**STATE OF MAINE**

**Department of Health and Human Services**

*Office of Behavioral Health*



**RFA# 202311234**

***Grant Funding Opportunity***

**Washington County**

**Expansion of Adult Residential Substance Use Disorder Treatment**

|  |  |
| --- | --- |
| **RFA Coordinator** | All communication regarding the RFA must be made through the RFA Coordinator: **Name:** Brittany Hall **Title:** Procurement Administrator  **Contact Information:** [Brittany.hall@maine.gov](mailto:Brittany.hall@maine.gov) |
| **Informational Meeting** | **Date:** December 20, 2023 **Time:** 10:00 a.m., local time  **Location:** ZOOM Meeting Link: [Web Meeting Link for RFP 202311234](https://mainestate.zoom.us/j/85470180571?pwd=NExaYW5FeWZkNXRWQXVPRVZIVG5XZz09) Meeting ID: 854 7018 0571, or by phone at 1-646-876-9923 using the Meeting ID provided. |
| **Submitted Questions** | *All questions must be received by the RFA Coordinator, identified above, by:*  **Date:** December 21, 2023, no later than 11:59 p.m., local time and must include **“RFA# 202311234 Questions”** in the subject line of the e-mail. |
| **Application Submission Deadline** | *Applications must be received by the Division of Procurement Services by:*  **Submission Deadline:** January 12, 2024, no later than 11:59 p.m., local time.  *Applications must be submitted electronically to*:[Proposals@maine.gov](mailto:Proposals@maine.gov)  and must include **“RFA# 202311234 Application Submission”** in the subject line of the e-mail. |

PUBLIC NOTICE

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**State of Maine**

**Department of Health and Human Services**

**RFA# 202311234**

**Washington County Expansion of Adult Residential Substance Use Disorder Treatment**

The State of Maine is seeking applications for Expansion of Adult Residential Substance Use Disorder Treatment within Washington County.

A copy of the RFA, as well as the Question & Answer Summary and all amendments related to the RFA, can be obtained at: <https://www.maine.gov/dafs/bbm/procurementservices/vendors/grants>.

An Information Meeting will be held on December 20, 2023, at 10:00 a.m.., local time at the following ZOOM Meeting Link: <https://mainestate.zoom.us/j/85470180571?pwd=NExaYW5FeWZkNXRWQXVPRVZIVG5XZz09>

using Meeting ID: 854 7018 0571, or by phone at 1-646-876-9923 using the Meeting ID provided.

Applications must be submitted to the State of Maine Division of Procurement Services, via e-mail, at: [Proposals@maine.gov](mailto:Proposals@maine.gov). Application submissions must be received no later than 11:59 p.m., local time, on January 12, 2024. Applications will be opened the following business day. Applications not submitted to the Division of Procurement Services’ aforementioned e-mail address by the aforementioned deadline will not be considered for contract award.

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**RFA TERMS/ACRONYMS with DEFINITIONS**

The following terms and acronyms, as referenced in the RFA, shall have the meanings indicated below:

|  |  |
| --- | --- |
| **Term/Acronym** | **Definition** |
| **Adult** | Individual, aged eighteen (18) years or older. |
| [**American Society of Addiction Medicine (ASAM)**](https://www.asam.org/) | A professional medical society representing physicians, clinicians, and associated professionals in the field of addiction medicine; dedicated to increasing access and improving the quality of addiction treatment, educating physicians and the public, supporting research and prevention, and promoting the appropriate role of physicians in the care of patients with addiction. |
| **ASAM Level of Care Criteria** | A collection of objective guidelines that give clinicians a way to standardize treatment planning and placement of patients in treatment, and how to provide continuing, integrated care and ongoing service planning. |
| **Consumer** | Adult seeking, engaged in, previously engaged in, or at high risk of requiring Residential Substance Use Disorder (SUD) Treatment. |
| **Department** | Department of Health and Human Services |
| **MaineCare** | Maine’s Medicaid program |
| **Medically Supervised Withdrawal Management** | A non-hospital residential withdrawal management program with support systems featuring availability of specialized clinical consultation and supervision for biomedical, emotional, or behavioral problems related to intoxication and withdrawal management. Medically Supervised Withdrawal Management is considered an ASAM Level 3.7 Level of Care. |
| **Medication Assisted Treatment (MAT)** | The use of medications in combination with counseling and behavioral therapies to provide a whole-patient approach to the treatment of SUDs. |
| **Residential SUD Treatment** | Treatment provided in a residential setting for individuals with a SUD. Residential SUD Treatment does not include services provided in conditions of involuntary confinement. |
| **RFA** | Request for Application |
| **State** | State of Maine |
| **Substance Use Disorder (SUD)** | Occurs when the recurrent use of alcohol and/or drugs causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home. |

