



Department of Mental Health

166 Horseshoe Drive | Weeks Building | Waterbury, VT 05671-2010
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<https://mentalhealth.vermont.gov/>

REQUEST FOR GRANT APPLICATIONS (RFGA114)

Peer Leadership, Advocacy, and Peer Support

ISSUE DATE	May 03, 2024
QUESTIONS DUE	May 22, 2024 – 4:30 PM (ET)
APPLICATIONS DUE BY	June 07, 2024 – 4:30 PM (ET)

PLEASE BE ADVISED THAT ALL NOTIFICATIONS, RELEASES, AND ADDENDUMS ASSOCIATED WITH THIS RFGA WILL BE POSTED AT:

<https://mentalhealth.vermont.gov/RFP>

THE STATE WILL MAKE NO ATTEMPT TO CONTACT INTERESTED PARTIES WITH UPDATED INFORMATION. IT IS THE RESPONSIBILITY OF EACH APPLICATION TO PERIODICALLY CHECK THE ABOVE WEBPAGE FOR ANY AND ALL NOTIFICATIONS, RELEASES AND ADDENDUMS ASSOCIATED WITH THIS RFGA.

STATE CONTACT:

NAME: Jennifer Rowell
TELEPHONE: (802) 241-0090
E-MAIL : AHS.DMHSubmissions@vermont.gov

1. OVERVIEW:

- 1.1. **SCOPE AND BACKGROUND:** Through this Request for Grant Applications (RFGA) the Department of Mental Health (DMH), hereinafter referred to as the “State,” is seeking applications to establish subrecipient agreements with one or more non-profit entities to provide **statewide peer leadership, advocacy, and education; support of local peer projects; and direct peer support.**
- 1.2. **RFGA OBJECTIVE:** The purpose of the RFGA is to solicit proposals from qualified applicants for five (5) scopes of work related to peer leadership, advocacy, education, and peer support. Applicants can submit proposals to one, some, or all the scopes of work described in section 2.1
- 1.3. **DESCRIPTION OF ORGANIZATION:** The Vermont Agency of Human Services (AHS) strives to improve the health and well-being of Vermonters today and tomorrow and to protect those among us who are unable to protect themselves. The scope of AHS is profound. Through its six departments, twelve district offices, and a network of community partners and providers, it is responsible for the implementation and delivery of all human service programs within the state. Each department has a distinct area of focus and responsibility and contributes to the creation and sustenance of an entire system of human service supports.

The Department of Mental Health (DMH) resides under AHS and has the same critical mission in mind: to improve the conditions and well-being of Vermonters and protect those who cannot protect themselves. DMH continues to focus on its vision for self-determination, empowerment, recovery, and resiliency. This means being responsive to the needs of Vermonters and their families, as well as continuing to challenge ourselves to try to change society’s culture, philosophy, and values, while working to fully embrace the concepts of recovery and resiliency. By improving our effectiveness and coordination of programs and services around the State, we will help Vermonters meet their needs.

- 1.4. **AGREEMENT PERIOD:** Agreements arising from this RFGA will be for a period of **up to 12 months**. The State anticipates the start date for such agreements will be starting in **July 2024**. Agreement term may be impacted by funding availability.
- 1.5. **SINGLE POINT OF CONTACT:** All communications concerning this RFGA are to be addressed in writing to the State Contact listed on the front page of this RFGA. Actual or attempted contact with any other individual from the State concerning this RFGA is strictly prohibited and may result in disqualification.
- 1.6. **QUESTION AND ANSWER PERIOD:** Any applicant requiring clarification of any section of this RFGA or wishing to comment on any requirement of the RFGA must submit specific questions in writing no later than the deadline for question submission indicated on the first page of this RFGA. Questions may be e-mailed to the point of contact on the front page of this RFGA. Questions or comments not raised in writing on or before the last day of the question period are thereafter waived. At the close of the question period a copy of all questions or comments and the State's responses will be posted on the State’s web site <https://mentalhealth.vermont.gov/RFP>. Every effort will be made to post this information as soon as possible after the question period ends, contingent on the number and complexity of the questions.
- 1.7. **CHANGES TO THIS RFGA:** Any modifications to this RFGA will be made in writing by the State through the issuance of an Addendum to this RFGA and posted online at

<https://mentalhealth.vermont.gov/RFP>. Modifications from any other source are not to be considered.

