State of Alaska
Department of Health
Division of Behavioral Health

Request for Proposals
Enhancing Alaska's Behavioral Health Crisis Response Continuum
For FY2027 Through FY2028

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: April 15, 2026, 3:59 PM
DEADLINE FOR WRITTEN INQUIRIES: April 6, 2026, 3:59 PM
PROJECT PERIOD BEGINS: July 1, 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 Enhancing Alaska's Behavioral Health Crisis Response Continuum services for the State of Alaska in FY2027 through FY2028. Program Services are authorized under 7 AAC 78 Grant Programs. Additional governing statutes are 7AAC 78 - Grant Programs. Additional governing statutes are 7AAC 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. 7AAC 70. Behavioral Health Services, 7AAC 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, substance use disorder 1115 Waiver Services. 7 AAC 139, Behavioral Health 1115. Waiver Services. Background Check Compliance, 7AAC 10.900-7 AAC 10.900. 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). 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).

The intent of this grant program is to advance Alaska’s development of a comprehensive, regionally responsive crisis continuum serving both youth and adults.

Please review the two (2) application groups listed below carefully. Responding to the incorrect group may result in not being funded. It is the applicant's responsibility to submit a proposal to the correct Application Group as described below.

This solicitation includes two applicant groups:

- Application Group 1: Psychiatric Emergency Services focuses on maintaining and operating Psychiatric Emergency Services (PES).
- Application Group 2: Crisis Continuum Enhancements focuses on addressing identified gaps in the provision of crisis response continuum that includes mobile outreach crisis response (MOCR) and crisis stabilization services (CSS).

Both priorities support strengthening coordination across the crisis continuum, including referral pathways and post-crisis follow-up, while acknowledging that other crisis services are being developed through additional funding sources, including Medicaid.

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.

Goal 1: Support an increase in awareness and utilization of a comprehensive crisis support system and services.

Anticipated outcome: An increase in awareness and use of the comprehensive crisis support system will be indicated by higher call volume and service encounters.

Goal 2: Maintain access to critical Psychiatric Emergency Services (PES) statewide.

Anticipated outcome: Psychiatric emergency services will remain continuously available statewide with minimal service interruptions, and individuals presenting for emergency psychiatric care will be assessed and served within established response-time standards.

Goal 3: Improve behavioral health system-of-care outcomes for vulnerable populations in Alaska.

Anticipated outcome: Vulnerable individuals served will demonstrate improved behavioral health outcomes as measured by service utilization data.

Goal 4: Improve recipients' experiences in access to behavioral health crisis services continuum of care.

Anticipated outcome: Recipients accessing behavioral health crisis services will report more positive experiences on post-crisis experience surveys and in service utilization data.

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

1.03 Program Services/Activities

Please provide a project narrative on the proposed crisis project and clearly explain how it will achieve the program goals and anticipated outcomes stated in this RFP.

Response applies to **both** application groups. Response must address the following components:

1. **Service Category and Scope**
   - *Identify* the application group, and describe the proposed PES services or crisis services continuum enhancements to be provided. Explain how the proposed services strengthen the crisis services continuum in the identified region(s) and respond to system gaps.
2. **Geographic Coverage**
   - Identify the region(s) and communities to be served and describe how services will be accessible across the service delivery area.
3. **Service Delivery Model**
   - *Describe how PES will be operationalized or crisis services continuum enhancements will be delivered in alignment with Section 1.03 standards.*
   - *Determine* hours of operation, staffing structure, and required service components.
4. **Projected Service Volume**
   - Estimate the anticipated number of individuals to receive PES or crisis services continuum enhancements annually and describe the assumptions used to determine projections. (FY 27 Attachment 2: Estimated Title 47 Evaluations by Region and Department of Corrections Facility).
5. **Services for Uninsured, Underinsured, or Medicaid ineligible Individuals (20% Set-Aside):**
   - All applicants must allocate a minimum of **20% of the total grant budget** to provide behavioral health services to individuals who are uninsured, underinsured, ineligible for Medicaid or otherwise lacking resources to pay for behavioral health services.