**Details and Instructions**

## Application Purpose and Background

The Department of Health and Human Services (Department) is dedicated to promoting health, safety, resiliency, and opportunity to all Maine residents. The Department’s Office of Behavioral Health (OBH) is committed to supporting a complete and coordinated behavioral health continuum of care that serves the whole person, the whole community.

Maine is seeking to provide Adult Residential Substance Use Disorder (SUD) Treatment beds in Washington County. In 2022 and 2023, there were three (3) Department issued RFAs to expand Residential SUD Treatment services across the State. This RFA builds on that effort by providing a one-time funding opportunity, with a total cap of one hundred and fifty thousand dollars ($150,000) per new bed, to support the establishment of new or expanded Adult Residential SUD Treatment services in Washington County.

Funds will be extended to agencies who are establishing new beds or expanding their capacity. Vendors who applied for previous RFAs and/or were awarded as a result of the prior RFA(s) may apply for funding under this RFA, as long as the application is for creation of new beds in Washington County. Awarded funds may be utilized for costs associated with administering and delivering Adult Residential SUD Treatment services and items that are reasonable, allowable, and directly related to adding and/or expanding Adult Residential SUD Treatment beds. The funds may not be used on building or facility maintenance expenditures, recreational items, outdoor space, artwork, food, and/or any expenditure that is not deemed necessary to the creation and implementation of new beds.

Under this one-time funding opportunity, awarded Applicants will be required to bill MaineCare the maximum allowed rate for services provided. Awarded Applicants will also be required to provide matching funds of at least ten percent (10%) of the award value. Matching funds must be cash or liquid assets. Application project awards are expected to result in the establishment of services that do not require additional Department funds to maintain the gains made during the project period.

## General Provisions

1. From the time this RFA is issued until award notification is made, all contact with the State regarding this RFA must be made through the RFA Coordinator identified on the cover page of this RFA. No other person/State employee is empowered to make binding statements regarding this RFA. Violation of this provision may lead to disqualification from the application process, at the State’s discretion.
2. Issuance of the RFA does not commit the Department to issue an award or to pay expenses incurred by an Applicant in the preparation of a response to the RFA. This includes attendance at personal interviews or other meetings, where applicable.
3. All applications must adhere to the instructions and format requirements outlined in the RFA and all written supplements and amendments (such as the Summary of Questions and Answers), issued by the Department. Applications are to follow the format and respond to all questions and instructions specified in the “Submission Instructions” section of the RFA’s application.
4. The Applicant shall take careful note that in evaluating its application submitted in response to this RFA the Department will consider materials provided in the application and internal Departmental information of previous contract history, if any, with the Applicant. The Department also reserves the right to consider other reliable references and publicly available information in evaluating the Applicant’s experience and capabilities.
5. Following announcement of an award decision, all submissions in response to this RFA will be public records, available for public inspection pursuant to the State of Maine Freedom of Access Act (FOAA) ([1 M.R.S. § 401](http://www.mainelegislature.org/legis/statutes/1/title1sec401.html) et seq.).
6. The Department, at its sole discretion, reserves the right to recognize and waive minor informalities and irregularities found in applications received in response to the RFA.
7. All applicable laws, whether or not herein contained, shall be included by this reference. It shall be the Applicant’s responsibility to determine the applicability and requirements of any such laws and to abide by them.

## Eligibility to Submit Applications

In order to be eligible for grant funding under this RFA, Applicants must:

1. Have a current or forthcoming MaineCare Provider Agreement; and
2. Be licensed or have the ability to obtain licensure through the Department’s [Division of Licensing and Certification for Behavioral Health Services](https://www.maine.gov/dhhs/dlc/licensing-certification/behavioral-health) to provide Residential SUD Treatment.

