



## RFP #25-32-PH – Opioid Settlement

### Addendum III

#### A. Questions & Answers

**(County responses and changes are in red)**

#### A. Questions & Answers

1. Regarding page 10 of the RFP, please confirm this is for all eligible entities applying, and the RFP is not only for nonprofits:

*4.3 PROPOSAL REQUIREMENTS Eligible applicants shall populate all attachments of this RFP that require the nonprofit to provide information and include an authorized signature where requested. Nonprofit RFP responses shall include the following items in the following order: ...*

Correct, all applicants should submit all proposal requirements listed in section 4.3.

All organizations listed in section 4.1 of the proposal are eligible to apply.

2. In the project requirements (section 4.2 A), it states, funded projects must:

*Be submitted as a joint application between a health care provider (behavioral health, mental health, substance use, physical health) and at least one community-based organization. Each applicant should select one primary applicant.*

Each applicant must partner with a community-based organization. The application can include multiple partners. The primary applicant will be the fiscal agent and will receive the award if funded. The primary applicant will be responsible for contracting with the partner to subaward funding.

3. Instead of a community based organization (CBO), can a for-profit apply with the government? And if so, will this affect scoring and priority?

A for-profit entity may partner with a government agency on their proposal. However, there still must be connection back to a community-based partner (it is allowable to have more than one secondary partner). The RFP does not dictate the funding share between the primary and secondary applicant(s), only that there is evidence of a community based partner involved in partnership.

4. Regarding ATTACHMENT A: INSTRUCTIONS TO VENDORS 6. SUSTAINABILITY: *To support the sustainability efforts of the County of Cumberland we solicit your cooperation in this effort. All copies of the proposal are printed double-sided.*

When submitting the application, would you like the applicant to print the responses double-sided? Or is this statement for internal purposes?

Printed copies should be submitted double sided.

5. Will there be an interview/presentation process? If yes, how will it be scored (i.e. points)?

Currently, there are no required presentations to receive funds. However, the county reserves the right to request follow up information from applicants to clarify information submitted with their proposals.

#### Questions addressed during the webinars:

6. Is the Cumberland County Detention Center considered a community-based partner agency? We are a Telehealth Office Based Opioid Addiction Provider, and we are hoping to partner with the local detention center (and the provider there called WellPath) to utilize the funds for expanding access to evidence-based medication-assisted treatment (MAT).

The reviewer would expect to see letters of support from the Sheriff's Office. In addition, reviewers would expect to a description of how the proposal does not duplicate the current MAT Program at the Detention Center, which is already receiving Opioid Settlement Funds.

7. What if there are multiple secondary applicants, some have not received county funding, and others have. How will the extra points be scored? Same for the annual budget?

Applicants need to list one primary care applicant/fiscal agent and at least one secondary applicant. We'll provide extra points based on the information provided for the listed primary applicant and the first secondary applicant listed in the application.

8. There is a requirement for funded projects that "Funded agencies are required to provide services at the Recovery Resource Center."

What does that mean? If we provide services inside the county detention facility, do we also need to provide services at the Recovery Resource Center?

Direct service delivery at the C-FORT Recovery Resource Center may not be appropriate in all instances. While the time per week/month will vary by proposal, applicants are expected to have a strong connection back to the C-FORT Recovery Resource Center. Examples of ways in which this requirement may be met are included below

- Providing direct services at the C-FORT Recovery Center (see question 21)
  - o Providing a class, facilitating training, or facilitating a recovery group
  - o STD testing
  - o A staff member is present to enroll eligible clients into the proposed services

- Participating in C-FORT Outreach events at the Recovery Resource Center (anticipated to be held several times annually)
- Actively referring clients to receive services at the Recovery Resource Center via NCCARE360, email, phone)
- Actively receiving referrals from clients of the Recovery Resource Center
- Providing tangible resources for individuals receiving services at the Recovery Resource Center (medication disposal kits, naloxone, wound care supplies, condoms)

More information about the C-FORT Recovery Resource Center is available here:

[https://www.cumberlandcountync.gov/departments/public-health-group/public-health/community-services/c-fort-\(opioid-response\)/c-fort-recovery-resource-center](https://www.cumberlandcountync.gov/departments/public-health-group/public-health/community-services/c-fort-(opioid-response)/c-fort-recovery-resource-center)

9. Can we attend the monthly C-FORT meetings virtually? Or are all meetings in-person?

C-FORT Meetings do have a virtual option for most of the monthly meetings. The required meetings may occur in-person or virtually. Grantee meetings are held at least quarterly.

10. Is the total funding \$800K available for the entire 4-year cycle for all grantees? Or is \$800K available per year for all grantees? So, are the funds limited to 5 projects? So \$200K per year for 4 years per project?

The total amount of available funding for all projects is \$4,000,000. Up to five project proposals are eligible to receive \$800,000 each over the four-year cycle. The total amount of funding per project proposal may not exceed \$800,000 over four years. There is no annual spending ceiling for each year of the project. For example, the submitted budget may include a higher year one budget that includes start up or training costs and fewer expenses for years two, three, and four of the proposed project.

11. What if an organization is a behavioral health provider AND a nonprofit organization?

Two individual entities must complete a joint application to be eligible for funding.

12. Does there have to be a certain percentage per strategy of the total budget? So, can we apply for different strategies in different years of the budget?

There are no requirements regarding how funds are allocated across strategies or between the two partner agencies. Different strategies may be included in different years of the project. For example, Year 1 of the project may focus on evidenced-based treatment and then additionally address another strategy in subsequent years. If strategies are being added or discontinued throughout the life of the project, the project narrative may be used to explain this more clearly.

