

Guernsey, Knox, and Licking County Departments of Job and Family Services
Peer Recovery Coach Recruitment and Development

REQUEST FOR PROPOSALS

Date Issued:

November 21, 2019

DUE:

At or before 10:00 AM
on January 9, 2020

Bidders must submit five (5)
proposal copies in an
envelope entitled:

Peer Recovery Coach RFP
Licking County
Commissioners' Office
c/o Bev Adzic
20 S. 2nd Street 4th Floor,
Newark, Ohio 43055

Faxed or email proposals will
not be accepted

BIDDERS' CONFERENCE

Bidders Conference:

2:00 pm on December 5, 2019
OhioMeansJobs|Licking
County, 998 East Main
Street, Newark, Ohio 43055

Attendance is
recommended, but not
required, in order to answer
questions related to the
RFP.

CONTACT INFORMATION

Questions concerning this RFP
may be directed to:

Nathan Keirns

Licking County Job and Family
Services

(740) 670-8726 or
Nathan.Keirns@jfs.ohio.gov

PURPOSE & BACKGROUND:

Ohio was awarded a National Emergency Grant (NEG) through the U.S. Department of Labor's Workforce Innovation and Opportunities Act (WIOA) to respond to the state's ongoing opioid epidemic. The NEG funds were provided to the state's various Workforce Investment Boards (WIB), including Area 7, to issue to counties.

Guernsey, Knox, and Licking Counties are members of the Area 7 WIB. Guernsey, Knox, and Licking Counties are in close proximity geographically and are experiencing similar addiction crises. Guernsey, Knox, and Licking Counties are collaborating as a region to establish and develop a network of Addiction Peer Recovery Coaches to address substance abuse disorders, not limited to opioid addiction, in their communities.

The counties wish to solicit provider(s) for the outreach, recruitment, training, and/employment of Addiction Peer Recovery Coaches.

Providers may submit proposals for one or multiple counties. **A separate proposal must be submitted for each county provider wishes to serve. ALL PROPOSALS, REGARDLESS OF COUNTY/COUNTIES TO BE SERVED, MUST BE SUBMITTED TO LICKING COUNTY COMMISSIONERS' OFFICE (see "Submission Criteria" section below for more details).**

SCOPE OF WORK:

Funding is available through the National Emergency Grant to reimburse the selected provider(s) for the outreach, recruitment, training and development, and/or initial employment of WIOA-eligible dislocated workers to become Addiction Peer Recovery Coaches. Once the dislocated worker is adequately trained, he or she is expected to become employed by a provider who will seek and obtain Medicaid reimbursement for the Addiction Peer Recovery Coach's efforts or secure other funding sources to provide services within the respective county.

WIOA dislocated worker eligibility will be determined by each county's Department of Job and Family Services and/or OhioMeansJobs staff. In general, to be considered eligible an individual must be one of the following:

1. A dislocated worker;
2. An individual temporarily or permanently laid off as a consequence of the opioid emergency;
3. A long-term unemployed individual (see definition below); or
4. A self-employed individual who became unemployed or significantly underemployed as a result of the opioid crisis.

State policy describes a **dislocated worker** as an individual who:

1. Has been terminated or laid off or has received a notice of termination or layoff from employment; AND is eligible for or has exhausted entitlement to unemployment compensation; OR
2. Has been employed for a duration sufficient to demonstrate attachment to the workforce, but is not eligible for unemployment compensation due to insufficient earnings or having performed services for an employer that was not covered under a state unemployment compensation law; AND is unlikely to return to a previous industry or occupation; OR

3. Has been terminated or laid off or has received a notice of termination or layoff from employment as a result of any permanent closure or any substantial layoff at a plant, facility, or enterprise; OR
4. Is employed at a facility where the employer has made a general announcement that such facility will close within 180 days; OR
5. The individual was self-employed (including employment as a farmer, rancher, or fisherman) but is unemployed as a result of natural disasters or general economic conditions in the community where the individual resides; OR
6. Is a displaced homemaker; OR
7. Is the spouse of a member of the Armed Forces on active duty and who has experienced a loss of employment as a direct result of relocation to accommodate a permanent change in duty state of such member; OR
8. Is the spouse of a member of the Armed Forces on active duty and who meets the criteria of a displaced homemaker who is unemployed or underemployed and is experiencing difficulty obtaining or upgrading employment.

