

OPIOID USE AND STIMULANT USE PREVENTION AND RECOVERY SERVICES IN THE LGBTQ2S+ COMMUNITY

REQUEST FOR APPLICATIONS

DECEMBER 2021



THE CENTER

at Sierra Health Foundation

MAT access
points
project

This funding opportunity is provided by The Center at Sierra Health Foundation with funding from the State of California's Department of Health Care Services.

The Center at Sierra Health Foundation is an independent 501(c)(3) nonprofit organization bringing people, ideas and infrastructure together to create a collective impact that reduces health disparities and improves community health for the underserved living in California.

For information about The Center, visit www.shfcenter.org.

READ ALL INSTRUCTIONS AND CRITERIA CAREFULLY

ORGANIZATION AND GRANT BACKGROUND

Sierra Health Foundation: Center for Health Program Management (The Center) was founded by Sierra Health Foundation in 2012 as an independent 501(c)(3) nonprofit organization. With offices in Sacramento and Fresno, The Center pursues the promise of health and racial equity in communities across California. Leveraging leadership, operational and funding support from Sierra Health Foundation and its partners, The Center establishes investment partnerships with public and private funders; community members; community organizations; national, state, and local government agencies; nonprofits; and businesses to advance health equity.

The **Opioid Use and Stimulant Use Prevention and Recovery Services in the LGBTQ2S+ Community** project falls under The Center's Medication Assisted Treatment (MAT) Access Points Project. The MAT Access Points Project is funding a network of organizations throughout California to address the opioid and stimulant use crisis by supporting and expanding prevention, education, stigma reduction, harm reduction, treatment and recovery services for people with opioid use disorder (OUD), stimulant use disorder and substance use disorder (SUD). The MAT Access Points Project is creating a community of practice that lifts up and makes available racially and culturally responsive population-based and place-based approaches for California's most underserved communities.

Under this funding opportunity, LGBTQ2S+ organizations will develop or expand upon prevention and recovery services for OUD, stimulant use and SUD while creating tangible links to MAT services and treatment providers specifically within the LGBTQ2S+ community. The Center is seeking applications from organizations that are mission-focused on the LGBTQ2S+ community, strive for health equity and that will work on specific culturally and linguistically appropriate prevention and recovery projects.

The MAT Access Points Project is a component of the California Department of Health Care Services' MAT Expansion Project, which is funded by the State Opioid Response II grant from the Substance Abuse and Mental Health Services Administration (SAMSHA). Accordingly, contract agreements will include standard federal rules and regulations, notably [2 CFR 200](#), [45 CFR Part 75](#), and applicable rules and regulations from the State of California.

The Center will incorporate the applicable federal and state rules and regulations into the terms and conditions of the contract agreements. Please see additional compliance components further in the RFA.

GLOSSARY AND RESOURCES

LGBT: Abbreviation for Lesbian, Gay, Bisexual and Transgender. An umbrella term that is often used to refer to the community as a whole. Over the years, the abbreviation has evolved to LGBTQ+, LGBTQ2S+ and LGBTQIA+ to include and raise awareness of Queer, Two-spirit (2S), Intersex and Asexual communities along with other communities (+). See the following for additional information on LGBT/LGBTQ+/LGBTQ2S+/LGBTQIA+: <https://lgbtqia.ucdavis.edu/educated>.

Addiction: The chronic neurobiological disorder centered on a dysregulation of the natural reward system. See video on rethinking addiction:

<https://www.youtube.com/watch?v=bwZcPwIRRcc&feature=youtu.be>

Medication Assisted Treatment (MAT) or Medications for Opioid Use Disorder (MOUD): MAT/MOUD uses medications with counseling to treat the whole patient. These medications stabilize the brain, control cravings and help patients do the hard work of recovery. It is the gold standard of care for opioid use disorder treatment.

Naloxone Distribution Project: Eligible entities may receive free naloxone through the [Naloxone Distribution Project](#). This DHCS project aims to address the opioid crisis by reducing overdose deaths through the provision of free naloxone, in its nasal spray formulation.

Opioid Use Disorder (OUD): A pattern of behavior characterized by craving, increased tolerance and withdrawal when use stops, and persistent use of opioids despite adverse consequences. This includes the misuse of prescription opioids and the use of heroin or fentanyl.

Recovery Coaching and/or Peer Support Services: Recovery coaches and/or peers walk side by side with individuals seeking recovery from SUD. They help people to create their own recovery plans and develop their own recovery pathways. Recovery coaches provide many different types of support, including emotional (empathy and concern), informational (connections to information and referrals to community resources that support health and wellness), instrumental (concrete supports such as housing or employment) and affiliated (connections to recovery, community supports, activities and events). Recovery plans and other supports are customized and build on each individual's strengths, needs and recovery goals. Peer recovery support focuses on long-term recovery and is rooted in a culture of hope, health and wellness. The focus of long-term peer recovery support goes beyond the reduction or elimination of symptoms to encompass self-actualization, community and civic engagement, and overall wellness.

Stimulants: Stimulant drugs encompass amphetamine-type stimulants as well as the various forms of cocaine-derived products (e.g., powder cocaine, crack). Amphetamine-type stimulants include methamphetamine (crystal, crank, speed, ice) as well as prescription medications primarily used for the treatment of attention-deficit/hyperactivity disorder (ADHD), such as amphetamine, methylphenidate, and dextroamphetamine. See the following for information on the treatment of stimulant use disorder:

https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/PEP20-06-01-001_508.pdf

Substance Use Disorder (SUD): Problematic use of alcohol and/or substances causing significant problems, including health problems, disability and failure to meet major responsibilities at work, school or home.

