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EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES  
OFFICE OF MEDICAID  
ONE ASHBURTON PLACE, 11<sup>TH</sup> FLOOR  
BOSTON, MA 02108*

**BEHAVIORAL HEALTH URGENT CARE EXPANSION SOLICITATION**

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### ATTACHMENTS

Attachment A - Behavioral Health Urgent Care Application

Attachment B - Behavioral Health Urgent Care Grant Payment Agreement

## SECTION 1 BACKGROUND, SCOPE, AND PURPOSE OF SOLICITATION

The Executive Office of Health and Human Services (EOHHS) is issuing this Request for Application to solicit proposals from Eligible Organizations, as defined below, to implement programs that (1) support workforce recruitment, retention, or training at their organizations, in accordance with the legislative requirement in Line Item 1599-2027 of Section 2A of Chapter 102 of the Acts of 2021 and (2) that promote stability in the behavioral health workforce, consistent with the Behavioral Health Urgent Care Expansion Grant Program.

As part of the [Roadmap for Behavioral Health Reform](#), the Expanding Access to Behavioral Health Urgent Care grant is designed to expand access to treatment by providing the following:

- night and weekend hours
- same-day and next-day appointment options
- by providing additional behavioral health treatments such as mental health treatments and addiction services.

Grant awardees must become a designated Behavioral Health Urgent Care (BHUC) provider by the end of the grant period.

The focus of the grant is to provide more non-emergency options for care and treatment, as well as to increase access to culturally relevant care with a strong emphasis on improving access to underserved communities and populations with underserved language needs, including individuals who are deaf or hard of hearing. The grant serves to help expand access to treatment via expanded hours, including nights and weekends; adding more same-day and next-day appointments; adding technology enhancement to improve scheduling capabilities and to improve security for extended hours; and increasing access to medication for addiction treatment or psychopharmacology.

All Massachusetts-based Community Mental Health Centers (CMHCs) that are not already designated BHUC providers are eligible to apply for this grant. Priority will be given to CMHCs with strong ties to underserved communities and populations with underserved language needs, including individuals who are deaf or hard of hearing, or to CMHCs that can provide services to these populations as a result of this grant funding.

EOHHS is soliciting Applicants that will include in their responses, among other things, detailed information related to how the Applicant will use the funds to build, strengthen, and enhance a program that promotes Home and Community Based Services (HCBS) or human services workforce retention, recruitment, or training in Massachusetts. EOHHS will review applications submitted by the deadline established herein at **Section 11** and will choose awardees and award amounts after such review, as described in **Section 10**.

Eligible Organizations receiving grant awards will be required to certify that they will not use any grant payment received for uses other than those described in their grant applications.

**EOHHS staff, or their designee, will monitor and evaluate the work of all Awardees.** The grant program described in this Grant Solicitation is funded from the Transitional Escrow Fund established in Section 16 of Chapter 76 of the Acts of 2021 as well as from amounts received by the Commonwealth of Massachusetts from the Substance Abuse and Mental Health Services Administration and the U.S. Department of the Treasury under Section 9817 of the American Rescue Plan Act of 2021 (ARPA), Strengthening and Investing in Home and Community Based Services for Medicaid Beneficiaries.

## SECTION 2 DEFINITIONS

The following terms appearing capitalized throughout this throughout this Grant Agreement and appendices have the following meanings unless the context clearly indicates otherwise.

**Applicant:** An entity or individual that submitted an application in response to this Grant Solicitation.

**Behavioral Health Urgent Care (BHUC):** A program to improve access to behavioral health care. Any CMHC can attest to providing enhanced availability of services, as described in Managed Care Entity Bulletin 76, if they meet the requirements as set forth in 130 CMR 429.000.

**Community Mental Health Center (CMHC):** An entity that delivers a comprehensive group of diagnostic and psychotherapeutic treatment services to individuals seeking treatment for mental health disorders, which may include co-occurring substance use disorder, and their families by an interdisciplinary team under the medical direction of a psychiatrist and participates in MassHealth as a Mental Health Center.

