

November 13, 2023

Dear Potential Applicant:

You are invited to submit an application to the Pennsylvania Department of Health in accordance with the enclosed Request for Applications (RFA) # 67-166.

All questions regarding this RFA must be directed by e-mail to tynrobinso@pa.gov, no later than 12:00 p.m. on December 4, 2023. All questions must include the specific section of the RFA about which the potential applicant is requesting clarification. Answers to all questions will be posted at <a href="https://www.emarketplace.state.pa.us">www.emarketplace.state.pa.us</a>. Click on 'Solicitations' and search for the above RFA number.

Submit one application, (Part 2 of this RFA) by email to <a href="RA-DHHEALTH\_DEPT\_DOC@pa.gov">RA-DHHEALTH\_DEPT\_DOC@pa.gov</a>. The Department cannot accept secure or encrypted emails. Any submission via secure or encrypted email will be immediately discarded. Applications must be received no later than 1:30 p.m. on **January 16, 2024**. Applications can be submitted as soon as they are ready for submission; to prevent late submissions, applicants are encouraged to not wait until this closing date and time. The timestamp on the received application email in the <a href="RA-DHHEALTH\_DEPT\_DOC@pa.gov">RA-DHHEALTH\_DEPT\_DOC@pa.gov</a> inbox is the final and only timekeeper to determine if the application was received by the deadline.

#### LATE APPLICATIONS WILL NOT BE ACCEPTED REGARDLESS OF THE REASON.

Type "APPLICATION ENCLOSED RFA # 67-166 as the subject line of your e-mail submission.

We expect that the evaluation of applications and the selection of Grantees will be completed within eight weeks of the submission due date.

Office of Procurement For Agency Head

Sincerely,

**Enclosure** 

## **Request for Application**

# Pennsylvania Substance Use Navigation Program (PA-SUN)

RFA Number RFA 67-166

Date of Issuance November 13, 2023

Issuing Office: Pennsylvania Department of Health

Office of Procurement

Email: RA-DHHEALTH\_DEPT\_DOC@pa.gov

RFA Project Officer: Tynesha Robinson

Pennsylvania Department of Health Health Resources and Services

Office of Drug Surveillance and Misuse

Prevention

Email: Tynrobinso@pa.gov

#### Pennsylvania Substance Use Navigation Program (PA-SUN) RFA 67-166

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**Application Forms and Attachments** 

- I. Cover Page
- II. BOP-2201 Worker Protection and Investment Certification Form
- III. Work Statement
- IV. Budget Template is downloadable and is attached for completion of the budget request
- V. PA-SUN Blueprint

Any Grant Agreement resulting from this RFA will include certain standard terms and conditions, which will either be attached as paper appendices or incorporated by reference and may be found at <a href="http://www.health.pa.gov/vendors">http://www.health.pa.gov/vendors</a>. These terms and conditions are not negotiable and are listed below:

- Payment Provisions (Rev. 9/21)
- Standard General Terms and Conditions (Rev. 2/21)
- Audit Requirements (Rev. 8/18)
- Commonwealth Travel and Subsistence Rates (Rev. 8/18)
- Federal Lobbying Certification and Disclosure (Rev. 12/05)
- Minimum Personal Computer Hardware, Software, and Peripherals Requirements (Rev. 1/19)
- Pro-Children Act of 1994 (Rev. 12/05)

# **PART ONE**

# Pennsylvania Substance Use Navigation Program (PA-SUN)

**General Information** 

### A. Information for Applicants

The Centers for Disease Control and Prevention Overdose Data to Action in States (OD2A-S) Grant provides funding to states to implement local overdose prevention strategies to establish programs for linking people to care and reducing health inequities for populations at greatest risk for overdose. The Pennsylvania Department of Health (Department), Office of Drug Surveillance and Misuse Prevention is an OD2A-S funding recipient and will use OD2A-S funding to implement activities in Pennsylvania focused on harm reduction, linkage to care, and navigation programs that empower outreach by people with lived experience to the communities they represent, and persons disproportionately impacted by the overdose epidemic. The Department will use OD2A-S funding to provide grant opportunities to Emergency Departments in Pennsylvania to support the design and implementation navigation and linkage to care activities for patients who are at risk for overdose.

Through this RFA process, the Department is soliciting Emergency Department navigation and linkage to care applications for the Pennsylvania Substance Use Navigation (PA-SUN) Program. The Department is interested in funding applications addressing building and implementing health system-wide clinical capacity to screen, diagnose, and support longitudinal care for opioid use disorder (OUD) and stimulant use disorder (StUD) and support recovery for adults and adolescents. The overall goal of this funding is to promote and support Emergency Department linkage to care via multidisciplinary teams including navigators, broadening the scope from only post-overdose scenarios to also include strategies like focused connections during care for conditions that may represent sequelae of substance use, and enhanced universal screening for substance use disorder (SUD) among patients presenting for other reasons to Emergency Departments to identify new opportunities to engage in and link to care.

