



**STATE OF WASHINGTON
HEALTH CARE AUTHORITY**

REQUEST FOR QUALIFICATIONS (RFQ)

RFQ NO. 2021HCA44

NOTE: *If you download this RFQ from any source other than the Washington Electronic Business Solution (WEBS), you are responsible for registering in WEBS in order for your organization to receive any RFQ amendments or bidder questions/agency answers. HCA is not responsible for any failure of your organization to register in WEBS or any other repercussions that may result to your organization because of this failure. If you need additional assistance, please contact WEBS Customer Service at webcustomerservice@des.wa.gov.*

PROJECT TITLES:

- **Contract A: SUD/SMI Recovery Advocacy Training and a One-Day SUD/SMI Recovery Event**
- **Contract B: SUD/SMI Lived Experience Speaker Program**

PROPOSAL DUE DATE: January 18, 2022, by 2:00 pm *Pacific Standard Time or Pacific Daylight Time*, Olympia, Washington, USA.

Up to two (2) contracts will be awarded, Contract A and Contract B. Bidders may submit one proposal for either contract, or two proposals, one for each type of contract. Each proposal must be submitted as a single all-inclusive document.

ESTIMATED TIME PERIOD FOR CONTRACT:

Contract A

- Year 1: 02-10-2022 to 09-30-2022
- Year 2: 02-10-2022 to 09-30-2023

Note – Contract A will initially be for the Year 1 period. Upon approval of funding for Year 2, HCA may extend Contract A additional time, as specified, for Year 2.

Contract B

- 02-10-2022 to 02-28-2023

The Health Care Authority reserves the right to extend the contracts for through 2025 at the sole discretion of the Health Care Authority.

BIDDER ELIGIBILITY: This procurement is open to those Bidders that satisfy the minimum qualifications stated herein and that are available for work in Washington State.

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1. INTRODUCTION

1.1. PURPOSE AND BACKGROUND

The Washington State Health Care Authority, hereafter called “HCA,” is initiating this Request for Qualifications (RFQ) to solicit proposals from firms interested in leading one or both of the following projects:

- Contract A: Recovery advocacy training in a virtual or in-person format and a one-day substance use and mental health recovery event including, but not limited to: building skills on telling one’s story, legislative and media advocacy, public speaking, encouragement, and motivation.
- Contract B: Training to adults in various stages of SUD and SUD/SMI behavioral health recovery to become leaders and participants in community recovery and education efforts.

Considering the current public health crisis, HCA understands and expects that mostly virtual options may be proposed. However, for both contracts, HCA also understands that some communities and populations have limited access to technology and virtual platforms, and might only be served or reachable if the format is in person.

HCA intends to award two (2) contract(s) to provide the services described in this RFQ.

1.2. OBJECTIVES AND SCOPE OF WORK

HCA desires to enter into contracts according to deliverables included in the Statement(s) of Work included in the following Exhibits:

Contract	Description	Work	Target Audience	Statement of Work
A	Recovery Advocacy Training	Provide four (4) to six (6) trainings per year period	Adults in recovery from SUD or SUD/SMI challenges	Exhibit A
	All-Day Recovery Event	Host a one-day event per year period		
B	Lived Experience Speaker Program	Create a pool of speakers and facilitate speaking events	Adults in recovery from SUD or SUD/SMI challenges AND People who have already taken the recovery advocacy training	Exhibit B

1.3. FUNDING

The Contracts resulting from this RFQ are funded through Federal SAMHSA funds provided by the Mental Health Block Grant (MHBG) and the Substance Abuse Block Grant (SABG) in the amounts indicated below:

Contract	Services	Funding Source	Maximum Funding (up to)
A	Recovery Advocacy Training	MHBG	\$40,000
	One-Day Recovery Event	SABG	\$43,000
	Sub-Total for Contract A, Year 1		\$83,000
	Recovery Advocacy Training	MHBG	\$40,000
	One-Day Recovery Event	SABG	\$43,000
	Sub-Total for Contract A, Year 2		\$83,000
	Total for Contract A, Years 1 and 2		\$166,000
B	Lived Experience Training	SABG	\$91,000
Total for Contract B		\$91,000	

Any contract(s) awarded as a result of this procurement is contingent upon the availability of funding. HCA may provide additional funding or de-obligate unused funds, if it is deemed by HCA, in its sole discretion, to be in HCA's best interest relative to the overall purpose and objective as stated herein.

1.4. FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT

If the resulting contract is supported by federal funds, such contract may require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how federal funds are spent.

To comply with the act and be eligible to enter into this contract, the Apparent Successful Bidder's organization must have a Data Universal Numbering System (DUNS®) number. A DUNS® number provides a method to verify data about your organization. If the organization does not already have one, it may receive a DUNS® number free of charge by contacting Dun and Bradstreet at www.dnb.com.

The Apparent Successful Bidder will be required to complete a Federal Funding Accountability and Transparency Act (FFATA) Data Collection Form which must be returned with the signed contract. If applicable, the contract will not be executed until this form has been properly completed, executed, and received by the agency.

Required information about the contracting organization and this contract will be made available on USASpending.gov by the Washington State Health Care Authority as required by P.L. 109-282. As a tool to provide the information, HCA encourages registration with the Central Contractor Registry (CCR) because less data entry and re-entry is required on behalf of both HCA and the contracting organization. Registration can be done with CCR online at <https://www.uscontractorregistration.com/>.

1.5. PERIOD OF PERFORMANCE

The period of performance of any contract resulting from this RFQ is tentatively scheduled as follows:

Contract	Start Date	End Date, Year 1	End Date, Year 2
A	February 10, 2022	September 30, 2022	September 30, 2023
B	February 10, 2022	February 28, 2023	

Amendments extending the period of performance, if any, will be at the sole discretion of HCA.

HCA reserves the right to extend the contract through June 30, 2025.

1.6. CONTRACTING WITH CURRENT OR FORMER STATE EMPLOYEES

Specific restrictions apply to contracting with current or former state employees pursuant to chapter 42.52 of the Revised Code of Washington. Bidders should familiarize themselves with the requirements prior to submitting a proposal that includes current or former state employees.

1.7. DEFINITIONS

Definitions for the purposes of this RFQ include:

“ACH” or “Accountable Community of Health” means the regional entity contracted with the Health Care Authority to improve Medicaid Health Outcomes through specific projects.

“ASB” or “Apparent Successful Bidder” means the bidder selected as the entity to perform the anticipated services, subject to completion of contract negotiations and execution of a written contract.

“BH-ASO” or “Behavioral Health Administrative Service Organization” means an organization funding non-Medicaid services and certain other programs in a region.

“Behavioral Health Peers” mean adults with lived experience in behavioral health services.

“BIPOC” means “Black, Indigenous, and People of Color”

“Bidder” means the individual or company interested in the RFQ that submits a proposal in order to attain a contract with the Health Care Authority.

“COD” or “Co-occurring Disorder” means a disorder with characteristics of mental health concerns and SUD.

“Contract A” or “Contractor A” means the agreement between HCA and the Apparent Successful Bidder (ASB) to carry out virtual trainings and a one-day recovery event.

“Contract B” or “Contractor B” means the agreement between HCA and the Apparent Successful Bidder (ASB) to carry out lived experiences trainings and speaking events.

“DBHR” or “Division of Behavioral Health and Recovery” means the HCA-designated state mental health authority to administer the state and Medicaid funded mental health programs authorized by RCW chapters 71.05, 71.24, and 71.3. “Elevate Recovery” means the

trainings developed and presented carried out by the Contractor as described in this Contract.

“LGBTQ+” means “Lesbian, Gay, Bisexual, Transgender, Queer and Intersexed” community

“Lived Experience” means personal knowledge about the world gained through direct, first-hand involvement in everyday events rather than through representations constructed by other people. For the purposes of this RFQ, the definition also includes Substance Use Disorder, recovery and related topics.