- For those who do not meet income eligibility, the applicant needs to *establish* a reasonable payment plan based on their current financial situation and applicable federal poverty guidelines, including use of a sliding fee scale when appropriate.
- Applicant *must describe*
  - How these individuals will be identified and tracked.
  - How financial need or lack of coverage will be assessed and documented.
  - How grant dollars applied to these services will be tracked to ensure compliance with 20% set aside.
  - How the agency will support individuals in securing longer-term funding such as Medicaid, commercial insurance, or other community resources.

6. **Community Awareness and Outreach:**
   - Applicants must ensure that residents, correctional facilities, hospitals, law enforcement agencies, and other behavioral health partners are informed about how to access local and regional crisis response services. Outreach may include public service announcements, printed materials, phone directories, hospital information services, or community presentations.
     - *Describe* community education or outreach efforts that promote awareness of crisis services and pathways to care, including acknowledgement of DBH funding the project.
7. **Partnership Support and Development:**
   - Allowable activities include coordination and collaboration through community meetings and agreements with schools, Tribal Health Organizations (THO), rural hospitals, and other partners to support psychiatric emergency services and crisis care delivery.
   - In remote or off-road-system communities located more than fifty (50) miles from the applicant's office, applicants may coordinate with local health aides, behavioral health aides, or other qualified community members to support crisis screening and assessment.
   - The on-call clinician may assist Village Public Safety Officers, including supporting emergency detention process when applicable.
     - *Describe* established MOU's, referral relationships, and coordination within the regional crisis continuum.
     - *Describe* how grant funds will strengthen coordination and collaboration with partner entities to support crisis services.
     - *Identify* available agency resources, including staffing, infrastructure, partnerships, and system relationships that support crisis service delivery.
8. **Alignment with Program Intent, Resources, Goals, Outputs and Outcomes:**
   - *Describe* core project activities and explain how they strengthen the regional crisis continuum.
   - Clearly *state* anticipated goals, measurable outputs, and identified outcomes.
   - *Describe* how the project addresses identified service gaps or capacity limitations within the region.
9. **Grant Expenditure Tracking:**
   - *Describe* how grant expenditures will be monitored to ensure compliance, and how individuals will be supported in securing longer-term coverage.
   - *Describe* how proposed services will be sustained after grant funding ends.
10. **Project Timeline:**
    - Applicant must upload a timeline for initiation of services and implementation of project activities.
      - *Identify* key milestones, including staffing, training, operational launch, implementation of crisis line coordination (if applicable), development of referral partnerships or MOUs, and initiation of service delivery.

Application Group 1: Psychiatric Emergency Services (all are Required Activities). Responses must address the following components:

1. **Crisis-line:**
    - Behavioral health emergency calls must be answered by the grantee or an affiliated service capable of immediately contacting the on-call clinician. A behavioral health clinician must respond to emergent requests for evaluation or intervention within two hours, either by phone or in person. Evaluations may be delayed when intoxication prevents meaningful participation in the assessment process. All contacts, assessments, interventions, and disposition decisions must be documented in case notes in accordance with established clinical documentation standards and applicable regulatory requirements.
        - *Describe* how crisis line functions will be maintained, including coordination with 9-8-8.
    - Behavioral health emergency calls must be answered by the grantee or an affiliated service capable of immediately contacting the on-call clinician. A behavioral health clinician must respond to emergent requests for evaluation or intervention within two hours, either by phone or in person. Evaluations may be delayed when intoxication prevents meaningful participation in the assessment process. All contacts, assessments, interventions, and disposition decisions must be documented in case notes in accordance with established clinical documentation standards and applicable regulatory requirements.
        - *Describe* screening and assessment tools utilized.
    - Crisis assessments and interventions should occur in community-based or outpatient settings whenever possible. Face-to-face assessments may occur in any location that ensures the safety of staff and individuals served. This includes clinics, offices, schools, hospitals, correctional facilities, or other community settings.
2. **Title 47** evaluations may be conducted in person within the correctional facility or via tele-health when clinically appropriate and operationally feasible.
    - *Describe* processes for responding to Title 47 evaluation requests, including coordination procedures.
3. **Crisis intervention Activities:** Proposed activities must include de-escalation, symptom management, prevention of harm to self or others, and actions to prevent deterioration or relapse.
4. **Crisis Stabilization Activities:** Proposed activities must include safety planning, coordination and referral to community services, linkage to medication services when needed, and skills training designed to reduce future crises.
    - *Describe* outreach efforts to ensure providers, law enforcement, the DOC, and the public understand how to access PES.
5. **Follow-up Care Activities:** Proposed activities may include coordination to follow-up care for individuals. While hospitalization may be necessary in some cases, awarded applicants are encouraged to stabilize individuals locally whenever possible and to prioritize referrals to local services and supports.

