

REQUEST for APPLICATIONS

***PROBLEM GAMBLING TREATMENT SERVICES***

State Fiscal Years 2016-17

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**STATE OF NEVADA**  
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**SFY 2016 - 2017**  
**REQUEST FOR APPLICATIONS and INSTRUCTIONS**  
**Revolving Account for the Prevention and Treatment of Problem Gambling**

***PROBLEM GAMBLING TREATMENT SERVICES***

**NOTE: This application is also available at <http://dhhs.nv.gov/Grants>**

**BACKGROUND**

Nevada is viewed throughout the world as a leader in the casino and gaming sector with regard to regulation, technology, business strategies, and sophistication of its gaming companies. In the same manner, Nevada has sought to develop systems to reduce gambling-related harms by addressing problem gambling and developing strategies that encourage responsible gaming.

In 2005, the Nevada State Legislature passed Senate Bill 357 to create the Revolving Account for the Prevention and Treatment of Problem Gambling and also an Advisory Committee on Problem Gambling (ACPG) to advise the Department of Health and Human Services (DHHS) in its administration of this account. Today, Nevada Revised Statute (NRS) 458A provides the program structure and NRS 463.320(e) authorizes the revenue (\$2 per slot machine per quarter). Nationwide economic problems led to a reduction in the amount of funding available from State Fiscal Year (SFY) 2011 through SFY2013, but full funding was restored in SFY 2014.

Problem Gambling Treatment in Nevada is aligned with a strategic plan cooperatively developed in SFY 2011 by DHHS staff, a contracted technical expert, and members of the ACPG and treatment providers. The plan includes treatment standards, fee-for-service rate reimbursements, and specific goals for each year through SFY 2016. The strategic plan was approved by the ACPG at its April 29, 2011 meeting and was last updated in August of 2014. It serves as the foundation for this Request for Applications (RFA) and may be viewed online.

[http://dhhs.nv.gov/uploadedFiles/dhhs.nv.gov/content/Programs/Grants/Programs/Problem\\_Gambling/PG\\_Treatment\\_Strategic\\_Plan\\_SFY2015\\_v81314.pdf](http://dhhs.nv.gov/uploadedFiles/dhhs.nv.gov/content/Programs/Grants/Programs/Problem_Gambling/PG_Treatment_Strategic_Plan_SFY2015_v81314.pdf)

For the purposes of this RFA, applicants are asked to describe their service proposal based on the Provider Guide and Reimbursement Codes and Rates contained in the most recent edition of the Treatment Strategic Plan. However, applicants should keep in mind that changes in service descriptions may occur if treatment demands surpass available funding. Any necessary changes would be made through the same kind of collaborative process that originally produced the strategic plan.

## **AVAILABLE FUNDING**

Projected available funding for Problem Gambling Treatment services in SFY 2016 is \$910,612 and in SFY 2017 is \$910,612. An additional \$13,150 is projected to be available in each fiscal year to gambling treatment grantees for program enhancements. These projections are subject to the availability of funds as well as any and all changes made by the 2015 Legislature during the state budgeting process. If changes occur, amendment(s) to this RFA will be published.

Program Enhancement Funds will be available for grantees that are awarded a Treatment grant. These funds are flexible grant dollars to help offset program costs not directly reimbursed by the service codes on Pages 32 and 33 of the Nevada Problem Gambling Treatment Strategic Plan. Allowable expenses fall into the following three categories:

1. Client wrap-around services: Costs related to client wrap-around services such as transportation to treatment, short-term housing, child care, etc.
2. Workforce development: Costs related to staff development such as arranging for an outside supervisor or costs associated with obtaining/maintaining certification as a problem gambling counselor.
3. Program materials: Costs related to materials such as client workbooks or treatment materials such as resource guides, books, videos, software, or licensing fees.

Agencies that are awarded a Treatment grant will be contacted by DHHS to establish the Program Enhancement grant.

## **GRANT PERIOD**

Awards made under this RFA are intended to span two State Fiscal Years – 2016 and 2017. Year One awards begin July 1, 2015 and end June 30, 2016. Year Two awards begin July 1, 2016 and end June 30, 2017. All awards are subject to funding availability. Year Two awards are also contingent upon grantee performance in Year One.

## **GENERAL PURPOSE OF FUNDING**

Problem Gambling Treatment is defined as the application of counseling to reduce or eliminate symptoms related to Problem Gambling. Treatment must be administered by a Certified Problem Gambling Counselor (CPGC) or Certified Problem Gambling Counselor Intern (CPGCI) approved by the Nevada Board of Examiners for Alcohol, Drug and Gambling Counselors and may include:

- Inpatient and/or outpatient services;
- Individual and/or group therapy, cognitive and behavioral therapy with supplemental support groups, and family therapy;
- Psycho-educational groups; and/or
- Clinical supervision, by Board approved supervisor, provided to Board certified intern.