The Department is soliciting applications from Hospitals and Health Systems on behalf of their Emergency Department(s) for Grant funding that shall be categorized by location as follows:

- 1. Northwest Region Category: Emergency Departments in Cameron, Centre, Clarion, Clearfield, Clinton, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Potter, Venango, or Warren counties
- 2. Northeast Region Category: Emergency Departments in Bradford, Carbon, Columbia, Lackawanna, Lehigh, Luzerne, Lycoming, Monroe, Montour, Northampton, Northumberland, Pike, Snyder, Sullivan, Susquehanna, Tioga, Wayne, Wyoming, or Union counties
- **3. Southwest Region Category:** Emergency Departments in Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Fayette, Fulton, Greene, Huntingdon, Indiana, Somerset, Washington, Westmoreland counites
- **4. Southeast Region Category:** Emergency Departments in Adams, Berks, Bucks, Chester, Cumberland, Delaware, Dauphin, Franklin, Juniata, Lancaster, Lebanon, Mifflin, Montgomery, Perry, Philadelphia, Schuylkill, or York counties

Hospitals and Health Systems must indicate their region of location on their application. Hospitals and Health Systems will be evaluated against applicants within their respective category (region).

The Department intends to award one applicant per region. The region of the applicant shall be defined by the location of the Emergency Department where activities shall take place and not the headquarters of the Hospital or Health System. Hospitals and Health Systems that apply on behalf of multiple Emergency Departments, within one Health System, where activities will take place shall define their region by the location of the Emergency Department with the largest patient volume.

The anticipated Grant Agreement term is May 1, 2024, to August 31, 2026, subject to the availability of funding. If the anticipated effective date is changed by the Department for the resulting Grant Agreement, the term is expected to remain a total of 28 months, subject to the availability of funding.

At the Department's discretion and by letter notice, the Department may renew the resulting Grant Agreement for the following term: two one-year periods.

- 1. In the event of a renewal, the Department may choose to renew the Grant Agreement under one of the following sets of terms:
  - a) If no renewal options were previously exercised, pursuant to the terms and conditions of the final year of the original Grant Agreement; or
  - b) If a renewal option has been exercised, pursuant to the terms and conditions of the final year of the previous renewal; or
  - c) Pursuant to the terms and conditions of the original Grant Agreement as amended, including Subsequently Available Funds (SAFs), Decrease in Funding (DIF), Funding Reduction Change Orders (FRCOs), Budget Revisions, or formal Amendments; or
  - d) At a maximum percentage of 10% under one of the following conditions:
    - (i) If no renewal options were previously exercised, to increase the Grant amount to reflect cost changes based on the final budget year of the original Grant; or
    - (ii) If a renewal option has been exercised, pursuant to the terms and conditions of the final year of the previous renewal; or
    - (iii) To include any increase in work documented in a previous Amendment to the original Grant Agreement, including any SAFs, DIFs, FRCOs, Budget Revisions, or formal Amendments. The increase in work shall be limited to deliverables established in the Grant Agreement as previously amended; or
  - e) To decrease the Grant amount, provided there is no change to the scope of work being performed.
- 2. Notwithstanding Paragraph (1)(d) above, line-items within the budget categories of Supplies/Equipment, Travel, and Other may be eliminated or the line-item amounts

decreased provided there is no alteration to the scope of work.

- 3. The percentage listed in Paragraph (1)(d) above, represents the maximum allowable increase per budget category and in the total Grant amount.
- 4. Nothing in this section is intended to permit an alteration in the scope of work of the original Grant Agreement.
- 5. The Department is not obligated to increase the amount of the Grant award.
- 6. The percentage increase set forth in Paragraph (1)(d) above, shall apply over the entire renewal term, even if the renewal term exceeds one year.
- 7. All renewal terms are subject to the other provisions of the resulting Grant Agreement, and the availability of funds.

Applications are welcomed from Hospitals and Health Systems in Pennsylvania who will implement activities in at least one Emergency Department within the Hospital or Health System. Hospitals and Health System applicants may choose to apply for funding to support activities that will take place in multiple Emergency Departments within the Health System. An Emergency Department (ED), also known as an Accident and Emergency Department, Emergency Room, or Emergency Ward, is defined as a medical treatment facility specializing in emergency medicine for serious medical issues that may be considered an emergency for patients who present without prior appointment; either by their own means or by that of an ambulance.

Additional information about how to apply, relevant and specific restrictions, and stated preferences regarding applicants are noted and outlined in Section B. Applicants are encouraged to be innovative and creative in their approach.

This RFA provides interested and eligible parties with information to prepare and submit applications to the Department. Questions about this RFA can be directed to the contact listed on the potential applicant letter (which is the first page of this RFA) by the date and time listed therein. All questions must include the specific section of the RFA about which the potential applicant is requesting clarification. Answers to all questions will be posted under the RFA Solicitation at <a href="https://www.emarketplace.state.pa.us">www.emarketplace.state.pa.us</a>. Each applicant shall be responsible to monitor the website for new or revised RFA information. The Department shall not be bound by any information that is not either contained within the RFA or formally issued as an addendum by the Department.

