State of Alaska
Department of Health
Division of Behavioral Health

Request for Proposals
Positive Pathways for Alaska Recovery: Expanding Access to Medications for Opioid Use Disorder
For FY2026 Through FY2027
Grants and Contracts

NOTICE: Proposals will ONLY be accepted through GEMS. Applicants are responsible for reviewing the State of Alaska GEMS Welcome Page for details regarding agency registration and availability of technical assistance. Log into GEMS through myAlaska to begin the application process. Once you are logged into GEMS, guidance and instruction are available in the Documents tab and from the film strip icon. Applicants are responsible for monitoring GEMS or the State Online Public Notices site for any changes or amendments that may be issued regarding this solicitation.

Relay Alaska provides assisted communication services at 711 or 1-800-770-8973 from a TTY phone, and at 1-800-770-8255 from a voice phone.

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PROPOSAL DUE DATE: December 16, 2025, 3:59 PM
DEADLINE FOR WRITTEN INQUIRIES: December 8, 2025, 3:59 PM
PROJECT PERIOD BEGINS: January 15, 2026

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Section 1 Grant Program Information

1.01 Introduction and Program Description

The Department of Health, Division of Behavioral Health, is requesting proposals from eligible applicants to provide Positive Pathways for Alaska Recovery: Expanding Access to Medications for Opioid Use Disorder services for the State of Alaska in FY2026 through FY2027. Program Services are authorized under 7 AAC 78 Grant Programs. Additional governing statutes are 7 AAC 78 - Grant Programs; AS 47.30.475. Grant-in-Aid Program, AS 47.30.520-620. Community Mental Health Services Act, AS 47.30.655-.915. 7 AAC 70. Behavioral Health Services, 7 AAC 135 Medicaid Coverage for Behavioral Health Services, AS 47.37. Uniform Alcoholism and Intoxication Treatment Act, 7 AAC 10.930. Request for a Variance 7 AAC 138. 1115 Substance Use Disorder Waiver Services, 7 AAC 139. Behavioral Health 1115 Waiver Services. State of Alaska statutes and regulations are accessible at the Department of Law Document Library or through the contact person identified on the cover page of this Request for Proposals (RFP).

1.02 Program Goals and Anticipated Outcomes

The proposed project must demonstrate a thorough understanding and support of the grant program goals and outcomes anticipated by the Department.

Increase Availability of MOUD Services
Expand the availability of Medications for Opioid Use Disorder (MOUD) by funding the development and enhancement of comprehensive systems of care. This includes support for hub-and-spoke MOUD models, new Opioid Treatment Programs (OTPs), addiction specialty care programs seeking to integrate all FDA-approved medications for Opioid Use Disorder (OUD), and expansion of MOUD in non-specialty settings such as primary care and low-barrier treatment programs. Please see pages 21-22 of the 3rd Edition of the Medication for Addiction Treatment Guide for descriptions of different types of MOUD models including hub-and-spoke.

- At least 1 **new MOUD service sites** will be established or expanded, including OTPs, hub-and-spoke models, and/or primary care settings integrating MOUD.
- **All programs within the organization** will integrate all FDA-approved medications for opioid use disorder within their care model.

Enhance Geographic Accessibility
Improve access to MOUD services by funding initiatives such as tele-MOUD, the establishment or expansion of mobile and non-mobile methadone medication units, asynchronous dosing options for methadone maintenance, flexible scheduling models, and care coordination efforts to reduce geographic barriers to treatment. Please see the 3rd Edition of the Medication for Addiction Treatment Guide for descriptions of initiatives such as tele-MOUD.

- A 25 percent increase in **individuals** who receive care coordination or navigation support related to geographic access barriers.

Support Client-Centered Accommodations
Increase retention and engagement in MOUD by funding supportive services that remove logistical barriers to care. This includes transportation assistance not covered by Medicaid, childcare services, integration of peer supports and behavioral health consultants, as well as services addressing language access and health literacy.

- At least 75 percent of clients receive support services such as transportation, childcare, or language/health

literacy assistance.

Promote Acceptability and Cultural Responsiveness
Improve the social and cultural acceptability of MOUD through investments in culturally responsive care, stigma reduction initiatives across individual, community, and institutional levels, MOUD-specific support groups, certified peer support specialists, and other community-informed strategies to improve perception and trust in treatment services.

- At least **3 culturally responsive interventions** (e.g., Medication for Addiction Treatment (MAT) support groups, tailored outreach, or cultural navigation services) will be implemented.
- At least **2 stigma reduction initiatives** will be launched within healthcare or community systems.

Improve Affordability and Financial Sustainability
Reduce financial barriers for both providers and clients by supporting programs that make MOUD integration more financially viable for agencies and increase access for individuals who may not qualify for traditional payer sources, ensuring equitable access to lifesaving treatment.

- **100 percent of individuals** who are uninsured or underinsured will receive subsidized MOUD services through grant support.

Projects must meet or exceed anticipated minimum outcomes described in this RFP.

1.03 Program Services/Activities

Applicant should offer an activity across each "A" of access. The following activities are allowable per each category:

- Availability: Funds will be available to develop and expand MOUD systems of care:
  - Hub and spoke MOUD models. Please review page 22 of the 3rd Edition of the Alaska Medication for Addiction Guide for more information on Hub and Spoke, and other models.
  - new opioid treatment program (OTP)s
  - addiction specialty care programs in need of funds to integrate all medications for MOUD
  - non-specialty settings to incorporate MOUD
  - primary care and clinical practices to incorporate MOUD, and
  - low-barrier MOUD treatment programs

- Accessibility: Funds within the Access to MOUD grant program will be available to support tele-MOUD, expansion of methadone through non-mobile or mobile medication units, asynchronous dosing set up for methadone maintenance, flexible scheduling, care coordination, and any other approved initiative to support geographic accessibility. Applicants may also apply to use funds for contingency management for the purposes of improving medication adherence, treatment attendance, and improving abstinence rates among other substance use.

- Accommodations: Funds within the Access to MOUD grant program will be available to support transportation for clients to receive MOUD that is not already Medicaid reimbursable, childcare for clients needing support, peer integrated services, behavioral health consultant integration, language support, and health literacy support.