**Deliverable:** Any work product that the Recipient delivers for the purposes of fulfilling its obligations to EOHHS under the terms of the Grant Agreement, including work product that Recipient must submit to EOHHS for EOHHS's review or approval in accordance with the procedures set forth herein.

**Diversity:** Variety in people's lived experiences, perspectives, identities, languages, cultures, and values.

**Eligible Expenses:** Expenses proposed by the Applicant to be expended in furtherance of one or more of the objectives listed in **Section 1** of the Grant Solicitation, and which are not determined unreasonable or impermissible by EOHHS. Eligible Expenses may include, without limitation, those identified in **Section 5** of the Grant Solicitation.

**Eligible Organization:** Any Massachusetts-based CMHC, enrolled as a MassHealth provider, that is not designated as a BHUC provider at the time of Application.

**Executive Office of Health and Human Services (EOHHS):** The Massachusetts agency responsible for the administration of the MassHealth program, pursuant to M.G.L. c. 118E and Title XIX and XXI of the Social Security Act and other applicable laws and waivers.

**Grant Agreement:** The agreement to be executed between EOHHS and each Recipient.

**Grant Award Notice:** The notice provided to the Recipient listing the Program activities within the Recipient's proposal that were approved for funding, providing the total grant funding awarded to the Recipient, and detailing other conditions, as applicable.

**Grant Program:** Behavioral Health Urgent Care Expansion Grant Program as described in the Grant Solicitation.

**Grant Solicitation:** This Behavioral Health Urgent Care Expansion Grant Solicitation and its accompanying attachments.

**Program Budget:** The budget for implementing the Program proposed by the Recipient in response to the Grant Solicitation, as approved by EOHHS in the Grant Award Notice. The Program Budget consists of the Budget Request Narrative included in **Appendix A** to this Grant Agreement, as modified and approved by EOHHS to reflect the total funding amount awarded to the Recipient as set forth in the Grant Award Notice. For the purposes of this Grant Agreement, the Program Budget does not include any portion of the Recipient's response regarding activities that were not approved for funding through the Grant Award Notice.

**Program Plan:** The plan for implementing the Program proposed by Recipient in response to the Grant Solicitation, as approved by EOHHS in accordance with the Grant Award Notice. The Program Plan consists of the Recipient's response to the Grant Solicitation attached as **Appendix A** to this Grant

Agreement, other than the Budget Request Narrative therein. For the avoidance of doubt, the Program Plan does not include any portion of the Recipient's response regarding Programs that were not approved for funding through the Grant Award Notice.

**Recipient:** Any Applicant that submitted an application in response to this Grant Solicitation, is selected for a grant award under this Grant Solicitation, enters into a Grant Agreement with EOHHHS, and receives funding as a result of this Grant Solicitation.

**State Fiscal Year:** The twelve-month period commencing July 1 and ending June 30 and designated by the calendar year in which the fiscal year ends (e.g., State Fiscal Year 2023 ends June 30, 2023).

### **SECTION 3 APPLICANT ELIGIBILITY**

All Massachusetts-based CMHCs that are not BHUC providers at the time of Application (Eligible Organizations) are eligible to apply for this grant. Priority will be given to Applicants with strong ties to underserved communities and populations with underserved language needs, including individuals who are deaf or hard of hearing, or Applicants that can provide services to these populations as a result of this grant funding.

## **SECTION 4 QUALIFYING PROGRAMS**

### **4.1 Minimum Qualifications**

Grant proposals must include a clear plan on how the Applicant will become a [designated BHUC](#) through the use of the grant funds by the end of the grant period. Eligible grant activities may include, but are not limited to:

- Recruiting and hiring staff to expand hours, including nights and weekends;
- Recruiting and hiring staff to add more same-day and next-day appointments;
- Technology enhancements to improve scheduling capabilities;
- Technology enhancements to improve security for expanded hours; and
- Marketing and outreach costs to inform the community of the enhanced availability of behavioral health services.