13. If we include multiple budget templates and tables does that include the 10 pages?

Only the project narrative counts toward the 10-page limit; budget tables and applicant information are not included in this limit. The project narrative (and the 10-page limit) includes the following sections: Healthcare Provider and Community-Based Agency Partnership, Project Description and Implementation Plan, Statement of Need (10 points), Population Served (10

points). Evidence-Based Practices, Results, Goals and SMART Objectives, Evaluation, Equity Impact, Project Partners, and Experience and Organizational Capacity.

14. Is funding disbursed on a reimbursement basis?

Yes, funds are disbursed on a reimbursement basis.

15. Resources included in the RFP:

Frequently Asked Questions on the MOA:

<https://www.morepowerfulinc.org/wp-content/uploads/2022/08/FAQ-about-the-NC-MOA-updated-August-2022.pdf>

FAQs on Option A Strategies in the MOA:

<https://www.morepowerfulinc.org/wp-content/uploads/2022/08/FAQ-about-Option-A-Strategies-updated-August-2022.pdf>

Strategy specific resources:

<https://ncopioidsettlement.org/strategy-resources/>

16. Are there any funds available for Re-entry Programs?

Yes, re-entry programs are supported under Option A, strategy 12. Funding is available to support programs that connect incarcerated persons to addiction treatment, recovery support, harm reduction services, primary healthcare, or other services or support they need upon release from jail or prison, or that provide any of these services or supports.

17. Do activities with the partner need to be active in all 4 years?

Yes, applications must demonstrate an ongoing partnership throughout the duration of the funding period.

18. It sounds like we do not have to allocate funding to these partner agencies in the budget, just by strategies. We have existing partners that are not a cost built into our program; can we include one of them as a partner agency?

The RFP does not require a specific share or split between the primary agencies (fiscal agent) and secondary agencies. Even if both agencies are not included in the budget, proposals should thoroughly describe the partnership between a healthcare (behavioral health, mental health, substance use, physical healthcare, etc.) provider and a community-based partner.

19. I feel we are taking a risk being a fiscal agent to a partner agency and any guidance on how to manage that? We allocate to them? Then, we are responsible as the primary agency?

The primary applicant is responsible for subcontracting with the secondary applicant(s). Cumberland County will only require documentation from the primary applicant.

20. Also, there are criteria like NC solicitation license and being a legally operating entity so who is responsible for checking that? How do we screen our agencies to be legally operating? There are a host of requirements to be legally operating nonprofit, do the partner agencies have to be under the same criteria? Can we be provided with a sub-contacting template?

Information for both partner agencies is required. Both the primary and secondary applicant(s) are required to be registered with the State of North Carolina and must be legally operating in the State of North Carolina. This will be verified during the RFP proposal review process.

[https://www.sosnc.gov/online\\_services/search/by\\_title/ Business Registration](https://www.sosnc.gov/online_services/search/by_title/Business%20Registration)

The County will contract with the primary applicant. The primary applicant may want to replicate some of the program requirement and fiscal requirement contract language to utilize in a sub-recipient contract.

21. Can C-FORT or the health department provide my organization with a letter of support?

No. County employees, including health department staff, provide significant administrative support to the Cumberland-Fayetteville Opioid Response Team (C-FORT). County employees are not permitted to contribute to the development of a proposal for this RFP. To ensure equity in the proposal development and review process, C-FORT and the health department will not provide a letter of support to any proposal in response to this RFP. The support of C-FORT is critical to the implementation of the Opioid Settlement Funds. A non-county employee who is also a member of C-FORT will serve on the multidisciplinary review panel. In general, C-FORT and health department staff are committed to supporting funded projects in the following ways:

- Providing time during C-FORT meetings to share about project activities
- Providing time/space for service delivery at the C-FORT Recovery Resource Center
- Sharing program resources, flyers, handouts, etc. to the C-FORT listserv
- Providing opportunities to participate in C-FORT and/or health department outreach events
- Sharing relevant local, state, and federal data
- Support in connecting partners to coordinate an organized response to the opioid crisis
- Providing naloxone overdose prevention training to partners
- Providing C-FORT Resource Guides, naloxone, and other harm reduction supplies, as supplies last and funding is available
- Receiving referrals for health department services and referring health department clients to funded programs
- Sharing training opportunities and providing direct training, as funding is available
- Providing eligible clients with services supported by the Opioid Settlement Funds
  - o Transportation to out of county in patient treatment
  - o Transitional housing for individuals with substance use disorder

22. Are proposals seeking funding under the Recovery Housing Programs strategy required to provide housing to individuals receiving Medication-Assisted Treatment (MAT) for opioid use disorder?

Subrecipients are held to the same spending eligibility requirements as the local governments, and local governments must ensure subrecipients' compliance with the NC MOA and local, state, and federal rules and laws, including the Americans with Disabilities Act (ADA), and the

Fair Housing Act (FHA). These laws require state and local governments to provide individuals with disabilities with an equal opportunity to benefit from all their programs, services & activities. These laws apply to individuals with substance use disorder and opioid use disorder.

Please see additional resources below:

[https://archive.ada.gov/opioid\\_guidance.pdf](https://archive.ada.gov/opioid_guidance.pdf)

[https://mahec.net/images/uploads/publications/Module\\_1\\_ADA\\_Presentation\\_PPT\\_PDF.pdf](https://mahec.net/images/uploads/publications/Module_1_ADA_Presentation_PPT_PDF.pdf)

<https://www.justice.gov/crt/fair-housing-act-1>