



**Extended Description:**

Opioid Settlement Grant RFP

**SHIPPING AND BILLING**

**Shipping**

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**Delivery Type:**

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**STATE OF ALABAMA  
DEPARTMENT OF MENTAL HEALTH**

RSA UNION BUILDING  
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POST OFFICE BOX 301410  
MONTGOMERY, ALABAMA 36130-1410  
[www.mh.alabama.gov](http://www.mh.alabama.gov)

July 28, 2025

RFP 2026-05

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, September 8, 2025**.

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 should be submitted in ink or typed and contain an original signature. 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. Also, please note: All US Postal mail, including express/overnight mail that is dispatched to any State agency is processed thru the State mail facility before it is forwarded to the appropriate State agency, 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 and therefore being determined to be untimely and will not be reviewed. 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. **All proposals received after the deadline will be deemed untimely and will not be reviewed.**

Sincerely,

*Leola Rogers*

Leola Rogers  
Office of Contracts & Purchasing

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**Organization:** ALABAMA DEPARTMENT OF MENTAL HEALTH (ADMH)

**RFP Closing Date & Time:** **2:00 pm on Monday, September 8, 2025**

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](mailto:leola.rogers@mh.alabama.gov)

### **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. Also, please note: All US Postal mail, including express/overnight mail that is dispatched to any State agency is processed thru the State mail facility before it is forwarded to the appropriate State agency, 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 and therefore being determined to be untimely and will not be reviewed. 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. **All proposals received after the deadline will be deemed untimely and will not be reviewed.**

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.
- # Were awarded Opioid Settlement Funds in FY25 through the ADMH grant process and are applying for continuation funding. \*\*

2. Who **may not** respond to this RFP?

- # Employees of ADMH, 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) in Round 1 (November 17, 2023) of funding still carrying a balance of unused funds.\*\*
- # Agencies awarded both in Round 1 (November 17, 2023) carrying a balance of unused funds along with awards in Round 2 (July 24, 2024) with unused funds. \*\*
- # Agencies retaining 50% or more of the awarded funds for Round 2 (July 24, 2024).\*\*

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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.) Website: [www.sos.alabama.gov](http://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 proposals if RFP instructions are not followed, to include submissions received after deadline (**see mailing note**), requested # of proposal copies not received, missing format submissions required, the absence of electronic submissions (USB drives).
7. **Protest (Effective 10/1/2022): A bona fide prospective bidder or offeror who is aggrieved in connection with the solicitation of a contract may protest to ADMH Director of Purchasing within 14 days of the date of issuance of the solicitation or any amendment to it, if the amendment is at issue.**
  - (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 award of a contract may protest to ADMH Director of Purchasing within 14 days of the date the award or notification of intent to award, whichever is earlier, is posted in accordance with this article.
  - 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 protest filed under subdivision (1) or (2) shall be in writing, be filed with ADMH, and set forth the grounds of the protest and the relief requested with enough particularity to give notice of the issues to be decided.
  - (b) ADMH, 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, ADMH shall commence an administrative review of the protest and issue a decision in writing within 14 days of the review.
  - (d) A copy of the decision under subsection (c) shall be mailed or otherwise furnished immediately to the protestor and any other party intervening.
  - (e) A decision under subsection (c) shall be final and conclusive, unless fraudulent, or a party adversely affected by the decision appeals administratively to the Director of Finance in accordance with Section 41-4-164.
  - (f) 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 protestor, except that solicitation or award of a protested contract is not stayed if ADMH, 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.
8. **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](http://www.mh.alabama.gov) for review. Please view the website prior to submitting a request for records as your request may be satisfied by the information contained therein.

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## **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 Schedule of Events for the RFP.*

### **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**

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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.

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**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**

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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>. 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.

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# ALABAMA DEPARTMENT OF MENTAL HEALTH

## OPIOID SETTLEMENT FUNDS

### REQUEST FOR PROPOSAL (RFP) 2026-05—Round 3

Leading Alabama’s efforts to enhance the health and well-being of individuals, families, and communities impacted by mental illness, developmental disabilities, 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. 2025–255. 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 over one million lives in the U.S., but recent data shows signs of progress. In 2023, the country experienced its first annual decline in drug overdose deaths since 2018, with 107,543 fatalities—a 3% decrease from 2022. Opioid-related deaths fell from about 84,181 to 81,083, and synthetic opioid deaths, primarily involving fentanyl, dropped from 76,226 to 74,702. However, overdoses involving cocaine and psychostimulants increased that year. Preliminary 2024 data suggest a dramatic turnaround, with a nearly 27% decrease in overdose deaths nationwide (an estimated 80,391 deaths, including 54,743 involving opioids). The CDC credits this shift to improved access to naloxone, expanded treatment for substance use disorders, enhanced prevention efforts, and more effective use of public health data tools.