“HCA” means the Health Care Authority, an executive agency of the state of Washington that is issuing this RFQ.

“Proposal” means a formal offer submitted in response to this solicitation.

“Regional Advocacy Collaborative” means a group of behavioral health peers working toward improvement in services and recovery.

“RFQ” or “Request for Qualifications” means formal procurement document in which a service or need is identified and firms are invited to provide their qualifications to provide the services and their hourly rates.

“Requesting Organization” means Organizations could include, but are not limited to recovery organizations, Tribes, legislature, peer organizations, or HCA.

“SAMHSA” or “Substance Abuse Mental Health Services Administration” means an agency with the US Department of Health and Human Services

“SMI” or “Serious Mental Illness” means to an individual with a serious mental illness as defined by 58 Federal Regulation 29422-29425

“Story” means an individual’s experience in living with behavioral health challenges and growing toward recovery.

“SUD” or “Substance Use Disorder” means a disorder characterized by misuse of alcohol or illicit drugs.

1.8. ADA

HCA complies with the Americans with Disabilities Act (ADA). Bidders may contact the RFQ Coordinator to receive this Request for Qualifications in Braille or on tape.

2. GENERAL INFORMATION FOR BIDDERS

2.1. RFQ COORDINATOR

The RFQ Coordinator is the sole point of contact in HCA for this procurement. All communication between the Bidder and HCA upon release of this RFQ must be with the RFQ Coordinator, as follows:

Name	Heidi Jones
E-Mail Address	HCAProcurements@hca.wa.gov
Email Subject Line	"RFQ 2021HCA44 – Heidi Jones – [Bidder Name]"

Any other communication will be considered unofficial and non-binding on HCA. Bidders are to rely on written statements issued by the RFQ Coordinator. Communication directed to parties other than the RFQ Coordinator may result in disqualification of the Bidder.

2.2. ESTIMATED SCHEDULE OF PROCUREMENT ACTIVITIES

Bidders are required to register as a vendor in Washington's Electronic Business Solution (WEBS) site, at <https://fortress.wa.gov/ga/webs/>. Once registered you will be provided access to download a copy of this RFQ document and view any Amendments issued by HCA, which may modify the terms of this RFQ.

HCA reserves the right to revise the schedule below.

Issue Request for Qualifications	December 20, 2021
Questions Due	January 4, 2022, 5:00 pm
Answers Posted	January 7, 2022
Proposals Due	January 18, 2022 2:00 pm
Evaluate Proposals	January 19 – 31, 2022
Announce "Apparent Successful Bidder" and send notification via e-mail to unsuccessful Bidders	February 1, 2022
Bidder Debrief Request Due	February 4, 2022
Hold Debriefing Conferences (if requested)	February 9, 2022
Estimated Contract Start Date	February 10, 2022

2.3. BIDDER QUESTIONS PERIOD

Bidders are provided an opportunity to ask questions during the bidder question period which starts on the date of the RFQ posting and concludes on the *Questions Due* date specified in section 2.2, *Estimated Schedule of Procurement Activities*.

2.3.1. Questions regarding the RFQ will only be accepted in writing, sent by email to the RFQ Coordinator. The Bidder must use the following email subject line when submitting questions: "RFQ 2021HCA44 Question(s) – Heidi Jones - [Bidder Name]" to ensure timely receipt.

2.3.2. HCA anticipates it will post answers to the questions in WEBS as an RFQ amendment on the

Answers Posted date specified in section 2.2, *Estimated Schedule of Procurement Activities*.

- 2.3.3. HCA is under no obligation to respond to any questions received after the Questions Due date, but may do so at its discretion.

2.4. SUBMISSION OF PROPOSALS

The proposal must be received by the RFQ Coordinator no later than the Proposal Due deadline in Section 2.2, *Estimated Schedule of Procurement Activities*.

- 2.4.1. Each proposal, for Contract A and Contract B, if applying for both, each contract must be submitted electronically as a single attachment, with all documents in the order indicated in this RFQ, either in Word or Adobe pdf format. Zipped files cannot be received by HCA and cannot be used for submission of proposals.
- 2.4.2. Attach proposal to an e-mail to the RFQ Coordinator, Heidi Jones at HCAProcurements@hca.wa.gov.
- 2.4.3. The e-mail subject line must begin with: "RFQ 2021HCA44 – Heidi Jones"
- 2.4.4. Any forms or attachments which require signature and are submitted with the proposal must be signed by the individual within the organization authorized to bind the Bidder to the offer, and must be in the order specified in Section 4, Proposal Contents. HCA accepts both scanned and electronic signatures.
- 2.4.5. HCA does not assume responsibility for problems with Bidder's e-mail. If HCA e-mail is not working, appropriate allowances will be made.

Proposals may not be transmitted using facsimile transmission.

Bidders should allow sufficient time to ensure timely receipt of the proposal by the RFQ Coordinator. Late proposals will not be accepted and will be automatically disqualified from further consideration, unless HCA e-mail is found to be at fault. All proposals and any accompanying documentation become the property of HCA and will not be returned.

2.5. PROPRIETARY INFORMATION / PUBLIC DISCLOSURE

Proposals submitted in response to this competitive procurement will become the property of HCA. All proposals received will remain confidential until the Apparent Successful Bidder is announced; thereafter, the proposals will be deemed public records as defined in chapter 42.56 of the Revised Code of Washington (RCW).

Any information in the proposal that the Bidder desires to claim as proprietary and exempt from disclosure under the provisions of chapter 42.56 RCW, or other state or federal law that provides for the nondisclosure of your document, must be clearly designated. The information must be clearly identified and the particular exemption from disclosure upon which the Bidder is making the claim must be cited. Each page containing the information claimed to be exempt from disclosure must be clearly identified by the words "Proprietary Information" printed on the lower right hand corner of the page. Marking the entire proposal exempt from disclosure or as Proprietary Information will not be honored.

If a public records request is made for the information that the Bidder has marked as "Proprietary Information," HCA will notify the Bidder of the request and of the date that the records will be released to the requester unless the Bidder obtains a court order enjoining that disclosure. If the Bidder fails to

obtain the court order enjoining disclosure, HCA will release the requested information on the date specified. If a Bidder obtains a court order from a court of competent jurisdiction enjoining disclosure pursuant to chapter 42.56 RCW, or other state or federal law that provides for nondisclosure, HCA will maintain the confidentiality of the Bidder's information per the court order.

A charge will be made for copying and shipping, as outlined in RCW 42.56. No fee will be charged for inspection of contract files, but 24 hours' notice to the RFQ Coordinator is required. All requests for information should be directed to the RFQ Coordinator.

2.6. REVISIONS TO THE RFQ

In the event it becomes necessary to revise any part of this RFQ, amendments will be published on Washington's Electronic Bid System (WEBS), <https://fortress.wa.gov/ga/webs/>, and HCA's website, <https://www.hca.wa.gov/about-hca/bids-and-contracts>. For this purpose, the published questions and answers and any other pertinent information will be provided as an amendment to the RFQ and will be placed on the WEBS website and HCA's website.

HCA also reserves the right to cancel or to reissue the RFQ in whole or in part, prior to execution of a contract.

2.7. DIVERSE BUSINESS INCLUSION PLAN

Bidders must include a completed Attachment 3, *Diverse Business Inclusion Plan*, with their proposal, even if the organization does not have a plan in place, and/or answers "No" to the questions in the attachment. In accordance with legislative findings and policies set forth in RCW 39.19, the state of Washington encourages participation in all contracts by firms certified by the Office of Minority and Women's Business Enterprises (OMWBE), set forth in RCW 43.60A.200 for firms certified by the Washington State Department of Veterans Affairs, and set forth in RCW 39.26.005 for firms that are Washington Small Businesses. Participation may be either on a direct basis or on a subcontractor basis. However, no preference on the basis of participation is included in the evaluation of Diverse Business Inclusion Plans submitted, and no minimum level of minority- and women-owned business enterprise, Washington Small Business, or Washington State certified Veteran Business participation is required as a condition for receiving an award. Any affirmative action requirements set forth in any federal Governmental Rules included or referenced in the contract documents will apply.

