

State of Nevada

Department of Health and Human Services

OFFICE OF COMMUNITY PARTNERSHIPS AND GRANTS

**REQUEST FOR APPLICATIONS and INSTRUCTIONS
STATE FISCAL YEARS 2018 – 2019**

PROBLEM GAMBLING TREATMENT SERVICES

REVOLVING ACCOUNT FOR THE PREVENTION AND TREATMENT OF PROBLEM GAMBLING

NOTE: This document is available online at <http://dhhs.nv.gov/grants>

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PROBLEM GAMBLING TREATMENT SERVICES

This Request for Applications (RFA) is for competitive proposals to be funded through the Revolving Account for the Prevention and Treatment of Problem Gambling for State Fiscal Years (SFY) 2018 and 2019. This RFA is published and administered by the Office of Community Partnerships and Grants (OCPG) in the Director's Office of the Department of Health and Human Services (DHHS-DO).

This is a competitive process. Current grantees are not guaranteed funding in SFY18-19 and applicants who receive awards through this RFA are not guaranteed future funding.

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).

Problem Gambling Treatment in Nevada is aligned with the Nevada DHHS Problem Gambling Services Strategic Plan (the Strategic Plan), cooperatively developed in SFY 2016 by DHHS staff, a contracted technical expert, members of the ACPG, and problem gambling treatment providers. The Strategic Plan includes treatment standards, fee-for-service reimbursement rates, and goals followed by lists of enhancement activities intended to achieve the stated goal. The enhancement activities are divided into two phases, reflecting the sequence in which they will begin: Phase 1 enhancement activities were those that were initiated in SFY 2017 and Phase 2 enhancement activities are those designated to take place during the SFY18-19 grant cycle. Many of these enhancement activities are contingent on funding availability, with some possible with current funding levels and others only being possible with additional dollars invested in DHHS Problem Gambling Services; that is, funding levels beyond what are made available through this RFA. The Strategic Plan 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_PGStrategicPlan2017-2019v62316.pdf

For 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

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 SFY18 is \$789,000 and in SFY19 is \$789,000. Additional monies may be placed in reserves and made available each fiscal year for program needs such as contract budget adjustments based on factors that include higher than projected treatment encounter billing, start-up funding for approved demonstration projects, and other emerging needs. These projections are subject to the availability of funds as well as all changes made by the 2017 Nevada Legislature during the state budgeting process. If changes occur, an amendment to this RFA will be published.

GRANT PERIOD

Awards made under this RFA are intended to span two State Fiscal Years – 2018 and 2019. Year One awards begin July 1, 2017 and end June 30, 2018. Year Two awards begin July 1, 2018 and end June 30, 2019. All awards are subject to funding availability. Year Two awards are also contingent upon grantee performance in Year One.

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 (CPGC-I) 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 a Board-certified supervisor, provided to a Board-certified intern.

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

- Appendix A: DHHS Problem Gambling Treatment Provider Guide (pages 28-35)
- Residential Gambling Treatment Provider Standards (page 36)
- Gambling Treatment Provider Standards (pages 37-46)
- Encounter Data Reporting Requirements (pages 47-49)

The standards and provisions detailed in the Nevada Problem Gambling Services 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.

ELIGIBILITY AND APPLICATION PROCESS

ELIGIBILITY

All nonprofit and public agencies (including state, local and tribal governmental agencies, universities and community colleges) and for-profit agencies can apply if interested in providing services that address one or more of the funding priorities described in this RFA.

EXPLANATION OF COMPETITIVE PROCESS

This is a competitive grant solicitation process structured to meet accepted industry standards. It is inappropriate for applicants to attempt to influence the outcome in any manner other than by submitting a strong proposal. Transparency and respect of the process are essential for a fair result.

USE OF THE TERMS APPLICATION, PROPOSAL AND REQUEST

Throughout this document, the words “application” and “proposal” may be used interchangeably. Both refer to the documents that applicants will submit to support funding for their projects. In this section, a distinction is made between those documents and the point at which the documents become a qualified “request.”

APPLICATION PROCESS

This is an online application process. Additional details about the online process are located in the “[Application Instructions](#)” section of this document

MANDATORY ORIENTATION

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 included in the [Timeline](#) of this RFA, along with contact information for the OCPG staff member who will track RSVPs.

The URL address to access the application website will be released by 5 PM on Friday, February 24 to those prospective applicants who have 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 logged in to the session.

APPLICATION QUESTIONS AND ANSWERS

Substantive questions about the application may be submitted via e-mail to GMU@dhhs.nv.gov through **Monday, March 6, 2017**, and will be posted to the OCPG website <http://dhhs.nv.gov/Grants/> with responses, by Friday, March 10, 2017. The Q&A will remain on the website through the end of

the application period. **After March 6, 2017, no substantive questions about the application will be answered.**

Technical questions about navigating the online application may be directed to Gloria Sulhoff via e-mail at GSulhoff@dhhs.nv.gov or via telephone at (702) 486-3530 throughout the application period.