In order to do business with the Commonwealth of Pennsylvania providers are required to enroll in the SAP system. Applicants may enroll by selecting "Non-Procurement" at: <a href="https://www.budget.pa.gov/Services/ForVendors/Pages/Vendor-Registration.aspx">https://www.budget.pa.gov/Services/ForVendors/Pages/Vendor-Registration.aspx</a> or by calling toll free at 1-877-435-7363. The PDF and MP4 embedded links next to "Non-Procurement" provide guidance on enrolling.

## **B.** Application Procedures

#### 1. General

- a) Applications must be received by the Department by the time and date stated in the cover letter. The Department will reject any late applications. The decision of the Department with regard to timeliness of submission is final.
- b) If it becomes necessary to revise any part of the application guidelines, an amendment will be posted under the RFA Solicitation at <a href="https://www.emarketplace.state.pa.us">www.emarketplace.state.pa.us</a>.
- c) The decision of the Department with regard to selection of applicants is final. The Department reserves the right, in its sole and complete discretion, to reject any and all applications received as a result of this request and to negotiate separately with competing applicants.
- d) The Department is not liable for any costs the applicant incurs in preparation and submission of its application, in participating in the RFA process or in anticipation of award of the resulting Grant Agreement(s).
- e) The Department reserves the right to cancel the RFA at any time up until the full execution of the resulting Grant Agreement(s).
- f) Awarded applicants and non-selected applicants shall not be permitted to issue news releases pertaining to this project prior to official written notification of award by the Department review committee. Any subsequent publication or media release issued by the Grantee throughout the life of the Grant using funding from this Grant Agreement must acknowledge the Department as the granting agency and be approved in writing by the Department.

#### 2. Evaluation of Applications

All applications meeting stated requirements in this RFA and received by the designated date and time, will be reviewed by a committee of qualified personnel selected by the Department. The Review Committee will recommend applications that most closely meet the evaluation criteria developed by the Department. If the Review Committee determines that additional clarification of an application is needed, Office of Drug Surveillance and Misuse Prevention staff and staff from the Office of Procurement will schedule an oral presentation, either in person or via a conference call, or assign a due date for the submission of a written clarification, or both.

Evaluation criteria used by the Review Committee, include:

- 1. Project Abstract
- 2. Health Disparity Impact Statement
- 3. Project Narrative
- 4. Project Workplan
- 5. Project Feasibility and Sustainability
- 6. Budget Detail and Budget Narrative

#### 3. Awards

Grants will be administered through the Department.

All applicants will receive official written notification of the status of their application from the Department. Unsuccessful applicants may request a debriefing. This request must be in writing and must be received by the Office of Drug Surveillance and Misuse Prevention within 30 calendar days of the written official notification of the status of the application. The Office of Drug Surveillance and Misuse Prevention will determine the time and place for the debriefing. If the debriefing is held via Microsoft Teams, a link, phone number, and conference ID number will be provided. The debriefing will be conducted individually by the Office of Drug Surveillance and Misuse Prevention staff. Comparison of applications will not be provided. Applicants will not be given any information regarding the evaluation other than the position of their application in relation to all other applications and the strengths and weaknesses in their individual application.

#### 4. Deliverables

- a) The awarded applicant(s) shall hire or maintain at minimum one Emergency Department-based navigator who shall, at minimum:
  - i. Develop and implement activities to link patients who are at risk for overdose, have opioid use disorder (OUD), or have stimulant use disorder (StUD) to peer support services.
  - ii. Provide rapid support services to increase linkage to evidence-based treatment including medications for opioid use disorder (MOUD).
  - iii. Provide patient education and resources on naloxone, primary overdose prevention resources, and harm reduction resources.
- b) The awarded applicant(s) shall optimize care for their patients at risk for overdose, have OUD, or have StUD, through enhanced communications, education, training, and technical assistance for healthcare professionals (including, but not limited to, physicians, advanced practice providers, nurses, and administrative staff) to increase awareness of care options and reduce stigma surrounding substance use.
  - i. The awarded applicant(s) shall identify at minimum one MOUD Clinical Champion who will promote access to evidence based MOUD treatment, provide education and mentorship to clinical peers on MOUD to support perception and attitudes towards MOUD, and advance linkage to care efforts.
  - ii. The awarded applicant(s) shall develop and implement activities to build and sustain an environment within the Emergency Department that welcomes patient disclosure of substance use without stigma.
  - iii. The awarded applicant(s) shall develop and implement activities to increase awareness of health system wide care options for patients at risk for overdose, have OUD, or have StUD.
- c) The awarded applicant(s) shall build and implement universal screening and linkage to care workflows and policies for patients presenting to the Emergency Department for overdose and other reasons that may represent sequelae of substance use to connect patients to trauma-informed, evidence-based treatment and resources.
- d) The awarded applicant(s) shall work collaboratively with the Department's Office of Drug

Surveillance and Misuse Prevention evaluation team to participate in an in-depth evaluation of navigator and linkage to care activities and their impact on health disparities and serving patients at disproportionate risk for overdose.