2.8. ACCEPTANCE PERIOD

Proposals must provide three (3) calendar days for acceptance by HCA from the due date for receipt of proposals.

2.9. COMPLAINT PROCESS

The complaint process allows Bidders to focus on the solicitation requirements and evaluation process and raise issues early enough in the process to allow HCA to correct a problem before proposals are submitted. The complaint period starts on the date of the RFQ posting and concludes on the Complaints Due date specified in section 2.2, *Estimated Schedule of Procurement Activities*.

2.9.1. Bidders may submit a complaint to HCA based on any of the following:

- 2.9.1.1. The RFQ unnecessarily restricts competition;
- 2.9.1.2. The RFQ evaluation or scoring process is unfair or unclear; or
- 2.9.1.3. The RFQ requirements are inadequate or insufficient to prepare a response.

- 2.9.2. A complaint must be submitted to HCA up to five Business Days before the bid response deadline. The complaint must:
- 2.9.2.1. Be in writing;
 - 2.9.2.2. Be sent to the RFQ Coordinator, or designee;
 - 2.9.2.3. Clearly articulate the basis for the complaint; and
 - 2.9.2.4. Include a proposed remedy.
- 2.9.3. HCA will address any complaint as follows:
- 2.9.3.1. The RFQ Coordinator, or designee will respond to the complaint in writing.
 - 2.9.3.2. The response to the complaint and any changes to the RFQ will be posted on WEBS.
 - 2.9.3.3. The Director of HCA will be notified of all complaints and will be provided a copy of HCA's response.

Complaints may not be raised again during a protest and HCA's action or inaction in response to a complaint will be final. There is no appeal process.

2.10. RESPONSIVENESS

All proposals will be reviewed by the RFQ Coordinator to determine compliance with administrative requirements and instructions specified in this RFQ. The Bidder is specifically notified that failure to comply with any part of the RFQ may result in rejection of the proposal as non-responsive. HCA also reserves the right at its sole discretion to waive minor administrative irregularities.

2.11. MOST FAVORABLE TERMS

HCA reserves the right to make an award without further discussion of the proposal submitted. Therefore, the proposal should be submitted initially on the most favorable terms which the Bidder can propose. HCA does reserve the right to contact a Bidder for clarification of its proposal.

HCA also reserves the right to use a Best and Final Offer (BAFO) before awarding any contract to further assist in determining the ASB(s).

The Apparent Successful Bidder should be prepared to accept this RFQ for incorporation into a contract resulting from this RFQ. The contract resulting from this RFQ will incorporate some, or all, of the Bidder's proposal. The proposal will become a part of the official procurement file on this matter without obligation to HCA.

2.12. CONTRACT STATEMENT OF WORK

The ASB will be expected to enter into a contract which includes substantially the same Statement of Work as the sample Statement of Work as provided in Exhibit A, *Statement of Work, Contract A* and Exhibit B, *Statement of Work Contract B*. HCA will not accept any draft contracts or Statement(s) of Work prepared by any Bidder. The Bidder must be prepared to agree to all terms of the Statement of Work as presented or the Proposal may be rejected. Bidders must include a copy of the Statement of Work with their proposals that includes redline edits documenting the changes they propose to be made if selected as ASB. If the Bidder fails to identify an objection to any particular term or condition, the term or condition will be deemed agreed to by the Bidder. HCA will review requested exceptions and accept or reject the same at its sole discretion.

If, after the announcement of the ASB, and after a reasonable period of time, the ASB and HCA cannot reach agreement on acceptable terms for the Contract, HCA may cancel the selection and Award the Contract to the next most qualified Bidder.

2.13. COSTS TO PROPOSE

HCA will not be liable for any costs incurred by the Bidder in preparation of a proposal submitted in response to this RFQ, in conduct of a presentation, or any other activities related to responding to this RFQ.

2.14. RECEIPT OF INSUFFICIENT NUMBER OF PROPOSALS

If HCA receives only one responsive proposal as a result of this RFQ, HCA reserves the right to either: 1) directly negotiate and contract with the Bidder; or 2) not award any contract at all. HCA may continue to have the bidder complete the entire RFQ process. HCA is under no obligation to tell the Bidder if it is the only Bidder.

2.15. NO OBLIGATION TO CONTRACT

This RFQ does not obligate the state of Washington or HCA to contract for services specified herein.

2.16. REJECTION OF PROPOSALS

HCA reserves the right, at its sole discretion, to reject any and all proposals received without penalty and not to issue a contract as a result of this RFQ.

2.17. COMMITMENT OF FUNDS

The Director of HCA or his/her delegate is the only individual who may legally commit HCA to the expenditures of funds for a contract resulting from this RFQ. No cost chargeable to the proposed contract may be incurred before receipt of a fully executed contract.

2.18. ELECTRONIC PAYMENT

The state of Washington prefers to utilize electronic payment in its transactions. The ASB will need to be registered as a Statewide Vendor with the Statewide Payee Desk at <https://ofm.wa.gov/it-systems/statewide-vendorpayee-services/receiving-payment-state>.

3. PROPOSAL CONTENTS

Proposals must be submitted electronically to the RFQ Coordinator **in the order noted below**, combined into one (1) single Word document or pdf.

Items marked “mandatory” must be completed in the order presented and included as part of the proposal for the proposal to be considered responsive: however, these items are not scored. Items marked “scored” are those that are awarded points as part of the evaluation conducted by the evaluation team.

If Bidder is submitting a proposal for both contracts, all pages for Contract A must be found solely in the single document for Contract A, likewise for Contract B. Documents, attachments and exhibits must not be sent once for both contract types.

MANDATORY - Not Scored:

All fields in all of the following documents must be completed and signed, if applicable. Incomplete and/or unsigned forms may impact the overall score or could disqualify Bidders.

1. Attachment 1, Bidder Intake Form (completed)
2. Attachment 2, Certifications and Assurances (completed and signed)
3. Attachment 3, Diverse Business Inclusion Plan (completed)
4. Attachment 4, Vaccine Requirements

MANDATORY – Scored:

5. Narrative for Contract A Requirements (6 required sections)

OR

6. Narrative for Contract B Requirements (9 required sections)

AND

7. Attachment 5, Contractor Certification of Compliance with Executive Order 18-03, Worker's Rights (completed and signed)

OPTIONAL – Not Scored, But Considered:

8. Redline version of Statement of Work
9. OMWBE Certification (Section 3.3)

3.1. PRE-SCREENING

Contracts staff will perform a preliminary review of proposal packets. Depending on how many proposals are received, some may be eliminated prior to the evaluation stage. The following are criteria for a proposal to move forward to evaluation:

- RFQ Packet is in the order listed in this section, and all in one single document (Word or Adobe pdf)
- All forms filled out completely
- Packet received by the deadline
- Have you provided SUD or SUD/SMI related training to adults in the past?

3.2. QUALIFICATIONS SECTION (SCORED)

The qualifications section of the proposal must contain information that will demonstrate to the evaluation committee the Bidder's understanding of the types of services proposed, the firm's ability to accomplish them, and the ability to meet tight timeframes.

The required qualifications for each contract are outlined below along with their associated maximum score. Bidders must provide documentation supporting each of the required qualifications which will be evaluated and scored by the Evaluation Team. The proposal must demonstrate to the evaluation committee the Bidder's understanding of the types of services proposed, their ability to accomplish them, and the ability to meet tight deadlines.

