# STATE OF NEW JERSEY DEPARTMENT OF HUMAN SERVICES DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES

#### REQUEST FOR PROPOSALS

### SUPPORTIVE HOUSING AND COMMUNITY SUPPORT SERVICES FOR INDIVIDUALS DISCHARGED FROM STATE PSYCHIATRIC HOSPITALS WHO ARE FORENSICALLY INVOLVED

January 13, 2015

Lynn A. Kovich, Assistant Commissioner

Division of Mental Health and Addiction Services

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#### I. Purpose and Intent

This Request for Proposals (RFP) is issued by the New Jersey Division of Mental Health and Addiction Services (DMHAS) to develop or expand supportive housing to serve a minimum of 15 individuals who are in a New Jersey State Psychiatric Hospital and have a history of forensic involvement.

The total annualized funding is \$960,000, subject to State appropriations.

Specifically, the DMHAS seeks to facilitate the discharge of individuals on Conditional Extension Pending Placement (CEPP)<sup>1</sup> status. The current RFP will pair housing subsidies funded by the DMHAS and administered by the New Jersey Housing Mortgage and Finance Agency (NJHMFA) with service dollars to develop or expand community supportive housing programs.

The following summarizes the RFP schedule:

January 13, 2015 Notice of Funding Availability
January 20, 2015 Mandatory Bidders' Conference

February 17, 2015 Deadline for receipt of proposals - no later than 5:00 p.m.

March 25, 2015 Preliminary award announcement

April 1, 2015 Appeal deadline

April 8, 2015 Final award announcement July 1, 2015 Anticipated award start date

#### II. Background and Population to be Served

While DMHAS has a long history of seeking to develop or expand the network of community housing opportunities for persons with serious mental illness, this current RFP is part of a larger initiative related to the Olmstead Settlement Agreement (Olmstead), under which the DMHAS has committed to effecting the timely discharge of persons in the State hospital system determined to no longer require that level of care. DMHAS is committed to discharging these individuals as promptly as possible after the consumers are placed on CEPP status.

In past rounds of community development, DMHAS has concentrated on the overall development of service capacity as a means of addressing the availability of supports within a context of dynamic service demands. As DMHAS moves to meet its obligations under Olmstead, however, it has recognized the need to implement a new, more direct strategy of service development, based on the community support needs of individuals awaiting discharge from the State hospitals. This RFP is one (1) in a series of requests that will embrace this approach.

#### III. Who Can Apply?

To be eligible for consideration for this RFP, the bidder must satisfy the following requirements:

<sup>1</sup> In New Jersey, the status of CEPP was created by a 1983 New Jersey Supreme Court decision in re: S.L., 94 N.J. 128 (1983), for individuals who no longer met the standard for involuntary commitment, but for whom there was no present appropriate placement in the community.

- The bidder must be able to demonstrate experience in successfully providing services to individuals who have a history of forensic commitments (including working with individuals mandated to register, individuals on KROL<sup>2</sup> status, individuals on parole or probation and individuals who completed a prison sentence and were subsequently released to a state psychiatric hospital for inpatient treatment for a mental illness);
- The bidder must be licensed by the DHS Office of Licensing as a Supportive Housing provider under N.J.A.C. 10:37A prior to the start of services. If the bidder is not licensed at the time of the submission of its proposal, the bidder must articulate, as a part of the phase-in plan, the estimated amount of time it will take for the bidder to become a licensed provider;
- The bidder must be willing to accept into service all consumers identified by the DMHAS:
- The bidder must be fiscally viable based upon an assessment of the bidder's audited financial statements;
- The bidder must not appear on the State of New Jersey Consolidated Debarment Report at http://www.state.nj.us/treasury/debarred/debarsearch.htm or be suspended or debarred by any other State or Federal entity from receiving funds;
- The bidder shall not employ a member of the Board of Directors in a consultant capacity;
- Pursuant to N.J.S.A. 52:32-44, a for-profit bidder and each proposed subcontractor must have a valid Business Registration Certificate on file with the Division of Revenue, i.e., this statutory requirement does not apply to non-profit organizations, private colleges and universities, or state and municipal agencies;
- The bidder must comply with the terms and conditions of DHS' contracting rules and regulations as set forth in the Standard Language Document, the Contract Reimbursement Manual (CRM) and the Contract Policy and Information Manual These documents are available the on http://www.state.nj.us/humanservices/ocpm/home/resources/manuals; and
- The bidder must attend the Mandatory Bidders Conference as described in the RFP.