- Acceptability: Funds within the Access to MOUD grant program will be available to support cultural responsiveness, MOUD stigma reduction across the socioecological model, Medication for Addiction Treatment (MAT) Support groups, certified peer support specialists, and other initiatives that could improve acceptability of MOUD. Applicants may also apply to use funds for contingency management for the purposes of improving medication adherence, treatment attendance, and improving abstinence rates among other substance use.

- Affordability: Funds will be used for improving affordability for agencies to incorporate MOUD and for individuals to afford MOUD who may not qualify for different payer sources.

Applicants will upload a timeline for the initiation of services and project activities. The expected deadline for project start-up will be by April 15, 2026.

Applicant proposals must describe the ways in which the project aligns with program intent. The submitted project proposal will identify agency resources available to the project; describe project activities; and clearly state the project's anticipated goals, outputs, and outcomes.

In support of project planning narratives, the applicant will complete a logic model using the instructions and template attached to this RFP [and provided at Section 4.04, #3]. *The logic model will identify resources available to the proposed project; summarize project activities; and clearly state anticipated goals, outputs, and outcomes compliant with program intent.*

Applicants must comply with the following additional program requirements and service standards.

The applicant must comply with the following program requirements:

- All applicants must follow 2026 Grant Programs and Service Standards.

- Care Integration: Applicants must adhere to the following care integration program requirements:
  - Establish and/or maintain linkages to care such as those with primary care, behavioral health, and social service agencies.
  - Participate in care coordination networks.
  - Enroll in Findtreatment.gov and 211 for navigation of services.

- Sustainability Plan
  - Applicants must show a financial sustainability plan beyond the grant that includes how the agency bills insurance, Medicaid, and has contracts with payers.
  - Applicants must drawdown Medicaid funds first to support services, and use this grant as a last payor of resort.
  - Applicants must show how they will develop community partnerships to continue access after funding ends.

The applicant must adhere to the following service standards:

- Section F of the FY 2025 Grant Substance Abuse and Mental Health Services Administration (SAMHSA) Notice of Funding Opportunity (NOFO) Application Guide.

- Section 5, Funding Limitations/Restrictions, on pages 31-32 of Department of Health and Human Services Substance Abuse and Mental Health Services Administration FY 2024 State Opioid Response Grants Notice of Funding Opportunity.

- Eligibility & Compliance
  - Applicant must be a licensed healthcare organization currently registered with Alaska Division of Behavioral Health Medicaid Unit and/or Alaska Health Care Services Medicaid Unit.
  - If applicant administers, dispenses, and prescribes methadone, then this applicant must be or be seeking to be approved as an Opioid Treatment Program as defined in 7 AAC 70.125.
  - Applicant must abide by buprenorphine-relevant federal regulations that may include 42 CFR Part 8 and 21 CFR Part 1300 depending on the nature of the program; and relevant State statutes and code. State regulations can include but are not limited to 7 AAC 70, AS 17.30.080, AS 8.64.364, and 12 AAC 40.450. Both federal and state regulations are dependent upon the type of service element offered.
  - Applicant must abide by patient rights protections including HIPAA, 42 CFR Part 2, American Disabilities Act with a particular emphasis on the following guidance: The ADA and Opioid Use Disorder: Combating Discrimination Against People in Treatment or Recovery.
  - If applicant uses RFP funds to integrate and/or maintain contingency management, the applicant must abide by the “Required Safeguards for SAMHSA Grantees Using Grant Funding to Support CM Incentives” as outlined in "Using SAMHSA Funds to Implement Evidence-Based Contingency Management Services, January 2025".

- Patient Access: Applicants must comply with the following patient access service requirements:
  - Receive clients regardless of method of payment.
  - Provide low-barrier entry that includes same-day or next-day appointments and overall minimal wait times.
  - Support geographically accessible services that may include establishing a mobile unit, telehealth prescribing, or other ways that support this accessibility.
  - Integrate transportation assistance that includes utilizing vouchers, shuttles, and any other method that supports client ability to attend appointments.
  - Support clients attend appointments with children under the age of 12 including creating a designated play area, integrating children into the appointments, or any other method that support adults living with children access care.
  - Support youth ages 16 and above with access to medication for opioid use disorder.
  - Support any individual who calls into access their services receive access to Project HOPE kits, and other life-saving overdose prevention and response resources.
  - Funds shall only be utilized to provide services to individuals that specifically address opioid or stimulant misuse issues. If either an opioid or stimulant misuse problem (history) exists concurrently with other substance use, all substance use issues may be addressed. Individuals who have no history of or no current issues with opioids or stimulants misuse shall not receive treatment or recovery services with this RFP’s funds.

- Clinical Standards of Care: Applicant must comply with the following clinical standards of care:
  - Incorporate counseling/behavioral health services for the client either in-house or by referral.
  - Allow client to access medication for opioid use disorder without counseling/behavioral health services; and use evidence-based techniques like motivational interviewing and/or cognitive behavioral therapy in supporting shared decision-making in accessing therapeutic interventions.
  - Conduct patient safety monitoring by utilizing the Alaska Prescription Drug Monitoring Program, appropriate urine drug screening, overdose risk assessments, and any other tools that support patient safety.
  - Incorporate clinical protocols for induction, stabilization, and tapering when appropriate.

- Workforce Standards: Applicant must comply with the following workforce service standards:
  - Ensure all staff are trained appropriately per their profession in MAT.
  - Coordinate continuing education for staff on addiction medicine, stigma reduction, and responsiveness to working with a variety of communities.
  - Funds shall not be utilized to provide incentives to any Health Care Professionals for receipt of any type of Professional Development Training.
  - If applicant uses funds for contingency management, all workforce involved in the direct and/or indirect care of the patient must receive and demonstrate at least six hours of contingency management training. This training may occur within the first two months of the award if individuals have not already received this training. The following trainings are acceptable but other trainings may be taken based on RFP program manager's approval.
    - PRISM Collaborative – Contingency Management Training
    - Northwest ATTC – Contingency Management for Healthcare Settings (online training)
    - Pacific Southwest ATTC – Overview of Contingency Management in Native Communities

- Reducing exclusion: Applicant must comply with reducing exclusion services standards:
  - Be responsive to all individuals, honoring different norms, values, beliefs, and language needs. Ensure services are accessible to everyone by offering translation support when necessary and by adopting approaches that strengthen relationships and meet the needs of a varied population.
  - Prioritize populations who are highest risk for overdose death including those who are or have been justice-involved, those who are using intravenously, underserved individuals, pregnant and/or individuals in first 12 months of post-partum.
  - Conduct data collection by different demographic indicators.