Bidders must indicate which body of work they are submitting the proposal for, Contract A or Contract B. If submitting for both contract types the Bidder must submit two separate proposals, one for each contract type. All pages for each proposal must be submitted in entirety using one (1) unique and distinct document (Word or pdf) to consolidate all information needed for the proposal. If submitting a proposal for both Contract A and Contract B, both application documents must be complete. HCA will not consider one form to be used for both proposals, and proposals involving multiple attachments will receive lower scores, or could be screened out during the initial review process.

Contract A: Coordination and Facilitation of Recovery Advocacy Training and One-Day Recovery Training Event

#	Requirement	Maximum Possible Score
1	<p>Connection to People with Lived Experience – Describe how the organization interacts and partners with adults with Lived Experience with SUD or SUD/SMI challenges, to include, but not limited to, the following topics:</p> <ul style="list-style-type: none"> • Outreach • Work in recovery centers • Peer work • Training • Understanding of lived experience (working closely with people, or their own) • Experience working with people in that population 	20
2	<p>Experience conducting trainings - The 20 points will be scored as follows:</p> <ul style="list-style-type: none"> • Resume – Provide a summary, in resume format, detailing trainings you have conducted in the past that serve populations addressing Substance Use Disorder (SUD) or SUD/SMI Recovery, or other related topics, whether they were online or in person, quotes from surveys, and self-reflection. 15 points • Proposal – Provide a narrative to propose how you would demonstrate the ability to operationalize training in virtual, in-person, hybrid environments for large groups of people, including web-based registration, webinar tools, surveys, and branded meeting materials. 5 points 	20

#	Requirement	Maximum Possible Score
3	<p>Methodology - Please describe your methodology for developing and conducting the training curriculum</p> <p>The 50 points will be scored as follows:</p> <ul style="list-style-type: none"> • Components <ol style="list-style-type: none"> 1. Timeline for curriculum development - 5 points 2. Curriculum topics - 5 points 3. Proposed staffing for the trainings, including identification of key personnel - 5 points 4. Advertisement, Marketing and Outreach - 5 points 5. Structure of a training event - 5 points • Training format could reasonably be implemented within HCA's timeline - 10 points • Addressed contingencies to shift format from in-person to virtual and/or hybrid, if necessary - 5 points 	40
4	<p>Timeline, curriculum, topics, staffing</p> <ul style="list-style-type: none"> • Submit proposed training schedule, including rural and underserved or marginalized communities • Submit proposed timeline and topics for one-day recovery event 	5
5	<p>Strategy, stakeholder engagement, outreach</p> <ul style="list-style-type: none"> • Describe how you will engage peers/adults with lived experience in the curriculum development and the trainings • Describe what outreach to target audiences looks like, including rural, underserved, and marginalized communities • Provide details or marketing, advertisement, and collaboration with other peer/lived experience groups • Submit proposed plan for SUD or SUD/SMI peer/lived experience involvement and leadership in the one-day recovery event 	10
6	<p>Cultural Competency – Describe, or provide an example, how your organizations' mission, vision, values and/or staffing is set up to be successful in working with diverse populations, such as LGBTQI+, BIPOC, tribal, veterans</p>	5
7	<p>Attachment 5, Contractor Certification of Compliance with Executive Order 18-03, Workers' Rights (completed and signed)</p>	5
<p><i>For HCA Evaluation Team Only, No Bidder Response Needed</i></p> <p>(8) Overall completeness, addressing every point, and all forms filled out completely</p>		5
<p>Total Points Possible, Narrative for Contract A Requirements</p>		110

Contract B: Coordination and Facilitation of Lived Experiences Speaking Opportunities

#	Requirement	Maximum Possible Score
1	<p>Connection to People with Lived Experience – Describe how the organization interacts and partners with adults with SUD or SUD/SMI Lived Experience, to include, but not limited to, the following topics:</p> <ul style="list-style-type: none"> • Outreach • Work in recovery centers • Peer work • Training • Understanding of SUD or SUD/SMI lived experience (working closely with people, or their own) <p>Experience working with people in that population</p>	15
2	<p>Connections with existing recovery organizations</p> <ul style="list-style-type: none"> • Provide a list of recovery organizations your organization has partnered. • Describe your relationship with an individual organization, or a project you have collaborated on, and key accomplishments 	10
3	<p>Submit an overview of your organization’s experience working with adults in recovery and supporting recovery in your community</p>	10
4	<p>Provide a plan for establishing a SUD or SUD/SMI peer/lived experience pool (database or Excel)</p> <ul style="list-style-type: none"> • Must include name, contact information, availability, area of expertise, region, experience, and training • Must include a mechanism to track where, when, audience, and the topic of presentation 	15
5	<p>Provide a timeline for the project/contract</p> <ul style="list-style-type: none"> • Specific timeline related to the contract deliverables outlined in the Statement of Work • Describe the firm’s ability to meet deadlines, especially on a short-time frame, and give examples of how past tight deadlines have been successfully met. 	10
6	<p>Describe how you would approach outreach, engagement, and creating speaking opportunities for adults who are peers with SUD or SUD/SMI Lived Experience</p>	10
7	<p>Submit proposed staffing and the identification of key personnel</p>	10
8	<p>Submit proposed speaking schedule, including rural and underserved or marginalized communities</p>	10
9	<p>Cultural Competency – Describe, or provide an example, how your organizations’ mission, vision, values and/or staffing is set up to be successful in working with diverse populations, such as LGBTQI+, BIPOC, tribal, veterans</p>	5
10	<p>Attachment 5, <i>Contractor Certification of Compliance with Executive Order 18-03, Workers’ Rights</i> (completed and signed)</p>	5
<p><i>For HCA Evaluation Team Only, No Bidder Response Needed</i></p> <p>(11) Overall completeness, addressing every point, and all forms filled out completely</p>		5
<p>Total Points Possible, Narrative for Contract B Requirements</p>		105

3.3. OMWBE Certification (OPTIONAL AND NOT SCORED)

Include proof of certification issued by the Washington State Office of Minority and Women's Business Enterprises (OMWBE) if certified minority-owned firm and/or women-owned firm(s) will be participating on this project. For information: <http://www.omwbe.wa.gov>.

3.4. EXECUTIVE ORDER 18-03 (SCORED)

Pursuant to RCW 39.26.160(3) and consistent with Executive Order 18-03 – Supporting Workers' Rights to Effectively Address Workplace Violations (dated June 12, 2018), HCA will evaluate bids for best value and provide a bid preference in the amount of 50 points to any Bidder who certifies, pursuant to the certification attached as Exhibit C, that their firm does NOT require its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waiver. Bidders that do require their employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waiver will not be disqualified evaluation of this RFQ, however they will receive 5 points for this section.

4. EVALUATION AND CONTRACT AWARD

4.1. EVALUATION PROCEDURE

Responsive proposals will be evaluated strictly in accordance with the requirements stated in this solicitation and any addenda issued. The evaluation of proposals will be accomplished by an evaluation team(s), to be designated by HCA, which will determine the ranking of the proposals. Evaluations will only be based upon information provided in the Bidder's Proposal.

All proposals received by the stated deadline, Section 2.2, *Estimated Schedule of Procurement Activities*, will be reviewed by the RFQ Coordinator to ensure that the Proposals contain all of the required information requested in the RFQ. Only responsive Proposals that meet the requirements will be evaluated by the evaluation team. Any Bidder who does not meet the stated qualifications or any Proposal that does not contain all of the required information will be rejected as non-responsive.

The RFQ Coordinator may, at his or her sole discretion, contact the Bidder for clarification of any portion of the Bidder's proposal. Bidders should take every precaution to ensure that all answers are clear, complete, and directly address the specific requirement.

