

STATE OF ALABAMA
DEPARTMENT OF MENTAL HEALTH

RSA UNION BUILDING
100 N. UNION STREET
POST OFFICE BOX 301410
MONTGOMERY, ALABAMA 36130-1410
www.mh.alabama.gov

July 1, 2026

RFP 2027-04

Dear Vendor:

The Alabama Department of Mental Health (ADMH) is soliciting proposals to provide **prevention, treatment, or recovery support** services through the ADMH Opioid Settlement Grant Program. Request for Proposals (RFP) will be accepted until **2:00 pm on Monday, August 24, 2026.**

The submission of a proposal does not guarantee the award of a contract. Any contract resulting from the proposal is not effective until it has received all required governmental approvals and signatures. In addition, the selected vendor shall not begin performing work under this contract until notified to do so by the departmental contracting agent.

When submitting a proposal, please read the entire RFP document and return your proposal in the requested format. All proposals must be type-written, formatted in ink, and containing an original signature. Only those RFP documents meeting the submission requirements will be approved for scoring. Submissions should be delivered to:

AL Department of Mental Health
Office of Contracts & Purchasing
100 North Union Street, Suite 570
Montgomery, AL 36104

MAILING NOTE: Proposals may be sent via Regular US Postal Service (USPS) Mail, Express/Overnight USPS Mail, commercial delivery service such as FedEx or UPS, or hand delivered by the closing date and time. Emailed or faxed responses are **not** accepted. All US Postal mail, including express/overnight mail dispatched to any State agency is processed through the State mail facility **before** it is forwarded to the appropriate State agency/Office of Contracts, thus delaying its arrival to the department. By using the USPS, you assume the risk of delay that may result in your proposal being received late; **late proposals received after the deadline will be considered untimely and ineligible for review.** Postmarks of the date mailed are insufficient; the proposal must **physically** be received at the listed office by the date and time specified - regardless of the delivery service used. A receipt indicating proposal is received at RSA Union Building does not denote receipt by the Office of Contracts.

Sincerely,



Leola Rogers
Office of Contracts & Purchasing

Organization: ALABAMA DEPARTMENT OF MENTAL HEALTH (ADMH)

RFP Closing Date & Time: **2:00 pm on Monday, August 24, 2026**
Review the mailing note.

RFP Contact Info: Leola Rogers ADMH
Office of Contracts & Purchasing
RSA Union Building
100 North Union Street, Suite 570
Montgomery, AL 36104
Telephone Number (334) 353-7440
Email: leola.rogers@mh.alabama.gov

ADDITIONAL INFORMATION

1. Who **MAY** respond to this RFP?
Public or private non-profit organizations who meet one of the following:
 - Agencies and/or organizations certified by ADMH to provide prevention or substance use treatment services.
 - Agencies or organizations approved by ADMH to provide recovery support services; or
 - Can be certified or approved by ADMH to provide such services within four months of award.
 - Opioid Settlement Funds recipient in previous funding years through the ADMH grant process and are applying for New or Continuation funding. (See descriptions below for what constitutes a Continuation Award with the Opioid Settlement Grant Funding Program.)
2. Who **MAY NOT** respond to this RFP?
 - Employees of ADMH or current State employees
 - Agencies, entities, or establishments awarded as direct recipients of funds as a result of litigation awarded in State suits in conjunction with pharmaceutical companies and local municipalities.
 - Agencies previously awarded Opioid Settlement Funds through the Alabama Department of Mental Health (ADMH) carrying a balance of funds from Rounds 1 (RFP 2024-12); and/or 50% of Round 2 funds (RFP 2025-10 & 11) remaining at time of submission.
 - Agencies previously awarded in Round 3 (RFP 2026-05) retaining 75% or more of the unused awarded funds.
3. In order to transact business in the State of Alabama all businesses domestic and foreign must be registered with the Alabama Secretary of State Office. (Domestic means within the State of Alabama. Foreign means out-of-state.) **NOTE: This registration is not contingent upon a award.** Website: www.sos.alabama.gov
4. If contracted with the State of Alabama, all vendors must enroll and actively participate in E-Verify. Website: <https://www.e-verify.gov/>
5. ALL vendor payments are processed thru the State of Alabama Accounting and Resource System (STAARS). All vendors must register with STAARS Vendor Self Service. Website: <https://procurement.staars.alabama.gov/webapp/PRDVSS1X1/AltSelfService>

6. The ADMH reserves the right to reject any and all proposals if RFP instructions are not adhered to, such as: late submissions received after deadline (**Review mailing note**), requested # of submissions not received.

RFP submissions: Four (4)—1 original, 2 copies, and 1 USB drive.	
Submission Addresses	
AL Department of Mental Health Office of Contracts & Purchasing RSA Union Building PO Box 301410 Montgomery, AL 36130	AL Department of Mental Health Office of Contracts & Purchasing RSA Union Building 100 N. Union St., Suite 570 Montgomery, AL 36104

7. ADMH reserves the right to issue multiple awards.

8. Filing of Protests; Resolution; Administrative Review.

(a)(1) A bona fide prospective bidder or offeror who is aggrieved in connection with the solicitation of a contract may file a notice of intent to protest with the Chief Procurement Officer within five (5) calendar days after the date the solicitation is issued, or after the date any amendment to the solicitation is issued if the amendment is at issue. After filing a notice of intent to protest, the bona fide prospective bidder or offeror shall have seven (7) calendar days to submit a formal written protest.

(2)a. Except as provided in paragraph b., a bona fide actual bidder or offeror who is aggrieved in connection with the intended award or the award of a contract may file a notice of intent to protest with the Chief Procurement Officer within five (5) calendar days after the date of the award or the date of the notice of intent to award, whichever is earlier, is posted in accordance with this article. After filing a notice of intent to protest, the bona fide actual bidder or offeror shall have seven (7) calendar days to submit a formal written protest. The Chief Procurement Officer may award the contract at issue if he or she does not receive the notice of intent to protest within the five-day period.

b. A matter that could have been raised under subdivision (1) as a protest of the solicitation may not be raised as a protest of the award or intended award of a contract.

(3) A notice of intent to protest filed under subdivision (1) or (2) shall be in writing, filed with the Chief Procurement Officer, state the intent to protest, and state the grounds of the protest and the relief requested with enough particularity to give notice of the issues to be decided.

(b) The Chief Procurement Officer or his or her designee may settle and resolve the protest of a bona fide actual or prospective bidder or offeror concerning the solicitation or award of a contract in accordance with rules adopted under this article.

(c) If the protest is not resolved by mutual agreement within 10 days after the protest is filed, the Chief Procurement Officer shall commence an administrative review of the protest and issue a decision in writing within 14 days after the review.

(d) A copy of the decision under subsection (c) shall be mailed or otherwise provided immediately to the protester and any other party intervening.

(e) A decision under subsection (c) shall be final and conclusive, unless fraudulent or unless a party adversely affected by the decision appeals administratively to the Director of Finance in accordance with Section 41-4-164.

(f)(1) Except as provided in subdivision (2), in the event of a timely protest under subsection (a) or an appeal under Section 41-4-164, the state may not proceed further with the solicitation or with the award of the contract until five days after notice of the final decision is provided to the protester.