FUNDING OPPORTUNITY AND BACKGROUND

More than 1.8 million individuals in California identify as part of the LGBTQ2s+ population¹. In comparison to heterosexual individuals nationwide, LGB (lesbian, gay and bisexual) adults report higher rates of stimulant use and substance use disorders². In 2019, 1.4 million LGB adults reported opioid (prescription pain reliever or heroin) misuse³. LGBTQ2S+ adults with substance use disorders are also more likely to have co-occurring psychiatric disorders⁴ and are at an increased risk of contracting HIV and Hepatitis C⁵. Because of this, mental health services or referrals as well as encouraging HIV testing and prevention are recommended components of educational and service activities. Some factors contributing to opioid use and stimulant use in the LGBTQ2S+ community include mental illness, risk of experiencing violence, structural stigma and discrimination⁶. These risk factors may be heightened due to the social and economic stressors brought on by the COVID-19 pandemic. These contributing factors also intersect with an individual's place, race, language, beliefs and other identity components that each hold a different place in society⁷.

In 2020, California reported more than 8,600 drug overdose deaths, with almost 70% of those deaths involving opioids⁸.

The goal of this funding opportunity is to support prevention and education, connections and referrals to treatment services, and recovery activities and programs specifically addressing opioid use and stimulant use in the LGBTQ2S+ community.

SCOPE OF WORK

Activities implemented through this funding opportunity must be related to opioid use, stimulant use and/or co-occurring substance use prevention, education and recovery, and should be primarily focused on increasing access to and community awareness of prevention and recovery services and programs for and within the LGBTQ2S+ community in California, as well as increase access to opioid use, stimulant use and/or co-occurring substance use treatment services through referrals and partnerships.

¹ https://www.lgbtmap.org/equality-maps/profile_state/CA

² <https://books.google.com/books?hl=en&lr=&id=4IE5DwAAQBAJ&oi=fnd&pg=PA153&dq=lgbt++%22opioid+use%22++california&ots=MAjBGHFUnN&sig=p1tOyvzic1EZBwGeJsdHEBkQ7Wk#v=onepage&q&f=false> and <https://www.publichealth.columbia.edu/public-health-now/news/lgb-individuals-use-stimulants-higher-rates-heterosexuals>

³ <https://www.samhsa.gov/data/sites/default/files/reports/rpt31104/2019NSDUH-LGB/LGB%202019%20NSDUH.pdf>

⁴ <https://www.drugabuse.gov/drug-topics/substance-use-suds-in-lgbtq-populations>

⁵ <https://www.drugabuse.gov/drug-topics/substance-use-suds-in-lgbtq-populations>

⁶ <https://www.publichealth.columbia.edu/public-health-now/news/lgb-individuals-use-stimulants-higher-rates-heterosexuals>, [https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366\(19\)30279-2/fulltext](https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(19)30279-2/fulltext), and [https://www.samhsa.gov/data/sites/default/files/NSDUH-SexualOrientation-2015/NSDUH-SexualOrientation-2015.htm](https://www.samhsa.gov/data/sites/default/files/NSDUH-SexualOrientation-2015/NSDUH-SexualOrientation-2015/NSDUH-SexualOrientation-2015.htm)

⁷ [Researching for LGBTQ Health](#) The analysis of the intersection of race and other forms of oppression or marginalization is commonly referred to as “intersectionality”

⁸ <https://www.drugabuse.gov/drug-topics/opioids/opioid-summaries-by-state/california-opioid-involved-deaths-related-harms>

Even with growing acceptance, the LGBTQ2S+ community still faces varying forms of discrimination. It is important for funded partners to recognize the multitude of barriers LGBTQ2S+ individuals face when seeking resources and treatment for addiction, OUD and SUD as well as the role intersectionality plays. Barriers to successful opioid, stimulant and substance use outreach and treatment include language access, long treatment wait lists, cost, transportation, societal stigma, intersectional trauma, and individual cultural barriers, among others. We request that applicants have deep involvement with as well as knowledge of the community and culture, the skill set to apply prevention interventions, an awareness of their own biases and utilize whole person and trauma-informed approaches.

Funded partners need to be responsive and intentional in the growth of and investment in trauma-informed community-based prevention, intervention and treatment access. Being mindful of the lived experiences of the community and striving to create culturally and linguistically appropriate programming and materials is vitally important in this work. This funding opportunity is intended for LGBTQ2S+ organizations and partners who center healing, possess cultural humility and responsiveness, and reflect the LGBTQ2S+ as well as racial and ethnic community it intends to serve. Services should be tailored and apply a stigma-reducing approach that addresses systemic and cultural barriers to opioid use and stimulant use prevention, treatment and recovery.

FUNDING INFORMATION

Awarded funds will support prevention and recovery services for opioid use and stimulant use disorders within the LGBTQ2S+ community throughout California.

Applicants are required to adhere to the budget guidelines included in the Budget Template. Applicants must submit their proposed budgets in the template format. Applications that do not conform to this template will not be considered. All items budgeted must be inclusive of all costs, including taxes and fees, in U.S. dollars. Applicants are required to submit a detailed cost budget to assist The Center in establishing cost reasonableness of the final fixed price amount awarded to the site.