Responsive Proposals will be reviewed and scored by an evaluation team using a weighted scoring system, Section 4.2, *Evaluation Weighting and Scoring*. Proposals will be evaluated strictly in accordance with the requirements set forth in this RFQ and any addenda issued.

HCA, at its sole discretion, may elect to select the top-scoring firms as finalists for an oral presentation.

4.2. EVALUATION WEIGHTING AND SCORING

The following weighting and points will be assigned to the proposal for evaluation purposes:

Contract A

Scoring Narrative Responses to Section 3.2, *Qualifications Section*, for Contract A: 100 points possible

#	Requirement	Total Points Possible
1	Connection to people with SUD or SUD/SMI Lived Experience	20
2	Experience conducting trainings	20
3	Methodology	40
4	Timeline	5
5	Strategy, stakeholder engagement, outreach	10
6	Cultural competency	5
7	EO-03 Workers Rights	5
8	Overall completeness	5
Total Points Possible, Contract A Requirements		110

Contract B

Scoring Narrative Responses to Section 3.2, *Qualifications Section*, for Contract B: 100 points possible

#	Requirement	Total Points Possible
1	Connection to people with SUD or SUD/SMI Lived Experience	15
2	Past attendance at a recovery event or training	10
3	Connections with existing recovery organizations	10
4	Overview	15
5	Plan for establishing peer pool	10
6	Timeline	10
7	Plan for outreach and engagement	10
8	List of recovery organizations partnered with	10
9	Cultural competency	5
10	EO-03 Workers' Rights	5
11	Overall completeness	5
Total Points Possible, Contract B Requirements		105

HCA reserves the right to award the contract to the Bidder whose proposal is deemed to be in the best interest of HCA and the state of Washington.

4.3. SUBSTANTIALLY EQUIVALENT SCORES

Substantially equivalent scores are scores separated by two percent or less in total points. If multiple Proposals receive a Substantially Equivalent Score, HCA may leave the matter as scored, or select as the Apparent Successful Bidder the one Proposal that is deemed by HCA, in its sole discretion, to be in HCA's best interest relative to the overall purpose and objective as stated in Sections 1.1 and 1.2 of this Procurement.

If applicable, HCA's best interest will be determined by HCA managers and executive officers, who have sole discretion over this determination. The basis for such determination will be communicated in writing to all Bidders with equivalent scores.

4.4. NOTIFICATION TO BIDDERS

HCA will announce the ASB to all Bidders via the WEBS notification system.

4.5. DEBRIEFING OF UNSUCCESSFUL BIDDERS

Any Bidder who has submitted a proposal and been notified it was not selected for contract award may request a debriefing. The request for a debriefing conference must be received by the RFQ Coordinator no later than 5:00 p.m., local time, in Olympia, Washington, within three business days after the Unsuccessful Bidder Notification is e-mailed to the Bidder. The debriefing will be held within three (3) business days of the request, or as schedules allow.

Discussion at the debriefing conference will be limited to the following:

- 4.5.1. Evaluation and scoring of the firm's proposal;
- 4.5.2. Critique of the proposal based on the evaluation; and
- 4.5.3. Review of Bidder's final score in comparison with other final scores without identifying the other firms.

Comparisons between proposals, or evaluations of the other proposals will not be allowed. Debriefing conferences may be conducted in person or on the telephone and will be scheduled for a maximum of thirty (30) minutes.

4.6. PROTEST PROCEDURE

A bid protest may be made only by Bidders who submitted a response to this RFQ and who have participated in a debriefing conference. Upon completing the debriefing conference, the Bidder is allowed five Business Days to file a protest. Protests must be received by the Contracts Administrator no later than 4:30 p.m., local time, in Olympia, Washington on the fifth Business Day following the Bidder's debriefing. Protests must be submitted by e-mail to ensure timely receipt.

Consistent with RCW 39.26.030, bid submissions and bid evaluations will be available for public inspection following the announcement of ASB(s). If requested, the protest period will not conclude before the requestor has been provided with the applicable bid submissions and bid evaluations and provided five (5) Business Days to review the same. Bidder is responsible for notifying the RFQ Coordinator of any such public disclosure requests so the timeline can be adjusted accordingly.

Bidders protesting this RFQ must follow the procedures described below. Protests that do not follow these procedures will not be considered. This protest procedure constitutes the sole administrative remedy available to Bidders under this RFQ.

- 4.6.1. All protests must be in writing, addressed to the Contracts Administrator, and signed by the protesting party or an authorized agent. The protest must state (1) the RFQ number, (2) the grounds for the protest with specific facts, (3) complete statements of the action(s) being protested, and (4) the relief or corrective action being requested. Protests must be emailed to contracts@hca.wa.gov with the following subject line: "RFQ 2021HCA44 Protest – [Bidder Name]"
- 4.6.2. Only protests alleging an issue of fact concerning the following subjects will be considered:
 - 4.6.2.1. A matter of bias, discrimination, or conflict of interest on the part of an evaluator;
 - 4.6.2.2. Errors in computing the score; or
 - 4.6.2.3. Non-compliance with procedures described in the RFQ, HCA's protest process, or DES policy requirements (POL-DES-170-00).

Protests based on anything other than those items listed above will not be considered. Protests will be rejected as without merit to the extent they address issues such as: 1) an evaluator's professional judgment on the quality of a Proposal; or 2) HCA's assessment of its own needs or requirements.

- 4.6.3. Upon receipt of a protest, HCA will undertake a protest review. The HCA Director, or an HCA employee delegated by the HCA Director who is a neutral party with no involvement in the evaluation and award process (Protest Officer), will investigate and respond to the protest. If the HCA Director delegates the protest review to an HCA employee, the Director nonetheless reserves the right to make the final agency decision on the protest. The Protest Officer will have

the right to seek additional information regarding the procurement from sources they deem appropriate in order to fully consider the protest.

- 4.6.4. If HCA determines in its sole discretion that a protest from one Bidder may affect the interests of another Bidder, then HCA may invite such Bidder to submit its views and any relevant information on the protest to the Protest Officer. In such a situation, the protest materials submitted by each Bidder will be made available to all other Bidders upon request.
- 4.6.5. The Protest Officer will issue a written protest response no more than ten (10) Business Days after receipt of the protest, unless additional time is needed, in which case HCA will notify the protesting bidder in writing. The Protest Officer's decision is final, unless the HCA Director exercises their right to make the final agency decision on the protest. There will be no appeal process.
- 4.6.6. The final determination of the protest will:
 - 4.6.6.1. Find the protest lacking in merit and uphold HCA's action; or
 - 4.6.6.2. Find only technical or harmless errors in HCA's acquisition process and determine HCA to be in substantial compliance and reject the protest; or
 - 4.6.6.3. Find merit in the protest and provide options to the HCA Director, which may include:
 - 4.6.6.3.1. Correct the errors and re-evaluate all Proposals; or
 - 4.6.6.3.2. Issue a new solicitation document and begin a new process; or
 - 4.6.6.3.3. Make other findings and determine other courses of action as appropriate.

If the protest is not successful, HCA will enter into a contract with the ASB(s), assuming the parties reach agreement on the contract's terms.

5. RFQ ATTACHMENTS AND EXHIBITS

See Section 4, Proposal Contents, to make sure that your proposal is presented in the correct order.