- 1.8. **SOURCE OF FUNDS:** The Department anticipates using State and Federal (Medicaid Global Commitment) funds with potential for additional funding from the Mental Health Block Grant for the resulting agreement(s). The Department may choose to modify the source of funding contingent upon the availability of funds at the time of award. Any selected organization will be subject to the requirements in the Catalog of Federal Domestic Assistance (CFDA) #93.778, U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS).
- 1.9. **PROPOSAL ASSISTANCE:** If an applicant requires assistance in preparing their proposal, registering with SAM.gov, or needs guidance on socioeconomic certifications, the applicant may contact the Agency of Commerce and Community Development (ACCD), Department of Economic Development (DED), APEX Accelerator (formerly the Procurement Technical Assistance Center [PTAC]). The Vermont APEX Accelerator specializes in helping small businesses navigate the documentation associated with State and Federal procurement. There is no cost to the Applicant for assistance provided by APEX Accelerator. Their website is: <https://accd.vermont.gov/economic-development/programs/ptac>.

2. DETAILED REQUIREMENTS/DESIRED OUTCOMES:

The State is interested in obtaining applications to meet the following need(s) to support individuals with mental health conditions and challenges (“Supported Populations”).

- 2.1. **General:** Respondents should provide detailed proposals, containing a clearly defined approach for one, some or all of the following **five (5) scopes of work related to peer leadership, advocacy, education, and peer support**. The proposed approach should establish specifics about the services delivered, populations to be supported, expected outcomes, proposed performance measures, and funding proposal per the requirements of this Section.

A. Statewide peer leadership, advocacy, and education. The grantee will serve as a statewide peer-run entity that will provide leadership, advocacy, and education for individuals with lived experience of mental health conditions. The grantee will develop an array of statewide activities, supports, and infrastructure including but not limited to the following:

- i. Leadership and advocacy
 - Provide **statewide leadership**, voice, and advocacy to promote recovery, ensure equal rights and protections, address stigma, and improve mental health services and supports in Vermont.
 - Build **forums for the peer community** to discuss, review, and prioritize key concerns. Support coordination across mental health community partners.
 - Support the **development of peer leadership** through education (see below) and mentorship.

- Lead **engagement and peer advocacy with the State Legislature**, e.g. hold legislative educational events, participate in Mental Health Advocacy Day.
- **Build links with Vermont state government.** Promote peer participation at state-level meetings regarding policy, system reform, service planning and provision.
- **Build links and support community organizations**, including the Designated Agencies and Specialized Service Agencies. Promote recruitment of individuals with lived experience to participate in local oversight and policy committees.

ii. Activities and education

- Provide education about mental health, recovery and the service system to individuals, organizations, and communities. Include a focus on stigma.
- Provide education focused on improving leadership, advocacy skills, and effective communication, primarily for people with lived experience.
- Participate in statewide activities to promote mental health awareness, recovery, improved services, reduced stigma.

B. Newspaper publication. The grantee will publish multiple issues annually that will emphasize news, opinion, arts, and resources of interest to individuals with lived experience of mental health conditions and their families, and secondarily to mental health providers and the general public.

- The news will include information about innovations in mental health treatments and supports. The grantee will include a wide array of information about resources provided by other community partners representing various viewpoints to allow people to choose the resources right for them and in line with their personal beliefs.
- Before development and publication of each issue, the Grantee will meet with an Editorial Board of individuals with lived experience, peer advocates, family members, and the provider/professional community to review potential content and advise on the policy and scope of the publication.
- The grantee will actively solicit contributions from individuals with lived experience, family members, and peer advocates for content. The grantee will post the newspaper on a website, distribute it electronically to a subscriber list, and print copies for distribution.

C. Local peer-operated projects/initiatives. The grantee will solicit proposals, and award one time funding for local peer initiatives. The projects will be designed and operated by individuals with lived experience of mental illness (peers) and provide new opportunities for individuals with lived experience to participate in providing support, education, advocacy and/or community building not otherwise available in their local community. Coordination of the peer-operated projects will include soliciting and receiving applications, reviewing the applications and making awards, collecting and reviewing performance measures and progress reports, monitoring and offering technical support and training as needed.

D. Patient representatives. The grantee will recruit, hire, and supervise peer support specialists to serve as Patient Representatives in the Designated Hospitals, Vermont Psychiatric Care Hospital (VPCH), River Valley Therapeutic Residence (RVTR), and the Intensive Recovery Residential (IRR) programs. DMH is mandated to offer outreach and support to individuals under the custody of the Department of Mental Health (DMH). The Patient Representatives are

available as well to all individuals hospitalized at the Designated Hospitals or residing at an IRR or the secure recovery residential facility (RVTR).