(2) Notwithstanding subdivision (1), a solicitation or award of a protested contract may proceed without delay if the Chief Procurement Officer, after consultation with the head of the using agency or the head of a purchasing agency, makes a written determination that the solicitation or award of the contract without further delay is necessary to protect the best interests of the state.

9. **Records Request:** ADMH recognizes and supports the public's right to inspect/request copies of public records in accordance with State law. Many public records and resources are available on the ADMH website: www.mh.alabama.gov for review. Anyone seeking copies of records and/or information from ADMH must complete a records request form. The form is located on ADMH website at www.mh.alabama.gov for review and completion.

Request for Proposals Standard Terms and Conditions

1. Authority

Division 4 of the Department of Finance Administrative Code (Chapters 355-4-1 through 355-4-6), effective October 1, 2022, is incorporated by reference and made a part of this document. To view the relevant provisions of the Administrative Code, visit our website <https://purchasing.alabama.gov/>

2. Prohibited Contacts; Inquiries regarding this RFP

From the Release Date of this Request for Proposal (hereafter referred to as RFP) until a contract is awarded, parties that intend to submit or have submitted a Proposal, are **prohibited from communicating** with any members of the Soliciting Party's Team for this transaction who may be identified herein or after the Release Date, or other employees or representatives of the Soliciting Party regarding this RFP or the underlying transaction except the designated contact(s).

3. Nonresponsive Proposals

Any Proposal that does not satisfy requirements of the RFP may be deemed non-responsive and may be disregarded without evaluation. Supplemental information, including information necessary to clarify a proposal, may be required from any Proposer.

4. Changes to RFP; Changes to Schedule

The Soliciting Party reserves the right to change or interpret the RFP prior to the Proposal Due Date. Changes will be communicated to those parties receiving the RFP who have not informed the Soliciting Party's designated contact that a Proposal will not be submitted. Changes to the deadline or other scheduled events may be made by the Soliciting Party as it deems to be in its best interest. **Review the RFP Schedule of Events.**

5. Expenses of Proposal

A Proposer will not be reimbursed for any expenses incurred in preparation of a proposal.

6. Rejection of Proposals

The State reserves the right to reject any and all proposals and cancel this Request if, in its sole discretion, it deems such action to be in its best interest.

7. The Final Terms of the Engagement

Issuance of this RFP in no way constitutes a commitment by the State to award a contract. The final terms of engagement for the service provider will be set out in a contract which will be effective upon its acceptance by the State as evidenced by the signature thereon of its authorized representative. Provisions of this RFP and the accepted Proposal may be incorporated into the terms of the engagement should the State so dictate. Notice is hereby given that there are certain terms standard to commercial contracts in private sector use which the State is prevented by law or policy from accepting, including indemnification and holding harmless a party to a contract or third parties, consent to choice of law and venue other than the State of Alabama, methods of dispute resolution other than negotiation and mediation, waivers of subrogation and other rights against third parties, agreement to pay attorney's fees

and expenses of litigation, and some provisions limiting damages payable by a vendor, including those limiting damages to the cost of goods or services.

8. Choice of Law; Venue

This Contract will be governed by laws of the State of Alabama and the sole venue for litigation and alternative dispute resolution activities will be the City of Montgomery in the State of Alabama. No other court shall have jurisdiction.

9. Not to Constitute a Debt of the State

The terms and commitments contained in the solicitation, or any contract resulting from this solicitation, shall not constitute a debt of the State of Alabama, the incurring of which is prohibited by Section 213 of the Official Recompilation of the Constitution of Alabama, 1901, as amended.

10. Proration

Any provision of a contract resulting from this bid to the contrary notwithstanding, in the event of failure of the State to make payment hereunder as a result of partial unavailability, at the time such payment is due of such sufficient revenues of the State to make such payment (proration of appropriated funds for the State having been declared by the governor pursuant to Section 41-4-90 of the Code of Alabama 1975), the supplier shall have the option, in addition to the other remedies of the contract, of renegotiating the contract (extending or changing payment terms or amounts) or terminating the contract.

11. Non-appropriation of funds

Section 41-4-144(c) of the Code of Alabama 1975 states: “(c) When funds are not appropriated or otherwise made available to support continuation of performance in a subsequent fiscal period, the contract shall be cancelled, and the supplier shall be reimbursed for the reasonable value of any non- recurring costs incurred but not amortized in the price of the supplies or services delivered under the contract. The cost of cancellation may be paid from any appropriations available for that purpose.”

12. Dispute Resolution

In the event of any dispute between the parties arising from this solicitation and any agreement with a dispute involving the payment of money, supplier’s sole remedy is the filing of a claim with the Board of Adjustment of the State of Alabama. For any and all other disputes arising under the terms of this contract which are not resolved by negotiation, the parties agree to utilize appropriate forms of non-binding alternative dispute resolution including, but not limited to, mediation. Such dispute resolution shall occur in Montgomery, Alabama, utilizing where appropriate, mediators selected from the roster of mediators maintained by the Center for Dispute Resolution of the Alabama State Bar Association.

13. No Indemnification

Supplier acknowledges and agrees that, under the terms of this solicitation and agreements relating to purchases or leases resulting therefrom, the State is prohibited from indemnifying the supplier. The State does not agree to and will not indemnify the supplier for any reason.

The State of Alabama does not release or waive, expressly or implied, the State of Alabama's right to assert sovereign immunity or any other affirmative defense right it may have under law. The State of Alabama shall control the defense and settlement of any legal proceeding on behalf of the State, including the selection of attorneys.

14. Conflict of Law

If any provision of this solicitation and any subsequent award shall contravene any statute or Constitutional provision or amendment, either now in effect or which may, during the course of this agreement, be enacted, then that conflicting provision shall be deemed null and void.

15. Internet Website Links

Internet and/or website links **will not** be accepted in RFP responses as a means to supply any requirements stated in this solicitation.

16. Solicitation Responses and Results

The complete bid file will be made available for review as provided by (or as outlined) in Section 41-4-115 of the Code of Alabama 1975 and Rule 355-4-1-.04 of the Department of Finance Administrative Code.

17. Exception to Terms and Conditions

Suppliers may place any qualifications, exceptions, conditions, reservations, limitations, or substitutions in their bid or proposal concerning the contract terms and conditions. However, the State is not obligated to accept any changes to the published terms and conditions of the solicitation.

18. Confidentiality

Procurement information is a public record to the extent provided by state law and shall be available to the public. Section 41-4-115 of the Code of Alabama 1975 defines what is exempt from disclosure. Additional rules are included in Rules 355-4-1-.03(4) and 355-4-1-.04 of the Alabama Department of Finance Administrative Code.