## Awards

The Department anticipates making multiple awards as a result of this RFA process. The Department reserves the right to make partial awards, eliminate the lowest scoring application(s), and/or make awards at amounts less than requested, whichever is in the best interest of the State. Request for funding may not exceed the total cap of one hundred and fifty thousand dollars ($150,000) per new bed to support the establishment of new or expanded Adult Residential SUD Treatment services. Applications must include a minimum of ten percent (10%) matching funds. The Department may award all or some of the available funding.

The Department intends to apply priority scoring to applications designed to provide Medically Supervised Withdrawal Management beds to Adults. This does not exclude proposals for other types of Adult Residential SUD Treatment programs.

Any person aggrieved by the award decision that results from the RFA may appeal the decision to the Director of the Bureau of General Services in the manner prescribed in [5 M.R.S.A. § 1825-E](http://www.mainelegislature.org/legis/statutes/5/title5sec1825-E.html) and [18-554 Code of Maine Rules Chapter 120](https://www.maine.gov/dafs/bbm/procurementservices/policies-procedures/chapter-120).  The appeal must be in writing and filed with the Director of the Bureau of General Services, 9 State House Station, Augusta, Maine, 04333-0009 within fifteen (15) calendar days of receipt of notification of conditional contract award.

1. **Contract Terms**

The Department anticipates issuing a one-time funding award to Adult Residential SUD Treatment facilities in Washington County that serve MaineCare members for a contract period to begin as early as April 1, 2024. Contract periods may vary based on the Department’s ability to fully execute each contract.

The terms of the anticipated contract will be determined at the time of negotiations. It is expected that the contract structure will define and treat physical structure costs separately from staffing and tangible, movable property costs. When invoicing, one (1) time per month, proof of payment and receipts must be submitted in order to receive reimbursement.

**Priority Service**

1. **Priority Service**

Applicants who intend to provide Medically Supervised Withdrawal Management must identify:

How Medically Supervised Withdrawal Management will be provided within Washington County.

**Activities and Requirements**

1. **Project Workplan**
2. Applicants must provide a workplan that addresses, at a minimum, projected timelines for each project phase, as applicable to:
3. Program certifications and/or licensing;
4. Project design, including anticipated physical location, if available;
5. Site control;
6. Permits/approvals;
7. Construction;
8. Onboarding of any new staff;
9. Type of Adult residential programming that will be provided;
10. ASAM Level of Care Criteria applicable to proposed Adult residential programming;
11. Anticipated delivery date of new and/or expanded Adult services;
12. Number of Adult beds added;
13. Plans to fill beds; and
14. Plans to sustain program beyond the project period.
15. Awarded Applicants must provide an updated workplan to the Department, if/when changes are made to the timeline, within seven (7) calendar days of identification of a change, to ensure the Department is informed of the progress of the work to be performed.

**C. Operational Requirements**

Provide a brief outline of the procedures and standards for staff providing Adult Residential SUD Treatment, including:

1. Hiring;
2. Retention;
3. Supervision; and
4. Training, including confidentiality.
5. Provide the anticipated physical location, hours of operation, and the number of potential Consumers to be served based on the anticipated number of beds to be created, stratified by health insurance payer type, including MaineCare.
6. Provide Adult Residential SUD Treatment services to MaineCare recipients for at least three (3) years after the first date of bed availability, pursuant to the terms of the resulting contract.
7. **Programmatic Requirements**
8. **Program Requirements**
   1. Describe the services to be offered and the Adult Residential SUD Treatment regimen, including evidence that supports its alignment with applicable American Society of Addiction Medicine (ASAM) criteria.
   2. Describe what evidence-based practice(s) will be used within the Adult Residential SUD Treatment regimen, research that justifies the chosen evidence-based practice with the population of focus, and how fidelity of the evidence-based practice will be monitored.
   3. Describe how Consumers will be recruited, engaged, and retained in services, including policies and practices to support accessing and successfully completing Adult Residential SUD Treatment services.
   4. Describe the Applicant’s experience in collaborating and coordinating with other community service agencies within the continuum of care.
      1. Ensure coordination includes continuum of care services after treatment, including but not limited to local recovery centers, hypodermic apparatus exchange programs, and recovery residences.
   5. Describe how the Applicant will collaborate with agencies and other stakeholders to support Consumers pre- and post-discharge and plans for continuing to engage Consumers moving to the recovery community.
   6. Describe how services will be brought to scale and will be sustainable without additional support from the Department.
      1. Include a prospective timeline indicating how revenue is expected to grow and displace the awarded funds after the project period.
   7. Ensure that if a Consumer requires or requests Medication Assisted Treatment (MAT), it is offered on-site, or the Consumer is provided access to MAT off-site.
9. **Equity and Consumer Engagement**
   1. Provide data specific to the population of focus, information on service gaps in Washington County, and what instruments or procedures were used for the collection of data.
   2. Describe how the project will monitor utilization and outcomes of services and how the Applicant will adapt approaches as necessary to improve utilization and outcomes.
   3. Describe efforts to engage Consumers experiencing SUD in governance, leadership, and direct service staffing.
   4. Explain any active or outstanding complaints or issues with relevant credentialing bodies against the Applicant, its leadership, or governance, and active or outstanding complaints or issues with the [Maine Human Rights Commission](https://www.maine.gov/mhrc/), which has occurred within the past four (4) years.