Attachment 1: Bidder Intake Form

Attachment 2: Certifications and Assurances

Attachment 3: Diverse Business Inclusion Plan

Attachment 4: Vaccine Requirement Form

Attachment 5: Contractor Certification of Compliance with EO 18-03

Exhibit A: Statement of Work – Contract A

Exhibit B: Statement of Work – Contract B

ATTACHMENT 1: BIDDER INTAKE FORM

1 – Identifying Information

A) Contractor Legal Name:	B) DBA or Facility Name:
C) WA Uniform Business Identifier (UBI) Number:	D) Taxpayer Identification Number (TIN):
E) State Wide Vendor Number (SWV#):	F) DUNS Number:
G) Legal status (ex: LLC, Corporation, Sole Proprietor):	H) Name(s) and title(s) of principal officer(s) (ex: CEO, CFO, COO):

2 – Contractor Address (Location of facility from which Bidder would operate)

A) Number, Street, Apartment/Suite:	
B) City, State, Zip Code+4:	
C) Email Address:	D) Phone Number:

3 – Contractor/Vendor Primary Contact

A) Full Name:	B) Job Title:
C) Email Address:	D) Phone Number:
Authorized to Sign Contracts? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'no' selected – Section Four (4) is REQUIRED	

3 – Contractor/Vendor Primary Signatory

A) Full Name:	B) Job Title:
C) Email Address:	D) Phone Number:

4 – Additional Contractor/Vendor Staff to be Notified

A) Full Name:	B) Email Address:
C) Full Name:	D) Email Address:

6 – Former State Employees

Do any former state employees work for this organization? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide names:
---	-------------------------------

7 – Proprietary Information

A) Are you including any proprietary information in this Proposal? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide sections or references here (Reference Section 2.5) :
--	--

8 – Contract Information – Additional Information

Provide any additional information here:
--

Completed By: _____ Date: _____

ATTACHMENT 2: CERTIFICATIONS AND ASSURANCES

I/we make the following certifications and assurances as a required element of the proposal to which it is attached, understanding that the truthfulness of the facts affirmed here and the continuing compliance with these requirements are conditions precedent to the award or continuation of the related contract:

1. I/we declare that all answers and statements made in the proposal are true and correct.
2. The prices and/or cost data have been determined independently, without consultation, communication, or agreement with others for the purpose of restricting competition. However, I/we may freely join with other persons or organizations for the purpose of presenting a single proposal.
3. The attached proposal is a firm offer for a period of 120 days following receipt, and it may be accepted by HCA without further negotiation (except where obviously required by lack of certainty in key terms) at any time within the 120-day period.
4. In preparing this proposal, I/we have not been assisted by any current or former employee of the state of Washington whose duties relate (or did relate) to this proposal or prospective contract, and who was assisting in other than his or her official, public capacity. If there are exceptions to these assurances, I/we have described them in full detail on a separate page attached to this document.
5. I/we understand that HCA will not reimburse me/us for any costs incurred in the preparation of this proposal. All proposals become the property of HCA, and I/we claim no proprietary right to the ideas, writings, items, or samples, unless so stated in this proposal.
6. Unless otherwise required by law, the prices and/or cost data which have been submitted have not been knowingly disclosed by the Bidder and will not knowingly be disclosed by him/her prior to opening, directly or indirectly, to any other Bidder or to any competitor.
7. I/we agree that submission of the attached proposal constitutes acceptance of the solicitation contents and the attached sample contract and general terms and conditions. If there are any exceptions to these terms, I/we have described those exceptions in detail on a page attached to this document.
8. No attempt has been made or will be made by the Bidder to induce any other person or firm to submit or not to submit a proposal for the purpose of restricting competition.
9. I/we grant HCA the right to contact references and other, who may have pertinent information regarding the ability of the Bidder and the lead staff person to perform the services contemplated by this RFQ.
10. If any staff member(s) who will perform work on this contract has retired from the State of Washington under the provisions of the 2008 Early Retirement Factors legislation, his/her name(s) is noted on a separately attached page.

We (circle one) **are** / **are not** submitting proposed Contract exceptions. (See Section 2.12, Contract and General Terms and Conditions.) If Contract exceptions are being submitted, I/we have attached them to this form.

On behalf of the Bidder submitting this proposal, my name below attests to the accuracy of the above statement. We are submitting a scanned signature of this form with our proposal.

Signature of Bidder

Title

Date

ATTACHMENT 3: DIVERSE BUSINESS INCLUSION PLAN

- Do you anticipate using, or is your firm, a State Certified Minority Business? Y N
- Do you anticipate using, or is your firm, a State Certified Women's Business? Y N
- Do you anticipate using, or is your firm, a State Certified Veteran Business? Y N
- Do you anticipate using, or is your firm, a Washington State Small Business? Y N

If you answered No to all of the questions above, please explain: _____

Please list the approximate percentage of work to be accomplished by each group:

Minority _____%

Women _____%

Veteran _____%

Small Business _____%

Please identify the person in your organization to manage your Diverse Inclusion Plan responsibility.

Name: _____

Phone: _____

E-Mail: _____

ATTACHMENT 4: VACCINE REQUIREMENT FORM

Proclamation 21-14 – COVID-19 Vaccination Certification

To reduce the spread of COVID-19, Washington state Governor Jay Inslee, pursuant to emergency powers authorized in [RCW 43.06.220](#), issued [Proclamation 21-14 – COVID-19 Vaccination Requirement](#) (dated August 9, 2021), as amended by [Proclamation 21-14.1 – COVID-19 Vaccination Requirement](#) (dated August 20, 2021) and as may be amended thereafter. The Proclamation requires contractors who have goods, services, or public works contracts with a Washington state agency to ensure that their personnel (including subcontractors) who perform contract activities on-site comply with the COVID-19 vaccination requirements, unless exempted as prescribed by the Proclamation.

HCA Solicitation Number: _____

I hereby certify, on behalf of the firm identified below, as follows (check one):

COVID-19 CONTRACTOR VACCINATION PROCLAMATION COMPLIANCE. Contractor:

1. Has reviewed and understands Contractor's obligations as set forth in [Proclamation 21-14 – COVID-19 Vaccination Requirement](#) (dated August 9, 2021), as amended by [Proclamation 21-14.1 – COVID-19 Vaccination Requirement](#) (dated August 20, 2021); and
2. Contractor personnel (including subcontractors) who are subject to the vaccination requirement in the above-referenced Proclamation will provide Agency proof of full vaccination against COVID-19 or appropriate exemption for which a reasonable accommodation has been provided.

OR

CONTRACTOR IS NOT ABLE TO PERFORM IN COMPLIANCE WITH THE VACCINATION PROCLAMATION. Contractor is not able to perform the contract obligations in compliance with the above-referenced Proclamation.

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the certifications herein are true and correct and that I am authorized to make these certifications on behalf of the firm listed herein.

Firm Name: _____
Name of Contractor– Print full legal entity name of firm

By: _____
Signature of authorized person

Title: _____
Title of person signing certificate

Date: _____

ATTACHMENT 5: CONTRACTOR CERTIFICATION

**Executive Order 18-03, Workers' Rights
Washington State Goods & Services Contracts**

Pursuant to the Washington State Governor's Executive Order 18-03 (dated June 12, 2018), the Washington State Health Care Authority is seeking to contract with qualified entities and business owners who certify that their employees are not, as a condition of employment, subject to mandatory individual arbitration clauses and class or collective action waivers.

Solicitation No.: RFQ# 2021HCA44

I hereby certify, on behalf of the firm identified below, as follows (check one):

NO MANDATORY INDIVIDUAL ARBITRATION CLAUSES AND CLASS OR COLLECTIVE ACTION WAIVERS FOR EMPLOYEES. This firm does NOT require its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers.

OR

MANDATORY INDIVIDUAL ARBITRATION CLAUSES AND CLASS OR COLLECTIVE ACTION WAIVERS FOR EMPLOYEES. This firm requires its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers.

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the certifications herein are true and correct and that I am authorized to make these certifications on behalf of the firm listed herein.