19. Click Wrap

The State of Alabama acknowledges that additional terms between the supplier and the State or third-party terms may apply but does not agree to be bound by them unless provided for review and separately agreed to in writing by an authorized official of the State of Alabama. If the purchase or use of the supplies or services provided utilizes a computer interface, no State of Alabama end user shall be deemed to have agreed to any clause by virtue of it appearing in an "I agree" click box or other comparable mechanism ("click-wrap" or "browse-wrap"); rather the terms and conditions, such as End User License Agreements, may only be accepted by inclusion in an agreement and signature by an authorized official of the State of Alabama. If the terms and conditions or any other third-party terms and conditions are invoked through click wrap, execution by any unauthorized individual shall not bind the end user or the State of Alabama to such clause. Any clause which requires the State of Alabama to indemnify another party or clause which assigns jurisdiction to any state other than Alabama which is contained in such click-wrap is deemed to be stricken from the terms and conditions unless expressly agreed in writing and under the signature of an authorized individual.

20. Debarment and Suspension

Supplier certifies that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any governmental department or agency. If supplier cannot certify this statement, supplier must attach a written explanation for review by the Chief Procurement Officer.

21. Merit System Exclusion

It is understood and agreed that supplier is an independent supplier and as such all services rendered by supplier and its agents and employees thereof shall be as an independent supplier and not as an employee, Merit or otherwise, of the State of Alabama, and supplier or its agents and employees thereof shall not be entitled to or receive Merit System benefits.

22. Severability

In the event any provision of this solicitation or resulting contract shall not be enforceable, the remaining provisions shall continue in full force and effect.

23. Volume of Business

Except as otherwise stated in this solicitation, the State of Alabama cannot and does not guarantee any volume of business.

24. Legislative Contract Review Committee

Personal and professional services contracts with the State may be subject to review by the Contract Review Permanent Legislative Oversight Committee in accordance with Section 29-2-40, et seq. of the Code of Alabama 1975. The vendor is required to be knowledgeable of the provisions of that statute and the rules of the committee. These rules can be found at [https://alison.legislature.state.al.us/contract- review](https://alison.legislature.state.al.us/contract-review). If a contract resulting from this RFP is to be submitted for review the service provider must provide the forms and documentation required for that process.

By submitting a response, I hereby affirm the following:

I acknowledge receipt of the solicitation and all amendments (new rounds). I have read the solicitation and agree to provide each item or service offered. I will comply with all terms and conditions contained within this solicitation. I have not been in any agreement of collusion among bidders in restraint of freedom of competition by agreement to bid or to refrain from bidding. I further certify that I am not barred from bidding or entering into a contract and acknowledge that the State may declare the contract void if this certification is false.

ALABAMA DEPARTMENT OF MENTAL HEALTH

OPIOID SETTLEMENT FUNDS—Round 4 REQUEST FOR PROPOSAL (RFP) 2027-04

Leading Alabama’s efforts to enhance the health and well-being of individuals, families, and communities impacted by mental illness, developmental disabilities, and/or substance use, the Alabama Department of Mental Health (ADMH) is seeking proposals for the use of the ADMH Opioid Settlement Grant Program. Funds allocated for The ADMH Opioid Settlement Grant Program are appropriated through Act No. 2026-602 The purpose of this grant program is to prevent, reduce, treat, or mitigate the effects of opioid substance use and has a total grant allocation amount of \$8,930,000.00.

A. OPIOID IMPACT

Since 1999, the opioid epidemic has claimed hundreds of thousands of American lives through successive waves involving prescription opioids, heroin, and more recently fentanyl and other synthetic opioids. Overdose deaths surged during and after the COVID-19 pandemic due to increased isolation, disrupted treatment access, mental health stressors, and the rapid spread of illicit fentanyl. By 2023, more than 110,000 Americans died from drug overdoses in a single year, with opioids involved in the majority of deaths. Recent national data, however, show encouraging progress. The Center for Disease Control (CDC) estimates indicate overdose deaths declined nearly 27% from 2023 to 2024—the largest one-year reduction ever recorded—driven in part by expanded treatment access, stronger public health surveillance, broader naloxone (Narcan) availability, and increased prevention and recovery support efforts. Despite these gains, overdose deaths remain significantly higher than pre-pandemic levels, while emerging substances such as carfentanil, medetomidine, and cychlorphine continue to present serious and evolving risks.

Alabama has mirrored many of the national trends, particularly in communities impacted by fentanyl and methamphetamine mixtures, limited rural treatment access, high historical prescribing rates, and barriers to obtaining care and recovery services. At the same time, the state has made substantial progress in reducing overdose deaths. Provisional reports show Alabama has experienced nearly a 30% decline in overdose fatalities since 2023, placing the state among the national leaders in percentage reduction. This progress reflects the impact of expanded naloxone distribution by state and community partners, increased federal prevention funding, stronger local intervention efforts, growth in peer support and recovery networks, and continued education aimed at reducing stigma. As Alabama receives opioid settlement funds to support prevention, treatment, and recovery initiatives, continued investment remains essential to sustain and expand these gains. Funding must prioritize services and supports that save lives, reduce substance use, increase education and awareness, and strengthen long-term recovery opportunities across all communities in the state. It is with these purposes in mind that ADMH - with funds allocated by the Alabama legislature and guidance by the Alabama Opioid Settlement Oversight Commission - offers this fourth round of Opioid Grant Funding opportunity for fiscal year 2027.

B. CATEGORIES OF FUNDING

For the purposes of this RFP, applicants must select one of the three primary categories per proposal submission. For *each* proposal you submit, you must choose **only one** of the three main categories. Clearly state in writing on the cover page of your proposal which category it is for which you are applying and requesting funds. ADMH reserves the right to move or reassign any submitted proposal for prevention, treatment, or recovery support to a different category, as deemed appropriate, based on the content and description of the proposed program and the nature of the services for which funding is requested.

(**Note:** You **may not** combine multiple categories in one proposal. If you want to apply for more than one category, you must submit a separate application for each.)

1. PREVENTION SERVICES

Prevention services aim to prevent the onset of and reduce or mitigate the progression of substance use and use related problems at the community level. ADMH Prevention Services support efforts to prevent or reduce overdose deaths and other opioid-related harms through evidence-based or evidence-informed programs or strategies. This guidepost for services is the utilization of the Substance Abuse Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Prevention's (CSAP) strategies for prevention efforts to impact large numbers of people, based on identified risk and protective factors.

In the context of prevention services, the Strategic Prevention Framework (SPF) is the model developed by SAMHSA in the United States to help communities plan, implement, and evaluate substance misuse prevention efforts. The SPF is a community-based approach to substance use prevention that cuts across existing programs and systems. SPF executes a data-driven, five-step process to include Assessment, Capacity, Planning, Implementation and Evaluation. Sustainability and cultural competence are woven throughout the five steps of the SPF:

The Strategic Prevention Framework (SPF) five key steps:

- 1. Assessment** – Identify local prevention needs based on data (e.g., substance use trends, risk and protective factors). The SPF Assessment is the first step of Alabama's SPF process. The assessment step provides guidance questions to get a clearer understanding of the problems, needs, resources and readiness of communities to address community problems. During this process, community capacity and readiness is determined to utilize the necessary resources to address the problems in ways that can be sustained over time. This process will be heightened by mobilizing community leaders and other key stakeholders across disciplines and communities. The establishment and identification of data sources and partnerships will enhance sustainability beyond SPF.
- 2. Capacity Building** – Build the necessary resources and readiness to address those needs (e.g., training, partnerships, infrastructure). SPF Capacity is the second step of Alabama's SPF process. Capacity is the ability to mobilize the community and resources to address the needs identified through the assessment. By building an inclusive multi-sector partnership, establishing a culture of commitment, educating key stakeholders and

identifying and securing resources, Alabama's capacity will extend beyond SPF. The goal is to not create an environment of burnout of a few people, but rather active engagement of various sectors creating steady, sustained efforts over time.