The applicant must review and adhere to the following guidelines:

- Alaska Department of Health. (2025, May). *Medications for Addiction Treatment Guide: Key components for delivering community-based medication for opioid use disorders in Alaska (3rd ed.)*. State of Alaska.
- American Society of Addiction Medicine. (2023). *The ASAM Criteria: Treatment criteria for addictive, substance-related, and co-occurring conditions (4th ed.).* Hazelden.
- Substance Abuse and Mental Health Services Administration. Using SAMHSA Funds To Implement Evidence-Based Contingency Management Services. Advisory. Publication No. PEP24-06-001. Rockville, MD: Substance Abuse and Mental Health Services Administration. 2025.

1.04 Program Evaluation Requirements and Reporting

Results Based Budgeting Framework

Results based budgeting provides a framework in which allocated resources support, and are justified by, a set of outputs and expected results. Within this framework, actual performance and achieved outcomes are measured by objective performance measures.

Projects are required to align with program objectives expressing Department priorities and core services. Projects will use performance measures to evaluate progress toward meaningful outcomes, and to initiate data collection and reporting consistent with Department priorities.

The Department Priorities, Core Services, Objectives, and Performance Measures of Effectiveness and Efficiency for this program are:

Department Priorities

- 1 Health & Wellness Across the Life Span

Department Core Services

- 1.1 Protect and Promote the Health of Alaskans

Department Objectives

- Improve the health status of Alaskans
- Decrease unintentional injuries
- Decrease substance abuse and dependency

- Applicants must adhere to the following Quality and Outcomes Reporting program requirements:
    - Comply with Government Performance and Results Act (GPRA) by using the Substance Abuse and Mental Health Services Administration (SAMHSA) Unified Performance Reporting Tool (SUPRT) for data collection, and work in partnership with Division of Behavioral Health and associated contractors to support SUPRT data collection from clients.
    - Developing a program evaluation plan based on the CDC Framework for Evaluation as well as the logic model that includes a stakeholder analysis, identification of evaluation questions, sub-data collection plan, which includes outlined indicators to collect data as well as the methods of analysis for all of it, and a sub-communication plan that includes how results will be demonstrated. The data collection tool can involve the SUPRT tool.
    - The following data must be collected as part of the program evaluation plan and report:
        - Number of patients and demographics of patients
        - MAT initiation, retention, and completion rates
        - Number of unduplicated clients by type of medication:
            - Methadone
            - Buprenorphine
            - Injectable Naltrexone
            - More than MOUD
        - Overdose reversals and mortality reduction
        - Other patient-reported outcomes
        - Progress on achieving goals and objectives
        - Progress on implementing required activities including accomplishments, challenges, barriers, and adjustments made to address these challenges

- Progress achieved in addressing the needs of high-risk populations and implementation of targeted interventions to reduce behavioral health disparities
- Problems encountered serving the population of focus and efforts to overcome them
- If applicant is incorporating contingency management into their budget, the following indicators must be followed:
    - Number of unique individuals receiving CM services
    - Type (prize-based or voucher-based) and focus (attendance and/or abstinence) of CM services provided
    - Average incentive amount received per person
    - The number of people who discontinued CM services for an unplanned reason during the CM treatment intervention
    - Number of people who continued CM treatment to completion

Performance Measures of Effectiveness and Efficiency

- Number of people living unhoused and struggling with opioid use disorder who receive engagement to care
- 25% increase in new clients with OUD during the duration of the grant
- At least 75 percent of clients living with OUD will receive MOUD
    - Percentage of those receiving methadone
    - Percentage of those receiving buprenorphine or buprenorphine/naloxone
    - Percentage of those receiving naltexone
- At least one program integrating MOUD will be created or expanded upon by June 30, 2027
- At least 75 percent of clients who need accommodations to MOUD will receive them on a quarterly basis through June 30, 2027
- Applicant will accomplish at least one initiative to support acceptance of MOUD
- 100 percent of clients who are not eligible for any type payor but need MOUD, will receive MOUD through this grant opportunity.
- At least two Key accomplishments
- At least one challenge encountered and action taken to address it

The applicant's proposed evaluation plan will incorporate the performance measures of effectiveness and efficiency identified above. Applicants can propose additional performance measures for evaluating the project’s progress in achieving results supportive of program goals and outcomes.

Grant Reporting

Required reporting will include:

1. Cumulative Fiscal Reports recording overall grant and match expenditures by budget line; and
2. Program Reports in the format prescribed by the program.

1.05 Target Population and Service Area

Applicants must clearly describe the population targeted by the project, including the area or communities that will be served. Proposals will be evaluated for compatibility with the program’s intended target population identified in this solicitation.

Target Population: The target population for the solicited services is those who are living with mild, moderate, or severe opioid use disorder, and are 16 or older.

Service Areas and Communities: This opportunity is for all communities within Alaska.

1.06 Program Funding

Funds available for this program are anticipated to total $1,300,000 over 18 months, 1/15/2026 through 6/30/2027, and fund up to five awards. Awardees may be funded $260,000 or greater for the full 18 months grant period, depending on the number of applicants and awardees. Funding source is SAMHSA State Opioid Response funding.

Proposed Budget: Please submit a budget proposal for the 18 months separated between FY26 (1/15/26-6/30/26) and FY27 (7/1/26-6/30/27). FY27 amounts may be increased to reflect the full FY27 fiscal year. The proposed budget detail and narrative will support the program's results-based service delivery and staffing requirements stated in this RFP.