#### IV. **Contract Scope of Work**

DMHAS seeks proposals to develop a minimum of five (5) forensic supportive housing slots and related services in each of the State hospital catchment areas. The hospital catchment areas are as follows:

- Greystone Park Psychiatric Hospital catchment area includes Bergen, Essex, Hudson, Hunterdon, Morris, Passaic, Somerset, Sussex, Warren, and Union counties.
- Trenton Psychiatric Hospital catchment area includes Mercer, Middlesex and Monmouth counties.

<sup>&</sup>lt;sup>2</sup> KROL status refers to Individuals in acquitted of a crime by reason of insanity. <a href="http://caselaw.findlaw.com/nj-">http://caselaw.findlaw.com/nj-</a> supreme-court/1348919.html.

 Ancora Psychiatric Hospital catchment area includes Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Ocean, and Salem counties.

By virtue of this program development, services will be targeted to facilitating the discharge of persons on CEPP status in a state psychiatric hospital who have a history of forensic commitment(s). A description of the legal histories of the individuals served through this initiative include those who are forensically-involved including Megan's Law Registrants and persons whose criminal histories include having been convicted by a court for one (1) or more of the following: murder, aggravated assault, manslaughter, aggravated sexual assault, sexual assault, criminal sexual contact, robbery in the first degree, aggravated assault, aggravated arson, arson, and kidnapping, or a crime that is similar to one of the aforementioned crimes. Many of these individuals have co-existing medical conditions, co-occurring substance use disorders, co-existing developmental disability, have experienced periods of long-term institutionalization, and/or are refusing to leave the hospital.

The funding will provide new housing opportunities for a minimum of 15 individuals who are in a State psychiatric hospital and designated as CEPP. Housing subsidies, administered in a manner consistent with the principles of supportive housing, will be paired with community support services in order to meet the needs of the individuals served through this RFP.

DMHAS will identify the consumers to be served through this funding, and will work with successful bidders toward effective discharges to community living. The successful bidder must accept consumers identified by DMHAS as appropriate for supportive housing level of placement, consistent with the consumer attributes delineated in this RFP, within the timeframes identified by DMHAS. Agency staff will begin working with identified consumers as soon as possible after contract award but prior to actual discharge to facilitate relationship building, housing preferences and needs assessments.

In order to meet the needs of the individuals served through this RFP, DMHAS sponsored rental subsidies will be made available. The DMHAS rental subsidy program guidelines and NJHMFA Clearinghouse guidelines must be followed, and no apartments can be rented over the Fair Market Rent as published by the New Jersey Department of Community Affairs (DCA) Housing Choice Voucher Program Payments Standards. The housing subsidies will be made available through a Housing Clearinghouse, known as the *Supportive Housing Connection*, administered by the NJHMFA. No capital funding is available through DMHAS for this initiative.

The Supportive Housing Connection, administered by NJHMFA, will manage the housing subsidies. The roles and responsibilities of the Supportive Housing Connection include:

 Providing tools such as a website that provides information on available, affordable housing to assist consumers in locating housing;

- Conducting initial and annual housing inspections to ensure the housing complies with quality standards;
- Serving as a Tenant Services Liaison to address disputes between the landlord and tenant that were unable to be resolved between the landlord and tenant (with the help of their advocate or service provider);
- Paying the landlord the housing subsidy payment and security deposit; and
- Providing the applicant (service provider) with one-time lease up dollars to purchase furnishings and pay utility deposits as necessary.

Awardees must adhere to all applicable State and Federal cost principles. Budgets should be reasonable and reflect the scope of responsibilities in order to accomplish the goals of this project.

As a model of supportive housing, awardee is to provide flexible support services paired with permanent leased based housing opportunities to meet the individual's varying needs and preferences. The model is based on a "Housing First" philosophy and endorsed as an opportunity to support innovative, person-centered service provision and to champion the inclusion of consumers as full partners in treatment and recovery. "'Housing First" is a philosophy that homelessness can be most efficiently ended by providing someone with access to safe, decent and affordable housing. Although an individual experiencing homelessness may benefit from supportive services such as mental health or substance use counseling, participation in these services is not a prerequisite to access housing or a condition of maintaining it. In fact, the stability that a housing unit provides bolsters a tenant's ability to participate in these services<sup>3</sup>" (Corporation of Supportive Housing, 2014). Teams will employ supportive services (grounded in rehabilitation principles) necessary to maintain housing, achieve identified wellness and recovery goals; as well as case management approaches to assure that consumers access the full array of other clinical and support services needed to function successfully within the community.