- 3. Planning** – Develop a strategic plan with goals, objectives, and evidence-based strategies. Planning is the third step of Alabama's SPF process. This step involves creating a logical, data-driven plan. Understanding that many funding sources are short-term in nature, specific strategies will be employed to develop an action plan to help ensure long-term sustainability. Adaptability to changing conditions in funding and policy environments will also play an integral planning role regarding long-term sustenance.
- 4. Implementation** – Put the plan into action, ensuring fidelity to chosen programs or interventions. Implementation is the fourth step of Alabama's SPF process – putting your plan into practice. Here you carry out the various components of the prevention plan, as well as identifying and overcoming any potential barriers. Based on the identified plan, what activities will address the targeted population, in what community, size and type of community. Detail the Evidence-based programs, practices, and policies (EBPPP) that need to be undertaken, develop specific timelines, and decide on ongoing program evaluation needs. Implemented strategies will be detailed on the Prevention Activity Sheet and information submitted through the ADMH Substance Use Management Information System (FEI).
- 5. Evaluation** – Measure the effectiveness of the program and improve it as needed. Evaluation is the final step of Alabama's SPF process. The evaluation component is crucial because it tells you what works, what doesn't work, what to improve and how to improve it. Evaluation is the systematic collection and analysis of information about program activities, characteristics, and outcomes to reduce uncertainty, improve effectiveness, and make decisions. Evaluation helps organizations recognize what they have done well and what areas need improvement. Additional data reports are required in the information system.

Guiding Principles:

- **Sustainability** – Ensure long-term success and impact.
- **Cultural Competence** – Establish comprehensive approaches to address person-centered and/or identified community need.

This framework is widely used in public health, particularly in substance use prevention, but it can also be applied to other behavioral health initiatives. Awareness of risk and protective factors are key. Embedded within the theory of risk and protective factors is to seek to modify risk factors and build upon existing protective factors. The risk and protective factor framework should be utilized in the effective planning of prevention programming.

There must be clear linkage between each step of the SPF process. The assessment must include current capacity and readiness to utilize the program/strategy identified in the plan. Implementation must be clearly identified and relate to the plan. There then must be a clear description of how this process will be monitored and evaluated. Equally, strengthening communities and building infrastructure to support long-term goals and person-centered approaches is foundational to SPF.

For detailed information on the SPF process and its principles, please access the following link: <http://www.samhsa.gov/resource/ebp/strategic-prevention-framework>

The ongoing opioid crisis, compounded by the increasing prevalence of polysubstance use among youth and adults - including underage drinking, vaping, and other co-occurring substance-related behaviors - necessitates a comprehensive, community-driven prevention response. Prevention proposals should seek to support the implementation of evidence-based prevention strategies aimed at preventing onsets and reducing the progression of opioid misuse and polysubstance use, particularly among people at higher risk. Applicants must address this need by implementing programs that:

1. **Prevent the initiation and escalation of polysubstance use**, with a primary focus on opioid use and secondary substances such as alcohol, nicotine (vaping), and other drugs often misused concurrently.
2. **Adopt and operationalize the Strategic Prevention Framework (SPF)** to guide community-level interventions, using data-driven approaches to target identified risk and protective factors and impact large populations effectively.
3. **Build sustainable, broad based prevention infrastructure** by increasing local capacity and readiness. Communities must be equipped to sustain prevention efforts long-term and adapt them to address one or more prioritized substance use issues.

To ensure effectiveness and accountability, all prevention proposals must clearly outline how the five steps of the Strategic Prevention Framework—Assessment, Capacity Building, Planning, Implementation, and Evaluation—will be integrated into the project’s design. It is this framework that sets Prevention Services apart from other substance use services. Proposals should follow the RFP guidelines for new, or continuation applications described in this RFP, and demonstrate a clear commitment to long-term, community-based prevention rooted in best practices.

2. TREATMENT SERVICES

Treatment refers to a comprehensive, person-centered process of services and support designed to address the complex needs of individuals and families affected by substance use and co-occurring conditions. The treatment process includes ensuring access to appropriate, evidence-based, patient-centered, and trauma-informed services that support health, wellness, and recovery. Services may include screening, assessment, diagnosis, counseling, peer and family support, case management, recovery support services, medication services, and ongoing follow-up care. Treatment is tailored to everyone’s unique strengths, needs, goals, and circumstances to support long-term recovery and improved quality of life. The primary goals of treatment are to reduce or eliminate harmful substance use, improve physical and behavioral health, strengthen social and community functioning, and support sustained recovery and overall well-being.

Treatment proposals should follow the ASAM (American Society of Addiction Medicine) model.

ASAM developed a classification system to help match individuals with substance use disorders to appropriate treatment settings based on their clinical needs. This system includes primary

levels of care, each with increasing intensity based on individuals assessed clinical needs. The ASAM Criteria also defines standards for the different levels of care across the continuum, describing the setting, staffing, service intensity and other core elements at each level of care. The levels of care across the continuum range from the lowest intensity to highest intensity. They include the following: Level 0.5 Early Intervention Services, Level 1 Outpatient Services; Level 2.1 – Intensive Outpatient , Level 2.5 – Partial Hospitalization ; Level 3: Level 3.1 – Clinically Managed Low-Intensity Residential Services, Level 3.3 – Clinically Managed Medium Intensity Services, Level 3.5 – Clinically Managed High-Intensity Residential Services, Level 3.7 – Medically Monitored Intensive Residential Services; Level 3.7 D Medically Monitored Residential Withdrawal Management Program and as outlined in SU Administrative Code 580-9-44.

3. RECOVERY SUPPORT SERVICES

Recovery is a process of change through which individuals improve their health and wellness, build purpose and meaning in life, and work toward reaching their full potential while managing or overcoming substance use disorders and related challenges. Recovery is often described as gaining control over one’s life—and the direction one wants that life to take—while healing from the physical, emotional, social, and economic impacts associated with substance use disorders. Recovery is unique to everyone and may involve multiple pathways, including clinical treatment, peer support, family support, spiritual practices, community connection, employment, education, and other wellness-focused supports.

Recovery Support Services (RSS) are nonclinical, person-centered services and supports that help individuals and families initiate, maintain, and strengthen recovery from substance use disorders and co-occurring conditions. These services are designed to enhance overall health and wellness, improve quality of life, and support long-term recovery and community integration. Recovery support services complement clinical treatment but may also be provided independently before, during, after, or in place of formal treatment, depending on an individual’s needs, goals, and stage of recovery.

Recovery support services are flexible, strength-based, and often peer-driven. They help individuals address barriers to recovery while building recovery capital—the internal and external resources needed to support sustained wellness and stability. Services may include peer recovery coaching, recovery mentoring, transportation assistance, employment and educational support, housing navigation, life skills development, childcare assistance, family education and support, support groups, recovery community organizations, wellness activities, financial literacy training, legal and court system navigation, linkage to healthcare and behavioral health services, and coordination with community-based and social service providers.