State policy defines a **displaced homemaker** as an individual who has been providing unpaid services to family members in the home and who:

1. Is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment; AND has been dependent upon the income of another family member, but is no longer supported by that income; OR
2. Is the dependent spouse of a member of the Armed Forces on active duty and whose family income is significantly reduced because of a deployment, a call or order to active duty, a permanent change of station, or a service-connected death or disability.

State policy describes a **long-term unemployed** individual as an individual who:

1. Has a substantial employment history (i.e., at least 12 months of full-time or 24-months of part-time work experience), is currently unemployed, and has been unemployed for at least 15 of the past 26 weeks; OR
2. Is currently unemployed and has been unemployed for at least 15 of the past 26 weeks; OR
3. Is currently employed but had been unemployed for 15 of the past 26 weeks and is not currently self-sufficient based on local policy; OR
4. Is either currently unemployed or working part-time, has not worked over 30 hours per week in any 15 of the past 26 weeks, has been seeking but unable to secure full-time employment, and is not currently self-sufficient based on local policy.

PLEASE NOTE: Eligible individuals are not required to have a history of opioid use disorder to and, due to confidentiality, cannot be required to disclose whether they have been impacted by the opioid crisis as a condition of participation. However, to target individuals impacted by the opioid use disorder and to make appropriate referrals, applicants may be asked the following optional question in accordance with Workforce Innovation and Opportunity Act Policy Letter Number 19-01:

- Your answer to this question is voluntary. Do you, a friend, or any member of your family have a history of opioid use? Please answer “Yes” or “No.”

The selected provider will be required to conduct outreach, recruitment, training, and/or employment of eligible dislocated workers to become Addiction Peer Recovery Coaches.

- Outreach: Providing information about Peer Recovery Coach opportunities to the community to identify individuals who may qualify for the program, have lived experience with addiction, and be effective as Peer Recovery Coaches.
- Recruit: Includes the active recruitment of potential Peer Recovery Coaches, engaging them in Peer Recovery Coach training and employment.
- Train: Provide training or access to training and support to the individual that leads to industry recognized credentials as a Peer Recovery Coach, including Ohio Mental Health and Addiction Services (OMHAS) certification.
- Employment: During training to obtain the necessary Peer Recovery Coach credential(s) and during initial

employment, the salary and benefits of the peer recovery coaches may be reimbursed through the WIOA NEG funds available through this RFP. After the Peer Recovery Coaches are credentialed and following their initial employment, they are to be employed by an agency who has sought and received the appropriate status necessary to bill Medicaid for Peer Recovery Coaches or secure other funding sources for the Peer Recovery Coaches.

The ultimate goal of this RFP is to develop a network of Addiction Peer Recovery Coaches in each county.

While the Addiction Peer Recovery Coaches may be utilized to meet the needs of the general community, Licking and Knox Counties are specifically interested in developing Addiction Peer Recovery Coaches that will meet the needs of individuals and families who are also working with the county's Public Children Services Agency (PCSA).

PCSAs provide services to children who have experienced abuse or neglect and their families. Many of the families served by the PCSA have at least one parent who is active in his or her substance use disorder.

In Licking and Knox Counties, Addiction Peer Recovery Coaches will work with families who are at risk of relinquishing custody of a child(ren) due, at least in part, to addiction issues who need additional supports to successfully maintain family preservation or additional services to encourage and promote reunification of children with the family following a removal.

Guernsey County will focus on developing a network of Addiction Peer Recovery Coaches for its general community.

SERVICE DEFINITIONS:

Addiction Peer Recovery Coaches are community-based service individuals experiencing addiction/substance use disorders. Peer recovery coaches promote and support recovery, self-determination, self-advocacy, well-being, and independence. Peer recovery services are individualized, recovery-focused, and support each person's ability to promote their own recovery from substance use disorder/addiction.

The responsibility of peer recovery coaches includes, but is not limited to:

1. Ongoing exploration of recovery needs;
2. Supporting individuals in achieving personal goals;
3. Encouraging hope;
4. Supporting the development of life and coping skills;
5. Developing and working toward achievement of personal recovery goals;
6. Modeling behaviors that support recovery;
7. Teaching skills to effectively navigate systems of care;
8. Providing facilitation that addresses symptoms or behaviors, through processes that assist the individual in eliminating barriers to seeking or maintaining recovery, employment, education, or housing;
9. Assisting with accessing and developing natural support systems in the community;
10. Promoting coordination and linkage among service providers;
11. Coordinating or assisting in crisis interventions and stabilization as needed;
12. Conducting outreach;
13. Participating in the treatment team;
14. Assisting individuals in the development of empowerment skills that inspire hope;
15. Assisting individuals in their recovery from addiction;
16. Encouraging and guiding individuals to successfully work children services case plans.