Alabama, long among the states hardest hit by the opioid crisis, has also shown meaningful progress. From July 2023 to July 2024, overdose deaths in the state declined by 18.2%, marking its first sustained improvement. Although Alabama experienced an 8% increase in overdose deaths in 2023, its overall trend is now moving in a positive direction. Prescription rates have dropped significantly—from 143.8 per 100 people in 2012 (the nation’s highest) to 71.4 in 2023, though it still ranks second highest behind Arkansas. State-led initiatives, including the distribution of over 29,000 doses of naloxone, expansion in treatment services, and increased prevention and recovery support efforts with investments from opioid settlement funds, have played a key role in driving these improvements. Still, continued action is needed to sustain momentum and further reduce overdose rates.

## 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 being requested.

(**Note:** You **cannot** 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

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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 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 the Substance Abuse and Mental Health Services Administration (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) has 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 EBPPPs 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 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

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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** – Tailor efforts to be respectful of and effective for diverse communities.

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, sustainability and cultural competence are integral components that are woven throughout the SPF. Sustainability is the process through which a prevention system becomes a norm and is integrated into ongoing operations. Sustainability is vital to ensuring that prevention values and processes are firmly established, that partnerships are strengthened, and that financial and other resources are secured over the long term.

Cultural Competence is the process of communicating with audiences from diverse geographic, ethnic, racial, cultural, economic, social, and linguistic backgrounds. This dynamic process requires cultural knowledge and skill development at all service levels, including policymaking, administration and practice.

Sustainability and cultural competence should be a constant throughout each step of planning and implementation and should lead to the creation of a long-term strategy to sustain effective policies, programs and practices.

The five steps of SAMHSA’s SPF (Strategic Prevention Framework) along with sustainability and cultural competence are designed to help states and communities build prevention competencies and the infrastructure necessary to implement and sustain effective prevention programs, policies and practices. For more detailed information on the SPF process, go to <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 the onset and reduce the progression of opioid misuse and polysubstance use, particularly among vulnerable populations. 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, culturally responsive prevention infrastructure** by increasing local capacity and readiness. Communities must be equipped to sustain prevention

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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 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 the comprehensive service delivery process needed to address the multiple and complex needs of individuals and their families impacted by substance use. The treatment delivery process assures that all necessary and available services are delivered to address individuals' needs relating to substance use. These services can include things like screening, assessment, diagnosis, counseling, family and social support, case management, and ongoing follow-up care. Services are designed to meet each person's unique needs and ensure they receive all the support available to help with recovery. The main goal is to reduce or stop harmful alcohol or drug use and address related physical, emotional, and social issues. 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 define 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 the process of gaining control over one's life—and the direction one wants that life to go—on the other side of substance use disorder and all the losses usually associated with it. Recovery supportive services are nonclinical services that assist individuals and families to recover from substance use disorder. They include social support, linkage to and coordination among allied service providers, peer services and a full range of human services that facilitate recovery and wellness contributing to an improved quality of life. These services can be flexibly staged and may be provided prior to, during, and after treatment. Recovery Supportive Services may be provided in conjunction with treatment, and as separate and distinct services, to individuals and families who desire and need them. Professionals, faith-based and community-based groups, and other recovery support service providers are key components of Recovery Oriented Systems of Care.

## **C.**

## **TARGET POPULATION**

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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.

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 a diagnosed opioid use or stimulant use disorder
- # Individuals at-risk for developing an opioid or stimulant use disorders.

## **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:

- (a) Title of proposal: (Agency Name) FY 2026 Opioid Settlement Fund Proposal
- (b) Name the service category for which you are submitting application.
  - Prevention Services
  - Treatment Services
  - Recovery Support
- (c) Legal name of Applicant Organization.
- (d) Applicant's legal business organizational structure.
- (e) Applicant's address, telephone number.
- (f) Applicant's website address, if operational.
- (g) Applicant's contact for the proposal: Name, Address, Telephone, Email Address.