Recovery support services may be delivered by peer professionals, recovery community organizations, faith-based organizations, healthcare and behavioral health providers, social service agencies, schools, employers, and other community partners. These services are key components of a Recovery-Oriented System of Care (ROSC), which emphasizes hope, self-direction, respect, multiple pathways to recovery, and ongoing community support. Through

collaboration among individuals, families, providers, and communities, recovery support services help people build stable, meaningful, and healthy lives in recovery.

C. TARGET POPULATION

Applicants must identify a minimum of one target population and clearly identify how the target population will receive services. Applicants may choose more than one target population. Consideration should be given to how the proposed services are unique and/or specialized for the selected population or enhanced beyond the current capacity being served. Funds must expand or improve services for the target population, not replace or supplant. Applicants must explain why the population chosen is the priority to align with the intended outcomes of the proposed program.

Examples of Target Populations:

- Individuals involved with foster care/kinship either directly or indirectly.
- Justice Involved individuals.
- Veterans
- Pregnant/Parenting women
- People who inject drugs
- Youth/Adolescent/Transition age individual
- Rural populations
- Older adults
- Individuals with diagnosed opioid use or stimulant use disorder
- Individuals at-risk for developing an opioid or stimulant use disorders.
- Families

D. DESCRIPTION OF PROPOSED PROGRAM AND BUDGET REQUEST FOR NEW PROPOSALS

NOTE: The information and order below constitute your proposal cover page and the order of your proposal content submission. Follow this format in the submission of your proposal. Applicants may not submit multiple funding requests within a single proposal. Additionally, continuation requests and new project proposals must be submitted as separate applications and may not be combined into a single submission.

SECTION I, page 1 – Completed COVER SHEET (1 page maximum)

The Proposal Cover Page **must** include the following information **in the following order:**

- (a) Title of proposal: (Agency Name FY 2027 Opioid Settlement Fund Proposal)
- (b) Clearly state the service category for which you are submitting this application.
 - Prevention Services
 - Treatment Services
 - Recovery Support

- (c) State the **amount of award** being requested, consistent with your submitted Budget request
- (d) Legal name of Applicant Organization.
- (e) Applicant’s legal business organizational structure.
- (f) Applicant’s address, telephone number.
- (g) Applicant’s website address, if operational.
- (h) Applicant’s contact for the proposal: Name, Address, Telephone, Email Address.
- (i) City, County, State in which the proposed program will be located.
- (j) Date of submission.

SECTION II – Profile of Applicant Organization (2 pages maximum)

The Applicant shall provide sufficient information for ADMH to determine whether the agency has the knowledge, skills, abilities, and resources to provide the services specified in this proposal. At a minimum, this information shall include:

- (a) The Applicant’s legal business name and legal organizational structure.
- (b) A brief history of the organization, including:
 - Number of years in business under the present business name, and under other business names.
 - Services currently provided, including physical addresses of each location. Include in your description a list of all **currently certified** services and levels of care provided; clearly describe all funding provided to support those services, including grants and existing contracts.
 - Number of years providing services for the target population specified in this RFP, and a description of the services provided to target population.
 - A copy of the Applicant’s current organizational chart. If the organizational chart will change under this proposed plan, also include the proposed organizational chart, indicating the number of FTEs per title. The proposed organizational chart should contain names of staff to be vetted in the Certification process – where available.

- A list of all members of the Applicant’s current or proposed Board of Directors. Also indicate whether any members are officers, agents, or employees of the Applicant organization.
- A description of all other grants (whether from Opioid Settlement Funds or other sources) received by the organization **within the past five (5) years**; include the name and source of award/funding and dates the awards/contracts were granted. Provide any award balances for all grants as of the date of this application.

SECTION III – Program Description Content (5 pages maximum)

- a) Describe why the services to be provided are relative to the target population, and how they will be incorporated into the Applicant Organization’s mission, values, and current work.
- b) Describe where the program will be located (city, county) and what information was used to decide on the location (needs assessment, overdose data rates, or other valid data reporting elements used in the justification of need for the services proposed).
- c) Identify and describe the strategies to be used to identify and inform the target population of the services available.
- d) Identify the number of individuals to receive the proposed services with the use of these funds in the target population.
- e) Identify the promising practices, best practices, and/or evidenced based practices that will be used in the provision of services and how they are related to the target population identified. Provide sufficient background information on any practices to be used. Describe how the agency will implement these evidence-based programs to assure fidelity to the practice. Include training, ongoing supervision plans and any planning for staff turnover.
- f) Describe the proposed program’s admission criteria and processes for each service that will be implemented. This should include information on how services may be accessed by the target population and how the target population may be referred for identified services. Populations should include those less represented populations..
- g) Detail the plan the organization has of engaging less represented populations within the state.
- h) Describe the policies, practices, and dedicated resources who need

linguistic assistance. This would include clients with limited English proficiency, those who have low literacy skills or are not literate, those with disabilities, or those who are deaf or hard of hearing.

- i) Describe how trauma specific services will be practiced by the agency and how that model will be implemented throughout the program. Describe how the agency will assess and respond to the trauma needs of the target population.
- j) Describe your agency's plan to work collaboratively with various social service agencies to provide additional referrals or services for the target population.
- k) Describe the strategies to be utilized to ensure the proposed services, project or program is, at all levels, responsive to the unique needs and perspectives of participants.
- l) Describe the timeline and process for implementation of services. Proposed services must start no later than 120 days after contract is fully executed and have all required signatures.

PLEASE NOTE: Agencies not currently certified or contracted with ADMH will require immediate response to certification requirements. Certification must be obtained prior to the execution of a contract. A contract must be signed and fully executed before services and billing may commence. (Timeline with dates must be listed as an **EXHIBIT 1 addendum**).

- m) Outline community organizations, providers, etc. with whom the organization collaborates, or intends to collaborate, with this initiative.
- n) If the proposed program will utilize any personnel that will be shared with, or co- assigned to other programs, describe this arrangement. Identify each position to be shared, along with the percentage of the staff's time assigned to the proposed program.
- o) Describe how the target population will be made aware that the program services will not have an associated cost and how such information will be documented.
- p) Clearly state and describe the specific, measurable, time specific goals/objectives for the program and the specific processes for achieving the goals.
- q) Describe how the program will be evaluated including both quantitative

and qualitative outcome measures. These stated outcomes *must* align with your scope of work *and* approved budget if awarded. Agencies should outline these specific objectives accordingly.