FIRM NAME: _____
Name of Contractor/Bidder – Print full legal entity name of firm

By: _____
Signature of authorized person

Print Name of person making certifications for firm

Title: _____
Title of person signing certificate

Place: _____
Print city and state where signed

Date: _____

EXHIBIT A: STATEMENT OF WORK – CONTRACT A

Recovery Advocacy Training and One-Day Recovery Event

The Contractor will provide the services and staff, and otherwise do all things necessary for or incidental to the performance of work, as set forth below

- 1. Purpose.** Provide training to adults in various stages of SUD or SUD/SMI recovery to become leaders and participants in policy development. Trainings and a one-day event include, but are not limited to: building skills on telling one's story, legislative and media advocacy, public speaking, encouragement and motivation.
- 2. Definitions.** The words and phrases listed below in alphabetical order, as used in this Contract, will each have the following definitions:

“ACH” or “Accountable Community of Health” means the regional entity contracted with the Health Care Authority to improve Medicaid Health Outcomes through specific projects.

“BH-ASO” or “Behavioral Health Administrative Service Organization” means an organization funding non-Medicaid services and certain other programs in a region.

“Behavioral Health Peers” mean adults with lived experience in behavioral health services.

“COD” or “Co-occurring Disorder” means a disorder with characteristics of mental health concerns and SUD.

“DBHR” or “Division of Behavioral Health and Recovery” means the HCA-designated state mental health authority to administer the state and Medicaid funded mental health programs authorized by RCW chapters 71.05, 71.24, and 71.3.

“Recovery Advocacy” means the trainings developed and presented carried out by the Contractor as described in this Contract.

“MCO” means “Managed Care Organization”

“ORP” or “Office of Recovery Partnerships” means the office within DBHR with responsibility for promoting peer voice.

“Regional Advocacy Collaborative” means a group of behavioral health peers working toward improvement in services and recovery.

“SMI” or “Serious Mental Illness” refers to an individual with a serious mental illness as defined by 58 Federal Regulation 29422-29425

“Story” means an individual’s experience in living with behavioral health challenges and growing toward recovery.

“SUD” or “Substance Use Disorder” means a disorder characterized by misuse of alcohol or illicit drugs.

3. **Consideration.** Upon satisfactory completion of the required Contract activities in Phase 1 and 2, Contractor will be entitled to the consideration as follows:

Phase	Services	Maximum Payment
Phase 1	Recovery Advocacy Training	Up to \$40,000
Phase 2	One-Day Recovery Event	Up to \$43,000
Maximum Compensation for Contract A		Up to \$83,000

Contractor will submit invoices for work, as outlined in the Deliverables Tables, no more than 45 days after each event.

4. **Work Expectations**

4.1. **Phase 1: Develop and Provide Recovery Advocacy Trainings.**

4.1.1. Develop a training packet, in collaboration with adults with lived experience, for participants which shall include the following topics, at a minimum:

4.1.1.1. Information on the legislative process

4.1.1.2. Sharing one's story

4.1.1.3. Skills in advocacy

4.1.1.4. Contractor to provide curriculum and training packet to HCA Contract Manager for approval prior to training.

4.1.2. No personal information shared by participants will be included in the reports or other documentation submitted to HCA.

4.1.3. Develop a general project plan describing in basic detail the locations, general timeframe, and structure of the trainings.

4.1.4. Hold four (4) full-day events (at least five hours each day) designed to train SUD or SUD/SMI peers in implementing leadership and advocacy, including, but not limited to the following:

4.1.4.1. Trainings will not include lobbying activities

4.1.4.2. Trainings will be in a virtual, online format, or in person.

4.1.4.3. Trainings will be the first, primary training, not follow-up trainings

4.1.4.4. Create a flyer for each event and distribute it to the regional BH-ASOs, MCOs, and ACH and to at least 10 behavioral health agencies serving adults with SUD or SUD/SMI within each region, as well as to HCA Contract Manager.

4.1.4.5. Flyers will be distributed at least three weeks before each event

- 4.1.4.6. Flyers will include the state agency logo provided by HCA Contract Manager with “The Office of Recovery Partnerships” included.
- 4.1.5. Maintain Registration information with contact information (emails) for use at all meetings
 - 4.1.5.1. Date
 - 4.1.5.2. Time
 - 4.1.5.3. Webinar topic
 - 4.1.5.4. Location, if applicable
 - 4.1.5.5. Electronic will be available
 - 4.1.5.6. Registration will include the opportunity to sign up for the ORP mailing list
 - 4.1.5.7. Registration list provided to HCA Contract Manager will include the participant number, but will not include identifying information of participants (ex: name, email address).
- 4.1.6. An event summary shall be submitted to HCA Contract Manager which includes, but is not limited to, the following:
 - 4.1.6.1. Date
 - 4.1.6.2. Location
 - 4.1.6.3. Copy of the schedule/agenda
 - 4.1.6.4. Number of participants
 - 4.1.6.5. Survey/evaluation results
 - 4.1.6.6. Summary, self-reflection of what went well, and proposed changes for successful future events.

4.1.7. **Deliverables Table - Phase 1: Develop and Provide Training.**
 Deliverables due no later than September 30, 2022

#	Deliverable	Maximum Payment Amount
1	Submission of training curriculum. Curriculum to be approved by HCA Contract Manager.	\$5,000
2	Online registration set up, facilitation and reporting for each of four (4) events (\$500 each)	Up to \$2,000

#	Deliverable	Maximum Payment Amount
3	Conduct four (4) five-hour trainings online or in person, \$8,000 each (includes speaker fees, new training technology, trainers, manuals and evaluations). Costs will be adjusted if less than ten (10) participants attend. Electronic flyers and online promotional products for each of four (4) events posted and/or email at least three (3) weeks before each training event.	Up to \$32,000
4	Report and summary for each of four (4) training events (\$250 each. Participant list, surveys, and online survey results for each training provided within (3) weeks of each training event.	Up to \$1,000
Sub-Total, Contract A, Phase 1 of 2		\$40,000

4.2. Phase 2 of 2: One-Day Recovery Training Event. Contractor will host a one-day recovery training event, including, but not limited to, the following:

- 4.2.1. Project Plan. Develop a general project plan for approval.
- 4.2.2. Flyer. Prepare an event flyer prior to the event:
 - 4.2.2.1. Email draft to HCA Contract Manager for formatting check and proper use of HCA logos, at least 30 days prior to the event.
 - 4.2.2.2. Distribute flyer after approval by HCA Contract Manager.
- 4.2.3. Agenda Schedule. Contractor will provide draft event schedule program agenda to HCA Contract Manager, at least 30 days prior to the event.
- 4.2.4. Advertising, Marketing and Outreach. The event will be advertised to be inclusive of adults with serious mental health challenges to attend. Flyers and calls will be made to peer organizations, clubhouses, behavioral health providers, peer networks and known advocates to promote the event.
- 4.2.5. Registration/Attendance. Contractor will monitor and track registration, and will confirm participation by at least 75 adults to HCA Contract Manager on the day of the event.
- 4.2.6. Facilitation. The Contractor will provide event facilitation, to include:
 - 4.2.6.1. Agendas, speaker fees, event flyers and media promotion of event to peer organizations, clubhouses, behavioral health providers, peer networks and advocates in the substance abuse and mental health recovery populations. HCA and Contractor agree that if conditions allow the event to be in person, that the delivery mode of these events can be changed, upon plan approval by the HCA Contract Manager, and amendment to this Contract. Participant event evaluations, the results of which to be submitted with final report

- 4.2.6.2. Contractor to provide curriculum to HCA Contract Manager for approval prior to training.
- 4.2.6.3. An event summary, for each training, shall be submitted to HCA contract manager which includes: date of event, copy of the schedule/agenda for the event, number of adults in attendance, written evaluation of the event including proposed changes for successful future events.