CONSIDERATIONS

Each of the counties wishes to invest the Workforce Innovation and Opportunity Act (WIOA) National Emergency Grant (NEG) in the implementation and development of peer recovery coaches for families experiencing addiction. In Licking and Knox Counties, addiction peer recovery coaches will primarily assist individuals/families who are actively working with their local children services PCSA and Families and Children First Council.

The WIOA NEG funds may be used to offset the costs associated with the hiring, training/credentialing, and initial employment of the peer recovery coaches. The selected provider(s) is required to be or become eligible for reimbursement through Medicaid for addiction peer recovery coaches or to obtain other funding sources. After

the coaches are credentialed, the provider will be responsible for billing Medicaid or other third party (not the County Department of Job and Family Services) for services provided by the peer coaches.

PROPOSAL CONTENTS: NARRATIVE

A separate proposal must be completed for each county where a potential provider would like to provide services.

Proposals must contain the following:

1. **PROGRAM NARRATIVE** that includes:
 - a. Description of services to be provided, including how outreach, recruitment, training, and employment will occur.
 - b. How each service will be delivered.
 - c. Expected capacity, outcomes, and performance goals
 - d. Description of how addiction peer recovery coaches will earn OHMAS certification.
 - e. Program time lines (particularly expected start date, when peer recovery will be hired, when they will be trained/credentialed, and when provider will begin billing Medicaid or other funding stream)
 - f. Note any collaborative efforts, identifying partnerships (including sub-contracts), if any, as well as any additional sources of program funding
 - g. Note qualifications as a provider and previous experience in the delivery of such services (including qualification of provider's staff). Include details regarding the qualifications, credentials, background check policies, and liability protections of those providing services.
 - h. Verification of any required/applicable licenses or credentials
 - i. Description of provider's experience with Medicaid. E.g., does the provider currently bill Medicaid or other funding stream for peer recovery coaches?
 - j. A description of provider's liability insurance coverages.

Please note that all proposals must contain specific, measurable program outcomes to be considered for funding. Selected providers will be required to submit updates regarding program measures and outcomes. Failure to meet established outcomes may result in contact termination.

PROPOSAL CONTENTS: BUDGET

Provide a detailed line item budget that includes identification of costs, per selected area (e.g., salary, benefits, supplies, etc.). See Attachment 1 for the budget template. An electronic version of this budget format is available upon request.

Should the Proposal involve existing services, please identify how funds will be utilized to expand services and current program income.

Identify collaborative efforts and sub-contracts with other service providers for the identified services above, including services provided and budget for proposed sub-contracted services.

Please note: Any contract that may result from this RFP will be based on reimbursement (i.e., advanced funds are not available).

Provider will receive reimbursement based upon costs. Expense reports (Attachment 2) must be submitted with monthly invoices for reimbursement. The provider will be monitored for program performance and fiscal responsibility.

This RFP and any contracts that result can only cover Non-Medicaid Expenditures and Services.

PROGRAM LIMITATIONS (FEDERAL & STATE):

Funds **cannot** be used for:

- Foster care or residential treatment care for youth in custody
- Constructing or purchasing buildings or facilities, or purchasing real property or capital goods (e.g. buildings, buses, etc.)
- Satisfying a cost sharing or matching requirement of another federal program
- Medicaid Eligible Services

Program Providers must assure all purchases of services or payments are in compliance with all federal procurement laws and regulations. Providers will be required to document and report monthly program expenditures prior to reimbursement.

SUBMISSION CRITERIA:

Proposals must be submitted in strict accordance with proposal submission instructions provided in this section. Any proposal failing to follow the entire proposal acceptance criteria listed below shall be disqualified from consideration.

A separate proposal must be submitted for each county provider wishes to serve. ALL PROPOSALS, REGARDLESS OF COUNTY/COUNTIES TO BE SERVED, MUST BE SUBMITTED TO LICKING COUNTY COMMISSIONERS' OFFICE FOLLOWING THE BELOW CRITERIA.

Proposals must be physically received in a sealed envelope no later than 10:00 AM on January 9, 2020, at the offices of the Licking County Commissioners (see below for addressing details).

Proposals received after this time will not be considered. Faxes or emailed proposals will not be accepted. Unsolicited materials received after the deadline date will not be added to previous submissions and will not be considered.

5 copies of the proposal must be submitted for each county for which the potential provider is submitting a bid.