The responsibilities and expectations of the Patient Representatives will include:

- Initial meeting after admission, upon agreement by the individual, to share **information** about the patient representative program, patient/resident rights, and the facility's grievance process.
- Providing individuals with **Peer support services**, which are informed by the principles of Intentional Peer Support (IPS) and Vermont's Code of Ethics developed for Peer Specialist Credentialing to ensure adherence to recovery principles, protection of the individual's privacy, and confidentiality.
 - Peer support can be individualized or offered in a group setting.
- **Advocating** for patients/residents and fostering communication between individuals and their health care providers. Patient representatives may attend treatment planning and treatment team meetings, if requested by the individual, to provide support and **encourage self-advocacy** skills.
- **Assistance with transition** from the facility including accessing community supports following discharge. This support will coordinate with the community outreach program (see item E. below).

The responsibilities of the Grantee will include:

- Provision of **training** in Intentional Peer Support (IPS), WRAP / Taking Action for Whole Health & Wellbeing, and other trainings e.g. Hearing Voices, deemed useful in supporting the work of the Patient Representatives.
- Provision of **supervision / co-reflection** for Patient Representatives, including individual support at least every two weeks and as needed. The supervisor is expected to be an experienced, trained, adult mental health peer support specialist.
- Development of a **written understanding or memorandum of understanding (MOU)** between the grantee and each facility that works with Patient Representatives to outline roles, expectations, and responsibilities of the Patient Representatives, methods of communication, and ways for individuals to access the Patient Representative at the facility.

E. Community outreach peer support program. The grantee will operate a peer support outreach program in coordination with the work of the Patient Representatives, to assist individuals with mental health and other co-occurring challenges (e.g. substance use). This program will focus on individuals transitioning out of the hospital, intensive residential programs, other institutional settings e.g. correctional facilities.

Services will include:

- Outreach, engagement, and peer support with individuals who need assistance in developing a transition plan back to the community and experiencing challenges in engaging in community services. Individuals will receive **peer support services**, which are informed by the principles of Intentional Peer Support (IPS) and Vermont's Code of Ethics developed for Peer Specialist Credentialing, to ensure adherence to recovery principles, protection of the individual's privacy, and confidentiality.
- **Assistance** with identifying and accessing community services. This includes assistance with the development and/or strengthening of formal and informal support networks.
- **Crisis intervention and prevention** for individuals who are at risk of hospitalization, incarceration, homelessness and/or negative health outcomes.

- Support and **advocacy** for individuals regarding the services and care they receive, e.g. attending meetings with providers per the request of the individual.

The Grantee is responsible for the following in support of the community outreach program:

- Provision of **training** in Intentional Peer Support (IPS), WRAP / Taking Action for Whole Health & Wellbeing, and other trainings, e.g. Hearing Voices, deemed useful in supporting the work of the Patient Representatives.
- Provision of **supervision / co-reflection** for Patient Representatives, including individual support at least every two weeks and as needed, and staff meetings at least every two weeks. The supervisor is expected to be an experienced, trained, adult mental health peer support specialist.
- Development of an **evaluation process** to track how the peer services being provided assist individuals in successfully transitioning back or remaining in the community. The evaluation will be paired with a quality improvement process to inform the program's policies and practices.

2.1.1. Responses should be sure to address the following:

- 2.1.1.1. What work is to be done?
- 2.1.1.2. What are the deliverables and associated outcomes anticipated?
- 2.1.1.3. Who is responsible for doing the work?
- 2.1.1.4. What is the timeline for the work to be done?
- 2.1.1.5. How will the work be performed?

2.2. **Applicability to the State's Objectives and Need Areas:** Proposals should establish a clear link between the services and/or programming proposed and meeting one or more of the specific objectives or need areas. listed below:

- Objective 1. Increased statewide peer leadership and advocacy based on improved communication and networking with the peer community.
- Objective 2. Regular publication of a newspaper that shares news, opinions, arts, and resources of interest to individuals with lived experience, with oversight and contributions from individuals with lived experience.
- Objective 3. Development and support of local peer-operated projects that provide opportunities for support, advocacy, and/or community-building not otherwise available in their communities.
- Objective 4. Timely, easy access to peer specialists serving as Patient Representatives in the Designated Hospitals, Vermont Psychiatric Care Hospital, the Intensive Recovery Residential programs, and the secure residential facility at River Valley Therapeutic Residence.
- Objective 5. Increased capacity for peer support for individuals transitioning out of psychiatric hospitals, residential programs, and correctional institutions, as well as individuals experiencing challenges engaging in community resources, particularly individuals experiencing homelessness.