The contracts will be deliverable-based, meaning contractors need to demonstrate progress on process measures (e.g., number of outreach activities, number of referrals) and fulfill set deliverables. Consistent with a fixed price, deliverable-based agreement, applicants will receive fixed price amounts established for the successful completion of each negotiated deliverable, rather than payment for actual time and material costs incurred during the agreement period.

Applicants must abide by standard funding restrictions as determined by SAMHSA and as described in Appendix A.

Payment schedule: Payments will be issued based on the completion of a set of agreed-upon deliverables as defined in the contract. Each contract will be divided into three payments:

- (1) 50% upon execution of contract and the completion of all compliance components
- (2) 40% based on achievement of initial report deliverables, and
- (3) 10% based on receipt and approval of final cumulative report, demonstrating completion of all deliverables.

If a contractor achieves all required deliverables by the end of the contract, the entire contract amount will be paid (i.e., “make up” payments are allowed).

FUNDING DESCRIPTION

Opioid Use and Stimulant Use Prevention and Recovery Services in the LGBTQ2S+ Community	
Description	These funds are for LGBTQ2S+ organizations to implement opioid use and stimulant use prevention and recovery services specifically for and within the LGBTQ2S+ community throughout California.
Amount Can Apply For	Up to \$250,000 for activities from March 1, 2022 – February 28, 2023.
Examples of Types of Activities	<ul style="list-style-type: none"> • Train and fund substance use navigators, behavioral health counselors, promotoras, cultural brokers, community champions, peer workers or other community health worker models to incorporate opioid use and stimulant use outreach, prevention and treatment referrals into their workflow. • Support staff positions for the duration of the contract to provide trauma-informed outreach, education and/or recovery services and connect individuals to services. • Implement a stigma-reduction campaign that is culturally responsive and linguistically appropriate. • Develop and circulate educational prevention materials (e.g., printed educational materials, duplication and distribution). • Connect individuals served with ongoing opioid use disorder and stimulant use disorder treatment services and resources through referrals and partnerships. <ul style="list-style-type: none"> ○ Connect with County partners. ○ Connect with treatment partners in the community. • Incorporate trauma-informed opioid use disorder and stimulant use education and outreach projects into organizational activities and programs. • Offer recovery services to support a recovery community such as peer support and community building, housing access, employment pathways, health care access, educational access, and other programs that are responsive to individuals and provide services and activities to support overall well-being and substance use disorder recovery⁹. • Implement other innovative efforts to expand trauma-informed opioid use and stimulant use outreach, education, prevention, treatment referrals and recovery.
Eligibility	<ul style="list-style-type: none"> • Organizations must be licensed/registered to do business in the State of California. • Organizations must be located in the State of California. • Organizations must provide services in the State of California.

⁹ Recovery is a process of change through which people improve their health and wellness, live self-directed lives and strive to reach their full potential. There are four major dimensions that support recovery:

- **Health**—overcoming or managing one’s disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being.
- **Home**—having a stable and safe place to live.
- **Purpose**—conducting meaningful daily activities and having the independence, income and resources to participate in society.
- **Community**—having relationships and social networks that provide support, friendship, love and hope.

For more information, see <https://www.samhsa.gov/find-help/recovery>.

	<ul style="list-style-type: none"> • Organizations must be a public entity or a 501(c)(3) entity. If an organization is a nonprofit but does not have 501(c)(3) status, they may use a qualifying fiscal sponsor. • Organizations must be <u>mission focused</u> on providing services to the LGBTQ2S+ community in their area. <p>Eligible LGBTQ2S+ organizations are those that include activities for and within the LGBTQ2S+ community and can include:</p> <ul style="list-style-type: none"> • School, youth, family, community-based and grassroots organizations explicitly focused on LGBTQ2S+ communities • Harm reduction organizations explicitly focused on LGBTQ2S+ communities <p>Organizations that are CenterLink LGBTQ Community Member Centers and fit the funding opportunity are highly encouraged to apply.</p>
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FUNDING RESTRICTIONS

The following will not be funded:

- Debt retirement
- Operational deficits
- Partisan activities
- Religious organizations for explicit religious activities
- Activities that exclusively benefit the members of sectarian or religious organizations
- Naloxone forms that cost more than \$75 per unit (*Naloxone Distribution Project information under glossary*)
- Fentanyl or fentanyl analogs
- Purchase of properties or vehicles
- No funding can be allocated to purchase telehealth equipment for patients or loaning equipment to patients off site for the purpose of providing telehealth services.
- Personal Protective Equipment (PPE) for use by clients
- Hand sanitizer or cleaning products
- Direct payments to individuals to enter treatment or continue to participate in prevention or treatment services
- Direct substance use disorder treatment services
- Funds may not be used, directly or indirectly, to purchase, prescribe or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder. Grant funds also cannot be provided to any individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders. See, e.g., 45 C.F.R. § 75.300(a) (requiring HHS to “ensure that Federal funding is expended . . . in full accordance with U.S. statutory . . . requirements.”); 21 U.S.C. §§ 812(c)(10) and 841 (prohibiting the possession, manufacture, sale, purchase, or distribution of marijuana). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the DEA and under an FDA-approved investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned controlled substance under federal law.