- r) Specify the outcome measures and data to be collected, how indicators will be measured, methods and tools used to collect data, and how these criteria will be used to evaluate effectiveness, impact, and program success.
- s) Identify any anticipated barriers, challenges, etc. relative to the proposal requirements and plans to address such.
- t) Describe the plan to keep the proposed program running after the funding ends. Include specific strategies for sustaining the program beyond one year, how the program will continue once funding stops, and the long-term approach to maintaining operations without this funding source. This should constitute your sustainability plan.
- u) Identify and describe the treatment service level of care (LOC) of the proposed program based on the American Society of Addiction Medicine (ASAM) Level of Care and ADMHSU Administrative Code, including programmatic requirements of the proposed level of care (LOC). *This applies to treatment service program proposals only.*

SECTION IV- Proposed 12-month Budget and Budget Narrative (2 pages)

- (a) Provide a proposed twelve-month budget *and* a complete and detailed narrative for the proposed program must be provided. (Include as **EXHIBIT 2: Proposed Twelve-Month Narrative and a Detailed Budget**)
- (b) Budget may include indirect costs with a percentage of 10% or less. Indirect costs should be described in the budget narrative.

PLEASE NOTE: New providers awarded, who have **not** been previously certified or awarded a contract with ADMH, will require a longer start-up process and should plan accordingly. For current providers under contract, work may begin at the start of the fiscal year. Awardees should consult with your program managers following notification of an award. If the site for which you made application is not currently certified, the agency will contact the ADMH Certification Department immediately following the notice of any award to begin the certification process.

E. DESCRIPTION OF PROPOSED PROGRAM AND BUDGET REQUEST FOR CONTINUATION PROPOSALS ONLY

Continuation Funding Awards - Grants may be awarded to agencies having received prior Opioid Settlement Funding awards through ADMH's previous RFP based on a review of the evaluation and outcomes of the previous project, and proposal for the continuation of previous project. Funding will be limited to the fiscal caps noted in this RFP. **You must have less than 75% remaining on your previous award at time of submission of this 2027-04 proposal to be eligible for a Continuation award.** Applicants may not submit multiple funding requests within a single proposal. Additionally, **continuation requests and new project proposals must be submitted as separate applications and may not be combined into a single submission.**

Continuation of funding will be contingent on the agency's ability to demonstrate documented established outcomes from previously awarded Opioid Settlement funds through ADMH's grant process.

In the Continuation Request, applicants must:

- Clearly describe the services or programs funded in the prior award.
- Provide the amount awarded in the prior award(s).
- Provide answers to the evaluation questions listed in item E of Section IV below.
- Show measurable results related to the previously funded project.

Only agencies that submit complete evaluations with demonstrated outcomes will be considered for continuation funding.

SECTION I – Completed COVER SHEET (1 page maximum)

The Proposal Cover Page must include the following information:

- a) Title of proposal: (Agency Name) FY 2026 Opioid Settlement **Continuation** Proposal (**NOTE:** "CONTINUATION" must be in your proposal title)
- b) Clearly state the service category for which you are submitting this application.
 - Prevention Services
 - Treatment Services
 - Recovery Support
- c) Clearly state the award amount requested consistent with the Budget request and narrative included in this proposal and request of funds.
- d) Legal name of Applicant Organization.
- e) Applicant's legal business organizational structure.
- f) Applicant's address, telephone number.
- g) Applicant's website address, if operational.

- h) Applicant's contact for the proposal: Name, Address, Telephone, Email Address.
- i) City, County, State in which the proposed program will be located.
- j) Date of submission

SECTION II – Program Description (5 pages maximum)

- a) Describe why the services from the previous RFP application should continue and how they are to be provided. This content must reflect the exact services and programs for which the program was previously awarded/funded.
- b) Describe if the current location of the program will change. If so, provide that information. If the location is to change, provide what information was used to decide on the location. If the program is to remain in the same location, state that in this section.
- c) Identify the number of individuals to receive the proposed services in the target population.
- d) Identify if the promising practices, best practices, and/or evidenced based practices identified in the first proposal will continue to be used. If removing any practices, please note those and the reason for the removal. If practices remain the same, state that in this section.
- e) Describe your agency's plan to work collaboratively with various social service agencies to provide additional referrals or services for the target population. Include any changes since last application.
- f) Describe the strategies to be utilized to ensure the proposed services, project or program is, at all levels, responsive to the unique needs and perspectives of participants. Include any changes since last application.
- g) Identify any new community organizations, providers, etc. with whom the organization collaborates, or intends to collaborate, with the continuation of this initiative.
- h) Clearly state and describe the specific, measurable, time specific goals/objectives for the program and the specific processes for achieving the goals. Include any changes since last application.
- i) Specify outcome measures and data to be collected, how indicators will be measured, methods and tools used to collect data, and how these criteria will be used to evaluate effectiveness, impact, and program success. Include any changes since last application.

- j) Describe how the program will continue to be evaluated including outcome measures. Indicate additional measures identified to enhance reporting since last award.
- k) Identify any anticipated barriers, challenges, etc. relative to the proposal requirements and plans to address such. Include any changes since last application
- l) Describe the plan to keep this program running after the current funding ends. Include specific strategies for continuing the program without this funding. Explain how the program will operate long-term without financial support from this source.

SECTION IV- Evaluation (2 pages maximum)

- a) Explain how the applicant evaluated the previous project. Identify the goals and objectives of the project for which continuation funding is being requested; did the project achieve those goals previously – why, or why not?
- b) Will measures require any system changes?
- c) Describe how an outside entity would know this project achieved its goals.
- d) Describe any changes to the project if funded, explaining the reasons for those changes. Be specific.

SECTION V- Proposed Detailed 12-month Budget and Budget Narrative (1 page maximum)

- a) Provide a proposed, detailed twelve-month budget and narrative for the proposed continuation program (Include as **Exhibit 2**, a Budget Narrative and a Twelve-Month detailed Budget).
- b) Budget may include indirect costs with a percentage of 10% or less. Indirect costs should be described in the budget narrative.

F. FUNDING INFORMATION, RESTRICTIONS, AND REPORTING REQUIREMENTS

Awards will be offered in each of three identified categories: Prevention, Treatment, and Recovery Support Services. Of the total \$8,930,000.00 allocated by the legislature for this 2026 Opioid Settlement funding round (FY2027), the total designated for Prevention is \$1,786,000.00; the total designated for Treatment Services is \$6,251,000.00; the total designated amount for Recovery Support is \$893,000.00. Each area has an award cap with the following designated limits:

CATEGORY	Allocated Amounts	Maximum amount per award
Prevention	\$1,786,000.00	\$75,000.00
Treatment	\$6,251,000.00	\$350,000.00
Recovery	\$893,000.00	\$150,000.00
Total	\$8,930,000.00	

All grants are subject to the limits of the amounts awarded. Unused funds may be carried over from one year to the next until the awarded grant amount contracted is exhausted. All awards will be subject to reporting and monitoring requirements by ADMH.

Please note there is no guarantee that the full amount requested will be awarded. The Alabama Department of Mental Health (ADMH) reserves the right to modify funding awards as deemed necessary. Awardees may receive funding up to the maximum amounts specified for each award.

Applicants must have a plan in place to ensure sustainability beyond the first year awarded as there is no guarantee of funding after the initial award. Additionally, applicants must demonstrate they are not supplanting existing funding and should avoid using the dollars in areas where other funds are available.

Applicants must certify that funds, if awarded, will not supplant expenditures from other Federal, State, or local sources or funds generated by the grantee. Applicants must also certify that funds, if awarded, will not be supplanted for existing services for which funds have already been provided. Supplementing occurs when opioid settlement funds are used to enhance services and programming activities for which funding has previously been provided.