2.3. **Reporting Requirements:** Respondents shall include in their responses a reporting approach that, at a minimum, provides the State with quarterly reporting on project progress. The proposed reporting approach shall include the frequency of reporting, core data elements to be included in the periodic reporting, and a description of reporting

format, timing, and other logistics. The State will consider how proposed reporting ties to proposed performance measures in evaluating responses.

2.4. Performance Measures: Responses must propose clear and measurable performance measures that will enable the State to determine the success of the services and/or programming. These performance measures should be linked to the desired impact of the services and/or programming and should, at a minimum, reflect how the project has successfully expanded care for the supported population. For reference, potential measures may include, but are not limited to:

- Number of individuals served
- Measurable increases in service capacity
- Defined program outputs/milestones/accomplishments
- Recipient satisfaction surveys

2.5. Applicant Eligibility: To be considered eligible for an award, proposals and applicants must meet the following criteria:

- The Applicant must comply with the terms and conditions required for all State grant recipients. See Attachments and links section.

3. GENERAL REQUIREMENTS:

3.1. PRICING: Applicants must price the terms of this solicitation at their best pricing. Any and all costs that the Applicant wishes the State to consider must be submitted for consideration. **The maximum amount of any pricing proposal shall not exceed \$607,375.**

3.1.1. Prices and rates shall remain firm for the term of the agreement. The pricing policy submitted by Applicant must (i) be clearly structured, accountable, and auditable and (ii) cover the full spectrum of materials and services required.

3.2. STATEMENT OF RIGHTS: The State shall have the authority to evaluate Responses and select the Applicant(s) as may be determined to be in the best interest of the State and consistent with the goals and performance requirements outlined in this RFGA. The State of Vermont reserves the right to obtain clarification or additional information necessary to properly evaluate a proposal. Failure of Applicant to respond to a request for additional information or clarification could result in rejection of that Applicant's proposal. To secure a project that is deemed to be in the best interest of the State, the State reserves the right to accept or reject any and all applications, in whole or in part, with or without cause, and to waive technicalities in submissions. The State also reserves the right to make purchases outside of the awarded agreements where it is deemed in the best interest of the State.

3.2.1. **Presentation.** An in-person or webinar presentation by the Applicant may be required by the State if it will help the State's evaluation process. The State will factor information presented during presentations into the evaluation. Applicants will be responsible for all costs associated with providing the presentation.

3.3. METHOD OF AWARD: Awards will be made in the best interest of the State. The State may award one or more agreements and reserves the right to make additional awards to

other compliant applicants at any time if such award is deemed to be in the best interest of the State.

- 3.3.1. **Evaluation Criteria:** Consideration shall be given to the Applicant’s project approach and methodology, qualifications and experience, ability to provide the services within the defined timeline, cost, and success in completing similar projects, as applicable, and to the extent specified below. The State will use a scoring scale of 100 total points, with a maximum of 80 points awarded based on the Technical Proposal and a maximum of 20 points awarded based on the Pricing Proposal. Points are divided into categories set forth below.

Technical Proposal	
Project Approach/Design	35
Alignment with State Objectives, Goals, and Needs	20
Organizational Capacity	15
Project Timeline	10
Funding Proposal	
Pricing Proposal	20
Total Points	100

- 3.4. **AGREEMENT NEGOTIATION:** Upon completion of the evaluation process, the State may select one or more Applicants with which to negotiate an agreement, based on the evaluation findings and other criteria deemed relevant for ensuring that the decision made is in the best interest of the State.
- 3.5. **COST OF PREPARATION:** Applicant shall be solely responsible for all expenses incurred in the preparation of a response to this RFGA and shall be responsible for all expenses associated with any presentations or demonstrations associated with this request and/or any proposals made.
- 3.6. **AGREEMENT TERMS:** The selected Applicant(s) will be expected to sign an agreement with the State, including the Standard Agreement Form and other standard attachments provided with this RFGA for reference.
- 3.6.1. **Business Registration.** To be awarded an agreement by the State of Vermont a Applicant (except an individual doing business in his/her own name) must be registered with the Vermont Secretary of State’s office <https://sos.vermont.gov/corporations/registration/> and must obtain a Business Account Number issued by the Vermont Department of Taxes <http://tax.vermont.gov/>.
- 3.6.2. **Payment Terms.** Subrecipient Agreements are funded on a reimbursement basis. Awardees will need to produce backup documentation to be reimbursed for expenses incurred for the work outlined in the Agreement(s).