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

EVALUATION AND AWARD PROCESS

Proposals received by the published deadline of **5 PM Friday, March 31, 2017** will be reviewed in a three-step process.

1. Staff from the DHHS OCPG will review applications to ensure that minimum standards are met. Applications **may** be disqualified if they:
 - Are missing any fundamental elements (unanswered questions, required 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 OCPG staff and business associates. Reviewers will score each application, using the Scoring Matrix in [Appendix A](#) of this document, and develop preliminary funding recommendations for consideration by the Advisory Council on Problem Gambling (ACPG). Funding awards for applicants who are SFY16-17 Nevada Problem Gambling Treatment grantees will be determined based on an allocation formula developed by the DHHS OCPG and Problem Gambling contracted technical expert (see [Appendix B: Funding Formula for Current Grantees](#)).
3. In a public meeting scheduled for **Thursday, May 18, 2017** 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 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 3 of the process. After the committee discussion, the ACPG will recommend applicants for funding to the DHHS Director. No specific grant award amounts will be recommended.

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

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

- Reasonable geographic distribution of available funds within the Revolving Account for the 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
- 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 OCPG staff will conduct negotiations with the applicants recommended for funding. During these negotiations, any specific issues identified by the ACPG, the OCPG, or the DHHS Director will be addressed. These issues may include, but are not limited to:

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

Not all applicants who submit a qualifying proposal or are contacted for final negotiations will necessarily receive an award. All questions and concerns must be resolved before a grant will be awarded. Upon successful conclusion of negotiations, DHHS OCPG staff will complete and distribute to grantees the Notice of Grant Award (NOGA), General Conditions and Grant Assurances, and Grant Instructions and Requirements (GIRS).

Awards will be based on a "not to exceed" grant amount that may be increased or decreased during the grant year, depending on utilization patterns of all treatment grantees and other conditions as detailed in the Strategic Plan, Appendix A, Section IV-A, Item 18 (page 33).

ALL FUNDING IS CONTINGENT UPON AVAILABILITY OF FUNDS.

REIMBURSEMENT METHOD

Reimbursement to grantees for treatment services will be based on the Procedure Codes and Reimbursement Rates in Exhibit 4 of the Nevada Problem Gambling Services Strategic Plan (pages 51-52).

REPORTING AND OTHER REQUIREMENTS

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

All grantees and sub-recipients 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.

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.

SFY2018-2019 RFA TIMELINE – PROBLEM GAMBLING SERVICES

	Applications for Problem Gambling Programs
Friday, February 17, 2017	Publish Request for Applications (RFA)
Thursday, February 23 1:30 – 3:30 pm	Orientation held via webinar. <u>Attendance is mandatory.</u> URL to access online application released by 5 pm Friday, February 24, 2017.
Monday, March 6, 5:00 pm	Deadline for submission of substantive questions about RFA
Friday, March 10	DHHS posts final Q & A for RFA on website
Friday, March 31, 5:00 pm	Deadline for submission of applications
Monday, April 3	Applications are forwarded to reviewers
Monday, May 1	Reviewers return results of evaluations to DHHS
Thursday, May 11	DHHS staff provides ACPG with results of reviews and recommendations
Thursday, May 18	ACPG Meeting - Committee discussion, award recommendations
Friday, June 2	DHHS Director makes final funding decisions
Monday, June 5 – Friday, June 23	DHHS staff conducts final negotiations with funded agencies and issues grant awards
July 1, 2017	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 by 3:00 pm on **Wednesday, February 22, 2017** so that the link to the webinar can be provided.

APPLICATION INSTRUCTIONS

ONLINE APPLICATION PROCESS

- A. This is an online application process. The URL address to access the application website will be released by 5 PM on **Friday, February 24, 2017** to all applicants who have attended the orientation session.
- B. The online application form will require, at minimum, organizational and contact information, a project title, a program summary, projected outputs and outcomes, and responses to questions regarding the proposed project. Some questions may have a word limit. Applicants
- C. 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. Some questions may have a word limit. Applicants must provide an answer for each question marked with an asterisk, which indicates that an answer is required. If a required question does not apply to a particular organization or proposal, the applicant must at least respond “Not applicable, or N/A.” The online system will not allow an application to be submitted if a required field is left blank.
- D. Applicants will also be asked to attach documents to the application. Some are required while others are optional, depending on the content of the proposal. The application software supports the following file types for uploading: Word (.doc, .docx); Excel (.xls, .xlsx); and PDF (.pdf).
- If a document’s extension does not match one of these choices, the applicant is advised to convert it to pdf format.
 - The system will allow only one uploaded document per Upload File field. If you have multiple documents relating to a specific question/request (i.e., Letters of Agreement or MOUs), scan them into one PDF document and upload the resulting file.
 - Requested documents include the following. Note that all may not be applicable to the applicant. If the field is marked as required, but does not apply or the required document is not available, please upload a simple word document of explanation.
 - Copy of agency’s IRS 501(c)(3) Letter of Determination
 - Letters of Agreement or Memorandums of Understanding
 - Draft Agreements with Sub-awardees
 - Board of Directors or Other Governing Board Roster, including member affiliations and terms of office