- Funds shall not be utilized to provide incentives to any health care professional for receipt of a DATA waiver or any type of professional development training. Procurement of DATA waiver training is not an allowable use of SOR funds as this training is offered free of charge from SAMHSA at pccsnow.org. These restrictions apply to recipients and subrecipients of SOR funding.
- No more than 5 percent of the total grant award may be used for administrative and infrastructure development costs. Up to 2 percent of the total grant award may be used for data collection and reporting. (This is in addition to the 5% administrative cost which may also include data collection).
- Indirect costs under this opportunity are limited to a de minimis rate of 10% of modified total direct costs (MTDC), as defined in 45 CFR Part 75. We will accept federally negotiated indirect cost rates for organizations. Please be prepared to share documentation on the negotiated ICR.

Funds shall not be utilized for services that can be supported through other accessible sources of funding, such as other federal discretionary and formula grant funds, (e.g., HHS, CDC, CMS, HRSA and SAMHSA), DOJ (OJP/BJA) and non-federal funds, third-party insurance, and sliding scale self-pay, among others.

SELECTION AND EVALUATION CRITERIA

The Center will select applicants who present the most complete and responsive applications demonstrating a mix of experience, capacity and potential. Applications will be reviewed on how well proposed activities match the intent of the funding opportunity, anticipated overall impact, and strength of project team and proposal.

The most competitive applications will:

<ul style="list-style-type: none"> • Be from organizations whose primary purpose is to serve the LGBTQ2S+ community and have a demonstrated track record of engaging the LGBTQ2S+ community
<ul style="list-style-type: none"> • Provide a detailed description of exactly what will be done to address the problem and how it will be implemented – who will be involved, what they will do, timeline and what will change
<ul style="list-style-type: none"> • Propose projects that have buy-in and are ready for immediate community implementation
<ul style="list-style-type: none"> • Have a demonstrated track record with proposed project activities, including having a concrete plan for incorporating proposed activities into the organization’s current workflow
<ul style="list-style-type: none"> • Propose an outreach, education, early intervention, referral delivery model that strives for stigma reduction and enables positive outcomes and long-term recovery
<ul style="list-style-type: none"> • Affirm applicant’s ability to submit regular data and financial progress reports

Applications must adhere to the funding guidelines and present a budget clearly linked to the proposed activities. If application requests exceed available funding, the review committee will consider factors such as geographic diversity.

At The Center’s discretion, the above evaluation criteria are subject to change to best meet programmatic needs and funding requirements.

FEDERAL COMPLIANCE

The MAT Access Points Project is a component of the MAT Expansion Project, which is funded by the State Opioid Response grant from the Substance Abuse and Mental Health Services Administration (SAMSHA). If awarded, contractors will have to complete pre-award requirements before funding is disbursed. This includes the following:

Pre-award Assessment: In compliance with federal regulations (2 CFR 200.331(b)), The Center is required to assess subrecipients prior to the execution of contracts to identify potential risks. While this pre-award risk assessment is a required component of the contracting process and ensures organizations have the financial capacity to complete the work, responses to the assessment will not affect eligibility or funding recommendations. The decision to accept the receipt of federal funds requires an attention to submit detailed documentation and to meet compliance considerations when receiving this type of funding. If you would like to complete the pre-award assessment prior to award announcements, please use this [link](#). Please select “LGBTQ2S+ Prevention and Recovery Services” for the RFA/Project.

DUNS/SAM: An organization must be registered as follows before it can accept any funds through this project. Both of the following are provided free of charge:

- a. Data Universal Numbering System (DUNS): All contractors must obtain a DUNS number, which is a unique nine-digit identification number provided by Dun & Bradstreet (D&B). It will be used as the Universal Identifier. The applicant organization may request a DUNS number by telephone at 1-866-705-5711 (toll free) or Internet at <http://fedgov.dnb.com/webform/displayHomePage.do>. The DUNS number will be provided at no charge.
- b. System for Award Management (SAM): The SAM is the primary registrant database for the federal government and the repository into which an entity must submit information required to conduct business as a recipient. Although not required, it is recommended that all funded organizations register with SAM and be assigned a SAM number. All information relevant to the SAM number should be current at all times during which the applicant has an active contract through the MAT Access Points Project. SAM information should be maintained until a final financial report is submitted or the final payment is received, whichever is later. The SAM registration process can require 10 or more business days, and registration should be renewed annually. Additional information about registration procedures may be found at <https://www.sam.gov/SAM/>. There is no cost associated with this registration.

DUNS is required (and SAM is strongly recommended) before contract execution and payment. This is a free registration process; however, it does take time. The Center strongly suggests organizations register for DUNS/SAM as soon as possible in order to avoid delays in payment and if organizations anticipate pursuing other federal funding. No payments can be issued until DUNS is verified and the organization is not on an exclusion list for federal funding. If you have questions related to the DUNS/SAM process, please reach out to mataccesspoints@shfcenter.org, subject “DUNS/SAM Support”.

PLEASE NOTE: DUNS will be replaced by a Unique Entity ID (SAM) on April 4, 2022. There is no action necessary if an organization is already registered in SAM.gov as a Unique Entity ID (SAM) is automatically assigned. After April 4, 2022, organizations will be required to register for a Unique Entity ID (SAM) on SAM.gov instead of a DUNS, if not already registered. A DUNS is required prior to April 4, 2022. Please see this [Quick Start Guide for Getting a Unique Entity ID](#).