The proposed service model must demonstrate how services and supports will be provided in a holistic manner such that it enables individuals diagnosed with a serious mental illness to develop the skills necessary to become fully integrated into their communities, particularly in the areas of housing, employment, and in social contexts. The proposed service is to articulate how it will use a strengths-based approach to working with individuals, rather than a focus on an individual's deficits. affirm that 1/3 (one-third) of their staffing will consist of individuals who possess and/or are actively pursuing certification to become a Certified Psychiatric Rehabilitation Practitioner (CPRP) will earn bonus points in the scoring of their proposal. See the following link for information about certification: http://www.psychrehabassociation.org/certification.

 $<sup>^{3} \, \</sup>underline{\text{http://www.csh.org/toolkit/supportive-housing-quality-toolkit/housing-and-property-management/housing-first-model/}$ 

Consumers, expected to be full partners in planning their own treatment, are to identify and direct the types of activities that would most help them maximize opportunities for successful community living. Staff support is provided through a flexible schedule, which must be adjusted as consumer needs or interests change. In order to avoid duplication of effort, individuals served by Programs for Assertive Community Treatment (PACT) or Integrated Case Management Services (ICMS) are not eligible for supportive housing services under contracts awarded pursuant to this RFP.

#### V. General Contracting Information

All bidders will be notified in writing of the State's intent to award a contract. All proposals are considered public information and as such will be made available for a defined period after announcement of the contract awardees and prior to final award, as well as through the State Open Public Records Act process at the conclusion of the RFP process.

A contract awarded as a result of this RFP may be annually renewable at DMHAS' sole discretion with the agreement of the awardee. Funds may only be used to support services that are specific to this award; hence, this funding may not be used to supplant or duplicate existing funding streams. Actual funding levels will depend on the availability of funds, satisfactory performance.

In accordance with DHS Policy P1.12 available on the web at http://www.state.nj.us/humanservices/ocpm/home/resources/manuals/index.html, programs awarded pursuant to this RFP will be separately clustered until the DMHAS determines, in its sole discretion, that the program is stable in terms of service provision, expenditures, and applicable revenue generation.

Should service provision be delayed through no fault of the provider, funding continuation will be considered on a case-by-case basis based upon the circumstances creating the delay. In no case shall the DMHAS continue funding when service commencement commitments are not met, and in no case shall funding be provided for a period of non-service provision in excess of three (3) months. In the event that the timeframe will be longer than three (3) months, DMHAS must be notified so the circumstances resulting in the anticipated delay may be reviewed and addressed. Should services not be rendered, funds provided pursuant to this agreement shall be returned to the Division.

The bidder must comply with all rules and regulations for any DMHAS program element of service proposed by the bidder. Additionally, please take note of Community Mental Health Services Regulations, N.J.A.C. 10:37, which apply to all contracted mental health services. These regulations can be accessed at <a href="http://www.state.nj.us/humanservices/providers/rulefees/regs/">http://www.state.nj.us/humanservices/providers/rulefees/regs/</a>

The timeframe for filling vacancies that occur after initial implementation and initial full occupancy is achieved must comport with DMHAS Administrative Bulletin 5:11, which

may be found on the DMHAS website at http://www.state.nj.us/humanservices/dmhas/regulations/bulletins/.

#### VI. Mandatory Bidders Conference

A bidder intending to submit a proposal in response to this RFP must attend the Mandatory Bidders Conference. It is the responsibility of the bidder to arrive promptly at the beginning of the Mandatory Bidders Conference and sign in to confirm attendance. A proposal submitted by a bidder not in attendance will not be considered. The Mandatory Bidders Conference will be held as follows:

Date: January 20, 2015

Time: 2:30 p.m.

Location: New Jersey State Police

Forensic Technology Center, Horizon Center 1200 Negron Drive, Hamilton, NJ 08691

The Mandatory Bidders Conference will provide the bidder with an opportunity to ask questions about the RFP requirements or the award process, as well as clarify any changes that may be made to this RFP. This ensures that all potential bidders have equal access to information. Questions regarding intent or allowable responses to the RFP, outside the Mandatory Bidders Conference, are not permitted. Any necessary response to questions posed by a potential bidder during the Mandatory Bidders Conference that cannot be answered at that time will be furnished via electronic mail to all potential bidders registered as being in attendance. Specific individual guidance will not be provided to individual bidders at any time.