REGARDING USE OF FUNDS FOR CAPITAL ASSETS

Capital assets are not considered allowable expenses. For the purposes of these grant awards, *capital assets* are defined as money a business would spend to acquire, upgrade, or maintain longer-term physical, tangible or intangible property that has a useful life of more than one year and a value that exceeds the capitalization threshold established by the awarding agency or recipient entity. This typically includes items such as land, buildings, vehicles, large equipment, and significant renovations or construction projects.

As such, recipients of opioid settlement grants must ensure that all expenditures align with eligible use categories and explicitly exclude the purchase, construction, or major improvement of capital assets.

Regarding Indirect Costs. Indirect costs are business expenses that support the organization’s overall operations but cannot be tied directly to a single, specific project, product, or other itemized expense. It is commonly referred to as overhead and may be shared costs that benefit multiple areas of the program services simultaneously. In terms of budgets provided for the proposed services, Direct Costs should be separated from Indirect Costs. The Indirect Costs proposed in this application must be described and clearly established in the budget narrative. Indirect costs are limited to 15% of total award.

PLEASE NOTE: The Alabama Department of Mental Health (ADMH) reserves the right to review purchases being considered. Certain items and expenditures submitted to the Alabama Department of Mental Health (ADMH) for invoicing and reimbursement may require prior written approval before any costs are incurred - depending on the nature, scope, and type of expense being considered. Items submitted to ADMH for reimbursement must clearly relate to the budget items stated in the proposal. The acceptance of a proposed budget and the issuance of an award do not constitute final approval of all budgeted items. All awarded budgets are subject to review and revision by the Alabama Department of Mental Health (ADMH) at any point during the term of the contract. Continued funding is contingent upon compliance with all applicable guidelines and the availability of funds.

If you are requesting funding for an existing program, you must demonstrate how the program and its participants will continue to be supported under the current funding structure. Additionally, you must clearly outline how the proposed funding will be used to expand the number of participants served. It is not required that a new service be introduced; however, the number of individuals served must exceed the levels historically supported through previous funding sources. Please note that an increase in the number of residential participants served, without a corresponding increase in the number of beds available, will not be allowed.

REGARDING PRIOR FUNDING AND PERFORMANCE

The Alabama Department of Mental Health (ADMH) reserves the right to evaluate prior performance when considering applications for new or continued Opioid Settlement Funding. Agencies that have received funding in previous rounds will be assessed based on the effectiveness of services provided, the quality and timeliness of required monthly reporting, and the management of allocated funds.

If an agency demonstrates ineffective service delivery, fails to meet reporting requirements, or retains unexpended balances from prior awards without justification, ADMH, with appropriate approval, reserves the right to withhold, reduce, or reallocate funding at its discretion. This is to ensure that funds are directed toward agencies that are providing effective, timely, and impactful services in alignment with program goals.

REPORTING REQUIREMENTS (FOR NEW PROPOSALS AND CONTINUATION PROPOSALS)

All grantees will be required to submit monthly program outcomes and financial reports. Reporting templates, reporting requirements, reporting formats, and deadlines will be identified at time of contracting. Failure to comply with reporting requirements may result in withholding of funds. Awardees are required to submit regular reports consistent with the stated project objectives described in their proposals for the use of these opioid settlement funds. All objectives and outcomes must be clearly defined, measurable, and include both qualitative and quantitative elements. Monthly data collection should specifically reflect the population served by the funded project. ADMH staff will collaborate with agencies to ensure that reported outcomes align with the approved project scope and accurately represent the unique needs of the population benefiting from this funding award.

G. SCORING CRITERIA—NEW Proposals

Scoring Criteria and Evaluation Questions for New Proposals (100 Possible points)	Potential Points
<p><u>Understanding of and Responsiveness to the Request for Proposal</u></p> <ul style="list-style-type: none"> ▪ Does the proposal clearly articulate an understanding of the concept of the prevention, treatment or recovery support services being proposed? ▪ Does the information provided in the proposal clearly correspond to the description of funding purpose and grant information requested? ▪ Is the information provided in the proposal articulated in a clear, concise, and organized manner? ▪ Did the proposal clearly describe how the target population will be impacted by the program and funding? 	20
<p><u>Organizational Experience in providing Prevention, Substance Use Treatment Services, or Recovery Support Services:</u></p> <ul style="list-style-type: none"> ▪ Does the Applicant have documented experience in serving individuals in need of substance use prevention, treatment services, or recovery support services? ▪ Are the proposed benefits to ADMH from selecting this Applicant to perform the work reasonable and achievable? ▪ Does the Applicant have adequate resources to perform the required work? ▪ Does the Applicant have a history of successfully performing the required work? 	15
<p><u>Quality, Completeness, and Responsiveness of the Program Description Relative to the Needs of individuals in need of treatment services or recovery support services:</u></p> <ul style="list-style-type: none"> ▪ Has the applicant described the operation of a safe, therapeutic environment that supports individual needs, promotes recovery, and fosters overall well-being? ▪ Do the proposed services reflect the true needs of the identified Population? ▪ Are the engagement strategies in alignment with the services being proposed? 	30

<ul style="list-style-type: none"> ▪ Are the services planned and organized in a manner to support attainment of the project’s goals? ▪ Are the specific evidence-based practices to be utilized clearly articulated in the proposal? ▪ Are best practices relative to individuals with substance use needs identifiable in the proposed services? ▪ Are the needs of clients who have co-occurring disorders adequately addressed? ▪ Are person-centered modalities clearly distinguishable throughout each aspect of the service description? ▪ Is linguistic competency clearly distinguishable throughout each aspect of the scope of work? 	
<p><u>Readiness to Implement Proposed Services</u></p> <ul style="list-style-type: none"> ▪ Does the implementation plan provide realistic targets in relation to the tasks to be performed? ▪ Is the service level of care (LOC) identified? ▪ Are the timelines and strategies for obtaining the required approvals or certification from the Alabama Department of Mental Health (ADMH) explained? ▪ Is a sustainability plan documented? 	15
<p><u>Budget and Budget Narrative</u></p> <ul style="list-style-type: none"> ▪ Does the proposed budget appear realistic for the services proposed? ▪ Does the budget clearly detail items and program needs and services described in the proposal? ▪ Does the budget narrative provide a clear explanation of all proposed costs and expenses? ▪ Does the budget contain any unallowable costs? ▪ Is Indirect Cost Rate at 15% or lower? 	20
New Proposal—Total Points possible	100