- Most recent Single Audit and Management Letter (if agency receives more than \$750,000 annually in federal funds) OR most recent year-end financial statements (if federal audit is not applicable.)
 - Proof of agency liability insurance
 - Proof of workers' compensation insurance
- E. There is no option to attach unsolicited materials to the online application. Any unsolicited materials mailed, delivered or e-mailed to the OCPG will **not** be accepted. This includes support letters, cover pages, cover letters, brochures, newspaper clippings, photographs, media materials, etc.
- F. Technical questions regarding submission may be directed to Gloria Sulhoff via e-mail at gsulhoff@dhhs.nv.gov or by phone at (702) 486-3530.

Applicants are strongly advised not to wait until the deadline to ask submittal questions since the OCPG cannot guarantee immediate response and the online system will automatically close at 5 pm.

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

APPENDIX A: PROBLEM GAMBLING TREATMENT SERVICES SCORING MATRIX

Proposals with an average score lower than 60 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 Problem Gambling Prevention Guidelines.

Points will be assigned for each item listed as follows:

- 80% - 100% of Maximum Points:** Applicant’s proposal or capability is superior and exceeds expectations for this criterion.
- 60% - 79% of Maximum Points:** Applicant’s proposal or capability is satisfactory and meets expectations for this criterion.
- 40% - 59% of Maximum Points:** Applicant’s proposal or capability is unsatisfactory and contains numerous deficiencies for this criterion.
- 0 – 39% of Maximum Points:** Applicant’s proposal or capability is not acceptable or applicable for this criterion.

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

Proposal Component	Potential Maximum Score
I. Executive Summary	Not Scored
II. Funding Request	10
III. Services Proposed/ Program Description	35
IV. Outputs and Performance Standards	5
V. Population to be Served	10
VI. Organization and Program Staff	20
VII. Support of Problem Gambling Service Strategic Plan	20
Total	100

APPENDIX B: FUNDING FORMULA FOR CURRENT GRANTEES

Problem Gambling Treatment Funding Awards for SFY2018 Based on Draws in SFY17, July through March

	Draws from July 2016 through March 2017	Total SFY17 Projected Claims (July-March x 1.25)	Performance Rating Adjustment* (8/8 performance standards = 15% increase, 7/8 = 10%, 6/8 = 5%, 5/8 = 0%, 4/8 = -15%)	SFY 2017 Grant Award	Difference Plus/Minus in Award	Projected Need for FY18 Award
TOTALS						
Total Funding Available						
Difference (Total Funding Available - Total SFY18 Funding Need)						
* The "Service Cost Share" performance standard measure (see below) will not be used in the Performance Rating Adjustment						

DHHS Problem Gambling Treatment Grantee Performance Standards

Access: The amount of time between a problem gambling affected individual's request for outpatient services and the first offered service appointment must be five business days or less for at least 90% of all individuals receiving services funded through this Agreement.

Retention: The percent 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 50%.

Successful Completion: The percent of all individuals receiving services funded through this Agreement who successfully complete treatment must not be less than 50%. 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.

Client Satisfaction: The percent 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%.

Long-term Outcome: The percent of problem gambling affected individuals receiving services funded through this Agreement who successfully complete treatment whose responses to a problem gambling follow-up survey suggest maintained improvement at twelve months after intake must not be less than 50%.

Consent for Follow-Up Evaluation: percentage of problem gambling affected individuals receiving services funded through this Agreement at each clinic consenting for follow-up evaluation should be no less than 80% of the average percentage of clients consenting system-wide.

Case Cost: The average outpatient treatment cost per case must not be more than 120% of the average cost per case across all DHHS funded outpatient gambling treatment grantees.

Service Cost Share: The percentage of total reported services not claimed for DHHS reimbursement should be no less than 75% of the average percentage of total reported services not claimed for DHHS reimbursement across all DHHS treatment grantees.

Documentation Accuracy: A comparison of documented clinical services provided within client files and client sign-in sheets with encounters entered into the UNLV Problem Gambling Treatment Data Management System must have a correspondence rate of 95% or greater for any period of 28 consecutive calendar days or longer.