NOTE: All services and activities identified under Application Group 2 (Crisis Service Continuum Enhancements), including mobile crisis response and related allowable activities, are allowable components of Psychiatric Emergency Services (PES). Applicants applying under Application Group 1 may incorporate any of the activities described for Application Group 2 into their proposed PES model, provided those activities support crisis response, stabilization, and continuity of care and are consistent with program intent.

Application Group 2 is intended to support the development, expansion, or enhancement of specific crisis continuum components, while Application Group 1 supports comprehensive psychiatric emergency service delivery. The distinction between application groups reflects scope and service configuration, not eligibility of activities.

Application Group 2: Crisis Service Continuum Enhancements

Applicants must propose to provide services under either Mobile Crisis Response Services (MOCR) or Crisis Stabilization Services (CSS). Applicants may propose providing additional services listed below identified in numbers 3 - 6.

1. **Mobile Crisis Response Services Activities** Applicants may propose to provide mobile crisis response services including start-up, expansion, and operationalization of mobile crisis response services to meet local and regional needs and to support development of a comprehensive crisis continuum.
2. **Crisis Stabilization Services Activities** Applicants may propose providing crisis stabilization services which are defined as providing services to individuals who are experiencing behavioral health and/or SUD crisis with a safe, home-like environment, 24 hours a day, 7 days a week and providing medically monitored care and short-term crisis stabilization services for a period of one to seven days. If applicants propose to provide CSS, the activities must include assessment, crisis intervention and crisis stabilization.
    - Fort Both MOCR and CSS: *Describe* how proposed activities support crisis response and stabilization within the community and include: A detailed description of the services to be provided, including but not limited to triage, assessment (including assessment of suicidality, risk, and safety), de-escalation, support and referrals or linkage to community resources including a warm hand off if needed to facility-based care.
3. **Crisis Response Transportation Services Activities** Applicants may propose providing transportation services associated with behavioral health intervention, treatment, outreach, or related services only when no other funding source is available. Allowable transportation activities may also include:
    - transportation for individuals experiencing a behavioral health crisis when not supported by Medicaid or other funding sources and when medical necessity is documented.
    - staff travel to provide in-person behavioral health services in rural or remote areas, including outreach and education or training in schools; and
    - limited coordination or administrative activities that are directly connected to an individual's crisis related care.
4. **Basic Needs Assistance Activities** Applicants may propose providing limited assistance to address immediate basic needs that support crisis stabilization or access to services, such as food, identification, or essential documents needed to access public assistance or care.
    - *Describe* how grant funds will support basic needs in a manner that stabilizes individuals in crisis and supports treatment engagement.
5. **Operational Support for Crisis Services** Funds may be used to support operational activities necessary to implement and sustain crisis services in regions where such services are unavailable, or where identified gaps exist across the crisis care continuum. Funding may address staffing, coordination, and other essential functions required to ensure timely access to crisis response services.
6. **Workplace Development Activities** Applicants may propose providing training activities. Proposed training activities must directly support the delivery of proposed crisis services. Applicants must demonstrate due diligence to ensure that the proposed training is not otherwise available at no cost through existing state-sponsored opportunities. Workforce development costs **may not exceed 10%** of the total proposed project budget.

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.

1.04 Program Evaluation Requirements and Reporting

Results Based Accountability Framework

The Division of Behavioral Health (DBH) utilizes the Results-Based Accountability (RBA) framework to assess program performance and outcomes. RBA is a data-driven performance management approach that measures progress by addressing three core questions: (1) how much was done, (2) how well it was done, and (3) whether participants are better off.

Grantees will be required to track specified RBA indicators and report applicable data using a quarterly reporting template provided by the DBH program manager. In addition, select data elements must be entered into the Alaska Automated Information Management System (AKAIMS) through the Emergency Services Portal. Data that is entered into AKAIMS will be extracted by DBH on a quarterly basis for monitoring and review.