Scoring Criteria and Evaluation Questions for Continuation Funding Requests	Potential Points
<p><u>Understanding of and Responsiveness to the Request for Proposal</u></p> <ul style="list-style-type: none"> ▪ Does the proposal clearly articulate an understanding of the concept of services for which continuation funding is being requested? ▪ Does the information provided in the proposal clearly present evidence continuance of the program/project would be of continued benefit to individuals being served? ▪ Does the continuation request correspond to the description of the services previously awarded? ▪ Is the information provided in the proposal articulated in a clear, concise, and organized manner? ▪ Did the proposal clearly describe how the target population was impacted by the program and previous funding? 	20
<p><u>Quality, Completeness, and Responsiveness of the Program Description Relative to the Needs of individuals in need of prevention, treatment, or recovery support services:</u></p> <ul style="list-style-type: none"> ▪ Does the applicant adequately explain the program description and any changes that may be made as a result of their experience with implementation from the previous opioid settlement funding? ▪ Did the objectives stated from previous award(s), and provided again in this proposal, clearly align with the needs of the target population? ▪ Was the organization successful in their reporting of these outcomes from the previous funding? ▪ Did the applicant clearly describe how services were provided under the previous funding to high-risk individuals, including those with co-occurring disorders? ▪ Does the program description distinguish services for all individuals providing linguistically responsive services? 	20

<ul style="list-style-type: none"> ▪ Does the program description represent a respectful patient-engagement perspective, demonstrating the use of evidence-based or best practices in serving individuals with co-occurring and/or substance use disorders? 	
<p><u>Readiness to Implement Proposed Services</u></p> <ul style="list-style-type: none"> ▪ Does the implementation/continuation plan provide realistic targets in relation to the tasks to be performed – including any adjustments or budget considerations? ▪ Is the service level of care (LOC) clearly identified as remaining the same as what was implemented with the previous award? 	10
<p><u>Evaluation of Previous Project</u></p> <ul style="list-style-type: none"> ▪ Does the evaluation describe if goals of previous project were achieved and how those goals were met? ▪ Would an outside agency be able to see the results of the goals? ▪ Does the narrative describe how the project will remain the same if funded for a second time? 	30
<p><u>Budget and Budget Narrative</u></p> <ul style="list-style-type: none"> ▪ Does the proposed budget appear realistic for the services proposed for continuation? ▪ Does the budget narrative provide a clear explanation of all proposed costs and expenses? ▪ Are there any unallowable costs in the budget? ▪ Is Indirect Cost Rate at 15% or lower? 	20
<p>Continuation Proposal—Total Points possible</p>	<p>100</p>

APPENDIX A

**Alabama Department of Mental Health
Proposal for Use of State Opioid Settlement Funding**

**STATEMENT OF ASSURANCE OF UNDERSTANDING OF THE GENERAL
REQUIREMENTS FOR PARTICIPATION**

As a duly authorized member of the governing body of (Insert Legal Name of Applicant Organization), I certify that (Insert Legal Name of Applicant Organization):

1. Has carefully read all sections and Appendices of the Request for Proposal (RFP) entitled Opioid Settlement Funding Proposal issued by the Alabama Department of Mental Health.
2. Has fully informed itself as to all specifications, conditions, terms, and limitations, specified, therein; and
3. Understands the basic requirements to qualify to provide the services described, as specified in the RFP.

I, further, certify that (Insert Legal Name of Applicant Organization), has the experience and capacity to carry out the scope of work described in the above referenced RFP.

APPLICANT ORGANIZATION

PRINTED NAME OF AUTHORIZED CERTIFYING OFFICIAL TITLE

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL DATE SUBMITTED

H. SCHEDULE OF EVENTS

RFP 2027-04: Opioid Settlement Funds Proposal

The following RFP Schedule of Events represents ADMH’s best estimate of the schedule that shall be followed. *Except for the deadlines associated with the vendor question and answer periods and the proposal due date, the other dates provided in the schedule are estimates.*

ADMH reserves the right, at its sole discretion, to adjust this schedule as it deems necessary. Notification of any adjustment to the Schedule of Events shall be posted on the RFP website at www.mh.alabama.gov for review. **Please note the date for submitting any questions. ADMH will not accept any questions after this date.** All times are in Central Time.

NOTICE OF BIDDER’S CONFERENCE:

ADMH will host a Bidder’s Conference one week from the date of publication of the Request for Proposals. The Conference is provided via virtual link to all interested parties and will be posted on the ADMH website. The purpose of the Bidder’s Conference is to review and clarify guidelines for submission, allow potential vendors the opportunity to ask questions regarding the proposal prior to submission, and provide an opportunity to review the certification and contract process.

NOTICE OF POST AWARD SUPPORT AND GUIDANCE:

Upon notification of receipt of award, ADMH will offer a post-award session for each individual awardee. This Post-Award Q&A session is designed to provide awardees with essential information regarding contract requirements, funding processes, and project timelines. Participants and ADMH will have the opportunity to clarify any questions about executing contracts, understanding funding disbursements, and meeting critical deadlines to ensure successful award management. We encourage all awardees to attend to gain a clear understanding of their responsibilities and available resources throughout the award period.

Date	Event	Method of Notification	
July 1, 2026	RFP Release	USPS, ADMH Website, and STAARs website	
July 20, 2026 1:00 PM CST	BIDDER’S CONFERENCE	Meeting URL	https://mhalabama.zoom.us/j/88361899433
		Meeting ID	883 6189 9433
July 22, 2026 by 12:00 pm	RFP questions deadline. Submit in Word—No tables	Email to: ContractingOffice.DMH@mh.alabama.gov	
July 24, 2026	RFP Q&A completion	ADMH website www.mh.alabama.gov	
August 24, 2026 2:00 pm	Four (4) RFP Submissions: 1 original, 2 copies, & 1 complete copy on a USB drive	USPS or FedEx or UPS (Review mailing note)	

August 24, 2026 2:00 pm	RFP Closing Date	USPS or FedEx or UPS <i>(Review mailing note)</i>
October (Date TBD)	Award Notification	USPS (In writing)
MID October (Dates TBD)	Navigating your award: Awardee Q&A	Individual Post Award meetings to be scheduled via ZOOM
This RFP is posted on ADMH website at www.mh.alabama.gov for review.		
Submission Addresses		
AL Department of Mental Health Office of Contracts & Purchasing RSA Union Building PO Box 301410 Montgomery, AL 36130		AL Department of Mental Health Office of Contracts & Purchasing RSA Union Building 100 N. Union St., Suite 570 Montgomery, AL 36104

NEW PROVIDERS

For NEW vendors awarded funds based on this RFP, the following items will require immediate submission and completion, in addition to the Certification information provided above:

1. Vender must enroll in eVerify and submit a copy of the Memorandum of Understanding (MOU) for employers:
 - Once enrolled, verify produces an eVerify MOU.
 - Submit a copy of the eVerify to ADMH. This is about 15-17 pages.
2. Must enroll in State of Alabama Accounting and Resource System (STAARS):
 - https://procurement.staars.alabama.gov/LoginExternal/Pages/register_for_a_new_accoun
 - STAARS must have the correct billing address for invoice processing.
 - STAARS will issue a vendor number.
3. Submit a copy of the TAX ID letter to ADMH
 - Legal business name must match Tax ID name.
 - If there are any name changes, provide any IRS correspondence to support the changes. Since all information should correspond with IRS.
 - If a vendor is “doing business as” (DBA), DBA must be on TAX ID letter.
4. Submit a copy of Certificate of Insurance. If a community provider, submit a copy of the liability insurance.
5. Register with Secretary of State (SOS). This registration is required for any vendor wishing to do business in the State of Alabama and is not contingent of a contract award.

