

**ASAM 1.0 LOC | Methadone Clinic**

<b>Date of Issue:</b>	December 5, 2024
<b>Applications must be received no later than:</b>	2:00 p.m. January 21, 2025
<b>Submit all RFP-related questions to:</b>	Provider Network Development <a href="mailto:CBHClinicalProcurements@phila.gov">CBHClinicalProcurements@phila.gov</a>

**EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER:  
WOMEN, MINORITY INDIVIDUALS AND PEOPLE WITH  
DISABILITIES ARE ENCOURAGED TO RESPOND**

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# 1. PROJECT OVERVIEW

## 1.1. Introduction; Statement of Purpose

**Community Behavioral Health** (CBH), a Behavioral Health Managed Care Organization (BH-MCO) for the Commonwealth of Pennsylvania (PA) [Behavioral HealthChoices](#) and [Community HealthChoices](#) programs, is seeking providers to deliver [American Society of Addiction Medicine](#) (ASAM) outpatient services (1.0 level of care/LOC). Providers must also offer onsite methadone maintenance and may have the option of providing additional medication-assisted treatment (MAT).

Applicants are required to be located in Philadelphia County within the 19136 ZIP code. Applicants must currently provide ASAM 1.0 LOC with appropriate [Pennsylvania Department of Drug and Alcohol Programs](#) (DDAP) license at the intended site for this service.

## 1.2. Organizational Overview

The City of Philadelphia contracts with the [PA Department of Human Services](#) (PA-DHS) to provide behavioral health services to Philadelphia's Medicaid recipients under PA's Health Choices behavioral health mandatory managed care program. Through this contractual agreement, services are funded on a capitated basis. The City of Philadelphia, through the [Department of Behavioral Health and Intellectual Disability Services](#) (DBHIDS), contracts with CBH to administer the HealthChoices program.

DBHIDS has a long history of supporting innovative services in Philadelphia for individuals in recovery, family members, providers, and communities; the Philadelphia behavioral health system is recognized nationally and internationally for innovation in delivering behavioral health care services in the public sector. DBHIDS envisions a Philadelphia where everyone can achieve health, well-being, and self-determination.

The mission of DBHIDS is to educate, strengthen, and serve individuals and the community so that all Philadelphians can thrive. This mission is accomplished using a population health approach with an emphasis on recovery, resilience-focused behavioral health services, and self-determination for individuals with intellectual disabilities. Working with an extensive network of providers, DBHIDS provides services to individuals and their families dealing with intellectual disabilities, mental health issues, or substance use disorders to ensure they receive high-quality services that are accessible, effective, and appropriate.

DBHIDS is comprised of six divisions: Behavioral Health, Intellectual Disability Services (IDS), CBH, Planning Innovation, Behavioral Health and Justice Division (BHJD), and Division of Administration, Finance, and Quality.

CBH manages a full continuum of medically necessary and clinically appropriate behavioral health care services for the City's approximately 833,000 Medicaid recipients under PA's Health Choices program. Approximately 66% (n=552,000) of Philadelphia's Medicaid-eligible individuals are adults over 18 years of

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age. The mission of CBH is to meet the diverse behavioral health needs of the Philadelphia community by assuring access, quality, and fiscal accountability through being a high-performing, efficient, and nimble organization driven by quality, performance, and outcomes. CBH consistently promotes its mission as a diverse, innovative, and vibrant organization empowered to support wellness, resiliency, and recovery for all Philadelphians.

### 1.3. Project Background and Objectives

There continues to be a need for improved access to substance use disorder (SUD) treatment due to the ongoing opioid epidemic and the significant impact on various communities within Philadelphia. Since 2019, over 1000 members residing in the 19136 ZIP code have received ASAM 1.0 services. Despite the fact that many individuals received treatment, from 2021 to 2022, there was a 25% increase in unintentional overdoses in the 19136 ZIP code ([Philadelphia Department of Public Health, 2022](#)). Opioids, both with and without the presence of stimulants, were found present in 82% of overdose deaths in Philadelphia. This has been further complicated by the uptick of xylazine which was found present in 34% of overdose deaths.

To address the ongoing impact of the opioid epidemic, CBH, in partnership with DBHIDS and Philadelphia treatment providers, have previously implemented multiple initiatives to increase access to high-quality, evidence-based SUD treatment. Many of these initiatives have emphasized increasing access to medication assisted treatment (MAT). This request for proposals (RFP) aims to continue this expansion by improving access to the ASAM 1.0 LOC, specifically for CBH members residing in and nearby the 19136 ZIP code.

### 1.4. Applicant Eligibility; Threshold Requirements

To be eligible to respond to this RFP, applicants must be enrolled in Medicare and Medicaid programs. They must also be licensed through DDAP as an ASAM 1.0 outpatient services provider.

Applicants must currently have site control and be license-eligible and **PROMISE™**-eligible by February 27, 2025. The awarded applicant(s) are expected to be able to provide services to CBH members by June 1, 2025. CBH is entitled to rescind the right to negotiate if there are delays with service implementation. Additionally, applicants must not be on the three Federal and Commonwealth exclusion lists or on a Corporate Integrity Agreement.

### 1.5. General Disclaimer

This RFP does not commit CBH to award a contract. This RFP and the process it describes are proprietary and are for the sole and exclusive benefit of CBH. No other party, including any respondent, is intended to be granted rights hereunder. Any response, including written documents and verbal communication, by any applicant to this RFP shall become the property of CBH and may be subject to public disclosure by CBH.

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### 1.6. Site Location

This RFP requires providers to be currently operating in the 19136 ZIP code in Philadelphia County.

## 2. SCOPE OF WORK

### 2.1. Overview of Services

This RFP aims to expand CBH's in-network capacity of ASAM 1.0 outpatient services by identifying currently operating providers to serve members residing in the 19136 ZIP codes and surrounding areas. Providers must offer methadone maintenance with the option of offering additional medication assisted treatment. Treatment should be aligned with DDAP regulations and ASAM requirements.