Grantee reporting in the Enhancing Alaska's Behavioral Health Crisis Response Program is required in two separate reporting systems. Grantees are expected to have the technical functionality to report in both the GEMS Grant Management System and also the AKAIMS Reporting System. Both systems are managed by the Department of Health.

Reporting Requirements for both Application Group1 and Application Group 2:

1. Quarterly cumulative fiscal reports documenting grant and required match expenditures by approved budget line item.
2. Quarterly program narrative reports describing progress toward approved service plan activities and performance outcomes.
3. Cumulative Detailed Expenditure Report verifying amounts reported in Cumulative Fiscal Reports due at Q2 and Q4.
4. An annual program report, submitted with the fourth quarter report, summarizing and aggregating performance and fiscal data for the full grant year.

Grantees in **both** Group 1 and Group 2 will be required to maintain and submit the following data as part of the standard quarterly program reporting:

1. **How much did you do?**
    - Number of unduplicated individuals served through grant-funded crisis services.
    - Number and percentage of individuals served who are uninsured, underinsured, Medicaid-ineligible, or otherwise lacking financial resources.
    - Reporting Site: AKAIMS (Emergency Services module).
    - Reporting Frequency: Quarterly.
2. **How well did you do?**
    - Percent of crisis encounters resolved in the community.
    - Reporting Site: (Emergency Services module).
    - Reporting Frequency: Quarterly.
3. **Is anyone better off? (Impact on participant's lives)**
    - Percent of individuals experiencing repeat crisis utilization within 30 days (lower percentages indicate improved outcomes).
    - Reporting Site: Quarterly Report Template.
    - Reporting Frequency: Quarterly.
4. **Annual Performance Narrative**
    - Reporting Site: GEMS.
    - Reporting Frequency: ONLY at 4th quarter program reporting.

Specific Reporting Requirements for Group 1: PES

1. **How much did you do?**
    - Number of new Partnerships established.
        - Number of Memoranda of Agreement (MOA), Memoranda of Understanding (MOU), or formal collaborative protocols established or maintained.
        - Reporting Site: AKAIMS Emergency Services Module
        - Reporting Frequency:Quarterly
    - Number of psychiatric emergency evaluations completed.
        - Reporting Site: AKAIMS Emergency Services Module
        - Reporting Frequency: Quarterly
    - Number of Department of Corrections Title 47 evaluations completed.
        - Reporting Site: AKAIMS Emergency Services Module
        - Reporting Frequency: Quarterly
    - Number of follow-up contacts completed within 24–72 hours of PES encounter.
        - Reporting Site: AKAIMS Emergency Services Module
        - Reporting Frequency: Quarterly
2. **How well did you do?**
    - Percent of emergency service requests responded to within two (2) hours.
        - Reporting Site: GEMS
        - Reporting Frequency: Quarterly
        - Percent of service days with uninterrupted 24/7 PES coverage.
        - Reporting Site: GEMS
        - Reporting Frequency: Quarterly
3. **Is anyone better off? (Impact on participant's lives)**
    - Percent of individuals diverted from emergency department utilization or inpatient hospitalization.
    - Reporting Site: GEMS
    - Reporting Frequency: Quarterly

Specific Reporting Requirements for Group 2: Crisis Services Continuum Enhancements

1. **How much did you do?**
    - **Number of unduplicated individuals served through mobile crisis response (if applicable)**
        - Reporting Site: AKAIMS Emergency Services Module
        - Reporting Frequency: Quarterly
    - **Number of unduplicated crisis stabilization services (if applicable)**
        - Reporting Site: AKAIMS
        - Reporting Frequency: Quarterly
    - **Number of crisis responded to or within the service region.**
        - Reporting Site: AKAIMS
        - Reporting Frequency: Quarterly
2. **How well did you do?**
    - **Percent of crisis responses involving coordination with law enforcement, emergency medical services (EMS), or other first responders.**
        - Reporting site: GEMS
        - Reporting Frequency: Quarterly
3. **Is anyone better off? (Impact on participant's lives)**
    - **Percent of mobile crisis encounters resolved without hospitalization**