Potential respondents to this RFP are requested to register for the Mandatory Bidders Conference via the registration link: <a href="https://njsams.rutgers.edu/training/frfp/register.aspx">https://njsams.rutgers.edu/training/frfp/register.aspx</a> Additionally, if you require assistance with this registration link, please contact <a href="mailto:RFP.Submissions@dhs.state.nj.us">RFP.Submissions@dhs.state.nj.us</a> no later than two (2) days prior to the Mandatory Bidders Conference.

The meeting room and facility is accessible to individuals with physical disabilities. Anyone who requires special accommodations should notify <a href="mailto:RFP.Submissions@dhs.state.nj.us">RFP.Submissions@dhs.state.nj.us</a>. For sign language interpretation, please notify <a href="mailto:RFP.Submissions@dhs.state.nj.us">RFP.Submissions@dhs.state.nj.us</a> at least five (5) business days in advance of the Mandatory Bidders Conference. Once reserved, a minimum of 48 hours is necessary to cancel this service, or else the cost will be billed to the requestor.

#### VII. Required Proposal Content

Proposals will be evaluated based on the elements indicated below. At a minimum, all facets of the proposal must comply fully with the relevant standards, delineated in N.J.A.C. 10:37, 10:37A, and 10:37J. Proposals must address the following topics, and be submitted according to the following sections:

Funding Proposal Cover Sheet (RFP Attachment A)

#### **Bidder History, Experience and Recent Experience/Performance (5 points)**

- 1. A brief narrative describing the bidder's history, mission and primary purpose.
- 2. The bidder's experience in providing services to individuals who have a history of forensic commitment (including individuals on KROL status, Megan's Law Registrants, individuals on probation or parole and individuals who completed their sentence in state prison and subsequently released to a state psychiatric hospital for inpatient treatment for a mental illness.
- 3. The bidder's current status and history relative to debarment by any State, Federal or local government agency. If there is debarment activity, it must be explained with supporting documentation as an appendix to the bidder's proposal.
- 4. Description of all active litigation in which the bidder is involved, including pending litigation of which the bidder has received notice.
- 5. Description of the bidder's ability to provide culturally competent services.
- 6. Bidders with an existing supportive housing contract(s) must describe the consumer occupancy rate for the entire supportive housing contract (against the contracted caseload target for the entire supportive housing contract) at the time of submission of the proposal and for the previous contract year. If the rate is below 90%, provide an explanation for the low occupancy rate as well as past and current remediation planning. Bidders that have an occupancy rate below 90% will receive a five (5) point reduction on their total score. If the low occupancy is due to slots/beds awarded in the last two (2) quarters of state fiscal year 2014, articulate what the bidder is doing to remediate. The DMHAS will consider proposals whose low occupancy rate is due to slots/beds awarded to come online in the last two (2) quarters of SFY 2014 or first two (2) quarters of SFY 2015 if the DMHAS determines that the remediation plan submitted as a part of this proposal is sufficient to address current vacancies. Bidders that have an occupancy rate below 85% will not be considered.

#### **Project Description (40 points)**

- 1. Indicate the number of individuals (on CEPP status at a state psychiatric hospital) who will be enrolled by the successful bidder as a result of this initiative and the team(s) resultant (new) caseload capacity. The current contracted caseload capacity and proposed caseload capacity must be clearly stated.
- 2. The full range of treatment, recovery and support services that will be provided to service recipients. Treatment, recovery and support services are to be grounded in principles of wellness and recovery and in the Substance Abuse and Mental Health Services Administration's (SAMHSA) Eight Dimensions of Wellness. The treatment, recovery and support services provided and described are to be reflective of all eight dimensions of wellness, which can be found at the following web address: <a href="http://www.promoteacceptance.samhsa.gov/10by10/dimensions.aspx">http://www.promoteacceptance.samhsa.gov/10by10/dimensions.aspx</a>.
- 3. A detailed monthly timeline of activities for engagement and enrollment of the target population.
- 4. A complete list of capital and operating funding to be used (source of capital and project or tenant-based rental assistance) if the bidder is purchasing housing and state how the bidder will separate the lease-based housing from the services

individuals receive. Specify the number of subsidies, managed by the NJHMFA, that will be needed for the proposed program and if the proposed program is leveraging other resources such as a housing choice voucher for rental assistance. Indicate if the bidder has a relationship with landlords who are willing to provide housing to individuals who have a forensic background.