### 5. Reporting Requirements

- a) The awarded applicant(s) shall submit a written mid-term report of progress, issues, and activities to the Department within 180 calendar days after the Grant Agreement effective date. The mid-term report shall, at a minimum, identify if activities are proceeding according to the project plan, and explain any deviations from the project plan.
- b) The awarded applicant(s) shall submit a final written report to the Department within 30 calendar days after the end date of the Grant Agreement. The final report shall include the following components at minimum:
  - 1. Overall Summary: This section shall provide a brief description of the project, progress to date, and a summary narrative for each contracted deliverable.
  - 2. Successes: This section shall provide a summary narrative of program successes.
  - 3. Barriers: This section shall discuss the challenges the awarded applicant faced during phases of the project and what actions were taken to address respective challenges.
- c) The awarded applicant(s) shall submit to the Department monthly data reports that will be used for in-depth program evaluation of navigator and linkage to care activities as well as impact on health disparities and serving patients at disproportionate risk for overdose.

### C. Application Instructions and Required Format

#### 1. Application Instructions

The following is a list of requirements.

- a) The applicant must submit one application (Part Two of this RFA), by email to RA-DHHEALTH DEPT DOC@pa.gov. The Department cannot accept secure or encrypted emails. Any submission via secure or encrypted email will be immediately discarded.
- b) The application must be received by the date and time specified in the cover letter. Applicants should consider that technical difficulties could arise and allow sufficient time to ensure timely email receipt. (Late applications will be rejected, regardless of the reason). The application can be submitted as soon as it is ready for submission; to prevent late submissions, applicants are encouraged to not wait until the closing date and time in the cover letter.
- c) Please note there is a 10MB size limitation per email. If the application exceeds 10MB, zip the file to reduce the size or submit multiple emails so the entire application is able to be received.
- d) The application must be submitted using the format described in subsection 2, below Application Format.

- e) The Cover Page must be completed and signed by an official authorized to bind the applicant/organization to the application.
- f) The Worker Protection and Investment Certification Form (BOP-2201) must be completed and signed by an official authorized to execute the certification on behalf of the applicant and certify that the applicant is compliant with applicable Pennsylvania state labor and workplace safety laws.

Applicants are strongly encouraged to be brief and clear in the presentation of ideas.

#### 2. Application Format

Applicants must follow the format as described below to complete Part Two of this RFA. Applications must be typewritten on 8 ½" by 11" paper, with a font size no smaller than 10 point and margins of at least ½ inch.

- a) **Cover Page** Complete the form.
- b) Worker Protection and Investment Certification Form (BOP-2201) BOP-2201 must be completed and signed by an official authorized to execute the certification on behalf of the applicant and must certify that the applicant is compliant with applicable Pennsylvania state labor and workplace safety laws.
- c) **Work Statement** The work statement narrative shall not exceed 12 pages. Provide a narrative description of the proposed methodology addressing the following topics:

#### 1. Project Abstract (recommended 1-2 pages)

The project abstract shall provide:

- i. Succinct description of the applicant organization and Emergency Department(s), including the region category of the applicant
- ii. Succinct description of the Emergency Department population to be served by proposed activities and patient volume.
- iii. Succinct description of how Grant funds will be applied in the project, demonstrating understanding of the RFA deliverables.
- iv. A statement acknowledging that hospital or health system administration supports the applicant's RFA application and that they agree with all Grant deliverables outlined in section B 4.

#### 2. Health Disparity Impact Statement (recommended 1-2 pages)

The health disparity impact statement shall provide:

- i. Succinct description of underserved communities in the Emergency Department(s)' jurisdiction and people at disproportionate risk for overdose
- ii. Description of how planned activities will reach underserved populations through Emergency Department-based navigators and, ultimately, improve SUD linkage to care services.

#### 3. Project Narrative (recommended 4 pages)

The project narrative shall:

- i. Explain how Grant funding will be utilized to implement linkage to care activities in the Emergency Department(s) and will serve populations at disproportionate risk for overdose
- ii. Provide a description of how multidisciplinary teams including Emergency Department-based navigators will be utilized to achieve deliverables and makeup of the multidisciplinary teams.
- iii. Provide a description of how applicants will enhance linkage to care activities via navigators for conditions that may represent sequelae of substance use and implement enhanced universal screening for SUD among patients presenting for other reasons to the Emergency Department
- iv. Provide details of individuals responsible for administration and implementation of Grant-funded activities. Applicants shall provide a description of staff positions to be utilized in administering this project. Resumes of existing staff persons or position descriptions for vacant positions working directly on the proposed project shall be included as an Additional Appendix that does not count towards the page limit requirements.
  - v. Description of the job responsibilities of each new position proposed in the project as well as any specialized training or licenses or both required for the specific positions. Position descriptions of proposed staff positions must be included in as an Additional Appendix, not counting towards the page limit requirements.
- vi. Location where activities shall be implemented.