        - Reporting Site: GEMS
        - Reporting Frequency: Quarterly
    - **Percent of individuals experiencing repeat crisis contact within 30 days (lower percentages indicate Improved lives)**
        - Reporting Site: GEMS
        - Reporting Frequency: Quarterly
    - **Number of individuals receiving transportation assistance.**
        - Reporting Site: GEMS
        - Reporting Frequency: Quarterly
    - **Number of individuals receiving basic needs assistance directly tied to crisis stabilization.**
        - Reporting site: GEMS
        - Reporting Frequency: Quarterly
    - **Number of staff trained using grant funds (if workforce development funds are utilized).**
        - Reporting site: GEMS
        - Reporting Frequency: Quarterly
    - **Number of formal coordination meetings held, or agreements executed (if partnership development funds are utilized)**
        - Reporting site: GEMS
        - Reporting Frequency: Quarterly

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 are Alaskans of all ages who experience behavioral health crisis (both mental health and substance use related) with priority given to individuals who are uninsured, underinsured, or ineligible for Medicaid.

Service Areas and Communities: The service areas and communities requested for the services are as follows:

Regions: This request for proposals solicits for 2 application groups: psychiatric emergency services and crisis services continuum enhancements in the context of nine (9) regions as defined in Attachment 1DBH 1115 Regions and Communities. For this RFP, both application groups may submit no more than one (1) response per region. Agencies may propose services in more than one region but must submit a separate response to the RFP for each region in which they propose to provide services.

Each region identified in Attachment 1 DBH 1115 Regions and Communities serves as a competitive Service Area for this solicitation. As identified below, each competitive Region has estimated regional funding subtotals for psychiatric emergency services and mobile outreach crisis response. For any regions where need for the full amount of estimated funding is not demonstrated, funding will be shifted to other Regions. It is intended that distribution of funding ensure psychiatric emergency services or crisis services continuum enhancements are available within each region dependent on the submitted applications and their suitability per requirements of this RFP.

1.06 Program Funding

Estimated funding for Application Group 1: Psychiatric Emergency Services is $3,700,000 per fiscal year.

Estimated funding for Application Group 2: Crisis Services Continuum Enhancements is $900,000 per fiscal year.

Regional Funding Allocation Methodology

The Department uses a standardized, formula-based methodology to determine the maximum funding available for competitive awards across Alaska's regions. This approach is designed to promote equitable access to crisis services, reflect population-based needs, and account for geographic cost differences that affect service delivery. Total available funding is divided into three components:

1. **Base Equity Allocation (20 percent):** Ensures each region receives a minimum level of funding to support access to crisis services regardless of population size.
2. **Population-Based Allocation (60 percent):** Distributes funds proportionally based on each region's share of the statewide population, ensuring that funding aligns with relative demand.
3. **Rural Access and Cost Adjustment (20 percent):** Accounts for higher service delivery costs, workforce challenges, and access barriers in rural and remote areas. This component is informed by geographic cost considerations. Together, these components establish a Regional Allocation Envelope, which represents the maximum amount of funding available for awards within each region.

Award Structure

For Group 1, Psychiatric Emergency Services, the Department intends to issue up to two awards per region to ensure adequate geographic coverage, maintain service continuity, and strengthen overall system resilience. Each individual award may not exceed 50 percent of the total regional allocation.

For Group 2, for Crisis Services Continuum Enhancements, one or more awards is intended to be made within a region, provided total awards do not exceed the regional allocation.

Anchorage Municipality

- Crisis Services Continuum Enhancements (Total Available): $231,000
- Psychiatric Emergency Services (Total Available): $948,000

Fairbanks North Star Borough

- Crisis Services Continuum Enhancements (Total Available): $107,000
- Psychiatric Emergency Services (Total Available): $438,000

Northern & Interior

- Crisis Services Continuum Enhancements (Total Available): $69,000
- Psychiatric Emergency Services (Total Available): $283,000

Kenai Peninsula Borough

- Crisis Services Continuum Enhancements (Total Available): $80,000
- Psychiatric Emergency Services (Total Available): $327,000

Mat-Su Borough

- Crisis Services Continuum Enhancements (Total Available): $106,000

- Psychiatric Emergency Services (Total Available): $437,000

Western Region

- Crisis Services Continuum Enhancements (Total Available): $85,000
- Psychiatric Emergency Services (Total Available): $350,000

Northern Southeast

- Crisis Services Continuum Enhancements (Total Available): $69,000
- Psychiatric Emergency Services (Total Available): $283,000

Southern Southeast

- Crisis Services Continuum Enhancements (Total Available): $69,000
- Psychiatric Emergency Services (Total Available): $283,000

Gulf Coast / Aleutian Region

- Crisis Services Continuum Enhancements (Total Available): $80,000
- Psychiatric Emergency Services (Total Available): $328,000

Match Requirement: The budget must include matching funds equal to 25.00% of the proposed Department funds. Calculate required match with the following formula.

