

FY2017 Funding Opportunity to Address NAS by Expanding Treatment and Recovery Services for Pregnant and Parenting Women with Opioid Use Disorders (Short Title: NAS)

Purpose & Expectations:

- Funds must be used to address Neonatal Abstinence Syndrome (NAS) by developing or expanding comprehensive evidence-based residential treatment services, transitional housing, and other recovery supports to pregnant and parenting women with opiate use disorders.
- Proposals reflecting the most effective utilization of **one-time funds** to develop and expand treatment services and recovery supports to the population of focus, including the use of medication-assisted treatment approaches such as COR-12, transitional housing, and other supports, will be given priority.
- Funds are for **one year** with service delivery to begin upon award and no later than one-month post award. For applicants who propose to launch a residential program, service delivery must begin within 4 months of award.
- Awardees must submit quarterly progress reports and agree to be subject to program evaluation and monitoring.
- Funds cannot be supplanted, meaning the funding cannot take the place of existing funding.

Eligible Applicants:

Any not-for-profit provider licensed to do business in Kentucky with at least 2 years of continuous service to the population of focus is eligible for funding. Multiple agencies can partner for the application process but only one agency may serve as the fiscal agent.

Award Information:

Funding Mechanism: Grant

Anticipated Total Available Funding: up to \$2M

Award Ceiling: \$500,000

Length of Project: 1 Year

Cost Sharing/Match Requirement: No

Multi-Tiered Review and Selection Process:

Proposals will be screened to ensure that minimum eligibility requirements have been met. Proposals meeting eligibility requirements will be assessed by an independent review panel of experts from CHFS and KY-ASAP with expertise in substance use treatment and recovery with pregnant and parenting women. Award recommendations will be presented to KY-ASAP for final approval.

Questions:

Please submit questions regarding proposals to Katie Borgel at Katie.Borgel@ky.gov who will direct questions to the content experts.

Proposal Submission Format:

- Please include a cover letter on agency letterhead
- Abstracts, Proposals, Budgets, and Compliance Statements must be submitted in a combined PDF by email to Katie.Borgel@ky.gov no later than **5pm ET on July 8, 2016. Please title the PDF with the name of the agency.**
- Proposals must be double-spaced using Times New Roman 12-point font
- Proposals must address each of the key attributes in the proposal guidelines and should be organized and labeled such that each section is clearly identifiable to the reviewers (e.g., B-1, B-2, etc.)
- Proposals should be no longer than **eight (8) printed pages in length**, excluding the cover page, abstract, budget, compliance statement and supplemental materials.

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PROPOSAL GUIDELINES**

Section A: Vendor Information

- Official Business Name
- Address, Telephone and Fax number
- Name, Title and email address of primary contact person and individual authorized to contract on behalf of the organization.
- Brief history of the agency, business, or organization
- Length of time in business or operating and list any parent or subsidiary organizations
- Copy of current licensure status (e.g., CMHC, AODE, etc.)
- Copy of any accreditation obtained (e.g., COA, CARF, Joint Commission)
- Medicaid number(s) and information regarding current status as Kentucky Medicaid provider (i.e., which MCO is under contract and for what services)

Section B: Key Design Attributes

1. Statement of Need & Purpose
 - Clearly identify the population of focus.
 - Describe the designated service area(s).
 - Demonstrate the need within the intended area of service by providing data to illustrate the significant impact that opiate dependence has had on the population (e.g., rates of NAS, NAS-related hospitalization costs, overdose death rates, overdose-related hospitalizations).
 - Describe the purpose of the project including goals and objectives.
2. Evidence-Based Screening, Assessment, Treatment, and Recovery Supports
 - Identify and describe the evidence-based screening, assessment, treatment, and recovery supports that will be implemented. Selected models must be within SAMHSA's National Registry of Evidence-Based Programs and Practice (at <http://www.nrepp.samhsa.gov/>) or another nationally recognized registry. Please indicate on which registry the evidence-based practice(s) are listed.
 - Please describe how the agency will ensure that the practices are implemented with fidelity and sustained over time.
3. Access to a Broad Array of Trauma-Informed Services and Level of Care Determination
 - Describe how the agency will ensure the population of focus has access to a fully array of services, including outpatient, medication-assisted, individual, group, family, intensive outpatient, crisis, case management, and residential. If your agency does not provide the service, please describe with whom agreements for care coordination are in place.
 - Describe how guidelines are implemented to determine appropriate level and intensity of treatment that follows ASAM recommendations.
4. Necessary Partnerships
 - Demonstrate evidence of partnerships to ensure access to a comprehensive continuum of services and supports (e.g., CMHCs, BHSOs, MAT providers, community hospitals, advocacy organizations, local health departments, obstetric providers, and other medical/specialists) by describing existing partnerships and those to be garnered upon award.
5. Continuation of Support in Postpartum and Additional Supports
 - Describe how the agency will ensure that a continuum of recovery services and supports are available to women post-delivery (e.g., high frequency home visitation, substance use recovery supports,

parenting training, supportive housing, transportation, supported education and employment, child care, social supports)

6. Organizational Readiness

- **Organizational Capacity:** Service delivery must begin no later than one month post award. Given the immediacy with which services must be delivered, please describe your agency's capability to support the infrastructure needed for a rapid start-up of the proposed services and supports. If the agency plans to launch a residential program, sufficient evidence must be provided to demonstrate that service delivery can begin within four months post award.
- **Staffing Capacity:** Outline the plan for sufficient clinical leadership and direct-care staff with expertise and experience to address the treatment needs of individuals with opioid dependence.

7. Implementation Timeline and Sustainability Plan

- Include a chart depicting an implementation timeline, depicting major milestones, responsible staff, and dates.
- Describe when and how the proposed services to be supported by the funding will become fully sustainable.

8. Quality and Outcome Measures

- Describe the quality and outcome measures that will guide program improvement efforts and how continuous quality improvement efforts will be conducted.
- If applicant agency is a CMHC, applicant must provide a statement assuring that data from those served will be input into the KTOS system and by whom.

Section C: Attachments

- Attachment 1: A one-page abstract/summary of the proposal must be included and will not count towards the allowable page total.
- Attachment 2: Detailed budget using provided templated. Budget narrative will not count towards the allowable page total.
- Attachment 3: Signed compliance statement

Section D: Additional Information

Relevant agency brochures and/or literature can be included.