#### 4. Project Workplan (recommended 3 pages)

The workplan shall be reflective of the proposed project for the entire Grant term from May 1, 2024, to August 31, 2026, and shall:

- i. Provide overarching goals and activities that will be designed and implemented to achieve required deliverables. Activities shall be Specific, Measurable, Achievable, Relevant, and Time-phased.
- ii. Provide start and end dates of each activity.
- iii. List staff responsible for implementation of each activity.
- iv. Describe possible barriers and challenges that may be encountered for each activity and mitigation strategies.

#### 5. Project Feasibility and Sustainability (recommended 1 page)

The project feasibility and sustainability statement shall describe:

- i. How the applicant plans to initiate services within the Emergency Department immediately upon receiving the award and identify key implementation strategies.
- ii. How activities implemented in the Emergency Department(s) will be sustained after the Grant funds expire, including identification of possible funding sources to continue Emergency-Department based navigator(s)
- iii. How commitments from key stakeholders necessary for successful sustainability of the program will be established.

d) **Budget Detail and Budget Narrative** – Use the downloadable format to present your budget request. Instructions regarding completion of the budget can be found in the last worksheet of the downloadable excel budget file. The anticipated Grant Agreement term is May 1, 2024, to August 31, 2026. The overall 28-month budget for the application shall not exceed \$325,000.00. The budget must contain an Overall Summary in addition to a Summary with Budget Details for each year.

<b>Overall Summary</b>	May 1, 2024, to August 31, 2026	\$325,000.00
Year 1 Summary	May 1, 2024, to June 30, 2024	\$37,500.00
Year 2 Summary	July 1, 2024, to June 30, 2025	\$141,500.00
Year 3 Summary	July 1, 2025, to June 30, 2026	\$125,000.00
Year 4 Summary	July 1, 2026, to August 31, 2026	\$21,000.00

Applicants shall include a narrative which justifies the need to allocate funds for items in the spreadsheet of the itemized budget and demonstrates how they will maximize cost effectiveness of Grant expenditures. Applicants shall also explain how all costs are calculated, how they are relevant to the completion of the proposed project, and how they correspond to the information and figures provided in the Budget Detail Summary.

The budget template provided by the Department shall be used and the budget shall be reasonable for the work proposed. The budget and budget narrative are not included in the 12-page limit for the work statement.

See the Budget Definitions section below for more information.

#### 3. **Definitions**

#### a) **Budget Definitions:**

<u>Personnel:</u> This budget category shall identify each position by job title, hourly rate, and the number of hours per year allocated to the project. Fringe benefits are to be shown as a separate line-item by percentage and shall include a detailed listing of the benefits being covered.

<u>Consultant Services:</u> This budget category shall identify the services to be provided by each consultant including hourly rate and number of hours to be utilized under this Grant Agreement.

<u>Subcontract Services</u>: This budget category shall identify the services to be provided by each subcontractor under this Grant Agreement.

Patient Services: This budget category shall reflect funding dedicated for patient services.

<u>Equipment</u>: This budget category shall reflect the actual or projected cost of any equipment \$5,000 or greater. Justification for the purchase of any equipment must be included.

Purchase of equipment is not a priority of the Department.

<u>Supplies</u>: This budget category shall reflect expected costs for general office supplies including personal computers and facsimile machines valued at less than \$5,000, needed to support this project.

<u>Travel</u>: This budget category shall include anticipated expenditures for travel including mileage, hotels and meals.

Other: This budget category shall be used for anticipated expenditures that do not fit into any of the other budget categories such as telephone, printing, postage, and indirect costs (overhead, general, and administrative). Indirect rates cannot exceed the Provider's Federally approved indirect cost rate schedule. In the description area under OTHER COSTS include the % that the rate reflects, identify the budget categories to which the rate was applied, and list the specific items that the indirect is paying for.

#### b) **Program/Work Statement Definitions:**

**Medications for Opioid Use Disorder (MOUD):** Food and Drug Administration-approved medications indicated for the treatment of opioid use disorder including buprenorphine, methadone, and naltrexone.

Medications for Opioid Use Disorder (MOUD) Clinical Champion: The MOUD clinical Champion is the individual leading the implementation of MOUD initiation in the emergency department. This person shall be a board-certified addiction specialist or someone with equivalent training preferably a physician, nurse practitioner, or physician's assistant with SUD treatment experience. This role will coordinate and facilitate information and/or technical assistance sessions among Emergency Department personnel, provide education for treating patients with MOUD, recommendations for improving MOUD workflows in the Emergency Department, and stay abreast of and sharing new learning opportunities for staff.