### 2.2. Individuals Served

ASAM 1.0 treatment provides maximum flexibility to meet the individualized needs of members at different stages of substance use disorders. These services may be appropriate as the initial treatment intervention for members whose severity of illness and level of functioning warrants this intensity and who may be appropriately managed within the community. Additionally, it is often utilized as a discharge resource for members who are stepping down from more intensive levels of care. ASAM 1.0 LOC may be used for members who have achieved stability in recovery but require ongoing monitoring and disease management. This service can meet the needs of individuals who require fewer than nine hours of treatment on a weekly basis.

### 2.3. Service Delivery

#### 2.3.1. Individualized Treatment

ASAM 1.0 may include individual and group counseling, family therapy, motivational enhancement, educational groups, occupational and recreational therapy, psychotherapy, addiction pharmacotherapy, or other therapies. Treatment amount, frequency and intensity should be individualized based on the member's multidimensional severity and level of functioning.

An individualized treatment plan should reflect the member's progress in treatment. Various treatment interventions may optimize the response to treatment. Motivational enhancement and engagement strategies are preferred to confrontational therapies and should take into consideration the member's current stage of change.

Treatment should also routinely address mental health conditions and provide integrated clinical services. This may include referrals to more intensive mental health treatment or prescribing and monitoring psychotropic medications if and when the need arises.

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### 2.3.2. Support Services

Services are available on-site or through consultation or referrals for medical, psychiatric, psychological, laboratory, and toxicology. Medical and psychiatric consultation is available by telephone or, if in person, within 24 hours or a time frame appropriate to the severity and urgency of the consultation requested.

### 2.3.3. Emergency Services

Emergency services are available by telephone 24 hours a day, 7 days a week. This includes written procedures that the program has the availability of clinical staff (i.e., licensed or certified addiction counselors) 24 hours a day, 7 days a week. There are also written procedures on how members can access emergency services by telephone 24 hours a day, 7 days a week.

### 2.3.4. Continuous Quality Monitoring

As part of the DBHIDS initiative to ensure the delivery of high-quality services with positive, measurable outcomes, applicants will be expected to describe a plan for continuous quality improvement (CQI) that includes planned, systematic, formal, and ongoing processes for assessing and improving the outcomes of each proposed service. Applicants will also be expected to include diversity, equity, and inclusivity (DEI) monitoring as a core function of the CQI plan. The plan will be expected to detail a workforce that reflects the communities served, supports mitigating health disparities, and understands and demonstrates sensitivity to the needs of underserved communities. Awarded providers will be subject to evaluation, program, compliance, and budgetary monitoring by DBHIDS and CBH. Onsite reviews, including participation in treatment teams, may occur as CBH deems necessary.

Applicants are also expected to describe their planned processes to track, evaluate, and report outcomes at the individual and program levels. An essential component of service monitoring is gathering information that includes post-discharge monitoring of individuals who have received services, with a particular focus on reduced hospital readmissions and reliance on crisis services. The post-discharge monitoring function should include standardized quality of care metrics and track the use of involuntary commitment and be included as part of the applicant's quality assurance plan to assess and strengthen ongoing collaborative services and to follow up on the progress of individuals who received treatment.

### 2.3.5. Technological Capabilities

Applicants must have the technology capabilities to perform the activities proposed in this RFP, including the capability for electronic claims submission, service data reporting, telehealth capability, transmission and coordination of care, and secure information sharing.

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### 2.4. Service Philosophy

The awarded provider's treatment must align with DDAP regulations and *The ASAM Criteria, 3rd Edition* guidelines, emphasizing whole-person care instead of only the SUD. Treatment should be individualized to address the member's strengths, needs, obstacles, and support structure.

CBH has developed **Clinical Practice Guidelines** outlining best practices for treating specific disorders or certain populations. Providers should reference guidelines for treatment members with **Opioid Use Disorder** and may find other guidelines around prescribing medications.

### 2.5. Personnel and Required Training

Applicants should employ strategic hiring procedures to identify highly qualified candidates who can support the mission of ASAM services by providing compassionate and competent care. Hiring strategies should aim to form a team whose diversity and lived experience reflect that of the individuals served as much as possible. Treatment staff should support the mission of long-term recovery, community reintegration, and a reduction of overdose risk among members. Given the diversity, including racial and socioeconomic backgrounds, of CBH members, hiring strategies must aim to form a treatment team whose diversity reflects that of the member population served.

#### 2.5.1. Required Personnel

Requirements listed below are based on state-level regulations and may possibly be modified within the limits of those regulations. Providers must comply with the Commonwealth of Pennsylvania Code for the **Standards for Approval of Narcotic Treatment Program**, and the **Department of Drug and Alcohol Programs' (DDAP) ASAM alignment** staffing requirements.

##### ► Dispensing and Administering Staff

As per [28 Pa. Code § 715.7](#), the regulations for dispensing and administering staff are as follows:

- » If the facility operates an automated dispensing system, one full-time nurse, or another individual who is authorized by law to dispense controlled substances, needs to be available for every 200 patients.
- » If the facility operates a manual (or non-automated) dispensing system, one full-time nurse, or another individual who is authorized by law to dispense controlled substances, needs to be available for every 150 patients.
- » Dispensing time is determined by patient census: There must be a sufficient number of dispensing staff to ensure that all patients are medicated within 15 minutes of arrival at the dispensing area.

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- » According to DDAP ASAM Level 1 regulations, office-based nurses (registered nurses or licensed practice nurse) perform medication management in support of prescribers.
- » They provide patient education about medications, and support patient adherence to medications.

### ➔ Physician Staffing

As per [28 Pa. Code § 715.6](#), physician staffing regulations are as follows:

- » Medical Director: A narcotic treatment program shall designate a medical director to be responsible for all medical services. The Medical Director is required to be a physician, and shall have obtained one of the following:
  - Three years of documented experience with individuals with substance use disorders, including at least one year of experience with individuals who are addicted to narcotics.
  - Certification in addiction medicine by ASAM
  - Certificate of added qualifications in addiction psychiatry by the American Board of Psychiatry and Neurology, Inc.
- » A narcotic treatment program may employ narcotic treatment physicians to assist the Medical Director. Narcotic Treatment Physicians shall be available for consultation and medication orders at all times that a narcotic treatment program is open. Narcotic Treatment Physicians shall provide services one hour per week onsite for every 10 patients.
  - According to the [DDAP ASAM Level 1 regulations for Addiction Specialist Physicians](#), they provide medication management in referral from general physicians, mental health professionals, or certified addiction counselors.
  - Physician Assistant or Certified Registered Nurse: May perform functions of the Narcotic Treatment Physician as long as they are authorized by federal, state, and local laws and regulations. All functions are delegated by the Medical Director or the Narcotic Treatment Physicians.