Budget needs: When filling out the budget, applicant must identify the following components per the following categories:

- Personnel- Identify the following:
  - position, name, hourly rate or annual salary, FTE (Full-Time Equivalent), and description of position.
  - fringe components and rate (%) of each. Examples include Medicare, life insurance, etc.
  - Total fringe rate (%) per each position and fixed/lump sum fringe of each position.
- Travel- Identify the following per each trip:
  - Cost/rate per type of item (i.e. airfare, per diem, ground transportation, hotel), quantity of each item (i.e. one round trip air fare, three nights of hotel, etc.), number of individuals per each trip for these items, anticipated dates of travel, and reason for travel.
- Supplies- Identify the following per each item of supplies:
  - Supply itself and how it will be used to support project activities.
  - Unit cost, basis, quantity, and duration of each supply.
- Equipment- Identify the following per each equipment:
  - Identify, if applicable, quantity, purchase or rental/least cost, and percent charged to the project.

Overall Restrictions if Using SAMHSA State Opioid Response (SOR) IV Funding

Recipients must comply with SAMHSAs funding restrictions. Please review the following documents to understand these restrictions:

- FY 2025 Substance Abuse and Mental Health Services Administration (SAMHSA) Notice of Funding Opportunity (NOFO) Application Guide: Section F - Standards for Financial Management and Standard Funding Restrictions
- Department of Health and Human Services Substance Abuse and Mental Health Services Administration FY 2024 State Opioid Response Grants Notice of Funding Opportunity (NOFO) No. TI-24-008: Section IV.5. Funding Limitations/Restrictions

The proposed budget will be fully compliant with the limitations described in this RFP, and those detailed in 7 AAC 78.160 (Costs). Regulations are provided under the GEMS Documents tab.

Resources specific to budgeting are also available under the GEMS Documents tab. The Department's Grant Budget Preparation Guidelines provide information and guidance about budget lines, cost detail groupings, and narrative

requirements. Grantee User Manual Part I provides detailed instructions for entering a budget proposal in the chapter "Responding to a Solicitation."

Other Agency Funding: Prior to submitting a proposal, applicants are required to list all other agency funding received and applied for. This task must be completed by an Agency Power User in the Other Funding section of the Agency Administration tab. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

Indirect Costs: If the proposed budget includes indirect costs, 7 AAC 78.160(p) requires a copy of the agency's current federally approved Indirect Cost Rate Agreement. The agreement is to be uploaded in the Agency Administration tab. Lapsed agreements can be used if uploaded with the negotiating federal agency's written approval to continue using the rate until a new agreement is negotiated. If an agency has never entered into a federally approved Indirect Cost Rate Agreement or no longer has a federally approved agreement in place, the recently updated Federal Uniform Guidance 2 CFR 200 now allows that agency to budget the 15% De Minimis.

Payment for Services/Grant Income: If applicable to the services proposed in response to this solicitation, awarded grantees will have a Medicaid Provider Number or apply to obtain one, and will make reasonable effort to bill all eligible services to Medicaid and any other available sources of payment before seeking grant support for delivery of the proposed services. Department funds are the payer of last resort.

In the applicant's proposed budget, anticipated receipts and expenditures for all grant income must be evident in the detail and narrative. Fiscal reports for awarded income generating projects will include the receipts and expenditure of all grant income.

Section 2 Applicant Qualifications

2.01 Agency Experience

Proposal evaluation will include consideration of the applicant's history of compliance with service and grant requirements, and previous experience in providing the same or similar services. Evaluation may include Department site reviews, program audits, and confirmation of the successful resolution of any findings. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

The applicant must describe previous experience providing services the same or similar to those proposed. The description must clearly identify the time period over which services were provided and the target population served. The applicant must have the following experience:

- Licensure and accreditation:
  - Agencies proposing to use funds for prescribing, administering, and dispensing methadone must have been approved as an Opioid Treatment Program as defined in 42 CFR Part 8, and/or working towards approval of becoming an OTP as defined in 42 CFR Part 8, demonstrated by:
    - early application submission to an approved accrediting body,
    - submission of a SMA-162 to SAMHSA, and/or
    - submission of a DEA 363 Application.
  - Agencies proposing to dispense buprenorphine in-house must have:
    - a DEA registration
    - Alaska Board of Pharmacy drug room license
  - The program for which the applicant is applying must have or be working towards Alaska Department of Health Medicaid approval.

2.02 Project Staffing

Project staffing must be sufficient to implement the proposed activities in order to meet program goals and the anticipated outcomes.

Resumes (and/or position descriptions) and professional credentials for key project personnel must be uploaded as part of the response. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

Applicant must have a core team dedicated to supporting the client receiving MOUD. This core team should at the bare minimum consist of a provider who is a DEA licensed prescriber (Medical Director, Doctor of Osteopathy, Nurse Practitioner, Physician Assistant) authorized to prescribe Schedule III controlled substances. Additional core team members that should highly be considered are a care coordinator who facilitates communication between the provider and patient, qualified addiction professional who supports therapeutic wrap-around services, administrative staff who support overall operations, and a certified Peer Support Professional. See pages 19 and 20 of the 3rd Edition of the MAT Guide for more information.

If the applicant is an Opioid Treatment Program, and/or working towards becoming an OTP, then the core team must include a medical director and a program sponsor as defined in 42 CFR Part 8 as well as appropriate staffing as determined by the OTP.

- Clinical staff who are prescribing, dispensing, and administering buprenorphine must meet:
  - The Medication Access and Training Expansion (MATE) Act standards for education
  - Have a current DEA registration with authority to prescribe controlled substances including Schedule III substances. Current DEA registrations for necessary staff must be uploaded as part of the response.
  - Applicant must abide by relevant State statutes and code. State regulations can include but are not limited to 7 AAC 70, AS 17.30.080, AS 8.64.364, and 12 AAC 40.450. Both federal and state regulations are dependent upon the type of service element offered.

2.03 Administrative, Management, and Facility Requirements

The applicant must demonstrate the agency's sustainable fiscal and administrative capacity. Executive, administrative, and financial staff must be qualified, as indicated by the resumes of position holders uploaded as an element of the proposal. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

1. The applicant must ensure procedures are in place to protect client confidentiality compliant with State and federal standards.
2. The applicant must ensure its most recent financial audit was submitted to the appropriate state office (see Audit Requirements below), and any findings identified have been resolved.

Awarded proposers will be required to submit additional agency information if the agency GEMS record is not current.