**Allowable and Non-Allowable Use of Funds**

1. Awarded funds may be utilized for costs associated with administering and delivering Adult Residential SUD Treatment services and items that are reasonable, allowable, and directly related to adding and/or expanding Adult Residential SUD Treatment beds.
2. Describe the proposed project and how allowable use of funding will meet the requirements outlined in the RFA, refer to **Table 1**.

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| **Table 1** | | |
| 1. Allowable physical structure costs include, but are not necessarily limited to: | | |
|  | Pre-construction | * Site costs * Permitting and bidding * Construction, acquisition, and renovations |
|  | Exterior | * Siding and accessories * Replacement windows * Doors * Roofing |
|  | Interior | * Room additions and partitions * Demolition and disposal * Framing and ceilings * Painting and sheetrock * Flooring and carpeting * Systems (HVAC, electrical, plumbing, heat pumps) * Facility Safety Equipment (sprinkler system, security cameras/system, safety devices) |
| 1. Allowable staffing and tangible, movable property expenses include, but are not necessarily limited to: | | |
|  | Staffing | * Staff training, salary, and professional development (limited to initial three (3) months) |
|  | Equipment | * Bedroom Furniture (beds, dressers, lamps/lighting) * Bedroom Linens (bedding, sheets, pillows) * Staff furniture (desk, desk chairs) * Storage (medication, records) * Laundry appliances (washer, dryer) * Common area furniture (couch, chairs, side tables, coffee table) * Kitchen appliances and items (stove, refrigerator, dishwasher, pots, pans, utensils) * Patient and staff computers |

1. Funds shall not be used:
   1. On building or facility maintenance expenditures, recreational items, or outdoor space;
   2. For décor, artwork, televisions, entertainment systems, recreation items, or food;
   3. For staff bonuses and/or raises; or
   4. Any expenditure that is not deemed necessary to the creation and implementation of new Adult Residential SUD Treatment beds as determined by the Department.

**Key Process Events**

1. **Informational Meeting**

The Department will sponsor an Informational Meeting concerning the RFA beginning at the date, time and location shown on the RFA cover page. The purpose of the Informational Meeting is to answer and/or field questions, clarify for potential Bidders any aspect of the RFA requirements that may be necessary and provide supplemental information to assist potential Bidders in submitting responses to the RFA. Although attendance at the Informational Meeting is not mandatory, it is strongly encouraged that interested Bidders attend.

## Submitting Questions about the Request for Application

Any questions must be submitted by e-mail and received by the RFA Coordinator identified on the cover page of this RFA, as soon as possible but no later than the date and time specified on the RFA cover page. Applicants should utilize **Appendix D** (Submitted Questions Form) for submission of questions. Submitted Questions emails must include the subject line: “RFA# 202311234 Questions”. The Department assumes no liability for assuring accurate/complete/on time e-mail transmission and receipt.

