health Care Quality (OHCQ), including any statements of deficiencies and program improvement plans.
- Most recent final Financial Audit package including Findings and Management Letter from an independent auditor (preferred) OR a recent unaudited Income Statement AND Balance Sheet, if an audit is not available.
- Most recent IRS 990 – Return of Organization Exempt from Income Taxes OR if an IRS 990 form is not required to be filed, the most recent Business Tax Return OR the Schedule C only of the most recent Personal Tax Return. (Please redact any social security numbers on the Schedule C.)
- Certificate of Good Standing from the Maryland Department of Assessments and Taxation (screenshots from the MDAT website will not be accepted) - the certificate must be dated within one year of the RFP submission due date.