4. CONTENT AND FORMAT OF RESPONSES:

The content and format requirements listed below are the minimum requirements for State evaluation. Applicants should adhere to the Section page limits below. The State will not evaluate any information provided in excess of the section page limitations. All responses shall be provided in size 12 Arial font.

4.1. The application should include a Cover Letter, a Technical Response, Management Response, Price Schedule, and Risk Assessment Checklist.

4.2. COVER LETTER (Maximum 2 pages):

4.2.1. Applicants must explicitly identify which scopes of work are included in their proposal for consideration.

4.2.2. **Confidentiality:** To the extent your application contains information you consider to be proprietary and confidential, you must comply with the following requirements concerning the contents of your cover letter and the submission of a redacted copy of your application (or affected portions thereof).

4.2.3. All responses to this RFGA will become part of the agreement file and will become a matter of public record under the State's Public Records Act, 1 V.S.A. § 315 et seq. (the "Public Records Act"). If your response must include material that you consider to be proprietary and confidential under the Public Records Act, your cover letter must clearly identify each page or section of your response that you consider proprietary and confidential. Your cover letter must also include a written explanation **for each marked section** explaining why such material should be considered exempt from public disclosure in the event of a public records request, pursuant to 1 V.S.A. § 317(c), including the prospective harm to the competitive position of the Applicant if the identified material were to be released. Additionally, you must include a redacted copy of your response for portions that are considered proprietary and confidential. Redactions must be limited so that the reviewer may understand the nature of the information being withheld. It is typically inappropriate to redact entire pages, or to redact the titles/captions of tables and figures. Under no circumstances may your entire response be marked confidential, and the State reserves the right to disqualify responses so marked.

4.2.4. **Exceptions to Agreement Terms and Conditions:** If an Applicant wishes to propose an exception to any terms and conditions set forth in the Standard Agreement Form and its attachments, such exceptions must be included in the cover letter to the RFGA response. Failure to note exceptions when responding to the RFGA will be deemed to be acceptance of the State terms and conditions. If exceptions are not noted in the response to this RFGA but raised during negotiations, the State reserves the right to cancel the negotiation if deemed to be in the best interests of the State. Note that exceptions to agreement terms may cause rejection of the proposal.

4.3. TECHNICAL RESPONSE (Maximum 4 Pages). In response to this RFGA, an Applicant shall:

4.3.1. Provide a clearly defined approach describing the services or programming proposed by the Applicant for unique and innovative programming or services that can improve the mental health and/or well-being of the supported population. This

approach should establish specifics about the services delivered, populations to be supported, expected outcomes, proposed performance measures, and funding proposal per the requirements of this Section.

4.3.2. Describe your capabilities and particular experience relevant to the RFGA requirements.

4.3.3. Describe the proposed reporting and performance measurement approach that is consistent with Sections [2.3](#) and [2.4](#) of this RFGA.

4.4. MANAGEMENT RESPONSE (Maximum 2 Pages). In response to this RFGA, an applicant shall:

4.4.1. Provide details concerning your organization, the organization's leadership, size, capabilities, similar efforts supported, and resources.

4.4.2. Address how your organization will provide the necessary resources and operational capacity to provide the expected services. This should, at a minimum, discuss staffing or resourcing strategies for achieving the proposed objectives.

4.4.3. Briefly discuss quality assurance, oversight, or internal control steps that will be in place to ensure proper execution of the proposed approach.

4.5. PRIOR EXPERIENCE (Maximum 2 Pages). Please provide descriptions of two prior projects with which you have provided similar programming or services in the past. Experience may be explained through a partner's letter of support.

4.6. PRICE SCHEDULE (Maximum 1 Page): Proposals must include a funding proposal that includes the amount of funding requested and a proposed deliverable-based payment schedule consistent with the requirements of Section 4 of this RFGA. If applying for multiple scopes of work, applicants must delineate this in their proposed budget. **The maximum amount for individual awards is \$607,375.** Funding proposals shall not exceed this amount. Applicants shall submit their pricing information in the Price Schedule attached to the RFGA.