**Navigator:** Navigators can include peer navigators, certified peer recovery specialists, peer support specialists, case managers, patient navigators, community health workers, persons with lived experience, and other individuals who link people who use drugs (PWUD) to care and harm reduction resources. These are individuals familiar with the local public health and SUD treatment landscape and work directly with individuals with OUD or StUD to ensure they have the tools to address barriers to seeking care and who support people accessing treatment and their retention SUD treatment and care, as well as support access to other services, such as harm reduction and social supports.

Opioid Use Disorder (OUD): OUD is characterized as a chronic pattern of opioid use that causes significant impairments in health, social functions, and control over opioid use. OUD is a treatable, chronic disease that can affect anyone regardless of race, gender, income level, or social class. A diagnosis of OUD is based on specific criteria such as unsuccessful efforts to cut down or control use or use resulting in a failure to fulfill

obligations at work, school, or home, among other criteria.

**People Who Use Drugs (PWUD):** People who use non-prescribed drugs, regardless of administration route.

Stimulant Use Disorder (StUD): StUD is characterized as a chronic pattern of stimulant use that causes significant impairments in health, social functions, and control over stimulant use. StUD is a treatable, chronic disease that can affect anyone regardless of race, gender, income level, or social class. A diagnosis of StUD is based on specific criteria such as unsuccessful efforts to cut down or control use or use resulting in a failure to fulfill obligations at work, school, or home, among other criteria.

**Substance Use Disorder (SUD):** SUD is characterized as a chronic pattern of substance use that causes significant impairments in health, social functions, and control over substance use. SUD is a treatable, chronic disease that can affect anyone regardless of race, gender, income level, or social class. A diagnosis of SUD is based on specific criteria such as unsuccessful efforts to cut down or control use or use resulting in a failure to fulfill obligations at work, school, or home, among other criteria.

# PART TWO

# Pennsylvania Department of Health Office of Drug Surveillance and Misuse Prevention

# Pennsylvania Substance Use Navigation Program (PA-SUN)

Request for Applications (RFA) #67-166



### COVER PAGE RFA #67-166

<b>Applicant Name:</b>				
	(Organization or Institution)			
Type of Legal Entity_	(Corporation, Partnership, Professiona	al Corporation, Sole	Proprietorship, etc.)	
Federal I.D.#:	Gr	ant Amount:	\$	
SAP Vendor #:				
Address:				
	County			
	Person:			
Title:				
Telephone No.:	Fax:		E-mail:	
Region:				
Applications/proposals award(s) is or are mad		l, unless deemed	unresponsive, until such time that	t final
THE APPLICATION		AT ALL THE IN	SIGNATORY, IS BINDING IT NFORMATION SUBMITTED I ON AND BELIEF.	
SIGNATURE OF AU	THORIZED CERTIFYING OFFICIAL		TITLE	
			DATE	
				]]



#### WORKER PROTECTION AND INVESTMENT CERTIFICATION FORM

- A. Pursuant to Executive Order 2021-06, *Worker Protection and Investment* (October 21, 2021), the Commonwealth is responsible for ensuring that every worker in Pennsylvania has a safe and healthy work environment and the protections afforded them through labor laws. To that end, contractors and grantees of the Commonwealth must certify that they are in compliance with Pennsylvania's Unemployment Compensation Law, Workers' Compensation Law, and all applicable Pennsylvania state labor and workforce safety laws including, but not limited to:
  - 1. Construction Workplace Misclassification Act
  - 2. Employment of Minors Child Labor Act
  - 3. Minimum Wage Act
  - 4. Prevailing Wage Act
  - 5. Equal Pay Law
  - 6. Employer to Pay Employment Medical Examination Fee Act
  - 7. Seasonal Farm Labor Act
  - 8. Wage Payment and Collection Law
  - 9. Industrial Homework Law
  - 10. Construction Industry Employee Verification Act
  - 11. Act 102: Prohibition on Excessive Overtime in Healthcare
  - 12. Apprenticeship and Training Act
  - 13. Inspection of Employment Records Law
- B. Pennsylvania law establishes penalties for providing false certifications, including contract termination; and three-year ineligibility to bid on contracts under 62 Pa. C.S. § 531 (Debarment or suspension).

#### CERTIFICATION

I, the official named below, certify I am duly authorized to execute this certification on behalf of the contractor/grantee identified below, and certify that the contractor/grantee identified below is compliant with applicable Pennsylvania state labor and workplace safety laws, including, but not limited to, those listed in Paragraph A, above. I understand that I must report any change in the contractor/grantee's compliance status to the Purchasing Agency immediately. I further confirm and understand that this Certification is subject to the provisions and penalties of 18 Pa. C.S. § 4904 (Unsworn falsification to authorities).

Signature	Date
Name (Printed)	
Title of Certifying Official (Printed)	
Contractor/Grantee Name (Printed)	

BOP-2201

Published: 02/07/2022

## **Work Statement**

See Part One, General Information; Section C, Application Instructions and Required Format; Subsection 2c Work Statement for completion instructions.

