



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIRECTOR'S OFFICE

*Helping people. It's who we are and what we do.*



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Question Q1: Does the second bullet point under Eligible Entities include the prevention certification from SAPTA? We are a prevention coalition looking to apply for these funds.

Current Substance Abuse Prevention and Treatment Agency (SAPTA) certification and a minimum of two years of providing substance use disorder (SUD) treatment services – OR –

o Provide the level of program accreditation that meets or exceeds SAPTA certification standards (ex: hospital organization - Joint Commission). Programs that are Commission on Accreditation of Rehabilitation Facilities (CARF)- accredited must still obtain SAPTA certification. Page 8 of 26

(<http://dphh.nv.gov/Programs/ClinicalSAPTA/dta/Providers/SAPTAProviders>) - OR –

o Provide memorandums of understanding (MOUs) with community partners who will provide treatment and are able to provide proof of SAPTA certification in good standing. o Can provide direct services within 60 days of Notice of Subgrant Award (NOSA), if providing direct services.

o Can demonstrate significant completion and start of project within 60 days of subgrant for expansion or within 90 days of award for new projects. If applicant fails to meet the requirement, the state reserves the right to rescind the contract for failure to comply.

Answer Q1: **Yes**

Question Q2: Do you intend to hold a NOFO webinar?

Answer Q2: **No**

Question Q3: Can we utilize a portion of the funding to support the development of an Addiction Medicine fellowship training program? We would seek ACGME approval for the program.

If not, what other educational uses for the grant funding is permitted.

Answer Q3: **See page 6 of the NOFO;**

**this NOFO will allocate money from the FRN for the following initiatives focused on youth, adolescents, or TAY:**

- **Target 1: Enhance supports utilizing evidence-based practices**
- **Target 2: Expansion of youth, adolescent, and/or TAY treatment across all American Society of Addiction Medicine (ASAM) levels of care for OUD with co-occurring disorder (COD) integration**

- **Target 3: Develop and implement community prevention, treatment prevention and/or awareness activities around opioids, fentanyl, emerging drugs, and drugs of interest/prevalence in the community.**
- **Target 4: Provide opioid prevention and treatment consistently across the juvenile justice and public safety systems”**

Question Q4: Are specialty courts eligible to apply for these funds?

Answer Q4: Yes, however, please reference page 11: “Pursuant to NRS 433.740, an application submitted by a regional, local or tribal governmental entity must include, without limitation:

- (1) The results of a needs assessment that meets the requirements of NRS 433.742; and
- (2) A plan for the use of the grant that meets the requirements of NRS 433.744.”

Question Q5: Page 8 of the application states: Pursuant to NRS 458 and NAC 458, demonstrate:

- o Current Substance Abuse Prevention and Treatment Agency (SAPTA) certification and a minimum of two years of providing substance use disorder (SUD) treatment services o - OR –
- o Provide the level of program accreditation that meets or exceeds SAPTA certification standards (ex: hospital organization - Joint Commission). Programs that are Commission on Accreditation of Rehabilitation Facilities (CARF)- accredited must still obtain SAPTA certification. Page 8 of 26 (<http://dphh.nv.gov/Programs/ClinicalSAPTA/dta/Providers/SAPTAProviders>) - OR –
- o Provide memorandums of understanding (MOUs) with community partners who will provide treatment and are able to provide proof of SAPTA certification in good standing.**

Q5 1: If the applicant does not yet have SAPTA certification with 2 years’ history of providing SUD treatment and signs a MOU with a community partner who does have the certification and practice history, must the community partner provide all services in the program? (Example: In a program proposing to provide outpatient treatment inclusive of both medical services and counseling/behavioral interventions, would the entity with the SAPTA certification need to provide the medical care/prescribing and counseling or could the medical care/prescribing of MOUD be performed by our staff with just counseling provided by the community partner?)

Answer Q5 1: **Service providers receiving funding must be SAPTA certified.**

Q5 2: Must the SAPTA certification be current for the proposed target age range of the program and with treatment history in that age range?

Answer Q5 2: **Yes**

Q5 3: May an entity that has already received funding from FRN be a community partner under a MOU for a new applicant?

Answer Q5 3: **No supplanting of funds**

Question Q6: On target #4, it does not list hospitals as a part of the public safety system (w/ juvenile detention facilities) however, we view it as part of the public safety system. Could we include service delivery to the ER in our proposal?

Answer Q6: **Hospitals can be considered part of a public safety system**