### **4.2 Prioritized Proposal Criteria**

Priority will be given to Applicants with strong ties to underserved communities and populations with underserved language needs, including individuals who are deaf or hard of hearing, or Applicants that can provide services to these populations as a result of this grant funding. Grant proposals that will result in expanding access to urgent care throughout the Commonwealth based on community need may also be prioritized. Consideration may be given to ensuring a broad geographical distribution of awards.

## SECTION 5 ELIGIBLE EXPENSES

### 5.1 Allowable Uses of Funds

**Applicants must propose to use grant funds only for Eligible Expenses.** Awardees may use grant funds to cover a range of appropriate expenses to help a CMHC provider become a BHUC provider, including:

- Staff recruitment and retention;
- Physical security technology upgrades to improve access to the facility during expanded evening and weekend hours;
- Fellowship programs;
- Retention bonuses;
- Subscriptions to job boards or similar services to improve recruitment;
- Development of training programs;
- Marketing and advertising expenses associated with recruitment campaigns;
- Marketing and advertising expenses associated with outreach to underserved communities;
- Professional development and training programs;
- Licensure/certification fees;
- Security technology enhancements;
- Technology investments to improve administrative tasks such as scheduling; and
- Reasonable direct costs associated with workforce development programs, as approved by EOHHS.

### 5.2 Ineligible Activities

**Grant funds must not be used for any of the ineligible activities listed below.** Applications proposing to use grant funds on such impermissible expenses may be rejected in whole or in part, and under no circumstances will grant funds be approved for such impermissible expenses.

CMHCs that are already designated as BHUC providers are not eligible for Awards under this opportunity and grants funds may not be expended in support of ongoing BHUC programs.

In addition, grant funds cannot be used for:

- Ongoing operating costs;
- Overtime associated with extending hours;
- Ongoing staff salaries;
- Temporary salary increases;
- Loan repayment; or
- Transportation.

Awardees must expend funds by no later than March 1, 2025, unless otherwise directed by EOHHS. EOHHS may extend the date by which funds must be expended, in its discretion, by providing notice to the Awardees and without requiring an amendment to the Contract.

## SECTION 6 GRANT PROGRAM DESCRIPTION

### 6.1 Application Requirements

To apply for a grant award, Applicants must submit **Attachment A, Behavioral Health Urgent Care Expansion Grant Application**.

All information requested on the application must be supplied. If any question or request is not applicable to an Applicant's proposal, the Applicant must indicate that it is not applicable.

### 6.2 Reporting Requirements

There are no specific reporting requirements associated with this grant funding. However, designated BHUC are required to submit a quarterly report to MassHealth in accordance with [Managed Care Entity Bulletin 76](#). The reporting requirements include:

- A. Percentage of total quarterly visits provided during extended appointment hours;
- B. Percentage of total quarterly initial evaluations completed within one day of clinic operation following the first contact;
- C. Percentage of total quarterly initial evaluations completed during extended appointment hours;
- D. Percentage of total quarterly urgent visits for existing clients completed within one day of clinic operation;
- E. Percentage of total quarterly urgent visits completed within one day of clinic operation occurring during extended appointment hours;
- F. Percentage of total quarterly urgent psychopharmacology appointments that occur within 72 hours of initial diagnostic evaluation;
- G. Percentage of total quarterly Medication for Addiction Treatment appointments that occur within 72 hours of initial diagnostic evaluation;
- H. Percentage of total quarterly routine or follow-up visits completed within 14 calendar days of initial contact; and
- I. Percentage of total quarterly routine or follow-up visits completed within 14 calendar days of initial contact that occur during extended appointment hours.