The following language is required to be included in the Work Statement:

Pursuant to Executive Order 2021-06, Worker Protection and Investment (October 21, 2021), the Commonwealth is responsible for ensuring that every Pennsylvania worker has a safe and healthy work environment and the protections afforded them through labor laws. To that end, Contractors and Grantees of the Commonwealth must certify that they are in compliance with all applicable Pennsylvania state labor and workforce safety laws. Such certification shall be made through the Worker Protection and Investment Certification Form (BOP-2201) and submitted with the application.

# **Budget Template**

See Part One, General Information; Section C, Application Instructions and Required Format; Subsection 2d Budget for completion instructions.

### Pennsylvania Substance Use Navigators Program Blueprint

\*Modeled from the CA Bridge Program

Preparation Stage
$\square$ Identify at least one clinical champion in the ED
$\ \square$ Educate clinicians and hospital staff on MOUD and non-stigmatizing language
$\ \square$ Form a SUD workgroup that will assist with developing solutions for barriers that are encountered
during program implementation
☐ Begin internal discussions around patient access points to treatment
Getting Started
$\square$ Develop a process/policy for identifying patients with MOUD and StUD
☐ Ensure buprenorphine is on the formulary for MOUD and available in the hospital for administration
$\square$ Order signage informing the public that treatment is available and order any additional
supplies needed (signs inviting patient self-disclosure of desire for MOUD information/treatment)
$\square$ Implement treatment protocols, sharing with:
□ Nursing Teams
☐ Pharmacy Teams
☐ Coordination Teams (e.g., Navigator, Social Work Dept, Case Management, Crisis Intervention, Behavioral Health Unit)
☐ Evaluate your program by identifying and mitigating barriers
☐ Complete any IT system updates deemed necessary
Patient Linkage
☐ Hire a navigator to link patients to care
☐ Provide training and ongoing support to prepare navigators
□ Identify space in the ED for new staff
☐ Establish connections with at least one clinic or outpatient setting that provides MAT
☐ Establish a patient centered referral process, including workflows for night and weekend follow-up
$\square$ Equip navigators and staff with the tools that they need to provide patient education and support
Start Treatment
☐ Educate clinicians and hospital staff on MOUD protocols, treatment options, and the referral process
$\square$ Integrate harm reduction practices in the ED such as providing naloxone at the time of discharge
☐ Connect patient to ongoing care
Data Collection and Commitment
$\square$ Identify who will be responsible for data collection
☐ Submit monthly statistical data
☐ Participate in monthly provider/grantee calls
Program Sustainability
$\square$ Bill for services provided
Generate support in the hospital

# RFA# 67-166 PAYMENT PROVISIONS

The Department agrees to pay the Contractor for services rendered pursuant to this Contract as follows:

- A. Subject to the availability of state and Federal funds and the other terms and conditions of this Contract, the Department will reimburse the Contractor in accordance with Appendix C, and any subsequent amendments thereto, for the costs incurred in providing the services described in this Contract.
- B. This Contract may span several state fiscal periods; therefore, the Department is obligated to pay no more than the dollar amounts for each state fiscal year (SFY), for the periods of time indicated on the Budget, Appendix C. This shall not prohibit the Department from exercising its discretion to move funds unspent at the end of the SFY from one SFY to another to pay for services provided with separate written Department approval and in accordance with this Contract.
- C. Payment to the Contractor shall be made in accordance with the Budget set forth in Appendix C, and any subsequent amendments thereto, as follows:
  - 1. The Department shall have the right to disapprove any expenditure made by the Contractor that is not in accordance with the terms of this Contract and adjust any payment to the Contractor accordingly.
  - 2. Payments will be made monthly upon submission of an itemized invoice for services rendered pursuant to this Contract using the invoice format in Attachment 1 to this Appendix.
  - 3. An original invoice shall be sent by the Contractor directly to the address listed in Attachment 1 to this Appendix unless otherwise directed in writing by the Project Officer. Documentation supporting that expenditures were made in accordance with the Contract Budget shall be sent by the Contractor to the Department's Project Officer. The Department's Project Officer may request any additional information he or she deems necessary to determine whether the expenditures in question were appropriately made. The adequacy and sufficiency of supporting documentation is solely within the discretion of the Project Officer.
  - 4. The Contractor has the option to reallocate funds between and within budget categories (Budget Revision), subject to the following criteria:
    - a. General Conditions for Budget Revisions
      - Budget Revisions At or Exceeding 20%.
        - A. The Contractor shall not reallocate funds between budget categories in an amount at or exceeding 20% of the total amount of the Contract per budget year as set forth in Appendix C Budget, and any subsequent amendments thereto, without prior written approval of the Department's Project Officer.
        - B. The Contractor shall request prior written approval from the Department's Project Officer when the cumulative total of all prior Budget revisions in the budget year is 20% or greater of the total amount of the Contract per budget year.
        - C. Reallocations at or exceeding 20% of the total amount of the Contract per budget year may not occur more than once per budget year unless the Department's Project Officer finds that there is good cause for approving one additional request. The Project Officer's determination of good cause shall be final.
      - ii. Budget Revisions Under 20%. The Contractor shall notify the Department's Project Officer of any Budget Revision under 20% of the total amount of the Contract per budget year in writing, but need not request Department approval, except as provided for in Paragraph 4(a)(i)(B) above.