Audit Requirements:

Federal Requirements: Agencies spending $1,000,000 or more total Federal Financial Assistance in the agency fiscal year may be required to comply with conditions of the Single Audit Act of 1984, P.L. 98-502, as amended by the Single Audit Act Amendments of 1996, P.L. 104-156, and as defined in 2 CFR 200.

State Requirements: Agencies spending $1,000,000 or more total State Financial Assistance in the agency fiscal year are required to comply with the conditions of 2 AAC 45.010-090. The current regulations may be viewed at the State of Alaska, Department of Law website, Department of Law Document Library, or copies may be obtained from the contact identified on the cover page of the RFP.

Information on State and Federal Single Audit Acts compliance may be obtained from:

State Single Audit Coordinator
Department of Administration
Division of Finance
PO Box 110204
Juneau, AK 99811-0204
Telephone: (907) 465-4666
Fax: (907) 465-2169

Department of Health Program Audit Requirements: All DOH grantees are subject to the requirements of 7 AAC 78.230. If awarded, agencies which are not required to file State Single Audits under 2 AAC 45.010 must ensure a fiscal audit of the agency operations under the grant program is performed by an independent, licensed, certified public accountant at least once every two years and submitted to:

State of Alaska Department of Health and Social Services
Finance and Management Services
Audit Section
PO Box 110602
Juneau, AK 99811-0602
Telephone: (907) 465-3120

Facility, Service Access, and Safety:

1. The applicant must address potential safety concerns for clients and staff in the management of services proposed in response to this RFP.
2. The applicant should describe client accessibility to services and the way in which that will enhance project success.
3. All applicants for Department grants should have a written plan for emergency response and recovery that provides for potential safety concerns and the safe evacuation of clients and staff. This plan is mandatory for agencies providing residential and/or critical care services as noted in the State Grant Assurances.

2.04 Support/Coordination of Services

Medication for Opioid Use Disorder (MOUD) programs often serve individuals who need a wide range of supports, including social services, primary care, and behavioral health care. Building and strengthening partnerships across the community is essential to program success. Key partners may include emergency medical services, the Office of Children's Services (OCS), domestic and sexual violence service agencies, justice-involved agencies, housing providers, law enforcement, and others.

When these partners are informed about the effectiveness and local availability of MOUD, they can serve as vital referral sources and connection points to treatment. Their involvement can also foster more personal, trust-based relationships that encourage clients to enter and remain in care.

Applicants must demonstrate that the proposed project has established the necessary partnerships, support, and

coordination to ensure the effective delivery of MOUD services.

The proposal must address the following:

1. Community support where services are proposed;
2. Involvement of the public and potential service recipients in the planning process;
3. Partnerships and collaborations specific to the proposed project; and
4. Coordination with necessary referring agencies and the role of each described.

Section 3 General Instructions for Proposal Submission

3.01 Eligibility

Applicants must be eligible to apply under 7 AAC 78.030 (Eligible Applicants). Eligible applicants are state agencies; political subdivisions of the state such as cities, organized boroughs, and Regional Educational Attendance Areas; nonprofit organizations and consortia of nonprofits; and Alaska Native entities. As follows, eligibility will be verified by Grants and Contracts.

1. Political subdivisions of the state and Regional Educational Attendance Areas will be verified by State records.
2. Eligible nonprofits are listed in the State's database of registered nonprofit entities or the US Internal Revenue Service's register of tax-exempt organizations. Nonprofit subsidiaries of nonprofit corporations must also provide a letter from the parent organization confirming nonprofit status.
3. Alaska Native entities as defined in 7 AAC 78.950(1) must submit, with the application, a legally binding resolution waiving the entity's sovereign immunity to suit through the duration of the program, identified in RFP Subsection 3.05. The resolution must be authorized in compliance with the tribe's constitution, either by the tribal council or by majority vote of the tribal membership. The required template is provided at Subsection 4.02, Other Technical Requirements.

Federal Funding Accountability and Transparency Act (FFATA): In accordance with 2 CFR Chapter 1, Part 170 Reporting Sub-Award And Executive Compensation Information, reporting is required of any grant award with federal funding equal to or greater than $30,000. FFATA is intended to hold the federal government accountable for spending decisions. Accountability data is available to the public at U.S. Government spending. Reporting requirements extend to recipients of State-issued awards with federal funds. An Agency Power User must complete the FFATA form under Federal Reporting in the GEMS Agency Administration tab. The report data will reflect the audited figures of the agency's most recently completed fiscal year. The report captures expenses and executive compensation for your agency. More information regarding FFATA requirements can be found at Federal Funding Accountability and Transparency Act Subaward Reporting System.

Effective April 4th, 2022, the US Federal Government transitioned from the Dun & Bradstreet Data Universal Numbering System (DUNS) number to a System for Award Management (SAM) generated Unique Entity Identifier (UEI) alpha-numeric value for federal awards management. All grantees receiving awards with federal funds are required to have a UEI. More information regarding this transition can be found on the U.S. General Services Administration.

The Grants Electronic Management System (GEMS) has been updated to include fields for both the DUNS nine-digit number and the UEI twelve-digit alpha-numeric value under the General section of the Agency Administration tab. An Agency Power User must confirm the current UEI number is listed in GEMS. The DUNS number will continue to be displayed in GEMS until further notice.

Applicant agency GEMS records must contain the agency's current State of Alaska Business License number, and a current governing board roster which includes titles, contact information, and terms of office for each seat. The roster must include emergency contact information outside the applicant agency for one or more officers.

Grants and Contracts will verify neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving grant assistance from any State or federal department or agency. If an agency or its principals are excluded from receiving grant assistance, the proposal may not be considered.

If this grant program includes Federal funding, effective November 12, 2020 Federal Uniform Guidance 2 CFR 200 requires that agencies be registered on the System for Award Management (SAM) website at System for Award Management (SAM). If an applicant is recommended for award and is not registered on this site, the offered award will not be executed, and funds will not be issued until agency registration is confirmed.

Applicants who have had a contract or grant to help produce this RFP are not eligible to apply and any submitted proposal will not be considered.