### ➔ Psychosocial Staffing

As per 28 Pa. Codes § [704.7](#), [715.8](#), the psychosocial staffing is as follows:

- » Counselor: The caseload within a narcotic treatment program shall not exceed 35 active patients.

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- » Counselor Assistant: A Counselor Assistant who is eligible for a caseload may be included in determining ratios.

### 2.5.2. Required Training

All staff must be trained in:

- ➔ CPR and medical first aid
- ➔ CBH-required safety training
- ➔ Naloxone administration

Clinical staff must be trained in:

- ➔ *The ASAM Criteria, 3rd Edition*
- ➔ Co-occurring disorders
- ➔ Structured tools and other quality measures as applicable
- ➔ Mental health first aid
- ➔ Trauma-informed care
- ➔ Treatment approaches related to grief
- ➔ Safety planning intervention
- ➔ Topics relevant to trends and population (monthly or quarterly)
- ➔ The effectiveness of MAT

### 2.6. Language and Culture

Applicants should develop plans to ensure that the proposed sites welcome people from diverse cultures and have the resources to work with individuals and families who speak languages other than English. The applicant's description of plans for working with persons from diverse cultures should include information on addiction outpatient service strategies and resources to respond to the cultural needs and preferences of persons who live in Philadelphia. Applicants must present accurate and current information to show that this program's language and culture plan reflects the population served. It is expected that members served will comprise varying racial and socioeconomic backgrounds, and staff must be culturally and linguistically

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competent, including experience working with members with diverse backgrounds, identities, and related needs.

Providers must be prepared to support members whose treatment needs are heavily impacted and informed by social determinants and risk factors, including health complications, substance use challenges, poverty, histories of homelessness, unstable or inadequate housing, and violence in their communities. Programs should also be affirming of LGBTQIA populations, with an ability to sensitively support members in affirming their gender identities, gender expressions, and sexual orientations and relay this information to clinical management in the utilization review process.

### 2.7. Timetable

Services requested through this RFP are expected to be fully operational and serving CBH members by June 1, 2025.

### 2.8. Monitoring

Awarded providers will be subject to evaluation, program compliance, and budgetary monitoring by DBHIDS and CBH. As CBH deems necessary, onsite reviews, including participation in treatment team may occur.

### 2.9. Performance Metrics, Standards, and Reporting Requirements

The selected applicant(s) must comply with CBH's evaluations, credentialing, compliance, and future performance standards and reporting requirements during the term of the contract and provide 24-hour directed screening, evaluation, treatment, and ongoing recovery services to help the members achieve stabilization and changes in substance use behaviors. Reporting requirements may be modified prior to or during the contract award period. The applicant will be expected to have a compliance plan along with all other required documents for CBH initial credentialing. In addition to usual business hour operations, screenings and ASAM LOC assessments for admissions must be available during weekend and evening hours.

### 2.10. Compensation/Reimbursement

ASAM 1.0 LOC is part of CBH's Value-Based Purchasing plan and is paid through an Alternative Payment Arrangement. Providers receive a case rate for each member who is seen for, at minimum, three qualifying services in a calendar month. Providers should submit accurate claims for every service that is delivered to the member. Claims are subject to review. Improperly billed claims may be retracted either via provider self-audits or CBH Compliance audit.

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To increase access, the following services are paid Fee-for-Service at contracted rates and do not count as an accumulating service towards the number of billable services required to qualify for the case rate:

1. ASAM 1.0 Assessment (350-3) is paid Fee-for-Service as an event-based service and will include a dollar amount on the provider's contract (Schedule A). Billing for this service is limited to one per member, per provider, per 90 days.
2. ASAM 1.0 Psychiatric Evaluation (350-1) is paid Fee-for-Service as an event-based service and will include a dollar amount on the provider's contract (Schedule A). Billing for this service is limited to one per member, per provider, per 180 days.
3. ASAM 1.0 CRNP Evaluation (350-152) is paid Fee-for-Service as an event-based service and will include a dollar amount on the provider's contract (Schedule A). Billing for this service is limited to one per member, per provider, per 180 days.

For additional information, please review [Provider Bulletin 22-6](#), [Provider Bulletin 23-28](#) and [Provider Bulletin 24-08](#).

## 3. PROPOSAL FORMAT, CONTENT AND SUBMISSION REQUIREMENTS; SELECTION PROCESS

### 3.1. Required Proposal Format

Proposals must be prepared simply and economically, providing a straightforward, concise description of the applicant's ability to meet the requirements of the RFP. Each proposal must provide all the information detailed in this RFP using the format described below. The narrative portion of the proposal must be presented in print size of 12, using Times New Roman font, single-spaced with minimum margins of one inch. For each section where it is required, the applicant must fully answer all the listed questions in the outline form in which they are presented in the RFP. Answers to each question must be numbered/lettered and correspond to the numbered/lettered questions in this RFP. Failure to number and letter the questions or to respond to all questions may result in the proposal being considered non-responsive. Each attachment, appendix, or addendum must reference the corresponding section or subsection number. Applicants are required to limit their general narrative description to eight single-spaced pages, excluding required attachments. As a general instruction, if you have responded to a requirement in another part of your proposal, refer to that section and do not repeat your response. Applicants whose narrative exceeds the page limit may have their proposals considered non-responsive and be disqualified.

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### 3.2. Introduction: Executive Summary

- ➡ Provide a brief overview of your organization (not to exceed one page), including a general description of your understanding of the proposed project's scope.
- ➡ Provide the address of your organization.
- ➡ Describe previous work and experience providing SUD services similar to or aligned with those requested in this RFP.
- ➡ Describe the MAT options offered by your organization.
- ➡ Describe the continuum of services your organization offers, emphasizing service delivery for individuals with an SUD diagnosis.