**Question & Answer Summary:** Responses to all questions will be compiled in writing and posted on the State’s Division of Procurement Services [Grant RFPs and RFAs](https://www.maine.gov/dafs/bbm/procurementservices/vendors/grants) website. It is the responsibility of all interested parties to go to this website to obtain a copy of the Question & Answer Summary. Only those answers issued in writing on this website will be considered binding.

## Amendments to the Request for Application

All amendments released in regard to this RFA will be posted on the Division of Procurement Services [Grant RFPs and RFAs](https://www.maine.gov/dafs/bbm/procurementservices/vendors/grants) website. It is the responsibility of all interested parties to go to this website to obtain amendments. Only those amendments posted on this website are considered binding.

## Submitting the Application

* 1. **Applications Due:** Applications must be received no later than 11:59 p.m. local time, on the date listed on the cover page of the RFA.
     1. Any e-mails containing original application submissions or any additional or revised application files, received after the 11:59 p.m. deadline, will be rejected without exception.

1. **Submission Instructions:** Applications are to be submitted electronically to the State’s Division of Procurement services at [proposals@maine.gov](mailto:proposals@maine.gov).
   1. Only applications received by e-mail will be considered. The Department assumes no liability for assuring accurate/complete e-mail transmission and receipt.

Proposal submission e-mails that are successfully received by the [proposals@maine.gov](mailto:proposals@maine.gov) inbox will receive an automatic reply stating as such.

* 1. E-mails containing links to file sharing sites or online file repositories will not be accepted as submissions. Only e-mail applications that have the requested files attached will be accepted.
  2. Encrypted e-mails received which require opening attachments and logging into a proprietary system will not be accepted as submissions. It is the Applicant’s responsibility to check with its organization’s information technology team to ensure that security settings will not encrypt its application submission.
  3. File size limits are 25MB per e-mail. Applicants may submit files across multiple e-mails, as necessary, due to file size concerns. All e-mails and files must be received by the due date and time listed above.
  4. Applicants are to insert the following into the subject line of their e-mail submission: “**RFA# 202311234 Application Submission – [Applicant’s Name]**”.
  5. Applications are to be submitted as a single, typed, WORD and Excel file, as applicable, and must include all related documents identified on **Appendix C** (Application Form). Applicants are not to provide additional attachments beyond those specified in the RFA for the purpose of extending their response. Materials not requested will not be considered part of the application and will not be evaluated.

**Application Evaluation and Selection**

1. **Scoring Weights:** The score will be based on a 100-point scale and will measure the degree to which each application meets the following criteria. Only complete applications will be reviewed and considered for award.

|  |  |
| --- | --- |
| **Scoring Criteria** | **Points Available** |
| Part I – Eligibility | Pass/Fail |
| Part II – Priority Service | **20** |
| Part III – Response to RFA Requirements | **50** |
| Part IV – Budget Form and Narrative | **30** |
| **Total Points** | **100 points** |

1. **Scoring Process:** The Grant Review Team will use a consensus approach to evaluate and score all sections listed above. Members of the review team will not score those sections individually but, instead, will arrive at a consensus as to assignment of points for each of those sections.

The Department intends to apply priority scoring to applications designed to provide Medically Supervised Withdrawal Management beds.

Failure to respond to all questions and instructions throughout the RFA may result in the application being disqualified as non-responsive or receiving a reduced score. The Department, and its evaluation team, has sole discretion to determine whether a variance from the RFA specifications will result either in disqualification or reduction in scoring of a proposal.

Regarding the Cost Proposal, the Grant Review Team will consider whether the project work and cost estimates (tasks & budget) are reasonable for the expected outcomes, along with the amount and quality of proposed matching funds or services. Request for funding may not exceed the total cap of one hundred and fifty thousand dollars ($150,000) per new bed which support the establishment of new or expanded Adult Residential SUD Treatment services and must include a minimum of ten percent (10%) match funds.

1. **Selection and Award:** Notification of selection or non-selection will be made in writing by the Department. Issuance of this RFA in no way constitutes a commitment by the State to award a contract, to pay costs incurred in the preparation of a response to the RFA, or to pay costs incurred in procuring or contracting for services, supplies, physical space, personnel, or any other costs incurred by the Applicant.

The Department will consider all application funding requests, including exceptions to the maximum funding amount, on a case-by-case basis. The Department reserves the right to approve or deny any funding requests, including approval of any application at an amount lower than requested by the Applicant.