3.02 Acceptance of Terms

By submitting a proposal, an applicant accepts all terms and conditions of this RFP including all identified attachments and guidelines, 7 AAC 78, and any other applicable statutes and regulations. Copies of these may be accessed through the contact person identified on the cover page or through the web address(es) identified in this RFP.

If a grant is awarded, this RFP and the applicant's proposal become part of the grant agreement. The applicant will be bound by the provisions contained in the awarded proposal unless the Department agrees that specific parts of the proposal are not part of the agreement.

Proposals and other materials submitted in response to this RFP become the property of the State and may be returned only if the State allows. Proposals are public documents and may be inspected or copied by anyone after grants have been awarded.

3.03 Inquiries

Applicants should immediately review this RFP for defects and questionable or confusing content. Questions that can be answered by directing the applicant to a specific section in the RFP may be answered verbally by the contact person identified on the RFP cover page. Questions that cannot be answered by directing an applicant to a specific section of the RFP may be declared substantive. The applicant will be directed to submit the question in writing to the contact person at the email address on the cover page no later than the Deadline for Written Inquiries, also identified on the cover page. This will allow issuance of any necessary amendments and/or clarifications to all prospective applicants.

Applicants are responsible for monitoring GEMS or the State's Online Public Notices website (Online Public Notices) for any clarifications or amendments that may be issued regarding this solicitation.

Proposals will not be accepted after 3:59 PM prevailing local time on the due date identified on the cover page.

3.04 Proposal Costs and Content

The Department will not be responsible for any expenses incurred by the applicant prior to the authorized grant performance period. All costs of responding to this RFP are the responsibility of the applicant.

The applicant is responsible for the content of the proposal.

3.05 Duration

This RFP is for an 18-month period, partial year FY26-FY27, beginning 1/15/2026 through 6/30/2027. At the discretion of the Department, a project funded under this RFP may be considered for continued funding in subsequent program years. The annual decision to continue funding for the subsequent years of the 18 month grant cycle is based on the following general conditions:

1. the Department's judgment that there is a continued need for the grant project service;
2. the grantee's satisfactory performance during the previous grant year;
3. the availability of sufficient grant program funds, and whether continuation of the financing is consistent with public health and welfare; and
4. the ability of the grantee and the Department to agree on any adjustments in payments or service.

Applicants will submit a budget proposal for partial year FY26 and FY27. Funding in each subsequent year will require submission and approval of documents needed to update service plans, evaluation measures, and budgets. Grants and Contracts will notify grantees of specific submission requirements necessary to qualify for consideration of continued funding.

3.06 Proposal Review

Following the deadline for receipt of proposals, no revisions will be accepted unless provided in response to a request from the contact person named in this RFP. Proposals will be reviewed as follows:

1. Proposals will be evaluated in a manner that will avoid disclosure of contents before notices of grant award have been issued.
2. Department of Health staff will evaluate each proposal for minimum responsiveness and other technical requirements and eliminate nonresponsive proposals from consideration.
3. Using the criteria set out in this RFP and 7 AAC 78.100 (Criteria for Review of Proposals), Department staff will evaluate each responsive proposal. **Scores for each criterion will be based solely on the response to the associated question. Points will not be earned if the information was provided in response to another question in Section 4**. Department staff will also review relevant departmental documentation regarding the applicant. Staff recommendations regarding awards and levels of funding will include consideration of the following:
    i. a history of the applicant's compliance with grant requirements, to include records of program performance, on-site program reviews, and prior year audits;
    ii. priorities in applicable State health and social services plans;
    iii. requirements of applicable State and federal statutes; and
    iv. municipal ordinances or regulations applicable to the grant program.

If there are multiple responsive proposals for which there is insufficient money to fully fund, or supplementary expertise is deemed necessary to the review of proposed services, the Department may appoint a Proposal Evaluation Committee (PEC) as an additional advisory body. PEC members will initially evaluate proposals,

independently of other committee members. As a committee the PEC will meet in a **closed session** (7 AAC 78.090 Review of Proposals) to further review proposals and develop recommendations. Scores will be assigned based on the applicant's response to each individual question and the associated criteria. **Applicants will not earn points for a given question based on a response to another question in the RFP**. The PEC review will include discussion of each proposal's merits. PEC recommendations will rank proposals in priority order and include approval or disapproval for award, modifications to the proposed project, and special compliance conditions.

All staff advisory recommendations and, if applicable, those of the PEC, and all review materials will be submitted for consideration by the Division Director, who will make recommendations to the Commissioner of the Department of Health or the Commissioner's designee.

3.07 Final Decision Authority

Recommendations are advisory only, including those from any PEC that may be held. The final decision to approve or disapprove award, the amount of each award, and whether to impose special conditions or modifications rests with the Commissioner or Commissioner's designee.

NOTE: The final decision may include additional considerations, such as a lack or duplication of services in certain locations, or alternative services that may be available; a critical need for services by vulnerable populations; and matters of health, life and safety. The Department has the responsibility to ensure public monies are utilized in a manner that protects the interests of the people of the State and retains the right to make final awards that ensure responsible distribution of grant funds.

3.08 Notification of Grant Award and Appeals

Within fifteen (15) days after the decision regarding grant awards, applicants will be notified of the final funding decisions, and, if awarded, any conditions of award or modifications. Following any necessary negotiations for revisions to the proposed budget and scope of services, successful applicants will be issued a grant agreement. This formal agreement will contain specific performance and reporting requirements consistent with Department policy and procedure and 7 AAC 78.

Per 7 AAC 78.305 (Request for Appeal), an applicant may appeal a final grant award decision. Requests for hearing must be addressed to the Commissioner and received in writing at the address below within 15 days after the applicant receives notification of the decision. The request must contain the reasons for the appeal and must cite the law, regulation, or terms of the grant upon which the appeal is based.

With a copy to the contact identified on the solicitation cover page, send appeal to:

Heidi Hedberg, Commissioner
Department of Health
3601 C Street, Suite 902
Anchorage, Alaska 99503-5923

3.09 Cancellation of the RFP/Termination of Award

Contingent upon funding appropriations and the Governor's approval, the Department may fund proposals from eligible applicants. The Department may withdraw this RFP at any time and reserves the right to refrain from

making an award when such action is deemed to be in the best interest of the State. Funds awarded for a grant as a result of this RFP may be withheld and the grant terminated by written notice from the State to the grantee at any time for violation by the grantee of any terms or conditions of the grant award, or when such action is deemed to be in the best interest of the State.