Total Requested Grant Award x Required Match Percentage = Required Match

Federal grant funds may not be used to match federal funds awarded through this grant program, and State grant funds may not be used to match State funds awarded through this grant program.

Eligible sources of matching funds include:

- Local Cash: local sources, including local tax receipts, municipal revenue sharing, cash donations
- Local In-Kind: donated items of value for which the applicant incurs no cost, including volunteer labor and donations of supplies, equipment, space
- Other Sources: government and non-government grant awards, third party receipts, direct receipts such as gaming or sales of goods
- Grant Income: earnings anticipated as a result of this project proposal receiving award, and Medicaid reimbursements if award of this grant is required for the applicant to bill Medicaid for awarded services
- Medicaid: includes Medicaid which is not Grant Income, as well as other third-party receipts

Proposed Budget: The applicant must submit a budget proposal for the first fiscal year of the project. The proposed budget detail and narrative, (including required match), will support the program's results-based service delivery and staffing requirements stated in this RFP.

A minimum of **20%** must be budgeted in the other category to pay for crisis services for individuals who are underinsured, uninsured, or Medicaid ineligible for both applicant groups.

If proposing workforce development activities proposed amount may not exceed **10%** of total budget

The following activities may not be included in proposed budget:

- General operating overhead that is not directly tied to the project.
- Out-of-state travel for training, meetings, professional and workforce development.

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.

Administrative Costs: Proposed budgets must limit total administrative costs to no more than 5% of the total grant award.

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.

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

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.

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 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.

Applicants must identify a project director who will serve as the primary point of contact for the project and will be responsible for oversight of implementation, grant deliverables, reporting, compliance, and quality assurance and improvement activities, including performance monitoring using the RBA framework.

For PES Staff: Grantees must ensure that PES services are delivered by a master's-level clinician, as defined in 7 AAC 70.990(28), who is available twenty-four hours per day, seven days per week to respond to those experiencing a psychiatric emergency. An on-call clinician must be available by phone and, when needed, for face-to-face response. Title 47 evaluations must be conducted by a qualified mental health professional clinician consistent with AS 47.30.915.

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.
3. PES RESPONSIBILITY: Grantees are responsible for providing psychiatric emergency coverage twenty-four hours per day, seven days per week for individuals experiencing behavioral health emergency within their service area. Grantees must coordinate discharge planning and ensure that follow up appointments are scheduled within seven calendar days of hospital discharge.
4. Title 47 Evaluations: When an individual is in protective custody (AS 47.30.705) and/ or pending release with the with the DOC and the DOC determines that a Title 47 evaluation is required, the PES grantee for the applicable service region shall conduct Title 47 evaluation. This requirement applies to all correctional facilities within the grantee's regional service area. Title 47 assessments requested by hospitals, law enforcement, or correctional facilities must be completed in accordance within statutory timelines (AS 47.30.710). Grantees are expected to manage assessment volume to prevent backlogs or waitlists for statutorily required evaluations. If the PES grantee is temporarily unable to perform a Title 47 assessment within the required timeframes due to Documented and exceptional capacity constraints DOC may utilize an. alternative qualified provider to complete the evaluation. Such circumstances are expected to be limited, and the regional PES provider remains responsible for maintaining adequate capacity to meet standard demand.
5. Memorandum of Agreements: Grantees must maintain working relationships and written agreements with hospitals, correctional facilities, law enforcement and other partners to support crisis response and Title 47 evaluations and assessments.