Insurance Requirements: There will be insurance requirements under these contracts. Once funds have been awarded, communication will be sent to awarded organizations to upload the insurance documents and demonstrate compliance with all insurance requirements. Payment will not be released until insurance compliance requirements are met. The Center recognizes that the terms and coverage conditions for insurance requirements are technical in nature. If you need additional support to answer insurance questions or if you do not feel like you will be able to meet the insurance requirements, please reach out to mataccesspoints@shfcenter.org, subject “LGBTQ2S+ Insurance Requirements”. Refer to Appendix B for more information.

PROJECT TIMELINE

Contracts will cover activities for the following time period: March 1, 2022, through February 28, 2023. Due to federal restrictions, carry-over of funds is not allowable. Any funds not used by February 28, 2023, will be forfeited or must be returned.

DATA AND REPORTING REQUIREMENTS

Subcontractors will be required to submit quarterly progress reports responding to performance measures and including financial reports describing actual expenditures of contract funding. Please see Appendix C for information on the Scope of Services. Potential performance measures include:

- Meetings/presentations to external stakeholder (number of events/number of attendees)
- Webinars held (number of events/number of attendees)
- Trainings provided (number of events/number of attendees)
- Hybrid webinar/in-person meetings (number of events/number of attendees)
- Community engagement/events held (number of events/number of attendees)
- Other meetings/conventions held (number of events/number of attendees)
- Number of physicians/physician assistants/nurse practitioners/nurses (RN, LVN)/social workers/addiction counselors/peer recovery support positions/prevention professionals/administrators/pharmacists/psychologists/LMFTs/criminal justice professionals/community members/youth/substance use navigators (SUNs)/promotoras/medical assistants/health educators/community health workers/DUI program participants/other or unknown persons trained in overdose education and Naloxone distribution/prescribing guidelines/all other trainings
- Number of individuals to whom you provided technical assistance (clinical professionals, administrative professionals, other)
- Number of outreach materials developed
- Number of outreach materials distributed
- Number of ads developed
- Number of impressions from media sources
- Number of website views
- Recipients of your outreach/education activities during the reporting quarter (potential patients/general public/treatment providers/health care clinics/specialty substance use treatment programs/

criminal justice professionals/pharmacies or pharmacists/youth or community/ community organization/harm reduction organization/opioid coalitions/other)

- Number of Naloxone units purchased
- Number of Naloxone units distributed
- Number of Overdose reversals reports
- Number of Fentanyl testing strips purchased
- Number of Fentanyl testing strips distributed
- Number of Individuals provided with fentanyl testing strips
- Number of Individuals screened for SUDs
- Number of Individuals screened for mental health
- Number of individuals referred for SUD treatment services
- Number of individuals referred for SUD recovery support services
- Number of individuals referred for housing support services
- Number of individuals provided with recovery support services
- Type of recovery support services provided (housing/employment/transportation/social services/ food access/education, other)

Final Report Components (submitted at contract end)

- Narrative
 - Summary of project over the contract period
 - Major accomplishments over the contract period
 - Major barriers over the contract period
- Financial
 - Financial report with detailed expenditure listing
 - Report actual expenditures compared to the approved budget. Explain all budget variances.

Performance measures may be revised as needed to address current situations and high priority challenges.

Reports will follow the timeline below.

Report	Period	Date Due
Quarter 1 Data Report	3/1/2022 – 3/31/2022	4/15/2022
Quarter 2 Data Report	4/1/2022 – 6/30/2022	7/15/2022
Financial Progress Report	3/1/2022 – 6/30/2022	7/15/2022
Quarter 3 Data Report	7/1/2022 – 9/30/2022	10/15/2022
Quarter 4 Data Report	10/1/2022 – 12/31/2022	1/15/2023
Quarter 5 Data Report	1/1/2023 – 2/28/2023	3/15/2023
Final narrative and financial report	3/1/2022 – 2/28/2023	3/15/2023

RECOVERY SERVICES – DATA PROTOCOL AND GPRA COLLECTION

Only if applicable, if the subcontractor is using contract funds to cover recovery services (activities or recovery staff), the subcontractor will need to comply with all SAMHSA Government Performance and Results Act (GPRA) of 1993 reporting requirements. Additional information and technical assistance will be provided to organizations required to submit GPRA data.

GPRA Data Collection Incentives: For certain interviews, a maximum cash value of \$30 per interview is allowable. The incentives can include items such as food vouchers, transportation vouchers or phone cards. Incentives are only permitted for completion of a six-month GPRA follow-up interview. For GPRA discharge interviews, the incentive cannot be used for routine discharge interviews; they can only be used when program staff must search for a client who has left the program, or a client has dropped out of a program.

APPLICATION TIMELINE

At The Center's discretion, the timeline below is subject to change to best meet programmatic needs and funding requirements.

APPLICATION DEADLINE:

January 28, 2022, at 1 p.m. (Pacific Time)

REVIEW OF APPLICATIONS:

February 2022

APPROXIMATE AWARD ANNOUNCEMENT:

March 2022

NOTE: All funding will be backdated to March 1, 2022, even if contracts are signed after March 1.

To be considered, your proposal must be submitted by 1 p.m. (Pacific Time) on the deadline date. Proposals received after the due date/time will not be reviewed. Submission before the deadline date is advised in case you experience technical difficulties with submitting your application through the portal. We may not be able to respond to your requests for help on the deadline date.