Applicants who receive grant funds to provide Treatment services **must comply** with all standards and provisions detailed in the Nevada Problem Gambling Treatment Strategic Plan including, but not limited to, the following:

- DHHS Problem Gambling Treatment Provider Guide, Pages 12-19
- Residential Gambling Treatment Admission Criteria, Page 20
- Gambling Treatment Provider Standards, Pages 21-28

- Encounter Data Reporting Requirements, Pages 29-31

The standards and provisions detailed in the Nevada Problem Gambling Treatment Strategic Plan are subject to change during the grant period. If changes are made, those would most likely be to add service codes, revise data reporting requirements, or provide additional details for the purpose of clarifying clauses or conditions.

## **APPLICATION PROCESS**

### **Eligibility**

All governmental, educational, nonprofit and for-profit agencies are eligible to apply for funds to provide services consistent with this RFA.

### **Application Process**

This is an online application process. Additional details about the online process are located in the “Application Instructions” section of this document (*see Page 9*).

### **Mandatory Orientation**

In order to obtain the information necessary to access the application website, applicants **must** attend the Orientation Session, which will be conducted via webinar. The orientation date and time is provided on Page 7. ***The URL address and password to access the application website will be released by 5 p.m. on Friday, February 27, 2015 to all applicants who attended the orientation session.*** Verification of attendance is based on webinar registration and log-in, so applicants must be sure that at least one representative of their organization is actually logged in to the session. Applicants will need a valid email address and the organizations tax ID in order to access the online application.

### **Application Questions and Answers**

Substantive questions about the application may be submitted via e-mail to [gmu@dhhs.nv.gov](mailto:gmu@dhhs.nv.gov) through 5 p.m. ***Friday, March 6, 2015***. Inquiries will be responded to as quickly as possible, and all questions and answers will be posted to the DHHS Grants Management Unit (GMU) website by 5 p.m. ***Tuesday, March 10, 2015*** ([http://dhhs.nv.gov/Programs/Grants/Forms/RFA\\_2016-17\\_ProblemGambling/](http://dhhs.nv.gov/Programs/Grants/Forms/RFA_2016-17_ProblemGambling/)). The Q&A will remain on the website through the end of the application period. After March 6, 2015, no substantive questions about the application will be answered. Technical questions regarding submission may still be directed to Laurie Olson via e-mail at [lolson@dhhs.nv.gov](mailto:lolson@dhhs.nv.gov) or via telephone at (775) 684-4020.

**Applicants are advised not to wait until the deadline to ask submittal questions since the GMU cannot guarantee immediate response and applications submitted after the published deadline will be disqualified.**

### **Award Process**

Proposals received by the published deadline of 5 p.m. Friday, ***March 27, 2015*** will be reviewed in a three-step process.

1. Staff from the DHHS GMU will review applications to ensure that minimum standards are met. Submissions must include applicant information, an executive summary, answers to all RFA questions, and responses to a fiscal management checklist. Applications **will** be disqualified if they are received after the stated deadline and **may** be disqualified if they:
  - Are missing any fundamental elements (e.g., attachments);
  - Do not meet the intent of the RFA; or

- Are submitted by an entity that is financially unstable as evidenced by information gleaned from the fiscal management checklist and required fiscal documents.
2. Applications that meet minimum standards will be forwarded to a review team composed of DHHS GMU staff and business associates to identify technical strengths and weaknesses of the applicants' response to each question and develop preliminary funding recommendations for the ACPG's consideration. For SFY14-15 Nevada Problem Gambling Treatment grantees, funding for treatment will be allocated based on an allocation formula developed by the DHHS Grants Management Unit along with the Problem Gambling contracted technical expert. (See Appendix B.)
  3. In a public meeting scheduled for Thursday, May 21, 2015 ACPG members without a conflict of interest will discuss results of the reviews, funding recommendations prepared by the review team, and the performance of current or past Nevada grantees. ACPG members with a conflict of interest (i.e., members who have applied for funding or have an affiliation with an applicant agency) will be excused from Step Three of the process.

At the conclusion of the committee discussion, the ACPG will recommend applicants for funding to the DHHS Director. No specific grant amount will be recommended.

At this time, the ACPG may also recommend changes in an applicant's service plan to address concerns brought forward by the reviews.

Final funding decisions will be made by the DHHS Director based on the following factors.

- Reasonable geographic distribution of the available funds within the Revolving Account for Prevention and Treatment of Problem Gambling;
- Conflicts or redundancy with other federal, state or locally funded programs, or supplanting (substitution) of existing funding;
- Availability of funding; and
- Consideration of the recommendations of the ACPG.