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(h) City, County, State in which the proposed program will be located.

(i) Date of submission.

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

The Applicant shall provide sufficient information for ADMH to determine 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.
  - # 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.

## **SECTION III – Program Description Content (7 pages maximum)**

- a) Describe why the services to be provided are relative to the target population, and how it 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.

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- d) Identify the number of individuals to receive the proposed services 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 underserved and under-resourced.
- g) Detail the plan the organization has of engaging the historically underserved communities 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 diverse cultural beliefs and practices of participants.
- l) Describe the timeline and process for implementation of services. Proposed services must start no later than 120 days after date of award. (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.

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- 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.
- r) 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.
- 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 narrative for the proposed program (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.

**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 outcomes of the previous project and proposal for continuation of previous project. Funding will be limited to the fiscal caps noted in this RFP. You must have less than 50% remaining on your previous award at time of submission of this 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.

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

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

### **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
- b) Name the service category for which you are submitting application.
  - # Prevention Services
  - # Treatment Services
  - # Recovery Support
- c) Legal name of Applicant Organization.
- d) Applicant's legal business organizational structure.
- e) Applicant's address, telephone number.
- f) Applicant's website address, if operational.
- g) Applicant's contact for the proposal: Name, Address, Telephone, Email Address.
- h) City, County, State in which the proposed program will be located.
- i) Date of submission

### **SECTION II – Program Description (7 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 will 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 will remain the same, state that in this section.

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- e) Describe your agency's plan to work collaboratively with various social service agencies to provide additional referrals or services for the target population.
- f) Describe the strategies to be utilized to ensure the proposed services, project, or program is, at all levels, responsive to the diverse cultural beliefs and practices of participants.
- 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.
- 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.
- 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.
- 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 the 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 (2 pages)**

- i. 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).

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iB Budget may include indirect costs with a percentage of 10% or less.  
Indirect costs should be described in the budget narrative.

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## 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 2025 Opioid Settlement funding round (FY2026), 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 requirement 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 supplant for existing services for which funds have already been provided. Supplementing occurs when opioid settlement funds are used to enhance services and program activities for which funding has previously been provided.

To supplant funds means utilizing funds to take the place of an original funding stream and replace it with opioid settlement funds. For example, Medicaid and other insurance programs should be used as a payment source for treatment wherever possible.

### **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 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.

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**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 does 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 available beds, 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 (100 total points)**

Scoring Criteria and Evaluation Questions for <b>New</b> Proposals	Potential Points
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<p><b><u>Understanding of and Responsiveness to the Request for Proposal</u></b></p> <p># Does the proposal clearly articulate an understanding of the concept of the prevention, treatment or recovery support services being proposed?</p> <p># Does the information provided in the proposal clearly correspond to the description of funding purpose and grant information requested?</p> <p># Is the information provided in the proposal articulated in a clear, concise, and organized manner?</p> <p># Did the proposal clearly describe how the target population will be impacted by the program and funding?</p>	20
<p><b><u>Organizational Experience in providing Prevention, Substance Use Treatment Services, or Recovery Support Services:</u></b></p> <p># Has the Applicant have documented experience in serving individuals in need of substance use prevention, treatment services, or recovery support services?</p> <p># Are the proposed benefits to ADMH from selecting this Applicant to perform the work reasonable and achievable?</p> <p># Does the Applicant have adequate resources to perform the required work?</p> <p># Does the Applicant have a history of successfully performing the required work?</p>	15
<p><b><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></b></p> <p># Has the applicant described the operation of a safe, therapeutic environment that supports individual needs, promotes recovery, and fosters overall well-being?</p> <p># Do the proposed services reflect the true needs of the identified Population?</p> <p># Are the engagement strategies in alignment with the services proposed?</p> <p># Are the services planned and organized in a manner to support attainment of the project's goals?</p>	30