Applicants awarded through this RFA process will be required to submit, prior to the contract execution, a valid certificate of insurance on a standard ACORD form (or the equivalent) evidencing the awarded Applicant’s general liability, professional liability and any other relevant liability insurance policies that might be associated with the services provided as a result of this RFA.

**APPENDIX A**

**RFA# 202311234**

**Washington County**

**Expansion of Adult Residential Substance Use Disorder Treatment**

**GRANT FUNDING APPLICATION – COVER PAGE**

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| --- | --- | --- | --- | --- | --- |
| **Applicant’s Organization Name:** | |  | | | |
| **Vendor Customer Code:**  (for current State of Maine vendors) | | | VC | | |
| **Chief Executive - Name/Title:** | |  | | | |
| **Tel:** |  | | | **E-mail:** |  |
| **Headquarters Street Address:** | |  | | | |
| **Headquarters City/State/Zip:** | |  | | | |
| ***(Provide information requested below if different from above)*** | | | | | |
| **Lead Point of Contact for Application - Name/Title:** | | | |  | |
| **Tel:** |  | | | **E-mail:** |  |
| **Street Address:** | |  | | | |
| **City/State/Zip:** | |  | | | |

* This Application and the pricing structure contained herein will remain firm for a period of 180 days from the date and time of the bid opening.
* No personnel currently employed by the Department or any other State agency participated, either directly or indirectly, in any activities relating to the preparation of the Applicant’s Application.
* No attempt has been made, or will be made, by the Applicant to induce any other person or firm to submit or not to submit an Application.
* The above-named organization is the legal entity entering into the resulting contract with the Department should they be awarded the contract.
* The undersigned is authorized to enter contractual obligations on behalf of the above-named organization.

*To the best of my knowledge, all information provided in the enclosed application, both programmatic and financial, is complete and accurate at the time of submission.*

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| **Name (Print):** | **Title:** |
| **Authorized Signature:** | **Date:** |

**APPENDIX B**

**RFA# 202311234**

**Washington County**

**Expansion of Adult Residential Substance Use Disorder Treatment**

**DEBARMENT, PERFORMANCE, and NON-COLLUSION CERTIFICATION**

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| --- | --- |
| **Vendor’s Organization Name:** |  |

*By signing this document, I certify to the best of my knowledge and belief that the aforementioned organization, its principals and any subcontractors named in this application:*

1. *Are not presently debarred, suspended, proposed for debarment, and declared ineligible or voluntarily excluded from bidding or working on contracts issued by any governmental agency.*
2. *Have not within three years of submitting the application for this contract been convicted of or had a civil judgment rendered against them for:*
   1. *Fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a federal, state, or local government transaction or contract.*
   2. *Violating Federal or State antitrust statutes or committing embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.*
3. *Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (b) of this certification.*
4. *Have not within a three (3) year period preceding this application had one or more federal, state, or local government transactions terminated for cause or default*.
5. *Have not entered into a prior understanding, agreement, or connection with any corporation, firm, or person submitting a response for the same materials, supplies, equipment, or services and this application is in all respects fair and without collusion or fraud. The above-mentioned entities understand and agree that collusive bidding is a violation of state and federal law and can result in fines, prison sentences, and civil damage awards.*

|  |  |
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| **Name (Print):** | **Title:** |
| **Authorized Signature:** | **Date:** |

**APPENDIX C**

**RFA# 202311234**

**Washington County**

**Expansion of Adult Residential Substance Use Disorder Treatment**

## APPLICATION FORM

## The application may be obtained in a Word (.docx) format by double clicking on the document icon below.



**APPENDIX D**

**RFA# 202311234**

**Washington County**

**Expansion of Adult Residential Substance Use Disorder Treatment**

**SUBMITTED QUESTIONS FORM**

This form should be used by Bidders when submitting written questions to the RFA Coordinator as defined in Part III of the RFA.

If a question is not related to any section of the RFA, enter “N/A” under the RFA Section & Page Number. Add additional rows as necessary. Submit this document in WORD format, not PDF.

|  |  |
| --- | --- |
| **Organization Name:** |  |

|  |  |
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| **RFA Section & Page Number** | **Question** |
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