**Funding decisions made by the DHHS Director are final. There is no appeals process.**

Applicants will be notified of their status after the Director's decisions have been made. DHHS GMU staff will conduct negotiations with the applicants recommended for funding. During these negotiations, any specific issues identified by the ACPG, the GMU or DHHS Director will be addressed. These issues may include, but are not limited to:

- Revisions to the Scope of Work;
- Revisions to outcomes; and/or
- Enactment of Special Conditions (e.g., certain fiscal controls, more stringent performance requirements or more frequent reviews).

Not all applicants who submit a qualifying proposal or are contacted for final negotiation will necessarily receive an award. All questions and concerns must be resolved before a grant will be awarded. Upon successful conclusion of negotiations, DHHS GMU staff will complete and distribute to grantees notices of grant award, general conditions, grant assurances and grant instructions.

Awards will be based on a "not to exceed" grant amount that may be increased or decreased mid-year depending on utilization patterns of all treatment grantees. (See Section IV-A-18 on Page 17 of the Nevada Problem Gambling Treatment Strategic Plan.)

**ALL FUNDING IS CONTINGENT UPON AVAILABILITY OF FUNDS.**

**Reimbursement Method**

Reimbursement to grantees for treatment will be based on the service codes and rates listed in Pages 32-33, of the Nevada Problem Gambling Treatment Strategic Plan.

**Reporting and Other Requirements**

All applicants whose proposals are funded will be required to report as described in the Nevada Problem Gambling Treatment Strategic Plan and may also be required to submit to the DHHS GMU quarterly progress reports based on approved outcome measures no later than 30 days following the end of each quarter.

All grantees and subrecipients that provide direct services to clients are required to submit organizational and service information to Nevada 2-1-1 and to update that information annually. Proof of submission and/or updates will be required as part of the grantee's second quarter progress report.

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DHHS is not responsible for any costs incurred in the preparation of the application. All applications become the property of DHHS. DHHS, in coordination with the ACPG, reserves the right to accept or reject any or all applications. Projects awarded funding are those deemed to be in the best interest of the people of the State of Nevada.

## **TIMETABLE**

	<b>Application for Problem Gambling Treatment Programs</b>
Monday, February 23, 2015	Publish Request for Applications (RFA)
Thursday, February 26, 1:30-3:30 p.m.	RFA Orientation – to be scheduled via online webinar <b>Attendance is mandatory</b> URL to access online application released to webinar attendees by 5 p.m. on Friday February 27, 2015.
Friday, March 6	Deadline for submission of substantive questions about RFA <b>(No Questions will be accepted after 5 p.m.)</b>
Tuesday, March 10	DHHS posts final Q & A for RFA on website
<b>Friday, March 27</b>	<b>Deadline for submission of applications</b> <b>(No Applications will be accepted after 5 p.m.)</b>
Wednesday, April 1	Applications that meet minimum standards are forwarded to reviewers
Friday, May 1	Reviewers return results of evaluations to DHHS
Monday, May 11	DHHS staff provides ACPG with final results of reviews and recommendations
<b>Thursday, May 21, 9:00 a.m.</b>	<b>ACPG Meeting- committee discussion, award recommendations</b>
Thursday, May 28	DHHS Director makes final funding decisions
Friday, May 29 - Friday, June 26	DHHS staff conducts final negotiations with funded agencies and issues grant awards
July 1, 2015	Effective date for funds awarded to agencies

**Applicants must attend the Orientation session to be conducted via webinar.** Please RSVP to Gloria Sulhoff at [gsulhoff@dhhs.nv.gov](mailto:gsulhoff@dhhs.nv.gov) by 3:00 p.m. on **Wednesday February 25, 2015** so that the link to the webinar can be provided.

# APPLICATION INSTRUCTIONS

## I. Online Application Process

- A. This is an online application process. The URL address and password to access the application website will be released by 5 p.m. on **Friday, February 27, 2015** to all applicants who have attended the orientation session. Applicants will need a valid email address and the organizations tax ID in order to register online.
- B. The online application form will require, at minimum, organizational and contact information, a project title, a program summary, outputs and outcomes, and responses to questions regarding the proposed project. Each question will have a word limit. Applicants **must** provide an answer for each question marked with an asterisk to indicate that it is required or otherwise specifies that it is required. Failure to do so may result in disqualification. If a required question does not apply to a particular organization or proposal, the applicant must at least respond “**Not applicable.**”
- C. Applicants will be asked to provide the following documents. Some are required while others are optional depending on the content of the proposal. The online process will allow applicants to attach them when the application is submitted. The online system is programmed to accept documents with the following extensions – pdf, doc, docx, xls and xlsx. If a document’s extension does not match one of these choices, the applicant is advised to convert the document to pdf electronically, or print and scan the document to achieve a pdf format.
- Commitment letters from partner agencies (if applicable)
  - Memorandums of Understanding with partner agencies (if applicable)
  - Current List of Board of Directors or Other Governing Board (if applicable) including affiliations and terms of office
  - Auditor’s Letter and Schedule of Findings and Questioned Costs from most recent Federal Audit (if agency receives more than \$ 750,000 annually in federal funds)
  - Most recent Financial Status Report or Financial Statement (if Federal Audit not applicable)
- D. There is no option to attach unsolicited materials to the online application. Any unsolicited materials mailed, delivered or e-mailed to the GMU will **not** be accepted. This includes support letters, cover pages, cover letters, brochures, newspaper clippings, photographs, media materials, etc.
- E. Technical questions regarding online submission may be directed to Laurie Olson via e-mail at lolson@dhhs.nv.gov or via telephone at (775) 684-4020.