- iii. The Contractor shall obtain written approval from the Department's Project Officer prior to reallocating funding into a previously unfunded budget category or prior to eliminating all funding from an existing budget category, regardless of the percentage amount.
- iv. The Contractor shall provide the Department's Project Officer with notice or make a request for approval prior to the submission of the next invoice based on these changes.
- v. At no time can Administrative/Indirect cost rates be increased via a Budget Revision.

#### b. Budget Revisions Relating to Personnel

- i. Any change to funds in the Personnel Category requires the approval of the Department's Project Officer, and any such change at 20% or over as set forth in Paragraph 4(a) shall be counted as one Budget Revision under that paragraph.
- ii. The Contractor may not reallocate funds to, or move funds within, the Personnel Services Category of the Budget (Appendix C), and any subsequent amendments thereto, to increase the line items in that category unless one of the following circumstances apply:
  - A. The Contractor is subject to a collective bargaining agreement or other union agreement and, during the term of this Contract, salaries, hourly wages, or fringe benefits under this Contract are increased because of a renegotiation of that collective bargaining agreement or other union agreement. The Contractor shall submit to the Department's Project Officer written documentation of the new collective bargaining or other union agreement, which necessitates such reallocation.
  - B. The Contractor is unable to fill a position that is vacant or becomes vacant at or after the effective date of this Contract. The Contractor shall submit to the Department's Project Officer written justification for the request to increase line item amounts and reallocation of funds in connection with filling such a position in sufficient detail for the Department to evaluate the impact of that reallocation on the performance of the work of the Contract, as well as the Contractor's inability to fill the position. Justification may include, for example, documentation of salaries for the same or similar positions in the same geographic area.
  - C. The Contractor is unable to perform the work of the Contract with the existing positions, titles or classifications of staff. The Contractor may add or change a position, title or classification in order to perform work that is already required. The Contractor shall submit to the Department's Project Officer for his or her approval written justification for the request to reallocate funds in connection with changing or adding a position, title or classification, in sufficient detail for the Department to evaluate the impact of that reallocation on the performance of the work of the contract, as well as the Contractor's inability to fill current position. Justification may include, for example, documentation of salaries for the same or similar positions in the same geographic area.
- iii. The number of positions accounted for by any one line item may not be decreased, or consolidated into one position, without prior written approval of the Department.
- iv. All increases are subject to the availability of funds awarded under this Contract. The Commonwealth is not obligated to increase the amount of award.
- v. This paragraph is not intended to restrict any employee from receiving an increase in salary from the Contractor based on the Contractor's fee schedule for the job classification.
- 5. Unless otherwise specified elsewhere in this Contract, the following shall apply. The Contractor shall submit monthly invoices within 30 days from the last day of the month within which the work is performed. The final invoice shall be submitted within 45 days of the Contract's termination date. The Department will neither honor nor be liable for invoices not submitted in compliance with the time requirements in this paragraph unless the Department agrees to an extension of these requirements in

- writing. The Contractor shall be reimbursed only for services acceptable to the Department.
- 6. The Department, at its option, may withhold the last 20 percent of reimbursement due under this Contract, until the Project Officer has determined that all work and services required under this Contract have been performed or delivered in a manner acceptable to the Department.
- 7. The Commonwealth will make payments through the Automated Clearing House (ACH). Within 10 days of award of the Contract or Purchase Order, the Contractor must submit or must have already submitted its ACH information within its user profile in the Commonwealth's procurement system (SRM). Within 10 days of the Grant award, the Grantee must submit or must have already established its ACH information in the Commonwealth's Master Database. The Grantee will also be able to enroll to receive remittance information via electronic addenda and email (e-Remittance). ACH and e-Remittance information is available at <a href="https://www.budget.pa.gov/Services/ForVendors/Pages/Direct-Deposit-and-e-Remittance.aspx">https://www.budget.pa.gov/Services/ForVendors/Pages/Direct-Deposit-and-e-Remittance.aspx</a>.
  - a. The Contractor must submit a unique invoice number with each invoice submitted. The unique invoice number will be listed on the Commonwealth of Pennsylvania's ACH remittance advice to enable the Contractor to properly apply the state agency's payment to the invoice submitted (for Contracts or Purchase Orders) or to the invoice or program (for Grant Agreements).
  - b. It is the responsibility of the Contractor to ensure that the ACH information contained in SRM (for Contracts or Purchase Orders) or in the Commonwealth's Master Database (for Grant Agreements) is accurate and complete. Failure to maintain accurate and complete information may result in delays in payments.
  - c. In the event this language conflicts with language contained elsewhere in this agreement, the language contained herein shall control.
- D. The Department's determination regarding the validity of any justification or of any request for approval under this Appendix B (Payment Provisions) is final.