Section 4 Submission Requirements/Evaluation Criteria

4.01 Minimum Responsiveness Criterion per 78.100(2)(A)

Proposals that fail to meet the minimum responsiveness requirements below will be eliminated from consideration per 7 AAC 78.090(b)(2).

1 Applicant is eligible per 7 AAC 78.030.

Evaluation/Review Criteria		Review	Points
a	Applicant is eligible per Alaska Administrative Code 7 AAC 78.030.	☑	

4.02 Other Technical Requirements per 7 AAC 78.060, 78.090(b) and 78.100

Response & Organizational Documentation

1 If applying as a non-profit organization, confirm non-profit status is documented.

Evaluation/Review Criteria		Review	Points
a	The agency is listed as a non-profit in good standing on the State's corporation database, confirmed at State Corporation Database and/or	☑	
b	The agency's current 501(c)(3) status is confirmed on the Exempt Organizations page, accessible at IRS Tax Exempt Organization Search.	☑	
c	If a non-profit subsidiary of a non-profit corporation, a verifying letter from the parent non-profit agency is uploaded to the applicant's agency GEMS record (under General in the Agency Administration tab). The parent corporation must meet criteria a and/or b.	☑	

2 If applying as a Federally recognized tribal entity, upload the signed Resolution for Tribal Entities using the template provided below. Confirm the following criteria are met.

Evaluation/Review Criteria	Review	Points

a	The applicant is a recognized Alaska Native entity as verified by the Federal Register at Federal Register. If a tribal consortium, all members are recognized Alaska Native entities.	☑	
b	A Resolution, completed on the provided form, is uploaded in the space provided. If a tribal consortium, a Resolution from each member tribe is uploaded as a single file.	☑	

3 If applying as a government entity, confirm the following criterion is met.

Evaluation/Review Criteria		Review	Points
a	The applicant is another State Agency, such as the University; a political subdivision such as a city or municipality, verified at Local Boundary Commission ; or an REAA under AS 14.08.031 verified at Department of Education Alaska School Map.	☑	

4 Confirm neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving grant assistance from any State or federal department or agency. If an agency or its principals are excluded from receiving grant assistance, the proposal may not be considered.

Evaluation/Review Criteria		Review	Points
a	The applicant agency nor its principals are barred from receiving federal assistance as verified in the federal System for Awards Management at System for Award Management (SAM).	☑	

5 Electronically sign the State Grant Assurances form.

Evaluation/Review Criteria		Review	Points
a	State Grant Assurances form is signed by an individual authorized to enter into legal agreements on behalf of the applicant agency.	☑	

6 This program receives federal funds. Confirm the following criteria are met.

Evaluation/Review Criteria		Review	Points
a	The Federal Assurance and Certification form is electronically signed by an individual authorized to enter into legal agreements on behalf of the applicant.	☑	

b	The applicant agency GEMS record, under General in the Agency Administration tab, contains the agency's UEI number.	☑	
c	The required Federal Funding Accountability and Transparency Act (FFATA) information, located under the Federal Reporting section of the Agency Administration tab, has been provided for the agency's most recently completed fiscal year. This task can only be completed by an Agency Power User.	☑	

7 Confirm the following information is provided at the Agency Administration tab. These tasks must be completed by a Power User. If the information is found to be incomplete or not current, there may be delay in execution of any offered award.

Evaluation/Review Criteria		**Review**	**Points**
a	The General section contains a current governing board roster. The roster includes terms of each seat and contact information outside the applicant agency for one or more officers.	☑	
b	The Other Funding section contains a record for each source of agency operating funds. The record includes funds applied for under this solicitation. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.	☑	
c	The General section contains a State of Alaska business license number, verified at Alaska Business Licenses Search.	☑	
d	All agency contact records are up to date, including Head of Agency, Primary Contact, and Head of Financial Operations.	☑	
e	The applicant's agency record contains the Agency Fiscal Year Start Date.	☑	
f	The applicant's agency GEMS record contains a current Federally Negotiated Indirect Cost Rate Agreement. If lapsed, the agreement is uploaded with written confirmation from the negotiating agency that the rate is valid until a new agreement is approved.	☑	

4.03 History of Compliance with Grant Requirements per 7 AAC 78.100(2)(B)

1 Previous recipients of grant awards will confirm the following criteria pertaining to past performance and compliance are met. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200. All other applicants will mark Complete without confirming.

Evaluation/Review Criteria		Review	Points
a	Fiscal, narrative, and data reporting in prior years has been complete and timely.	☑	
b	Required State and Federal Single Audits have been submitted, verified at Division of Finance, State Single Audit. Any prior year audit exceptions have been resolved, verified by the Finance and Management Services Audit Section contact identified at Finance and Management Services Audit Contact.	☑	
c	Activities in prior year(s) demonstrate effective delivery of services. The departmental review may include documentation such as performance reports, audit reports, grant records, site visits, etc.	☑	
d	Agency historically maintains required standards. Verification may include, though is not limited to, quality assurance reviews, licensing, and certifications.	☑	
e	If a site visit was conducted at the agency for any Department of Health Grant Programs within the past three years, please identify in the application response the date of the visit and if there were findings. If there were findings, please identify what the findings were.	☑	
f	Please upload as an attachment a statement agreeing to comply with all 2026 Grant Programs and Service Standards, as well as all additional program requirements and program service standards.	☑	

4.04 Questions and Criteria Related to Program Policy, Goals, Outcomes, and Activities

1 Describe the proposed project in the text box below, identifying the ways in which it will achieve the program goals and anticipated outcomes stated in this RFP.

Evaluation/Review Criteria		Review	Points
a	The description demonstrates a thorough understanding of program goals and outcomes, and clearly identifies the ways in which they will be achieved.	☐	80

2 Provide the timeline for the initiation of services and implementation of project activities in the upload field below.