### 3.3. Licensure and Location

Applicants must be located in Philadelphia County, in the 19136 ZIP code. Applicants should indicate their licensure status through DDAP and provide a copy of their license.

### 3.4. Corporate Status

Please indicate whether you are a for-profit or not-for-profit organization and attach legal documentation of that status to your proposal. Preference will be given to minority, women, or disabled-owned business enterprises (M/W/DSBE).

### 3.5. Government Structure

Describe the governing body of your organization. Each applicant must provide a list of the names, gender, race, and business addresses of all members of its Board of Directors. Please indicate which, if any, board members are self-disclosed service recipients or are family members of people who have received services.

### 3.6. Service Requirements

The following information should be included in applicants' proposals:

- ➡ Clinical Services:
  - » Describe plans for training your staff in ASAM Criteria 3rd edition and treatment provisions, including completion of ASAM LOC assessments to determine medical necessity criteria.

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- » Discuss any evidence-based practices your organization will be implementing and how staff will be trained.
- » Include types of community-based connections and linkages that are available (e.g., mental health treatment, educational services, and work-related services) and how these linkages enhance your organization.
- » Describe your organization's co-occurring or co-occurring enhanced treatment. Share what personnel you employ to support the identified treatment.
- » Describe your organization's ability to provide psychiatric treatment on site or through referrals. This may include medication assessment and prescriptions as needed.
- » Describe your organization's policies around drug screening.
- » Describe your organization's policies around dosing. Discuss if there are times when individuals will not be dosed.
- » Describe your organization's ability to serve specialized populations (this may include linguistic competencies, LGBTQIA+, trauma informed, etc.).

➔ Referral Process:

- » Describe how your organization will ensure timely responses to referrals, intakes, and waitlist management.
- » Describe established linkages with community partners and how these linkages enhance the treatment of members receiving services within your organization.
- » Describe the process for meeting individualized treatment needs.

➔ Transportation/Accessibility:

- » Specify whether your organization has any ADA capabilities, requirements, or compliance exemptions.
- » Describe your ability to serve members with physical disabilities or limitations. Share how you can support these members in accessing treatment.

### 3.7. Operational Documentation and Requirements

Applicants must demonstrate the financial capability and fiscal solvency to do the work described in this RFP and as described in their proposal. At a minimum, applicants must meet the financial threshold requirements

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described below for their proposal to be considered for further review. The following documentation is required at the time of proposal submission and should be submitted as an attachment to the proposal:

- ➔ Tax Identification Number
- ➔ An overview of your agency's financial status, including a certified corporate audit report (with management letter where applicable)
  - » If this is not available, please explain and submit a review report by a CPA firm. If neither a certified corporate audit report nor a review report is available, please explain and submit a compilation report by a CPA firm. Any of these submissions must be for the most recently ended corporate fiscal year. If the report is not yet available, submit the report for the prior corporate fiscal year. Please note that the most recent report must be submitted prior to any potential contract negotiations. In the case of a startup with no financial activity, please provide a business plan, including a three-year financial projection of cash flow, income statement, and balance sheet.
- ➔ Federal income tax returns for for-profit agencies, or IRS Form 990 (Return of Organization Exempt from Income Tax) for non-profit agencies
  - » Either of these submissions must be for the most recently ended corporate fiscal year. If the tax return is not yet available, submit the return for the prior corporate fiscal year. Please note that the most recent tax return must be submitted prior to any potential contract negotiations. In the case of a startup, provide proof of corporate charter, corporate tax status, and individual tax return(s) of principal(s)/owner(s).
- ➔ Proof of payment for all required federal, state, and local taxes (including payroll taxes) for the past 12 months
  - » If pre-operational, provide proof of deposits to cover initial operations.
- ➔ Proof of an adequate line of credit demonstrating funds available to meet operating needs (If not available, please explain.)
- ➔ Disclosure of any bankruptcy filings or liens placed on your agency over the past five years
  - » Please include explanations. If your agency has not been subject to bankruptcy filings or liens over the past five years, please include an attestation signed by either your chief executive officer or chief financial officer indicating this.
- ➔ Certificates of insurance with the named insured entity being the same name and address as the provider contracting with CBH

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- » The insurance company providing coverage must be certified to do business in Pennsylvania or be otherwise acceptable to CBH.
- » The insurance certificate must include the following coverage:
  - General liability with a minimum of \$2,000,000 aggregate and a minimum of \$2,000,000 per occurrence
  - Professional liability with a minimum of \$1,000,000 aggregate and a minimum of \$3,000,000 per occurrence (Professional liability policy may be per occurrence or claims made; if claims made, a two-year tail is required.)
  - Automobile liability with a minimum combined single limit of \$1,000,000
  - Workers' compensation/employer liability with a \$100,000 per accident, \$100,000 disease-per-employee, and \$500,000 disease policy limit
- » CBH, the City of Philadelphia, and the Commonwealth of Pennsylvania Department of Public Welfare must be named as additional insured with respect to your general liability policy. The certificate holder must be CBH.
- » Applicants who have passed all threshold review items and are recommended by the review committee to be considered for contract negotiations for this RFP will be required to provide a statement from an independent CPA attesting to the applicant agency's financial solvency.

### 3.8. Terms of Contract

The contract CBH enters into as a result of this RFP will be designated as a Provider Agreement. CBH will only negotiate with applicants whose applications, including all appropriate documentation (e.g., audits, letters of credit, past performance evaluations, etc.), show them to be qualified, responsible, and capable of performing the work required in the RFP.

The selected applicant(s) must maintain full responsibility for the maintenance of such insurance as may be required by the law of employers, including (but not limited to) worker's compensation, general liability, unemployment compensation, employer's liability insurance, professional liability, and automobile insurance.

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### 3.9. Health Insurance Portability and Accountability Act (HIPAA)

The work to be provided under any contract issued pursuant to this RFP is subject to the federal Health Insurance Portability and Accountability Act (HIPAA), as amended, and/or other state or federal laws or regulations governing the confidentiality and security of health information. The selected applicant(s) will be required to comply with CBH confidentiality standards identified in any contractual agreement between the selected applicant(s) and CBH.