Envelopes must be addressed to the following and designate which county it is for:

**Peer Recovery Coach RFP
Licking County Commissioners Office
c/o Commissioners Clerk, Bev Adzic
20 S. Second Street, 4th Floor
Newark, Ohio 43058-5030**

BIDDERS' CONFERENCE:

A bidders' conference will take place at OhioMeansJobs|Licking County, 998 East Main Street, Newark, at 2:00 PM on December 5, 2019. Attendance, while not required, is highly recommended to answer questions related to the RFP.

FUNDING:

Services provided as a result of this RFP will be reimbursed through the Workforce Innovation and Opportunities Act (WIOA) National Emergency Grant (Dislocated Worker Grant), which has a Catalog of Federal Domestic Assistance (CFDA) number of 17.278.

Dislocated worker eligibility will be determined by each county.

The estimated maximum amount of funds available per county for services secured through this RFP is projected to be:

Guernsey County: \$63,435.60
Knox County: \$51,687.90
Licking County: \$87,249.60

Proposals will be evaluated independently by each county. Each county will determine which provider(s), if any, it wishes to award a contract. Each county will then enter into an independent agreement with their selected provider(s). Each county reserves the right to enter into an agreement with any, all, or none of the providers who submit a proposal.

PROVIDER SELECTION CRITERIA:

Prospective Providers are advised that an offer for a contract may be initiated after a review of the proposal received by members of a proposal review team. Proposals will be reviewed for acceptability with emphasis on various factors according to the type of service to be provided.

All Proposals will be evaluated on the criteria as listed on the Proposal Score Sheet (Attachment 3), and any other pertinent areas as selected by the respective County Department of Job and Family Services or the Ohio Department of Job and Family Services.

CONTRACTUAL REQUIREMENTS:

Any contract resulting from the issuance of this solicitation is subject to terms and conditions established by each county. The proposal must state if any of the elements will be subcontracted to other parties. If so, the proposal must state the name of the subcontractor, the services/activities to be provided by the subcontractor, and planned costs. This must be reflected in the proposed budget.

RFP LIMITATIONS:

This Request for Proposals does not commit Licking County, Knox County, Guernsey County, each county's Department of Job and Family Services, or each county's board of commissioners to award a contract or to pay any costs incurred in the preparation of a proposal. Each county reserves the right to accept or reject any or all proposals received, to negotiate services and costs with proposers, and to cancel in part or in entirety this RFP.

Contracts are expected to be awarded no earlier than January 1, 2020, through December 31, 2020. The amount of any award is dependent upon the availability of funding through allocations received by each county's Department of Job and Family Services. Funds may not be used to supplant existing programs; they may be used to expand existing programs. Multiple vendors may be selected to provide the described services.

Contracts awarded shall not be effective beyond December 31, 2020. However, the Licking County Job and Family Services, reserves the right to renew contracts annually for up to a maximum of two (2) years, through December 31, 2022, based on performance and availability of funds.

CONTACT INFORMATION:

Questions concerning this RFP may be directed to:

Nathan Keirns
Program Planner
Licking County Job & Family Services
Nathan.Keirns@jfs.ohio.gov
740.670.8726

**ATTACHMENT 1
Budget Template**

Summary Sheet	
Provider Name & Program	
Budget Time Period	
Date Completed	
	Estimate Amount
I. Staff	
A. Participant Salaries	\$0.00
B. Staff Salaries	\$0.00
C. Participant Payroll Related Exp	\$0.00
D. Staff Payroll Related Exp	\$0.00
TOTAL STAFF COSTS	\$0.00
II. Operations	
A. Travel/Mileage for Staff	\$0.00
B. Consumable Goods	\$0.00
C. Occupancy	\$0.00
D. Indirect Costs	\$0.00
E. Participant Training	\$0.00
F. Participant Transportation	\$0.00
G. Other - Misc	\$0.00
TOTAL OPERATIONAL COSTS	\$0.00
III. Equipment	
A. Equipment Subject to Depreciation	\$0.00
B. Small Equipment Purchases	\$0.00
C. Leased and Rented Equipment	\$0.00
TOTAL EQUIPMENT COSTS	\$0.00
SUBTOTAL OF ALL COSTS (TOTAL PROJECT COST)	\$0.00
IV. Other Dollars Received	\$0.00
TOTAL PROGRAM COSTS (TOTAL AMOUNT REQUESTED FROM JFS)	\$0.00