## **SECTION 7 GRANT PROGRAM INFORMATION**

### **7.1 Grant Program Process and Authority**

This Grant Solicitation is issued under the provisions of regulations at 815 CMR 2.00. Various terms found in the state procurement regulations at 801 CMR 21.00 are also incorporated by reference in this Grant Solicitation. Words used but not specifically defined in this Grant Solicitation shall have the meanings defined in 815 CMR 2.00 or 801 CMR 21.00. Unless otherwise specified in this Grant Solicitation, all communications, applications, and documentation must be in English, using English customary weights and measures (feet, pounds, quarts, etc.) and U.S. dollars. All applications must be submitted in accordance with the terms specified in **Section 9**.

Payments under this Grant Solicitation, including payments under any contract extensions, are subject to legislative appropriation and authorization, availability of state and federal funds, and EOHHS's determination of satisfactory performance and advancement of the public interest and the objectives of EOHHS.

EOHHS reserves the right to amend this Grant Solicitation at any time prior to contract execution. Any such amendment will be posted on COMMBUYS. Potential Applicants are advised to check this site regularly, as this will be the sole guaranteed method used for notification of changes.

EOHHS makes no guarantee that a contract, or any obligation to provide funding, will result from this Grant Solicitation.

This Grant Solicitation is distributed electronically using the Commonwealth of Massachusetts' eProcurement system known as COMMBUYS at [www.commbuys.com](http://www.commbuys.com) (see **Section 12.1** for more information about COMMBUYS).

### **7.2 Duration of Contract**

Contracts resulting from this Grant Solicitation shall be in effect upon execution and shall end on March 31, 2025.

### **7.3 Anticipated Grant Awards**

Grant funds will be awarded through a competitive application process according to this Grant Solicitation. Applications will be evaluated in accordance with **Section 10**. Awards under this Grant Solicitation shall be for a fixed amount, with an anticipated minimum award to chosen Awardees of \$50,000 and an anticipated maximum award to chosen Awardees of \$300,000, which amount shall be determined and announced to the Awardee in accordance with **Section 10** and shall be paid out in a single payment to each Awardee upon execution of the BHUC Attestation form. EOHHS may issue awards above or below these anticipated amounts, in its discretion. If additional funds become available during the Contract period, EOHHS reserves the right to increase the maximum obligation to some or all of the Contracts executed as a result of this Grant Solicitation or to execute Contracts with organizations not funded in the initial selection process, subject to available funding, satisfactory Contract performance, and service or commodity need.

## **SECTION 8 CONTRACT REQUIREMENTS**

**Attachment B, Model Grant Agreement**, contain terms that will be incorporated into each Grant Agreement that will be entered into between EOHHS and any Awardee. Under any Grant Agreement resulting from this Grant Solicitation, the Awardee will be responsible for the implementation of its proposed Grant Program, submission of required reporting once the CMHC becomes a BHUC provider, conducting required evaluation activities, and any other requirements outlined in the Awardee's application, this Grant Solicitation, the grant award notification letter, and the Grant Agreement between EOHHS and the Awardee.

## SECTION 9 APPLICATION REQUIREMENTS

### 9.1 Application Submission Requirements

All solicitations posted on COMMBUYS (referred to as Bids), require the submission of electronic responses (also referred to as Quotes). To submit an electronic response, Applicants must register and maintain an active COMMBUYS Vendor account. Questions regarding COMMBUYS should be directed to the COMMBUYS Help Desk at [OSDHelpDesk@mass.gov](mailto:OSDHelpDesk@mass.gov). In addition, there is a webcast, [Locate and Respond to Bid Solicitations in COMMBUYS](#), that Applicants may find helpful, as well as Job Aids for Vendors linked on the COMMBUYS landing page.

Respondents must submit electronic responses on COMMBUYS by the date and time specified in **Section 11**. COMMBUYS will not accept submissions after the specified deadline. The Applicant shall comply with all COMMBUYS electronic submission requirements and file size limits. Electronic media submissions, other than the required electronic files submitted via COMMBUYS, such as videotapes, audiotapes, and diskettes will not be accepted. Facsimile and e-mailed responses will not be accepted.