### 3.10. Minority/Women/Disabled-Owned Business Enterprises (M/W/DSBE)

CBH is a city-related agency, and as such, its contracted providers must cooperate with the local municipality's intent regarding M/W/DSBEs. CBH expects the selected applicant(s) to employ a "Best and Good Faith Efforts" approach to include certified M/W/DSBEs in the services provided through this RFP where applicable and meet the intent of M/W/DSBE legislation.

The purpose of M/W/DSBE state legislation is to provide equal opportunity for all businesses and to assure that CBH funds are not used, directly or indirectly, to promote, reinforce, or perpetuate discriminatory practices. CBH is committed to fostering an environment in which all businesses are free to participate in business opportunities without the impediments of discrimination and participate in all CBH contracts on an equitable basis.

- ▶ For-profit applicants should indicate if their organization is a M/W/DSBE certified by an approved certifying agency or identified in the [City of Philadelphia Office of Economic Opportunity \(OEO\)](#) certification registry. If the applicant is M/W/DSBE-certified, a copy of the certification should be included with the proposal. Any certifications should be submitted as hard copy attachments to the original application and copies that are submitted to CBH.
- ▶ Not-for-profit applicants cannot be formally M/W/DSBE-certified. CBH does utilize adapted state definitions to determine the M/W/DSBE status. Criteria are applied to not-for-profit entities to determine M/W/DSBE status in the CBH provider network, as follows (all criteria must be satisfied):
  - » At least 51% of the board of directors must be qualified minorities, women, or disabled persons.
  - » A woman, minority, or disabled person must hold the highest position in the company.
  - » Minority groups eligible for certification include African Americans, Hispanic Americans, Native Americans, and Asian Americans.

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- » Citizenship and legitimate minority group membership must be established through birth certificates, military records, passports, or tribal cards.
- ➔ Not-for-profit organizations may have sub-contracting relationships with certified M/W/DSBE for-profit organizations. Not-for-profits should include a listing of their M/W/DSBE-certified subcontractors and their certification information.

### 3.11. City of Philadelphia Tax and Regulatory Status and Clearance Statement

As CBH is a quasi-governmental, city-related agency, prospective applicants must meet certain City of Philadelphia requirements. It is the policy of the City of Philadelphia to ensure that each contractor and subcontractor has all required licenses and permits and is current with respect to the payment of City taxes or other indebtedness owed to the City (including, but not limited to, taxes collected by the City on behalf of the School District of Philadelphia) and is not in violation of other regulatory provisions contained in The Philadelphia Code. To assist the city in determining this status, through its Department of Revenue and Department of Licenses and Inspections, each applicant is required to complete and return with its proposal a [City of Philadelphia Tax and Regulatory Status and Clearance Statement](#).

If the applicant is not in compliance with the City's tax and regulatory codes, the applicant will be provided with an opportunity to enter into satisfactory arrangements with the City. If satisfactory arrangements cannot be made within a week of being notified of their non-compliance, applicants will not be eligible for the award of the contract contemplated by this RFP.

Selected applicant(s) will also be required to assist the City in obtaining the above information from its proposed subcontractors (if any). If a proposed subcontractor is not in compliance with city codes and fails to enter into satisfactory arrangements with the City, the non-compliant subcontractor will be ineligible to participate in the contract contemplated by this RFP, and the selected applicant(s) may find it necessary to replace the non-compliant subcontractor with a compliant subcontractor. Applicants are advised to take these city policies into consideration when entering into their contractual relationships with proposed subcontractors.

Applicants need not have a City of Philadelphia Business Privilege Tax Account Number and Business Privilege License Number to respond to this RFP but will, in most circumstances, be required to obtain one or both if selected for award of the contract contemplated by this RFP. Proposals for a Business Privilege Tax Account Number or a Business Privilege License may be made through the [City of Philadelphia Business Services webpage](#). Call the Department of Revenue at 215-686-6600 for questions related to City of Philadelphia Business Privilege Tax Account Numbers or the Department of Licenses and Inspections at 215-686-2490 for questions related to a Business Privilege License.

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### 3.12. Compliance with Philadelphia 21st Century Minimum Wage and Benefits Ordinance

Applicants are advised that any contract awarded pursuant to this RFP is a “Service Contract,” and the selected applicant(s) under such contract is a “Service Contractor,” as those terms are defined in Chapter 17-1300 of the Philadelphia Code, or [Philadelphia 21st Century Minimum Wage and Benefits Standard Ordinance](#). Any Subcontractor and any sub-subcontractor at any tier proposed to perform services sought by this RFP is also a “Service Contractor” for Chapter 17-1300 purposes. If any such Service Contractor (i.e., applicant and subcontractors at any tier) is also an “Employer,” as that term is defined in § 17-1302 (more than five employees) and is among the Employers listed in § 17-1303, then during the term of any resulting contract it is subject to the minimum wage and benefits provisions set forth in Chapter 17-1300 unless it is granted a waiver or partial waiver under § 17-1304. Absent a waiver, these minimum wage and benefits provisions, which include a minimum hourly wage that is adjusted annually based on the CPI, health care, and sick leave benefits, are mandatory and must be provided to the applicant’s employees or the employees of any subcontractor at any tier who perform services related to the city contract resulting from this RFP.

Applicants and any subcontractors at any tier proposed by applicants are strongly encouraged to consult Chapter 17-1300 of the Philadelphia Code, the [General Provisions](#), and any wage or equal benefits ordinances on [eContract Philly](#) for further details concerning the applicability of this chapter and obligations it imposes on certain city contractors and subcontractors at any tier. In addition to the enforcement provisions contained in Chapter 17-1300, the selected applicant(s)’s failure or the failure of any subcontractor at any tier to comply (absent an approved waiver) with the provisions of Chapter 17-1300 or any discrimination or retaliation by the selected applicant(s) or their subcontractors at any tier against any of their employees on account of having claimed a violation of Chapter 17-1300, shall be a material breach of any Service Contract resulting from this RFP. By submitting a proposal in response to this RFP, applicants acknowledge that they understand and will comply with the requirements of Chapter 17-1300 and will require the compliance of their subcontractors at any tier if awarded a contract pursuant to this RFP. Applicants further acknowledge that they will notify any subcontractors at any tier proposed to perform services related to this RFP of Chapter 17-1300 requirements.