4.2.7. Deliverables Table - Phase 2: One-Day Recovery Training Event.
Deliverables due no later than September 30, 2021.

#	Deliverable	Maximum Payment Amount
1	Event Plan –online format	\$1,000
2	Electronic flyers and online promotional products posted and/or emailed at least three (3) weeks before the event	\$5,000
3	Event program itinerary for participants – including activity descriptions and instructions for breakout sessions	\$2,500
4	Event program itinerary for facilitators	\$2,500
5	Media campaign and outreach to MCOs, BH-ASOs, recovery community organizations, clubhouses, and mental health support organizations	\$10,000
6	Facilitate a one-day recovery event with prominent guest speakers	\$18,000
7	Participant evaluations	\$2,000
8	Final Report and Summary	\$2,000
Sub-Total, Contract A, Phase 2 of 2		\$43,000

EXHIBIT B: STATEMENT OF WORK – CONTRACT B

Lived Experience Speaker Program

The Contractor will provide the services and staff, and otherwise do all things necessary for or incidental to the performance of work, as set forth below:

- 1. Purpose.** Create and train a group of adults with Lived Experience related to Substance Use Disorder (SUD) or SUD **and** SMI challenges so that they can speak at recovery related trainings and events throughout Washington State. Skill building training will include, but are not limited to: telling one's story, legislative and media advocacy, public speaking, encouragement and motivation.
- 2. Definitions.** The words and phrases listed below in alphabetical order, as used in this Contract, will each have the following definitions:

“ACH” or “Accountable Community of Health” means the regional entity contracted with the Health Care Authority to improve Medicaid Health Outcomes through specific projects.

“BH-ASO” or “Behavioral Health Administrative Service Organization” means an organization funding non-Medicaid services and certain other programs in a region.

“Behavioral Health Peers” mean adults with lived experience in behavioral health services.

“COD” or “Co-occurring Disorder” means a disorder with characteristics of mental health concerns and SUD.

“DBHR” or “Division of Behavioral Health and Recovery” means the HCA-designated state mental health authority to administer the state and Medicaid funded mental health programs authorized by RCW chapters 71.05, 71.24, and 71.3. “Elevate Recovery” means the trainings developed and presented carried out by the Contractor as described in this Contract.

“MCO” means “Managed Care Organization”

“ORP” or “Office of Recovery Partnerships” means the office within DBHR with responsibility for promoting peer voice.

“Regional Advocacy Collaborative” means a group of behavioral health peers working toward improvement in services and recovery.

“Requesting Organization” means Organizations could include, but are not limited to recovery organizations, Tribes, legislature, peer organizations, or HCA.

“SMI” or “Serious Mental Illness” refers to an individual with a serious mental illness as defined by 58 Federal Regulation 29422-29425

“Story” means an individual’s experience in living with behavioral health challenges and growing toward recovery.

“SUD” or “Substance Use Disorder” means a disorder characterized by misuse of alcohol or illicit drugs.

3. **Consideration.** Upon satisfactory completion of the required Contract activities, Contractor will be entitled to the consideration set forth in the Deliverables Tables for each phase. Contractor will submit invoices for work delivered no more than 45 days after each event. **Maximum Compensation for Contract B is \$91,000.**

4. **Work Expectations**

4.1. Identify people with SUD or SUD and SMI Lived Experience.

4.1.1. Contractor will provide HCA with the number of available speakers and the regions where speakers are available.

4.1.2. To maintain privacy, Contractor will not provide names of speakers to HCA. Contractor will assign each speaker a number and that number will connect to one (1) unique individual speaker throughout the term of the Contract

4.1.3. HCA estimates that the Contractor will facilitate 75 speaker requests during this Contract period, with monthly averages as follows:

Month(s) of Contract	Minimum Number of Speakers
First 2 Months	2 per month
Remaining Months	5 per month

HCA and Contractor will address number variances in the monthly reporting process.

4.1.4. Process. Requesting organizations will contact Contractor directly to request a speaker. HCA may submit or forward a speaker request to Contractor.

4.1.5. Contractor will make best efforts to increase capacity for new or timid speakers to be able to share their stories, thereby increasing the number and variation of stories shared.

4.1.6. Response Time. Contractor will make best effort to reasonably accommodate schedule requests.

4.1.6.1. Contractor will respond to requests within 3 business days. Response may include the actual schedule confirmation. Confirmation of schedule must be in writing within 7 business days.

4.1.6.2. Contractor will screen speaker requests in order to match speakers' topic expertise to the topic requested.

4.1.6.3. Contractor will communicate the details of the speaking engagement to the speaker in writing via email, USPS mail or phone, and will confirm with speaker prior to the event.

- 4.2. **Curriculum Development.** Contractor will develop a curriculum packet for approval by HCA Contract Manager. Curriculum will guide training for Lived Experience speakers including, but not limited to, the following:
 - 4.2.1. Adults with Lived Experience will be involved in the development of the training
 - 4.2.2. Curriculum packet will be at a minimum of 10 pages
 - 4.2.3. Where to find assistance with all of the training subjects
 - 4.2.4. How to advocate for behavioral health in Washington State
 - 4.2.5. Interacting with event hosts
 - 4.2.6. Anticipating feedback from the host, and welcoming feedback from the speaker
- 4.3. Contractor will schedule speaking engagements for Lived Experience speakers, with event attendance being at a minimum of at least eight (8) adults.
- 4.4. Connect with, and do outreach to, recovery communities to communicate availability of speakers.
- 4.5. Coordinate with event hosts to monitor speaker engagement activities and feedback.
- 4.6. **Monthly Report.** Contractor will provide monthly summary to HCA Contract Manager which includes, but not limited to, the following
 - 4.6.1. Email to HCA Contract Manager no later than the 10th of the month following the month of service
 - 4.6.2. Summary per event. Contractor will provide a summary of each event, to include, but not limited to, the following:
 - 4.6.2.1. Date
 - 4.6.2.2. Location
 - 4.6.2.3. Organization
 - 4.6.2.4. Name of event
 - 4.6.2.5. Speaker number
 - 4.6.2.6. If the speaker had spoken to the host group previously, or is a new speaker for the host group.
 - 4.6.2.7. Topic requested.
 - 4.6.2.8. Lived experience subject area, if different
 - 4.6.2.9. How many people attended event

- 4.6.2.10. Format. Whether the event was in-person, virtual, or in a hybrid format.
 - 4.6.2.11. Follow up with event organizers
 - 4.6.2.12. Address feedback from host
 - 4.6.2.13. Ongoing training/mentoring, including what the host can do to increase the speaker's comfort level with presenting their stories.
 - 4.6.2.14. Follow up with speaker
 - 4.6.2.15. Follow up with host, if applicable
- 4.6.3. Administrative Costs
- 4.6.4. Engage in discussions with HCA Contract Manager, as requested
- 4.7. Monthly Reporting Spreadsheet
 - 4.7.1. HCA Contract Manager will provide Monthly Reporting Spreadsheet template to Contractor within 10 days of contract execution.
 - 4.7.2. Contractor will use HCA Template and will include completed template when providing monthly summary report to HCA Contract Manager for approval.
 - 4.7.3. In conjunction with A-19.
- 4.8. Administrative Costs
 - 4.8.1. Contractor will include the breakdown for the month's administrative costs on the Monthly Report.
 - 4.8.2. Costs include the following:
 - 4.8.2.1. Operational costs
 - 4.8.2.2. Data entry
 - 4.8.2.3. Billing
 - 4.8.2.4. Record Keeping
 - 4.8.2.5. Personnel
 - 4.8.2.6. Other items, as approved by HCA Contract Manager
 - 4.8.3. Travel and technology costs are not included in this Contract

5. **Deliverables Table** – Lived Experience Speaker Program. Deliverables due no later than March 28, 2023.

#	Deliverable	Rate	Maximum Payment Amount
1	Monthly Reports	\$5515.13 per month x 15 months	\$82,727
2	Administrative Costs included in monthly payment	\$551.53 per month x 15 months	\$8,273
Sub-Total, Contract B			\$91,000