**A complete response to this Grant Solicitation shall consist of a completed Attachment A (Behavioral Health Urgent Care Expansion Grant Application), including the required attachments described therein.**

When reviewing a response, EOHHS, in its discretion, may choose not to consider any material that is not presented in accordance with EOHHS's instructions. Applicants are strongly encouraged not to include information or attachments that are extraneous, duplicative, or do not apply directly to the content requested. A CMHC may submit only one response to this Grant Solicitation.

### 9.2 Taxpayer Identification Number and Certification (Mass. Substitute W-9 Form)

Applicants must submit a complete and accurate Request for Taxpayer Identification and Certification Number (Mass. Substitute W-9 Form) as part of a completed Application as described in this Section. An original W-9 form is not required; an electronically signed or scan of wet-ink signed form is acceptable. If the Applicant's name, address, or Tax ID Number have not changed since the Applicant last submitted and executed a Mass. Substitute W-9 Form, a new Mass. Substitute W-9 Form is not required.

**The Mass. Substitute W-9 Form is available at this [Link](#).** The information on this form will be used to record the Applicant's legal address and where payments under a State Contract will be sent. The company's correct legal name and legal address must appear on this form and must be identical to the legal name and legal address on the Commonwealth Terms and Conditions. Please do not use the U.S. Treasury's version of the W-9 Form.

### 9.3 Awardee Authorized Signatory Listing

Applicants must complete the Contractor Authorized Signatory Listing available at this [Link](#), in accordance with Comptroller requirements, as part of a complete Application as described in **Section 9.1**.

Further information on how to correctly complete the Authorized Signatory Form is provided below.

- A. In the table entitled "Authorized Signatory Name" and "Title," type the names and titles of those individuals authorized to execute loan agreements, contracts, and other legally binding documents on behalf of the Applicant. Applicants are advised to keep this list as small as possible, as Awardees will be required to notify EOHHS of any changes. If the person signing in the signature block at the bottom of the first page of this form also will serve as an "Authorized Signatory," that person's name must be included in the typed table.

- B. In the next paragraph, which begins “I certify that I am the President, Chief Executive Officer, Chief Fiscal Officer, Corporate Clerk, or Legal Counsel for the Awardee...,” if your organization does not have these titles, cross them out and handwrite the appropriate title above the paragraph.
- C. The second page of the form (entitled “Proof of Authentication of Signature”) states that the page is optional. However, EOHHS requires the completion of separate second pages for each signatory listed on the first page (e.g., if three names are listed on the first page, three separate second pages, one for each signatory, must be completed).
- D. Please note that in two places where the form states “in the presence of a notary,” this should be interpreted to mean “in the virtual presence of a notary or corporate clerk/secretary.” Either a notary or corporate clerk/secretary may authenticate the form; only one is required.

Organizations whose corporate clerks/secretaries authenticate this form are not required to obtain a Corporate Seal to complete this document.

#### **9.4 Acceptable Forms of Signature**

Effective June 15, 2021, for all 1) CTR forms, including the Standard Contract Form, W-9s, Electronic Funds Transfer (EFT) forms, ISAs, and other CTR-issued documents and forms, or 2) documents related to state finance and within the statutory area of authority or control of CTR (i.e. contracts, payrolls, and related supporting documentation), CTR will accept signatures executed by an authorized signatory in any of the following ways: **1.** Traditional “wet signature” (ink on paper); **2.** Electronic signature that is either: **a.** Hand drawn using a mouse or finger if working from a touch screen device; or **b.** An uploaded picture of the signatory’s hand drawn signature; or **3.** Electronic signatures affixed using a digital tool such as Adobe Sign or DocuSign. If using an electronic signature, the signature must be visible, include the signatory’s name and title, and must be accompanied by a signature date. Please be advised that typed text of a name not generated by a digital tool such as Adobe Sign or DocuSign, even in computer-generated cursive script, or an electronic symbol, are not acceptable forms of electronic signature.