### 3.13. Certification of Compliance with Equal Benefits Ordinance

If this RFP is a solicitation for a “Service Contract” as that term is defined in [Philadelphia Code § 17-1901\(4\)](#) (“A contract for the furnishing of services to or for the City, except where services are incidental to the delivery of goods. The term does not include any contract with a governmental agency.”) and will result in a Service Contract in an amount in excess of \$250,000, pursuant to [Philadelphia Code Chapter 17-1900](#), the selected applicant(s) shall, for any of its employees who reside in the City, or any of its employees who are non-residents subject to City wage tax under [Philadelphia Code § 19-1502\(1\)\(b\)](#), be required to extend the same employment benefits the selected applicant(s) extends to spouses of its employees to life partners of such employees, absent a waiver by the City under § 17-1904. By submission of their proposals in response

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to this RFP, all applicants so acknowledge and certify that, if awarded a Service Contract pursuant to this RFP, they will comply with the provisions of Philadelphia Code Chapter 17-1900 and will notify their employees of the employment benefits available to life partners. Following the award of a Service Contract and prior to execution of the Service Contract by the City, the selected applicant(s) shall certify that its employees have received the required notification of the employment benefits available to life partners and that such employment benefits will actually be available, or that the selected applicant(s) does not provide employment benefits to the spouses of married employees. The selected applicant's failure to comply with these provisions or any discrimination or retaliation by the selected applicant(s) against any employee on account of having claimed a violation of Chapter 17-1900 shall be in material breach of the Service Contract resulting from this RFP. Further information concerning the applicability of the Equal Benefits Ordinance and the obligations it imposes on certain city contractors is contained in the wage and equal benefits ordinances on [eContract Philly](#).

### 3.14. City of Philadelphia Disclosure Forms

Applicants and subcontractors are required to complete the [City of Philadelphia Disclosure Forms](#) to report campaign contributions to local and state political candidates and incumbents; any consultants used in responding to the RFP and contributions those consultants have made; prospective subcontractors; and whether applicants or any representatives of applicants have received any requests for money or other items of value or advice on particular firms to satisfy M/W/DSBE participation goals. These forms must be completed and returned with the proposal. The forms are attached as separate PDFs on the website posting.

### 3.15. CBH Disclosure of Litigation Form

The applicant shall describe any pending, threatened, or contemplated administrative or judicial proceedings that are material to the applicant's business or finances including, but not limited to, any litigation, consent orders, or agreements between any local, state, or federal regulatory agency and the applicant or any subcontractor the applicant intends to use to perform any of the services described in this RFP. Failure to disclose any of the proceedings described above may be grounds for disqualification of the applicant's submission. Complete and submit with your proposal the [City of Philadelphia Disclosure of Litigation Form](#).

### 3.16. Selection Process and Responses

An application review committee will review all responses to this RFP. Based on the criteria detailed below, the committee will make recommendations concerning the submissions that best meet the RFP's goals.

Submissions will be reviewed based on the merits of the written responses to the RFP.

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### 3.17. Threshold Requirements

Threshold requirements provide a baseline for all proposals, which means they provide basic information that all applicants must meet. Failure to meet all of these requirements may disqualify an applicant from consideration through this RFP. Threshold requirements include timely submission of a complete proposal with responses to all sections and questions outlined herein. In addition, all required attachments must be submitted. Threshold requirements include having the requisite experience and licenses to implement the program and being a service provider in good standing with the City and CBH (as applicable).

CBH will determine if a provider is in good standing by reviewing information gathered through various departments across DBHIDS. A determination is based on, but not limited to, the following criteria: re-credentialing status history, compliance error rate history, quality improvement plan status, and financial solvency. When applicable, state licensure status will also be reviewed, taken into consideration, and discussed with the PA Department of Human Services.

Neither the provider nor its staff, contractors, subcontractors, or vendors may be on any of these three Excluded Individuals and Entities lists:

- ➔ [List of Excluded Individuals and Entities \(LEIE\)](#)
- ➔ [System for Award Management \(SAM\) \(formerly EPLS\)](#)
- ➔ [Department of Human Services' Medicheck List](#)

For this RFP, the applicant must include an attached statement that the provider and its staff, subcontractors, or vendors have been screened for and are not on any of the three Excluded Individuals and Entities lists. Ongoing, the provider must conduct monthly screening of its own staff, contractors, subcontractors, and vendors for excluded individuals on the three Excluded Individuals and Entities lists.

## 4. APPLICATION ADMINISTRATION

### 4.1. Procurement Documents and Schedule

Please make sure to include completed and signed (where applicable) attachments with your submission:

- ➔ Attachment: [CBH RFP Response Cover Sheet](#)
- ➔ Attachment: [City of Philadelphia Tax and Regulatory Status and Clearance Statement](#)
- ➔ Attachment: [City of Philadelphia Disclosure Forms](#)

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- ➔ Attachment: [City of Philadelphia Disclosure of Litigation Form](#)
- ➔ Attachment: [CBH Provider Rate Request Certification Statement](#)
- ➔ Attachment: [CBH Provider Rate Request Supporting Documentation](#) (xlsx)  
*Please Note: This Excel file contains three sheets: Expenditure Summary, Personnel Invoice Schedule, and Miscellaneous Item Detail*

RFP Event	Deadline Date
RFP Issued	December 5, 2024
<a href="#"><u>Bidder's Conference</u></a>	10:00 a.m. ET on December 18, 2024
Deadline to Submit Questions	January 2, 2025
Answers to Questions on Website	January 7, 2025
Application Submission Deadline	2:00 p.m. ET on January 21, 2025
Applicants Identified for Contract Negotiations	February 27, 2025

CBH reserves the right to modify the schedule as circumstances warrant.

This RFP is being issued on December 5, 2024. To be considered for selection, all applications must be emailed to [CBHClinicalProcurements@phila.gov](mailto:CBHClinicalProcurements@phila.gov) no later than 2:00 p.m. on January 21, 2025.