Evaluation/Review Criteria		Review	Points
a	The timeline proposed for initiation of services and project activities is compatible with program intent and includes a project start date of no later than April 15, 2026.	☐	80

3 In the text box below, describe the ways in which the project aligns with program intent. The response will identify project resources, activities, and clearly state the project's anticipated goals, outputs, and outcomes. In the upload field below, provide the project's completed logic model.

Evaluation/Review Criteria		Review	Points
a	The described activities are well developed, reasonable and supportive of program intent.	☐	80
b	The response identifies project resources, activities, and clearly states the project's anticipated goals, outputs, and outcomes.	☐	80
c	The applicant's logic model identifies project resources, activities, and projected outcomes that meet program intent.	☐	60
d	The response includes a comprehensive sustainability plan that appears achievable.	☐	80
e	The response clearly described how the applicant will meet all program requirements and service standards listed in section 1.03 of the RFP.	☐	80

4 In the text box below, describe the project evaluation plan, including indicators and data gathering strategies that will be implemented to address the program's performance measures identified in Subsection 1.04.

Evaluation/Review Criteria		Review	Points
a	The proposed evaluation plan includes indicators and data gathering strategies aligned with the program performance measures identified in Subsection 1.04.	☐	80

5 In the text box below, describe the target population and service area(s) of the proposed project.

Evaluation/Review Criteria	Review	Points

a	The description clearly identifies the proposed target population and service area and meets the intent of the services solicited.	☐	80

6 Provide the proposed budget for the first partial year of the project. A supplemental budget reflecting the full year's duration of FY27 must be added as an attachment using the template provided. Include detail and supporting narrative as shown in the provided Grant Budget Preparation Guidelines (Documents tab). Confirm the following criteria are met.

Evaluation/Review Criteria		**Review**	**Points**
a	The budget narrative is complete and mutually consistent with the budget detail.	☑	
b	Cost line items are allowable under 7 AAC 78.160 and are compliant with stated program requirements.	☑	
c	Travel costs are consistent with 7 AAC 78.160(h) and (i), and with any program requirements or limitations identified in the solicitation.	☑	
d	Equipment costs and subcontract costs are allowed by the program and consistent with 7 AAC 78.280.	☑	
e	Indirect costs are fully compliant with rates and exemptions of the agency's current Federally Negotiated Indirect Cost Rate Agreement, uploaded in the General section of the Agency Administration tab.	☑	
f	The budget supports the proposed project and program intent, and the project appears achievable with demonstrated resources.	☐	40
g	Costs are reasonable and substantiated in the narrative.	☐	20
h	The proposed budget narrative clearly describes any necessary allocation of resources among target populations or service areas.	☐	20
i	Supplemental budget reflecting the full year’s duration of FY27 has been provided as an attachment.	☑	20

4.05 Applicant Qualifications - Criteria Relating to Personnel, Management, and Facilities

1 In the text box below, describe the agency's previous experience in providing services the same as, or similar to, those proposed. Clearly identify the time period over which services were provided and the population served. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

Evaluation/Review Criteria		Review	Points
a	The applicant's previous experience providing the same or similar services demonstrates the resources and capacity needed to provide the solicited program services. Note: the review by department staff will also include documentation such as prior year performance reports, audit reports, site visits, etc. as noted in Subsection 4.03.	☐	60
b	Applicant has the necessary licensures, accreditations, and registrations as outlined in Section 2.01 of the RFP.	☑	

2 In the text box below, describe the proposed project's program and administrative staffing needs. Scan the following documents as a single file and upload in the space provided below: 1) Position descriptions for key project positions 2) Resumes and professional credentials for position holders 3) Resumes of administrative staff providing supervision, fiscal, reporting, and management needs. 4) Current DEA registration for necessary clinical staff as listed in Section 2.02 of the RFP. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

Evaluation/Review Criteria		Review	Points
a	Staff providing services are qualified and competent as demonstrated by the uploaded position descriptions, resumes, professional credentials, and DEA registrations.	☐	120
b	Staffing levels are sufficient to support the requirements of the proposed project and compliant with all identified program mandates. As detailed in Section 2.02 of the RFP, the core team includes a provider who is a DEA licensed prescriber. If the applicant is an Opioid Treatment Program or working towards becoming an OTP, the core team includes a medical director and a program sponsor as defined in 42 CFR Part 8.	☐	80
c	Position descriptions support the intent of the RFP and the project proposed.	☐	60
d	Administrative staff is qualified as demonstrated by the resumes provided.	☐	80
e	Administrative capacity demonstrates capability to meet management and reporting needs.	☐	80

3 In the text box below, describe the procedures that will be used to protect client confidentiality.

Evaluation/Review Criteria		Review	Points
a	The applicant's description identifies the procedures necessary to protect client confidentiality compliant with State and Federal standards.	☐	100

4 In the text box below, describe the service delivery facilities and locations and the ways in which access to services will enhance project success.

Evaluation/Review Criteria		Review	Points
a	The facilities described are safe and appropriate to the purpose of the program.	☐	60
b	Access to the locations will enhance delivery of services to the targeted populations.	☐	60

4.06 Demonstration of Support/Coordination of Service

1 In the upload field below, provide a single-file scan of documented community support for the proposed project.

Evaluation/Review Criteria		Review	Points
a	Appropriate documentation of support is provided from each community in which the applicant proposes to provide services.	☐	60

2 In the text box below, describe the ways in which the project planning process involved the public and potential service recipients.

Evaluation/Review Criteria		Review	Points
a	The applicant’s description demonstrates the involvement of the public and potential recipients of services in planning the project proposed.	☐	40

3 In the text box below, describe partnerships or collaborations necessary to the proposed project. In the upload field below, provide a single-file scan documenting existing partnerships and collaborations specific to the proposed project.

Evaluation/Review Criteria	Review	Points

a	Partnerships and collaborations necessary for the effective delivery of services are well described. Evidence specific to the proposed project is provided.	☐	60

4 ***In the text box below, describe the in-place or planned coordination with the State or other providers for referrals necessary to project success. Identify the project staff involved as well as the responsible positions at the referring agencies.***

Evaluation/Review Criteria		**Review**	**Points**
a	The applicant's description demonstrates a clear understanding of the roles that must be performed by the applicant and by referring agencies for the effective delivery of services to the targeted population.	☐	60