#### **9.5 Applicant Certifications**

By submitting an application, each Applicant certifies that:

- A. All information provided in or as part of the application is accurate;
- B. If awarded grant funds, the Applicant will produce receipts or other evidence that funds were used as proposed and approved and will otherwise comply with the terms of this Grant Solicitation and the Contract; and
- C. The Applicant understands that EOHHS may recoup the amount of any funding not used as proposed and approved. Methods of recoupment shall be at EOHHS’ discretion and may include offsetting payment for services rendered by the Awardee to MassHealth members.

## SECTION 10 APPLICATION EVALUATION PROCESS

### 10.1 Application Review

- A. Applications submitted in response to this Grant Solicitation shall undergo initial review by a third-party vendor retained by EOHHS, who will determine compliance with the minimum requirements of this Grant Solicitation. Failure to meet any such requirements may cause an Applicant or proposal to be disqualified from consideration. The third-party vendor will then compile and summarize the key information from the Applicant's application for EOHHS' internal Evaluation Committee (the "Committee") and make initial recommendations.
- B. The Committee will then review the materials from the third-party vendor, and complete final evaluations and recommendations for awardees and award amounts. In addition to the information provided in an Applicant's application, the Committee may consider any relevant information about the Applicant known to EOHHS. The third-party vendor may provide Committee with technical assistance, as the Committee deems necessary, during its review.
- C. The Committee will then make recommendations to the Secretary of EOHHS or her designee.
- D. Applications that lack adequate detail with respect to the information required under **Section 9**, as determined by the Committee, may be considered incomplete, and may cause an Applicant or proposal to be disqualified from consideration. At its option, the Committee may seek clarification from the Applicant pursuant to **Subsection 10.3**, below.
- E. All applications will be reviewed for comprehensiveness, appropriateness, feasibility, clarity, effectiveness, and responsiveness to the needs of EOHHS and the goals of the Behavioral Health Urgent Care program. EOHHS may fund all or some of the services proposed by the Applicant in its application. In addition, EOHHS may consider any relevant information about the Applicant known to EOHHS. EOHHS may also consider the Applicant's understanding of the nature and scope of the services requested, and history providing services as a currently contracted provider or to similar program participants. Should an Applicant be selected for a grant award, EOHHS may fully or partially fund the request submitted by the Applicant.
- F. The Committee will (1) evaluate applications in accordance with the criteria described in **Section 9.1**; (2) give a rating of "Excellent", "Very Good", "Good", "Fair", "Poor" or "Non-Responsive" for each section evaluated; (3) assign each of the applications an overall rating; and (4) compare the applications to one another.
- G. The Committee may determine that a defect in an Applicant's application is immaterial and may, at its discretion, consider the application to meet the requirements of this Grant Solicitation, with or without clarification from the applicant.

### 10.2 Budget and Work Plan Revisions

EOHHS will notify Applicants of any approved awards. After notification, selected Applicants may be required to develop and submit a revised work plan and budget, using the approved award amount as a condition of receipt of award. Work plans and budgets may need to be revised to clarify something in the initial proposals or to accommodate the approved award amount (which may be less than the Applicant requested). Revised work plans and budgets must still satisfy the requirements of this Grant Solicitation as determined by EOHHS. Additionally, Applicants may be required to submit updated cost proposals, quotes, etc. to support revised work plans, if applicable, on request.