- ➔ Email subject line should be marked “ASAM 1.0 RFP.” Applications submitted by any means other than email will not be accepted.
- ➔ Applicants must submit the electronic application with appropriate e-signatures.
- ➔ Applications submitted after the deadline date and time will not be accepted. The cover sheet of the application must be signed by an official of the submitting agency authorized to bind the agency to all provisions noted in the application.

All questions concerning this RFP must be submitted in writing to the Provider Network Development Team at CBH at [CBHClinicalProcurements@phila.gov](mailto:CBHClinicalProcurements@phila.gov). Questions should have the subject line “ASAM 1.0 RFP Questions.” Only questions submitted by January 2, 2025, will be addressed in the FAQ. Questions submitted after the deadline date may result in no response. CBH will respond to questions it considers appropriate to the RFP and of interest to all applicants but reserves the right, at its discretion, not to respond to any question. Responses will be posted on the [CBH Clinical Procurements](#) page. Posted responses become part of the RFP upon posting. CBH reserves the right, at its discretion, to revise responses to questions after posting by

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posting a modified response. No oral response to any applicant question by any DBHIDS or CBH employee or agent shall be binding to CBH or in any way considered to be a commitment by CBH.

### 4.1.1. Bidder's Conference

An optional [\*\*ASAM 1.0 RFP Bidder's Conference\*\*](#) will be hosted via Zoom on December 18, 2024 at 10:00 a.m. Interested parties must register in advance via the link (Webinar ID: 929 5327 8326; Passcode: 717692). After registering, you will receive a confirmation email containing information about joining the webinar.

### 4.2. Interviews/Presentations

Applicants may be required to make an oral presentation concerning various aspects of their application to CBH. Such presentations provide an opportunity for applicants to clarify their application to ensure a thorough and mutual understanding. CBH will schedule such presentations on an as-needed basis.

### 4.3. Terms of Contract

CBH reserves the right to set the rates for this service, budgets notwithstanding. Continuation of funding is contingent upon the availability of funds, quality of service being provided, and contract compliance. CBH reserves the right to continue subsequent yearly contracts. All contracts become binding on the date of signature by the provider agency's chief executive officer and CBH's chief executive officer. CBH reserves the right to reissue all or part of the RFP if it is not able to establish acceptable providers for any or all services. CBH also reserves the right to amend contracts throughout the contract period and to renegotiate the contract length as needed.

## 5. GENERAL RULES GOVERNING RFPS/APPLICATIONS; RESERVATION OF RIGHTS; CONFIDENTIALITY AND PUBLIC DISCLOSURE

### 5.1. Revisions to RFP

CBH reserves the right to change, modify, or revise the RFP at any time. Any revision to this RFP will be posted on the [\*\*CBH Clinical Procurements\*\*](#) page with the original RFP. The applicant must check the website frequently to determine whether additional information has been released or requested.

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### 5.2. City/CBH Employee Conflict Provision

City of Philadelphia or CBH employees and officials are prohibited from submitting an application in response to this RFP. No application will be considered in which a City or CBH employee or official has a direct or indirect interest. Any application that violates these conditions may be rejected based on CBH's sole judgment.

### 5.3. Proposal Binding

By signing and submitting a proposal, each applicant agrees that the contents of its proposal are available for the establishment of final contractual obligations for a minimum of 180 calendar days from the proposal deadline for this RFP. An applicant's refusal to enter into a contract that reflects the terms and conditions of this RFP or the applicant's proposal may, at the sole discretion of CBH, result in the rejection of the applicant's proposal.

### 5.4. Reservation of Rights

By submitting responses to this notice of request for proposals as posted on the CBH website, applicants accept and agree to this Reservation of Rights. The term "notice of request for proposals," as used herein, shall mean this RFP and include all information posted on the CBH website in relation to this RFP.

#### 5.4.1. Notice of Request for Proposals (RFP)

CBH reserves the right and may, at its sole discretion, exercise any one or more of the following rights and options with respect to this notice of request for proposals:

1. to reject any and all applications and to reissue this RFP at any time;
2. to issue a new RFP with terms and conditions substantially different from those set forth in this or a previous RFP;
3. to issue a new RFP with terms and conditions that are the same or similar as those set forth in this or a previous RFP in order to obtain additional applications or for any other reason CBH determines to be in its best interests;
4. to extend this RFP in order to allow for time to obtain additional applications prior to the RFP application deadline or for any other reason CBH determines to be in its best interests;
5. to supplement, amend, substitute, or otherwise modify this RFP at any time prior to issuing a notice of intent to develop a provider agreement or consultant contract to one or more applicants;

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6. to cancel this RFP at any time prior to the execution of a final provider agreement, whether or not a notice of intent to develop a provider agreement has been issued, with or without issuing, at CBH's sole discretion, a new RFP for the same or similar services; and
7. to do any of the foregoing without notice to applicants or others, except such notice as CBH, at its sole discretion, elects to post on the CBH website.

### 5.4.2. Proposal Selection and Contract Negotiation

CBH may, at its sole discretion, exercise any one or more of the following rights and options with respect to application selection:

1. to reject any application if CBH, at its sole discretion, determines the application is incomplete, deviates from or is not responsive to the requirements of this RFP, does not comply with applicable law, is conditioned in any way, or contains ambiguities, alterations or items of work not called for by this RFP, or if CBH determines it is otherwise in its best interests to reject the application;
2. to reject any application if CBH, at its sole discretion, determines the applicant has been delinquent or unfaithful in the performance of any contract with CBH or with others; is delinquent, and has not made arrangements satisfactory to CBH, with respect to the payment of city taxes or taxes collected by the City, or other indebtedness owed to the City; is not in compliance with regulatory codes applicable to the applicant; is financially or technically incapable; or is otherwise not a responsible applicant;
3. to waive any defect or deficiency in any application, including, without limitation, those identified in preceding subsections, if, at CBH's sole discretion, the defect or deficiency is not material to the application;
4. to require, permit, or reject, at CBH's sole discretion, amendments (including, without limitation, information omitted), modifications, clarifying information, and/or corrections to their applications by some or all of the applicants at any time following application submission and before the execution of a final provider agreement or consultant contract;
5. to issue a notice of intent to develop a provider agreement or consultant contract and/or execute a provider agreement and/or consultant contract for any or all of the items in any application, in whole or in part, as CBH, at its sole discretion, determines to be in CBH's best interests;
6. to enter into negotiations with any one or more applicants regarding price, scope of services, or any other term of their applications, and such other agreement or contractual terms as CBH may require, at any time prior to execution of a provider agreement or consultant contract, whether or not a notice of intent to develop a provider agreement or consultant contract has been issued to any applicant and without reissuing this RFP;