**Applicants are strongly advised not to wait until the deadline to ask submittal questions since the GMU cannot guarantee immediate response and applications submitted after the published deadline will be disqualified.**

- F. Once the full application is submitted, no corrections or adjustments may be made prior to the negotiation period.



**Nevada Department of Health and Human Services  
Request for Applications SFY 2016-17**

**APPENDIX A**

**TREATMENT SCORING MATRIX**

Proposals with an average score lower than 70 may be excluded from further consideration.

Accepted proposals will be evaluated based on the following criteria:

- A. All parts of each section are included and addressed.
- B. Descriptions and detail are clear, organized and understandable.
- C. Descriptions are responsive to the intent of the RFA objectives.
- D. The overall ability of the applicant, as judged by the evaluation committee, to successfully provide services in accordance with the provider provisions and standards described in the Strategic Plan.

The maximum points to be awarded for each proposal section are as follows:

<b>Proposal Component</b>	<b>Potential Maximum Score</b>
I. Applicant Information	Not Scored
II. Executive Summary	Not Scored
III. Funding Request	10
IV. Services Proposed/ Program Description	50
V. Outputs and Performance Standards	Not Scored
VI. Populations to be Served	Not Scored
VII. Organization and Staff	20
VIII. Support of NV Problem Gambling Treatment Strategic Plan	20
<b>Total</b>	<b>100</b>

## APPENDIX B

### FUNDING FORMULA FOR CURRENT GRANTEEES

#### Problem Gambling Outpatient Treatment Allocated Funding Based on All Draws in SFY15

	Draws from July through March 2015	Total FY15 Projected Claims (July-March x 1.25)	Performance Rating Adjustment (7/7 performance standards = 15% increase, 6/7 = 10%, 5/7 = 5%, 4/7 = 0%, 3/7 = -15%)	SFY 2015 Grant Award	Difference Plus/Minus in Award	Projected Need for FY16 Award
<b>TOTALS</b>						
				<b>Total Available</b>		
				<b>Difference (Total Available - Total FY16 Funding Need)</b>		

#### DHHS Problem Gambling Treatment Grantee Performance Standards

1. Access: The amount of time between a problem gambling-affected individual’s request for outpatient services and the first offered appointment must be five business days or less for at least 90% of all individuals receiving services funded through this Agreement.
2. Retention: The percentage of problem gambling-affected individuals receiving services funded through this Agreement who actively engage in problem gambling treatment for at least 10 clinical contact sessions must not be less than 40%.
3. Successful Completion: The percentage of all individuals receiving services funded through this Agreement who successfully complete treatment must not be less than 35%. A successful problem gambling treatment completion is defined as the individual’s: (a) achievement of at least 75% of short-term treatment goals; (b) completion of a continued wellness plan (i.e., relapse prevention plan); and (c) lack of engagement in problem gambling behaviors for at least 30 days prior to discharge from services.
4. Client Satisfaction: The percentage of problem gambling-affected individuals receiving services funded through this Agreement who complete a problem gambling client satisfaction survey would positively recommend the provider to others must not be less than 85%.
5. Consent for Follow-Up Evaluation: The percentage of clients at clinic consenting for follow-up evaluation should be no less than 80% of the average percentage of clients consenting

system-wide.

6. Case Cost: The average outpatient treatment cost per case should be no more than 120% of the average cost per case across all DHHS funded outpatient gambling treatment grantees.
7. Service Cost Share: For each grantee, the dollar value of services paid from the Revolving Account for Problem Gambling will be compared to the dollar value of services reported but paid by other sources (including services rendered free of charge). These figures will be used to calculate the percentage that the reported/unpaid services represent. The percentage for each grantee will be averaged, and a standard will be identified by multiplying the average by 75%. Treatment providers whose Service Cost Share is at or below the identified standard will be considered as performing well on this measure.

\* Note: Long-term Outcome data not available for FY2016. FY2017 funding formula will include “Long-term Outcome” defined as “the percentage of problem gambling-affected individuals receiving services funded through this Agreement who successfully complete treatment, and whose responses to a problem gambling follow-up survey suggest maintained improvement at one year after treatment entry, must not be less than 50%.”