### 10.3 Non-compliance and Clarifications

- A. EOHHS reserves the right to reject an Applicant's application at any time during the evaluation process if the Applicant:
  - a. Fails to demonstrate to EOHHS's satisfaction that it meets all requirements of this Grant Solicitation or receives a rating of "Poor" in one or more sections of the evaluation;
  - b. Fails to submit all required information or otherwise satisfy all response requirements in **Section 6 and Section 9**;
  - c. Has any interest that may, in EOHHS's sole determination, conflict with performance of services for the Commonwealth or be anti-competitive; or
  - d. Rejects or qualifies its agreement to any of the mandatory provisions of this Grant Solicitation, the Contract or the Commonwealth's Standard Contract Form or Terms and Conditions.
- A. The Committee may determine that non-compliance with a Grant Solicitation requirement is not material. In such cases, the Committee may seek clarification, allow the Applicant to make minor corrections, consider the non-compliance when evaluating the response, or apply a combination of all three remedies.
- B. The Committee may seek clarification from the Applicant if it determines some element of an Applicant's application requires clarification or correction.

## SECTION 11 TIMETABLE

#	DESCRIPTION	DATE
1	Grant Solicitation released	26-June-2023
2	<b>Deadline for receipt of written questions on the Grant Solicitation</b> (refer to Grant Solicitation <b>Subsection 12.3</b> )	7-July-2023, 3:00PM EST
3	<b>Bid Opening Date (Responses Due)</b>	28-July-2023 , 3:00PM EST
4	Awardees and award amounts determined (anticipated)	14-August-2023
5	Executed Contracts due from Awardees to EOHHS (anticipated)	25-August-2023
6	Projected Contract start date (anticipated)	1-September-2023

## SECTION 12 ADDITIONAL GRANT PROGRAM REQUIREMENTS AND TERMS

### 12.1 COMMBUYS as Official Source of Information

COMMBUYS is the official source of information for this procurement (known as a Bid in COMMBUYS terminology) and is publicly accessible at no charge at [www.commbuys.com](http://www.commbuys.com). Information contained in this Grant Solicitation and in COMMBUYS, including file attachments, announcements, or modifications, if any, and information contained in the related attachments, along with any modifications thereto, are all components of the procurement.

Applicants are solely responsible for obtaining all information distributed for this procurement via COMMBUYS.

It is each Applicant's responsibility to check COMMBUYS for any amendments, addenda, announcements or modifications to this Grant Solicitation or its attachments.

The Commonwealth accepts no responsibility and will provide no accommodation to Applicants who submit a Response to this Grant Solicitation based on out-of-date information or received from a source other than COMMBUYS.

COMMBUYS Registration. Applicants may elect to obtain a free COMMBUYS Seller registration which provides value-added features, including automated email notification associated with postings and modifications to COMMBUYS records.

The COMMBUYS system introduces terminology, which Applicants should be familiar with in order to conduct business with the Commonwealth. To view this terminology and to learn more about the COMMBUYS system, visit the [COMMBUYS Resource Center](#).

Questions specific to COMMBUYS should be made to the OSD Help Desk at [OSDHelpDesk@mass.gov](mailto:OSDHelpDesk@mass.gov).

All other questions must be directed to the Grant Solicitation contact, in accordance with **Section 12.2**.

### 12.2 Applicant Communications

Applicants are prohibited from communicating directly with any employee of EOHHS concerning this Grant Solicitation except as specified below, and no other individual Commonwealth employee or representative is authorized to provide any information or respond to any question or inquiry concerning this Grant Solicitation.

**Grant Solicitation Contact:** Shukri Osman, [shukri.osman@mas.gov](mailto:shukri.osman@mas.gov).

**Reasonable Accommodation:** Applicants with disabilities or hardships that seek reasonable accommodation, which may include the receipt of Grant Solicitation information in an alternative format, must submit a written statement describing the Applicant's disability and the requested accommodation to the contact person for the Grant Solicitation. EOHHS reserves the right to reject unreasonable requests.

### 12.3 Grant Solicitation Inquiries

Applicants may make written inquiries concerning this Grant Solicitation until no later than the date and time specified in the timetable in **Section 11** of this Grant Solicitation. Written inquiries must be sent to the Grant Solicitation contact at the email address listed in **Section 12.2** above. No acknowledgment of receipt will be given. EOHHS will review all questions and, at its discretion, prepare written responses to those it determines to be of general interest and relevant to the preparation of an application in response to the Grant Solicitation. These responses will be posted on the COMMBUYS website. Only written responses will be binding on EOHHS.