STAFF

I. A. Participant Salaries

Position Title	Number of Positions Required	Annual Salary	Percent of Time to Program	Reimbursable Salary
				\$0.00
				\$0.00
				\$0.00
				\$0.00
Total Staff				\$0.00
Staff Equivalent				
Total Reimbursable Salaries				\$0.00

I. Participant Payroll Related Expenses

Item	Payroll Related Expenses
Retirement	\$0.00
Worker's Comp	\$0.00
Social Security	\$0.00
Medicare	\$0.00
	\$0.00
	\$0.00
	\$0.00
Total Payroll Related Expenses	\$0.00

I. B. Staff Salaries

Position Title	Number of Positions Required	Annual Salary	Percent of Time to Program	Reimbursable Salary
				\$0.00
				\$0.00
				\$0.00
				\$0.00
Total Staff				\$0.00
Staff Equivalent				
Total Reimbursable Salaries				\$0.00

I. Staff Payroll Related Expenses

Item	Payroll Related Expenses
Retirement	\$0.00
Worker's Comp	\$0.00
Social Security	\$0.00
Medicare	\$0.00
Total Payroll Related Expenses	\$0.00

Operations

II. A Travel and Short Term Training	
Mileage Reimbursement (___ per mile)	\$0.00
Other (identify)	\$0.00
Other (identify)	\$0.00
TOTAL TRAVEL AND TRAINING	\$0.00

II. B. Consumable Supplies	
Office Supplies	\$0.00
Cleaning Supplies	\$0.00
Other (identify)	\$0.00
TOTAL CONSUMABLE SUPPLIES	\$0.00

II. C. Occupancy Costs	
Rental @ \$___ per square foot	\$0.00
Usage allowance/depreciation @ ___% rate of original acquisition costs of \$_____ by Program Square Footage Percentage (Program Square Footage ___ divided by Provider Square Footage ___ = _____%)	\$0.00
Maintenance and Repairs	\$0.00
Utilities, if not included in rent	\$0.00
Heat and Light	\$0.00
Telephone/Internet	\$0.00
Water	\$0.00
TOTAL OCCUPANCY COSTS	\$0.00

II. D. Indirect Costs	
Categories Identified in Cost Allocation plan	
The following are listed as a % of the total to relate to the Cost Allocation Plan	
Total Percent _____	
<i>If not included elsewhere in budget</i>	
Other (identify)	\$0.00
TOTAL INDIRECT COSTS	\$0.00

II. E. Other/Misc.	
Identify Misc Costs & provide detail	
TOTAL CONSUMABLE SUPPLIES	\$0.00

**ATTACHMENT 2
Expense Report**

Monthly Expense Report					
Date completed:	Completed by:	Agency Name:			
Contract #:	Service Type:	Program Name:			
Expense Month/Year Reported:					
EXPENSES BY PROGRAM SERVICES	YEARLY PROGRAM BUDGET	MONTHLY ACTUAL EXPENSES	CONTRACT YTD ACTUAL EXPENSES		
STAFF SALARIES					
PARTICIPANT PAYROLL EXPENSE					
STAFF PAYROLL EXPENSE					
TRAVEL AND SHORT TERM TRAINING					
CONSUMABLE GOODS					
OTHER-MISC					
SUB-TOTAL OF EACH COLUMN					
OTHER DOLLARS RECEIVED					
TOTAL PROGRAM EXPENSE					
COMPLETE EACH ITEM BELOW FOR THE MONTH REPORTED AND THE YEAR-TO-DATE DATA					
ANALYTICS WILL BE ADDED DURING CONTRACT NEGOTIATIONS					
5. Was new program funding received during this service month? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>					

Example only, may be customized based on specifics of each agreement

ATTACHMENT 3
Proposal Rating & Evaluation Rubric

POINTS	APPLICANT RESPONSE	SCORE	COMMENTS
Max = 3	Provider has experience providing addiction focused peer recovery coaching		
Max = 3	Provider can train or facilitate training for new addiction peer recovery coaches that leads to a recognized credential, including OMHAS certification		
Max = 3	Provider has experience with billing Medicaid or other third party for addiction peer recovery coaches		
Max = 3	Provider has experience coordinating services with other organizations, such as county public children services agencies		
Max = 3	Provider offers flexible hours of services, including evenings and weekends		
Max = 3	Provider's staff are willing work in the community in a variety of settings to meet the needs of clients		
Max = 3	Budget request appears reasonable and consistent with market expectations		
Max = 3	Proposal meets all requirements established in RFP		
Max = 24	Total Score out of 24		