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<ul style="list-style-type: none"> <li># Are the specific evidence-based practices to be utilized clearly articulated in the proposal?</li> <li># Are best practices relative to individuals with substance use needs identifiable in the proposed services?</li> <li># Are the needs of clients who have co-occurring disorders adequately addressed?</li> <li># Is cultural competency clearly distinguishable throughout each aspect of the service description?</li> <li># Is linguistic competency clearly distinguishable throughout each aspect of the scope of work?</li> </ul>	
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<p><b><u>Readiness to Implement Proposed Services</u></b></p> <ul style="list-style-type: none"> <li># Does the implementation plan provide realistic targets in relation to the tasks to be performed?</li> <li># Is the service level of care (LOC) identified?</li> <li># Is the timeline and strategies for obtaining the required approvals or certification from the Alabama Department of Mental Health (ADMH) explained?</li> <li># Is a sustainability plan documented?</li> </ul>	15
<p><b><u>Budget and Budget Narrative</u></b></p> <ul style="list-style-type: none"> <li># Does the proposed budget appear realistic for the services proposed?</li> <li># Does the budget clearly detail items and program needs and services described in the proposal?</li> <li># Does the budget narrative provide a clear explanation of all proposed costs and expenses?</li> <li># Does the budget contain any unallowable costs?</li> <li># Is Indirect Cost Rate at 10% or lower?</li> </ul>	20
<b>New—Total Points possible</b>	<b>100</b>

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Scoring Criteria and Evaluation Questions for <b>Continuation</b> Funding Requests	Potential Points
<b><u>Understanding of and Responsiveness to the Request for Proposal</u></b>  # 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
<b><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></b>  # 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 funding?  # Did the objectives stated from previous award and provided again in this proposal clearly align with the needs of the target population and was the organization successful in their reporting of these outcomes from the previous funding?  # Was there a clear description of how cultural and linguistic, as well as co-occurring disorders were distinguishable through the utilization of best practices for individuals with substance use who were served under the previous funding?	20
<b><u>Readiness to Implement Proposed Services</u></b>  # 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

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<b><u>Evaluation of Previous Project</u></b>  # 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
<b><u>Budget and Budget Narrative</u></b>  # 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 10% or lower?	20
<b>Continuation—Total Points possible</b>	<b>100</b>

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## 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.

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APPLICANT ORGANIZATION

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PRINTED NAME OF AUTHORIZED CERTIFYING OFFICIAL      TITLE

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SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL      DATE SUBMITTED

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## H. SCHEDULE OF EVENTS

### RFP 2026-05: Opioid Settlement Funds Proposal

The following RFP Schedule of Events represents the 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](http://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. This Post-Award Q&A session 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 28, 2025	RFP Release	USPS, ADMH Website, and STAARs website
August 12, 2025 1:00pm	BIDDER'S CONFERENCE	Via Zoom: <a href="https://mhalabama.zoom.us/j/87130697541">https://mhalabama.zoom.us/j/87130697541</a>
August 14, 2025 by 12:00 pm	RFP questions deadline. <b>Submit in Word—No tables</b>	Email to <a href="mailto:leola.rogers@mh.alabama.gov">leola.rogers@mh.alabama.gov</a>
August 15, 2025	RFP Q&A to be posted for review	ADMH website <a href="http://www.mh.alabama.gov">www.mh.alabama.gov</a>
September 8, 2025 2:00 pm	RFP Submissions (4): 1 original, 2 copies, & 1 complete copy on a USB drive	USPS or FedEx or UPS (Review mailing note)
September 8, 2025 2:00 pm	RFP Closing Date	USPS or FedEx or UPS (Review mailing note)
October 1, 2025	Notification of selection status	USPS (In writing)
October 8, 2025	Navigating your award: Awardee Q&A	

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**Submit RFP Responses To:**

AL Department of Mental Health Office of Contracts & Purchasing  
 RSA Union Building  
 100 N. Union Street, Suite 570  
 Montgomery, AL 36104

## **NEW PROVIDERS**

If the event that a new vendor is awarded funds based on this RFP, the following items will require immediate submission and completion:

- # Registered with Secretary of State (SOS).
  - # Need Tax ID number.
  - # Legal Business name
  - # There is a cost of approximately \$200.00.
  - # SOS will do the name registration. This is good for 12 months. Then the provider will complete the registration and will be assigned an entity ID number.
- # 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.
- # Must enroll in State of Alabama Accounting and Resource System (STAARS):
  - # [https://procurement.staars.alabama.gov/LoginExternal/Pages/register\\_for\\_a\\_new\\_account.htm](https://procurement.staars.alabama.gov/LoginExternal/Pages/register_for_a_new_account.htm)
  - # STAARS should have the correct billing address for invoice processing.
- # STAARS will issue a vendor number.
- # 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.
- # Submit a copy of Certificate of Insurance. If it’s a community provider, submit a copy of the liability insurance.