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7. to enter into simultaneous, competitive negotiations with multiple applicants or to negotiate with individual applicants, either together or in sequence, and to permit or require, as a result of negotiations, the expansion or reduction of the scope of services or changes in any other terms of the submitted applications, without informing other applicants of the changes or affording them the opportunity to revise their applications in light thereof, unless CBH, at its sole discretion, determines that doing so is in CBH's best interests;
8. to discontinue negotiations with any applicant at any time prior to the execution of a provider agreement or consultant contract, whether or not a notice of intent to develop a provider agreement or consultant contract has been issued to the applicant, and to enter into negotiations with any other applicant, if CBH, at its sole discretion, determines it is in the best interests of CBH to do so;
9. to rescind, at any time prior to the execution of a provider agreement or consultant contract, any notice of intent to develop a provider agreement or consultant contracted to an applicant, and to issue or not issue a notice of intent to develop a provider agreement or consultant contract to the same or a different applicant and enter into negotiations with that applicant, if CBH, at its sole discretion, determines it is in the best interests of CBH to do so;
10. to elect not to enter into any provider agreement or consultant contract with any applicant, whether or not a notice of intent to develop a provider agreement or consultant contract has been issued and with or without the reissuing this RFP, if CBH, at its sole discretion, determines that it is in CBH's best interests to do so;
11. to require any one or more applicants to make one or more presentations to CBH at CBH's offices or other locations as determined by CBH, at the applicant's sole cost and expense, addressing the applicant's application and its ability to achieve the objectives of this RFP;
12. to conduct on-site investigations of the facilities of any one or more applicants (or the facilities where the applicant performs its services);
13. to inspect and otherwise investigate projects performed by the applicant, whether or not referenced in the application, with or without consent of or notice to the applicant;
14. to conduct such investigations with respect to the financial, technical, and other qualifications of each applicant as CBH, at its sole discretion, deems necessary or appropriate;
15. to permit, at CBH's sole discretion, adjustments to any of the timelines associated with this RFP, including, but not limited to, extension of the period of internal review, extension of the date of provider agreement or consultant contract award and/or provider agreement or consultant contract execution, and extensions of deadlines for implementation of the proposed project; and
16. to do any of the foregoing without notice to applicants or others, except such notice as CBH, at its sole discretion, elects to post on its website.

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### 5.4.3. Miscellaneous

1. *Interpretation; Order of Precedence.* In the event of conflict, inconsistency, or variance between the terms of this Reservation of Rights and any term, condition, or provision contained in any RFP, the terms of this Reservation of Rights shall govern.
2. *Headings.* The headings used in this Reservation of Rights do not in any way define, limit, describe, or amplify the provisions of this Reservation of Rights or the scope or intent of the provisions and are not part of this Reservation of Rights.

### 5.5. Confidentiality and Public Disclosure

The selected applicant(s) shall treat all information obtained from CBH that is not generally available to the public as confidential and/or proprietary to CBH. The selected applicant(s) shall exercise all reasonable precautions to prevent any information derived from such sources from being disclosed to any other person. The selected applicant(s) agrees to indemnify and hold harmless CBH, its officials, and employees from and against all liability, demands, claims, suits, losses, damages, causes of action, fines, and judgments (including attorney's fees) resulting from any use or disclosure of such confidential and/or proprietary information by the selected applicant(s) or any person acquiring such information, directly or indirectly, from the selected applicant(s).

By preparation of a response to this RFP, applicants acknowledge and agree that CBH, as a quasi-public corporation, is subject to state and local public disclosure laws and, as such, is legally obligated to disclose to the public documents, including applications, to the extent required hereunder. Without limiting the foregoing sentence, CBH's legal obligations shall not be limited or expanded in any way by an applicant's assertion of confidentiality and/or proprietary data.

### 5.6. Incurring Costs

CBH is not liable for any costs incurred by applicants for work performed in preparation of a response to this RFP.

### 5.7. Primary Contractor Responsibility

The selected contractor will be required to assume responsibility for all services described in their applications, whether or not they provide the services directly. CBH will consider the selected contractor the sole point of contact regarding contractual matters.

### 5.8. Disclosure of Proposal Contents

Information provided in applications will be held in confidence and will not be revealed or discussed with competitors. All material submitted as part of the RFP process becomes the property of CBH and will only

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be returned at CBH's option. Applications submitted to CBH may be reviewed and evaluated by any person other than competing applicants. CBH retains the right to use any/all ideas presented in any reply to this RFP. Selection or rejection of an application does not affect this right.

### 5.9. Selection/Rejection Procedures

The selected applicant(s) will be notified in writing as to the selection, and their selection will also be posted on the CBH website. This notification will provide information on any issues within the application that will require further discussion or negotiation with CBH. This notification should not be considered a letter of award. A formal letter of award will be forthcoming when the parties have reached a mutual agreement on all issues pertaining to the proposal. Applicants whose submissions are not selected will also be notified in writing by CBH.

### 5.10. Non-Discrimination

The selected applicant(s), as a condition of accepting and executing a contract with CBH through this RFP, agrees to comply with all relevant sections of the Civil Rights Act of 1964, the Pennsylvania Human Relations Act, Section 504 of the Federal Rehabilitation Act of 1973, and the Americans with Disabilities Act, hereby assuring that: "The contractor does not and will not discriminate against any person because of race, color, religious creed, ancestry, national origin, age, sex, sexual orientation, handicap, or disability in providing services, programs, or employment or in its relationship with other contractors.

### 5.11. Life of Proposals

CBH expects to select applicant(s) as a result of this RFP within approximately 90 days of the submission deadline. However, proposals that are submitted may be considered for selection up to 180 days following the submission deadline. By submitting a proposal, respondents agree to hold the terms of their proposal open to CBH for up to 180 days following the submission deadline.