PROPOSERS' WEBINAR

We have pre-recorded an RFA Overview presentation that covers the application and submission process. The webinar recording is available at <https://youtu.be/i-99egFc8cg> and on the [MAT web site](#). We have scheduled an additional proposers' webinar to review the funding opportunity and the application process, and to answer questions on **Monday, January 10, from 11 a.m. to 1 p.m.** (Pacific Time). The webinar content will cover the same materials as the RFA Overview presentation recording linked above. Review of the recording or webinar attendance is strongly recommended. Registration to attend the live RFA webinar is available online at https://us06web.zoom.us/webinar/register/WN_ffDEiymoQPGipx2PkBGEgg. This webinar will also be recorded and posted on the MAT Access Points Project [web site](#). Application materials are posted on the MAT Access Points [web site](#) to review prior to the live webinar.

Important Application Guidelines

To help us process your application, please follow these submission guidelines:

- We encourage you to submit your application before the deadline date in case you need help with any of the RFA components.
- Applications are due no later than 1 p.m. (Pacific Time) on January 28, 2022.
- Submit the application via our online portal through this [link](#). New users of the portal will need to create an account as the first step in the application process. You will only use this link one time to initiate your application. After you have started working on your application, use the link below or received via e-mail to continue working on your saved application.
- Respond to all required fields (marked with an *).
- Upload all attachments listed under “Application Checklist” below.
- On the portal, you may click “Save & Finish Later.” You will receive an e-mail with a link to return to your in-progress application. You may also use this [link](#) to return to your in-progress application.
- Click “Save & Finish Later” any time you will not be working in your application for a few minutes.
- You may submit your application only once. Be sure your application is complete and accurate, including required documents, before submitting it. Revised applications will not be accepted.
- If you are unable to submit your application online or need help, please contact us at mataccesspoints@shfcenter.org with the subject line: LGBTQ2S+ Application Online Help.

Send questions and inquiries related to this funding opportunity
to mataccesspoints@shfcenter.org with the subject line:
LGBTQ2S+ RFA Question

APPLICATION CHECKLIST

- Initiate the funding application [online](#). The link is also posted on the MAT Access Points Project [web site](#). *Use this link only once to initiate your application.*
- Required Application Attachments**
 - Proposed project budget completed in The Center’s Proposed Budget Template (template is available in the online portal for download)
 - Proposed budget justification
 - Applicant organization’s W-9

Incomplete applications will not be reviewed. Applications received after the above deadline will not be considered. If you are unable to submit your application online or need technical assistance, please contact us at mataccesspoints@shfcenter.org with the subject line: LGBTQ2S+ Application Online Help.

Appendix A – Standard Funding Restrictions

HHS codified the *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards*, 45 CFR Part 75. All components of 45 CFR Part 75 are applicable to all sub-recipients. In Subpart E, cost principles are described and allowable and unallowable expenditures for HHS recipients are delineated. 45 CFR Part 75 is available at <https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=df3c54728d090168d3b2e780a6f6ca7c&ty=HTML&h=L&mc=true&n=pt45.1.75&r=PART>. Unless superseded by program statute or regulation, follow the cost principles in 45 CFR Part 75 and the standard funding restrictions below.

SAMHSA funds must be used for purposes supported by the program and may not be used to:

- Exceed Salary Limitation: The Consolidated Appropriations Act, 2016 (Pub. L.113-76) signed into law on January 10, 2016, limits the salary amount that may be awarded and charged to SAMHSA grants and cooperative agreements. Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II. The Executive Level II salary can be found in SAMHSA’s standard terms and conditions for all awards at <https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>. This amount reflects an individual’s base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to the applicant organization. This salary limitation also applies to sub awards/subcontracts under a SAMHSA grant or cooperative agreement. The Federal Executive Level II Salary Cap is currently \$199,300.
- Pay for any lease beyond the project period.
- Pay for the purchase or construction of any building or structure to house any part of the program. (Applicants may request up to \$75,000 for renovations and alterations of existing facilities, if necessary and appropriate to the project.)
- Provide residential or outpatient treatment services when the facility has not yet been acquired, sited, approved, and met all requirements for human habitation and services provision. (Expansion or enhancement of existing residential services is permissible.)
- Provide detoxification services unless it is part of the transition to MAT with extended-release naltrexone.
- Make direct payments to individuals to enter treatment or continue to participate in prevention or treatment services.
 - Note: A recipient or treatment or prevention provider *may* provide up to \$30 non-cash incentive to individuals to participate in required data collection follow up. This amount may be paid for participation in each required follow-up interview.
- Meals are generally unallowable unless they are an integral part of a conference grant or specifically stated as an allowable expense in the FOA. Funds may be used for light snacks, not to exceed \$3.00 per person.
- Support non-evidence-based treatment approaches, such as short-term methadone or buprenorphine use (“detox” with initial treatment less than one year).
- No out-of-state travel is permitted with these funds.

**SAMHSA funds were granted to the State and all funding restrictions are applicable to this funding opportunity and all sub-contracts.*

Appendix B – Insurance Requirements

All evidence of required insurance coverage must be submitted to The Center prior to the release of payment. Awarded organizations will receive an e-mail from “The Center@Sierra Health Foundation” via TrustLayer requesting the same insurance documents as indicated below. A link will be provided for organizations to review and upload the required insurance documents. Please pay special attention to the “Additional Requirements” section for exact instructions and specific language that must be included.