EOHHS reserves the right to accept additional written questions after the date and time specified in the timetable in **Section 11** of this Grant Solicitation and, at its discretion, prepare written responses to those it determines to be of general interest and relevant to the preparation of an application in response to the Grant Solicitation. These additional responses will also be posted on the COMMBUYS website. However, EOHHS makes no guarantee that it will answer questions received after the deadline.

#### **12.4 Electronic Communication and Update of Applicant's Contact Information**

It is the responsibility of the Applicant to keep current the e-mail address of the Applicant's contact person and prospective Contract manager, if awarded a Contract, and to monitor that e-mail inbox for communications from EOHHS, including requests for clarification. EOHHS and the Commonwealth assume no responsibility if an Applicant's designated e-mail address is not current, or if technical problems, including those with the Applicant's computer, network, or internet service provider (ISP) cause e-mail communications sent to or from the Applicant and EOHHS to be lost or rejected by any means, including e-mail or spam filtering.

#### **12.5 Amendment or Withdrawal of Grant Solicitation**

EOHHS reserves the right to amend the Grant Solicitation at any time prior to contract execution and to terminate this procurement in whole or in part at any time. If EOHHS decides to amend or clarify any part of this Grant Solicitation, any amendment will be posted on COMMBUYS. EOHHS recommends that Applicants check the COMMBUYS site regularly for updates, as it is the Applicant's responsibility to remain aware of clarifications and amendments.

#### **12.6 Funding Levels**

Funding levels not specifically identified in an Applicant's response and accepted by EOHHS as part of a Contract will not be compensated under any Contract awarded pursuant to this Grant Solicitation. The Commonwealth will not be responsible for any costs or expenses incurred by Applicants in responding to this Grant Solicitation.

#### **12.7 Electronic Funds Transfer (EFT)**

By responding to this Grant Solicitation, Applicants agree to participate in the Commonwealth Electronic Funds Transfer (EFT) program for receiving payments, unless the Applicant can provide compelling proof that it would be unduly burdensome. EFT is a benefit to both Awardees and the Commonwealth because it ensures fast, safe, and reliable payment directly to Awardees and saves both parties the cost of processing checks. Awardees can track and verify payments made electronically through the Comptroller's VendorWeb application. Additional information about EFT and VendorWeb is available on the [VendorWeb](#) site. Any successful Applicant must enroll in EFT.

**Awardees may submit their Electronic Funds Transfer Authorization Agreement, provided by EOHHS, at any time prior to execution of a grant award under this Grant Solicitation. It is not required as part of the Application submission.**

#### **12.8 Incorporation of Grant Solicitation**

This Grant Solicitation and any documents an Applicant submits in response to it may be incorporated into any Contract awarded to that Applicant.

## **12.9 Public Records**

All applications and related documents submitted in response to this Grant Solicitation become public records and are subject to the Massachusetts Public Records Law, M.G.L. c. 66, § 10 and M.G.L. c. 4, § 7 subsection 26. Any statements in submitted applications that are inconsistent with these statutes will be disregarded.

EOHHS will not return to Applicants any applications or materials they submit in response to this Grant Solicitation.

Because the Electronic Funds Transfer (EFT) Authorization Agreement contains banking information, this form, and all information contained on this form, shall not be considered a public record and shall not be subject to public disclosure through a public records request.

## **12.10 Restriction on the Use of the Commonwealth Seal**

Applicants and Awardees are not allowed to display the Commonwealth of Massachusetts Seal in their bid package or subsequent marketing materials if they are awarded a Contract because use of the coat of arms and the Great Seal of the Commonwealth for advertising or commercial purposes is prohibited by law.

## **12.11 Application Duration**

The Applicant's Application shall remain in effect until any Grant Agreement with the Applicant is executed.