6. By applying under this RFP, all applicants agree to the additional program requirements and service stand identified below:
    - Applicant must demonstrate the ability to serve both individuals with mental health disorders and substance use disorders.
    - Must maintain current program listings in 2-1-1 and FindTreatment.gov to support public awareness of available services.
    - Must maintain current and accurate contact information with 9-8-8 Suicide and Alaska Careline to ensure effective coordination and appropriate routing of calls to local PES and/or other DBH funded crisis programs. Grantees are responsible for promptly updating any changes in contact information to support timely crisis response and continuity of care.
    - Support individuals in accessing public assistance programs, including support enrolling with Medicaid .
    - In accordance with 7 AAC 70.100(16), report to the DBH program manager any individual served in the grant-funded program who is missing or deceased, using the form provided in Attachment XXX2 Incident Report.
    - Grantees must comply with approved spending, timely and compliant reporting, and the approved grant project service plan. Grantees are required to notify the Department and receive prior approval for changes to grant project services, the grant project director, or the approved budget.
    - In accordance with 7 AAC 10.900, ensure that all staff working in the grant-funded program complete required background checks using the SOA background check system.
    - Pursuant to 7 AAC 78.260 (Changes in Approved Grant Project), grantees must provide written notification at least 30 days in advance and obtain Department approval before making any of the following changes:
        - Modifying the grant project plan.
        - Changing the beginning or end dates of the grant project; or
        - Terminating a grant project or pausing service delivery. Requirements related to record transfer in the event of termination are outlined in 7 AAC 78.255 (Transfer of Records).
    - Grantees must provide immediate written notification to the Department and obtain approval if the grantee proposes to replace the grant project director.
    - Awarded proposers will be required to submit additional agency information if the agency GEMS record is not current.

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 $750,000 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
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

Applicants must demonstrate the proposed project has the necessary support and coordination for the successful delivery of services. The proposal must address the following:

1. **Community support where services are proposed**
   - Applicants must demonstrate clear and meaningful community support for the proposed services. Community support is essential to ensuring that funded activities are responsive to local needs, culturally appropriate, and sustainable within the regional service landscape. Given Alaska's geographic, cultural, and system variability, services developed without local engagement risk duplication, poor utilization, or misalignment with existing resources. Applicants must describe how the proposed project is supported by the community it intends to serve, including engagement with local stakeholders such as community leaders, Tribal entities, consumers, families, and existing service providers, as applicable. Documentation may include letters of support, evidence of planning conversations, or other materials demonstrating community awareness of and support for the proposed services.
2. **Partnerships and collaborations specific to the proposed project**
   - Strong partnerships and cross-system collaboration are critical to achieving the intended outcomes of this grant program. No single provider or agency can independently address the full range of needs associated with crisis response and stabilization; coordinated partnerships help ensure continuity of

care, efficient use of resources, and improved outcomes for individuals served. Applicants must identify and describe partnerships and collaborations that are directly relevant to the proposed project, including the role of each partner and how collaboration will function in practice. Partnerships must be clearly tied to the proposed activities and contribute substantively to service delivery.

3. **Coordination with necessary referring agencies and the role of each described.**
    - Effective coordination with referring agencies is essential to ensuring timely access to services and appropriate use of crisis and stabilization resources. Clear referral pathways reduce service gaps, prevent unnecessary escalation, and support individuals in receiving the right level of care at the right time. Applicants must describe how they will coordinate with necessary referring agencies, such as emergency departments, law enforcement, emergency medical services, 988 call centers, schools, child welfare, behavioral health providers, or other relevant entities. The description must clearly outline the role of each referring agency, how referrals will be initiated and managed, and how coordination will support continuity of care and follow-up, consistent with applicable privacy requirements.

Applicants who have existing Memoranda of Agreement (MOAs) in place with required partners at the time of application are encouraged to upload fully executed copies within the grant management system as part of their proposal submission.

If current MOAs are already established with entities such as the Alaska Psychiatric Institute, the Alaska Department of Corrections, Designated Evaluation and Treatment (DET) facilities, Designated Evaluation and Stabilization (DES) facilities, hospitals within fifty (50) miles of the applicant’s main office, local law enforcement agencies, or correctional facilities, those agreements should be uploaded to demonstrate existing collaborative capacity.

If executed agreements are not in place at the time of application, applicants are not required to submit MOAs prior to award. However, upon grant award, grantees will be required to secure and maintain the required written agreements. In cases where a partner declines to enter into a written agreement, the grantee must document reasonable and good-faith efforts to obtain such agreement.