Commercial General Liability

- Each Occurrence must be greater or equal to \$1,000,000
 - Coverage Trigger: Occurrence must be present
 - Insurance is written on an occurrence basis using ISO form CG 0001 or equivalent
- General Aggregate must be greater or equal to \$2,000,000
- Products/Completed Operations Aggregate must be greater or equal to \$2,000,000
- Personal and Advertising Injury must be present
- Primary and Non-Contributory Endorsement must be present
- Additional Insured Endorsement must be present
 - With Completed Operations language
 - Using a combination of ISO forms CG2010 10/04 and CG 2037 10/04 or equivalent

Automobile Liability

- Combined Single Limit (each accident) must be greater or equal to \$1,000,000
- Coverage Applies to: Owned Autos Only must be present
- Coverage Applies to: Hired Autos Only must be present
- Coverage Applies to: Non-Owned Autos Only must be present
- Additional Insured Endorsement must be present
 - Using ISO form CA 2048 or equivalent

Worker’s Compensation and Employer’s Liability

- Statutory Limits must be present
- Employer’s Liability Each Accident must be greater or equal to \$1,000,000
- Employer’s Liability Disease – each employee must be greater or equal to \$1,000,000
- Employer’s Liability Disease – policy limit must be greater or equal to \$1,000,000
- Waiver of Subrogation Endorsement must be present

Professional Liability

- Each Claim must be greater or equal to \$1,000,000
- Aggregate must be greater or equal to \$2,000,000

Improper Sexual Contact and Physical Abuse Insurance

- Coverage must be greater or equal to \$1,000,000

Cyber Liability

- Claims made Coverage must be greater or equal to \$1,000,000

Additional Requirements

- Certificate Holder must read: Sierra Health Foundation 1321 Garden Highway Sacramento, CA 95833
- A.M. Best rating of at least A-:VI
- 10 or more Passengers being transported in any one vehicle will require
 - State of California Class B driver's license
 - Auto liability in the amount of \$5,000,000 per occurrence for bodily injury and property damage combined.
- Description of Operations must read: The Center, Sierra Health Foundation, The State of California, their respective officers, directors, agents, representatives, constituent entities, affiliates, volunteers, officials, parents, subsidiaries, and employees shall be added as Insureds (“additional Insureds”) under each commercial general liability and automobile insurance policy. **Agreement # 21-10295** and **Agreement # 20-10323** must be present

Appendix C – Scope of Services

Each contract agreement will include an individual scope of services as outlined below. The application and budget of each awarded application will be reviewed, and the applicable tasks will be checked off.

Opioid Use and Stimulant use Prevention and Recovery Services in the LGBTQ2S+ Community Project Purpose: To support prevention and education, connections and referrals to treatment services, and recovery activities and programs specifically addressing opioid use and/or stimulant use in the LGBTQ2S+ community.

Required	Task	Deliverable	Timeframe
✓	Complete subrecipient grant program onboarding	Webinar attendance	First quarter of the contract
✓	Administrative Requirements including submission of narrative and budget reports that address progress toward meeting desired outcomes indicated in the grant application.	<ol style="list-style-type: none"> Quarterly data progress reports Intermittent financial report Final report (narrative and financial) 	See schedule below
	Increase prevention and education activities and programs for opioid use disorder and/or stimulant use disorder as indicated in the application and budget.	Quantitative data on number of individuals served and types of prevention/education services (shared through quarterly data progress reports)	March 1, 2022 – February 28, 2023
	Increase treatment referrals and partnerships for opioid use disorder and/or stimulant use disorder as indicated in the application and budget.	Quantitative data on number of referrals (shared through quarterly data progress reports)	March 1, 2022 – February 28, 2023
	Increase recovery support services for individuals with opioid use disorder and/or stimulant use disorder such as assistance around housing, education, employment, social services, etc. as indicated in the application and budget.	Quantitative data on number of individuals served and types of recovery services (shared through quarterly data progress reports)	March 1, 2022 – February 28, 2023

Report	Period	Date Due
Quarter 1 Data Report	3/1/2022 – 3/31/2022	4/15/2022
Quarter 2 Data Report	4/1/2022 – 6/30/2022	7/15/2022
Financial Progress Report	3/1/2022 – 6/30/2022	7/15/2022
Quarter 3 Data Report	7/1/2022 – 9/30/2022	10/15/2022
Quarter 4 Data Report	10/1/2022 – 12/31/2022	1/15/2023
Quarter 5 Data Report	1/1/2023 – 2/28/2023	3/15/2023
Final narrative and financial report	3/1/2022 – 2/28/2023	3/15/2023

FOR REFERENCE ONLY
SUBMIT YOUR APPLICATION USING THE ONLINE PORTAL

MAT Access Points Sub-Contractor Application

Pre-Application QUIZ

Has the applicant been debarred from receiving federal funds?

Select Yes or No.

INSTRUCTIONS

Be sure to read the request for applications carefully before beginning your application. Required fields and attachment uploads are marked with *.

You may save your in-progress application at any time and return to it later using the link you will receive in an automated e-mail.

Should you have questions, send an e-mail to mataccesspoints@shfcenter.org with the subject line: LGBTQ2S+ Application Online Help.

APPLICANT INFORMATION

Applicant Organization Information

Organization Name*

Enter the organization's legal name.

Is the applicant organization a fiscal sponsor for this proposal? *

A fiscal sponsor is an organization that applies on behalf of an entity or group that does not have legal standing with the IRS. Select Yes or No.