4.7. RISK ASSESSMENT CHECKLIST: This form **must** be completed and submitted as part of the response for the proposal to be considered valid. The [Risk Assessment Checklist](#) can be downloaded from the DMH Website.

5. SUBMISSION INSTRUCTIONS:

5.1. CLOSING DATE: Applications must be received by the State by the due date specified on the front page of this RFGA. Late applications will not be considered. If unallocated funding is still available after timely applications are reviewed, the State may consider late submissions.

5.1.1. The State may, for cause, issue an addendum to change the date and time when applications are due. If a change is made, the State will inform all applicants by posting on the webpage indicated on the front page of this RFGA.

5.2. STATE SECURITY PROCEDURES: Please be advised extra time will be needed when visiting or delivering information to State of Vermont offices. All individuals

visiting State offices must present a valid government issued photo ID when entering the facility.

- 5.2.1. State office buildings may be locked or otherwise closed to the public. If this RFGA permits hand delivery of applications, delivery instructions will be posted at the entrance to the State facility. **Any delay caused by State Security Procedures will be at the applicant's own risk.**

5.3. APPLICATION DELIVERY INSTRUCTIONS:

- 5.3.1. ELECTRONIC: Electronic applications **will** be accepted.

5.3.1.1. E-MAIL Applications. Emailed applications **will** be accepted. Applications will be accepted via email submission to AHS.DMHSubmissions@vermont.gov. Applications must consist of a single email with a single, digitally searchable PDF attachment containing all components of the application. The Risk Assessment Checklist should remain in Excel format. Multiple emails will not be accepted. There is an attachment size limit of 40 MB. It is the Applicant's responsibility to compress the PDF file containing its application, if necessary, in order to meet this size limitation.

5.3.1.2. FAX APPLICATIONS: Faxed applications **will not** be accepted.

5.3.2. U.S. MAIL OR EXPRESS DELIVERY OR HAND DELIVERY:

5.3.2.1. All paper format applications must be addressed to the State of Vermont, Department of Mental Health, **166 Horseshoe Drive, Waterbury, VT 05671-2010**. ENVELOPES MUST BE CLEARLY MARKED 'SEALED APPLICATION' AND SHOW THE REQUISITION NUMBER AND/OR PROPOSAL TITLE, OPENING DATE AND NAME OF APPLICANT.

5.3.2.2. **NUMBER OF COPIES:** For applications submitted via mail, express, or in-hand, submit an unbound original (clearly marked as such) and three (3) paper copies and one digital copy in PDF. If large file transfer is needed, applicant must request secure file transfer link.

5.3.2.3. Paper Format Delivery Methods:

5.3.2.3.1. U.S. MAIL: Applicants are cautioned that it is their responsibility to originate the mailing of applications in sufficient time to ensure applications are received and time stamped by the Department of Mental Health prior to the submission deadline.

5.3.2.3.2. EXPRESS DELIVERY: If applications are being sent via an express delivery service, be certain that the RFGA designation is clearly shown on the outside of the delivery envelope or box. Express delivery packages will not be considered received by the State until the express delivery package has been received and time stamped by the Department of Mental Health.

5.3.2.3.3. HAND DELIVERY: Hand carried applications shall be delivered to a representative of the Department of Mental Health at the Waterbury State Office Complex prior to the submission deadline. A Security Officer is at 280 State Drive until 4:30PM which is the normal hours. An application submitted by Hand Delivery will not be accepted after 4:30 PM.

6. APPLICATION SUBMISSION CHECKLIST:

- ✓ Required Number of Copies (paper format only)
- ✓ Cover Letter
- ✓ Technical Response
- ✓ Management Response
- ✓ Redacted Technical Response, if applicable
- ✓ Prior Experience
- ✓ Price Schedule
- ✓ Completed Risk Assessment Checklist
- ✓ W-9 Tax Form Signed (non-electronically) in the past 6 months.

7. ATTACHMENTS & LINKS:

7.1. [Risk Assessment Checklist](#)

7.2. [Standard State Grant](#) with its associated attachments, including but not limited to:

7.2.1. [Grant Award Detail \(GAD\) – Part 1](#) (1/2024)

7.2.2. [Attachment C: Standard State Provisions for Contracts and Grants](#) (12/7/2023)

7.2.3. [Attachment E – Business Associate Agreement \(BAA\)](#) (5/22/2020)

7.2.4. [Attachment F – AHS Customary Contract/Grant Provisions](#) (5/16/2018)