All agreements, whether existing or executed post-award, must address shared responsibilities for crisis response, credentialing (when applicable), emergency department face-to-face assessment processes, screening and transport procedures with law enforcement, referral and communication processes with correctional facilities, safety and security requirements, telehealth capability, and continuity of care coordination.

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.

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 a two-year period, beginning 7/1/2026 through 6/30/2028. At the discretion of the Department, a project funded under this RFP may be considered for continued funding in subsequent program year(s). The annual decision to continue funding for the subsequent year(s) of the two-year 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 year one of the grant only. 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 (Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 (Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 (Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 (Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 (Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 (Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 (Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 (Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 the date of the visit and if there were findings. If there were findings, please identify what the findings were.	☑	

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

1 (Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 (Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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.	☐	120

b	The timeline includes key milestones such as staffing, training, operational launch, implementation of crisis line coordination (if applicable), development of referral partnerships or MOUs, and initiation of service delivery.	☑	60

3 ***(Application Group 2: Crisis Continuum Enhancements) -***

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.

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 as identified in sections 1.02 and 1.03 that are required for all applicants.	☐	40
c	The response identifies Mobile Crisis Response Services or Crisis Stabilization Services. If any additional activities under Application Group 2 are identified (numbers 3 -6), the response thoroughly describes the ways in which they will be achieved as outlined by the activity description provided in section 1.03.	☐	20

3 ***(Application Group 1: Psychiatric Emergency Services) -***

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.

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 as identified in sections 1.02 and 1.03 that are required for all applicants.	☐	40
c	The response describes how crisis line functions will be maintained, including coordination with 9-8-8	☐	40

d	The response describes the screening and assessment tools utilized.	☐	40
e	The response describes the process for responding to Title 47 Evaluation requests, including coordination procedures.	☐	40
f	The response includes de-escalation, symptom management, prevention of harm to self or others, and actions to prevent deterioration or relapse.	☐	40
g	The response describes outreach efforts to ensure providers, law enforcement, the DOC, and the public understand how to access PES.	☐	40

4 ***(Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 ***(Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 ***(Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - Provide the proposed budget for the first year of the project. 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.	☑	0
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	Proposed sources of Required Match are identified in the budget narrative as well as in the Matching Fund Source table located near the beginning of the application. All proposed sources of matching funds are eligible, and the level of match is met.	☑	
j	A minumum of 20% has been budgeted to pay for crisis services for individuals who are underinsured, uninsured, or Medicaid ineligible.	☐	40
k	If proposing workforce development activities, the proposed amount does not exceed 10% of the total budget.	☑	
l	Administrative costs are no more than 5% of the total grant award.	☑	
m	Indirect costs not directly tied to the project is not included in the proposed budget.	☑	

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

1 ***(Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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	Agency has the financial strength and capacity to manage grants and verifies that is has the capacity to implement funds if received.	☑	

2 ***(Application Group 1: Psychiatric Emergency Services) -***

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. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200. Please include the overall agency staff turnover rate during the past two years.

Evaluation/Review Criteria		Review	Points
a	Staff providing services are qualified and competent as demonstrated by the uploaded position descriptions, resumes, and professional credentials.	☐	120
b	Staffing levels are sufficient to support the requirements of the proposed project and compliant with all identified program mandates.	☐	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

f	Agency has indicated in the narrative proposal what the overall agency staff turnover rate has been during the past two years.	☑	
g	The response ensures that PES services are delivered by a master's level clinician, who is available 24 hours a day, seven days per week to respond to those experiencing a psychiatric emergency.	☑	60
h	The response includes an on-call physician is available by phone, and when needed, for face-to-face responses.	☑	60

2 ***(Application Group 2: Crisis Continuum Enhancements) -***

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. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200. Please include the overall agency staff turnover rate during the past two years.

Evaluation/Review Criteria		**Review**	**Points**
a	Staff providing services are qualified and competent as demonstrated by the uploaded position descriptions, resumes, and professional credentials.	☐	120
b	Staffing levels are sufficient to support the requirements of the proposed project and compliant with all identified program mandates.	☐	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
f	Agency has indicated in the narrative proposal what the overall agency staff turnover rate has been during the past two years.	☑	

3 ***(Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 ***(Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 ***(Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) -***

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 ***(Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 ***(Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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 ***(Application Group 2: Crisis Continuum Enhancements, Application Group 1: Psychiatric Emergency Services) - 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