Name of fiscally sponsored organization, if applicable.

Enter the name of the organization who will be implementing the project, otherwise known as the fiscally sponsored organization.

Applicant Organization Address*

City*

State*

Zip Code*

County*

Phone*

Website URL (optional)

Tax Exempt ID # or Employer ID #*

Enter the applicant organization's Tax-ID or the Employer ID if the organization is an individual.

DUNS #

Enter the organization’s Data Universal Numbering System number. If the organization does not have DUNS number, we highly recommend that the organization completes registration as soon as possible as it is a requirement before funds can be disbursed.

SAM Expiration Date

Enter the registration expiration date for the organization. It can be found in the SAM system. If the organization does not have SAM expiration date, we highly recommend that the organization completes registration as soon as possible as it is a requirement before funds can be disbursed.

Organizational Status*

Organization has 501(c)(3) nonprofit status with the IRS. Select Yes, No, or Unsure.

Annual Budget*

What is the applicant organization's annual budget amount?

Annual Audit*

Does the applicant organization have an annual financial audit? Select Yes or No.

CEO/Director Information

Prefix* First Name* Last Name*

Title*

E-mail Address*

Office Phone* Extension

Project Contact Information (for questions related to this proposal)

Prefix* First Name* Last Name*

Title*

E-mail Address*

Office Phone* Extension

PROJECT INFORMATION

Project Information

Project Name* (10 words maximum):

Brief Summary and Purpose of Project* (100 words maximum):

Project Start Date: March 1, 2022

Project End Date: February 28, 2023

Total Amount Requested: * \$ _____

Up to \$250,000.00.

Project Geography

Geography (County-level) *

Please indicate what percentage of activity will be spent in which California counties. Total must add up to 100. (A list of all 58 California counties is in the online application.)

Population to be Served

Focus Populations (Race/Ethnicity) *

For the racial and ethnic populations that will be affected, provide your best estimate of the percentage of the total people of each population (Total must add up to 100.)

- African-American/Black: %
- American Indian/Alaska Native: %
- Asian-American/API: %
- Latino/Hispanic: %
- White: %
- Mixed race: %
- Other: % [please specify]

Focus Populations (Age Groups) *

For the age groups that will be impacted, provide your best estimate of the percentage in each age group. (Total must add up to 100.) *There are no age restrictions/limits for individuals served with these funds.*

- Under 5: %
- 5 - 9: %
- 10 - 14: %
- 15 - 19: %
- 20 - 24: %
- 25 - 54: %
- 55+: %

NARRATIVE QUESTIONS

Organization Description*

Provide a brief overview of your organization (the entity that is carrying out the project), including: a) when it was established, b) its mission, and c) whom you serve. (200 words maximum)

**Organizations that do not have a mission focus on LGBTQ2S+ services are not currently eligible for this funding opportunity.*

Fiscal Sponsor Description

If the project has a fiscal sponsor that is different from the organization that is implementing the project, briefly describe the fiscal sponsor, including its mission and any past and/or current work with the sponsored organization. (200 words maximum)

Track Record with Proposed Project Activities*

State whether the proposed activities are new to your organization or an expansion of or supplement to existing activities. Describe your organization's experience with the kind of work proposed in this application. Briefly describe 1-3 examples of successes your organization has had implementing similar work. (200 words maximum)

Population Description*

Describe the population that will be affected by the proposed project. Include any data available on their geographic setting or neighborhood as well as demographic characteristics (age, gender, race/ethnicity), socioeconomic status, and any other relevant information.) (200 words maximum)

Track Record with Proposed Focus Population*

Describe your organization's experience providing culturally and linguistically appropriate services to the LGBTQ2S+ community. Briefly describe 1-3 examples of your work with this community (or communities). (200 words maximum)

Use of Funds*

Describe in detail your plan to use these funds to pursue the long-term impact of opioid use disorder, stimulant use disorder, and substance use disorder prevention and recovery in the LGBTQ2S+ community. List the specific activities and resources needed to carry out your proposed project, and the timeline. (300 words maximum)

Expected Outcomes*

List 2-5 expected direct outcomes of the proposed activities. The expected outcomes should be specific and measurable. (300 words maximum)

Evaluation Process*

Describe how you will document or evaluate project activities and progress toward the outcomes. (300 words maximum)

Partnerships*

Describe partnerships that are already in place or will be established to support implementation of your program goals. If no partners are needed, please explain. (200 words maximum)

Organizational Capacity*

Describe the qualifications of the project leaders and key staff on the project. Specify which positions have staff in place and which will need to be hired. Explain how these qualifications demonstrate an ability to be culturally responsive in carrying out the activities identified above. (200 words maximum)

Sustainability*

If the project is to continue beyond the grant period, describe your plans for sustainability of the proposed project. Include (1) if you are leveraging or plan to leverage other existing sources of funding and (2) if you have submitted or will submit this project to other funders. (200 words maximum)

Technical Assistance

To help us plan a technical assistance strategy, please tell us what technical assistance your organization would benefit from in implementing this project? (Your response to this question is not considered in decisions about funding.) (150 words maximum)

ATTACHMENTS

- Proposed Project Budget*
 - a. [Download The Center's budget form](#). Fill it in and upload it in Excel format.
- Proposed Project Budget Justification*
 - a. Applicants may use the provided budget narrative/justification template. [Download the form](#). Upload your budget narrative/justification in word or PDF format.
- Applicant organization's W-9*