- 5. The strategies that will be used for engaging the targeted individuals and addressing their needs related to community integration, inclusive of how the service will provide "pre-enrollment" services.
- 6. The bidder's willingness to accept consumers referred by DMHAS staff and any foreseen barriers in this process. Detailed description of the daily level of service that will be delivered to consumers upon discharge.
- 7. Description of clear and effective strategies that will be used in the proposed program to address consumers' needs in a community setting for each of the physical and behavioral health care needs listed below that may interfere with successful community tenure such as:
  - a. Incontinence;
  - b. Diabetes with difficulties self-administering insulin;
  - c. Obesity;
  - d. Ambulation impairment;
  - e. Poor impulse control;
  - f. Self-injurious behavior (burning, cutting, teeth/hair pulling);
  - g. Anger management;
  - h. Florid psychosis/active fixed delusions;
  - i. Cognitive impairment (or brain injury);
  - j. Metabolic Syndrome;
  - k. Resistance to Hospital Discharge;
  - I. Daily living skills including showering, eating, toileting, etc.; and
  - m. Independent living skills deficits (budgeting, cooking, etc.).
- 8. Description of how the target population's needs related to housing will be managed.
- 9. The plan to address consumers' substance use disorder treatment needs.
- 10. The units of service that the bidder is committing to provide, defined as 15 contiguous minutes of face to face contact with the consumer, during the phase-in period and annually thereafter.
- 11. The average number of hours of service the bidder estimates one (1) consumer will receive per week for the first six (6) months of service.
- 12. The average number of hours of service one (1) consumer will receive annually.
- 13. The amount of hours for one (1) full time equivalent (FTE) staff person and the percentage of face-to-face hours to be provided in the proposed service (e.g., a bidder may identify that one (1) FTE consists of a 40 hour work week and 50% (or 20 hours per week) of the staff time will be spent in direct face-to-face contact with consumers).
- 14. Description of how the proposed service will integrate the following principles into service delivery, as evidenced by specific program considerations:
  - a. Promotion of wellness and recovery;
  - b. Promotion of community inclusion; and
  - c. Demonstration of best practices.

#### Outcome & Evaluation (15 points)

Provide the following information related to the projected outcomes associated with the proposal as well any evaluation method that will be utilized to measure program effectiveness.

- 1. The evaluation of the contracted program outcomes.
- 2. Description of all tools to be used in the program evaluation.
- 3. Details about any outside entity planned for use to conduct the evaluation, including but not limited to the entity's contact information, brief description of credentials and experience conducting program evaluation.
- 4. Tools and activities the bidder will implement to ensure fidelity to the evidence-based practice.

#### Staffing (15 points)

- 1. The number of direct service staff (in full time equivalents) who will be part of the proposed program(s). Current and proposed staffing must be presented, including specific titles, qualifications for the staff to be added to the team, as well as a rationale for selection of these staff persons. (Details on all current direct service staff vacancies must be included).
  - a. If existing staff are included in other DMHAS contracted services/programs, the bidder must provide assurances that their use in this new program will not negatively affect the operations of the existing program.
  - b. Discuss the specific compensation strategies will be used to ensure that afterhours service and 24/7 coverage are adequately built into the program's structure.
  - c. Bidders who affirm that 1/3 (one-third) of their staffing will consist of individuals who possess and/or are actively pursuing certification to become a Certified Psychiatric Rehabilitation Practitioner (CPRP) will earn 5 bonus points in the scoring of their proposal. See following link for information about certification:http://www.psychrehabassociation.org/certification.
- 2. The anticipated staff schedule, inclusive of all existing staff and new staff who will participate in the proposed initiative. Schedule must reflect service provision on evenings and weekends.
- 3. The proposed organizational structure, including an organizational chart in an appendix to the bidder's proposal.
- 4. The bidder's hiring policies, including background and credential checks, as well handling of prior criminal convictions.
- 5. A list of the bidder's board members, including each member's professional licensure and organizational affiliation(s). The bidder's proposal must identify each board member who is also an employee of the bidder or an affiliate of the bidder. The proposal shall indicate if the Board of Directors votes on contract-related matters.
- 6. A list of names of consultants the bidder intends to utilize for the contract resulting from this RFP, including each consultant's professional licensure and organizational affiliation(s). Each consultant must be further described as to whether they are also a board member and, if so, whether they are a voting members. The bidder must

identify all reimbursement the consultant received as a board member over the last twelve (12) months.

#### Facilities, Logistics, Equipment (2 points)

- 1. A description of the manner in which tangible assets, i.e. computers, phones, other special service equipment, etc., will be acquired and/or allocated.
- 2. A description of the bidder's Americans with Disabilities Act (ADA) accessibility to its facilities and/or offices for individuals with disabilities.

#### **Budget (23 points)**

- 1. A detailed budget using the Annex B standard budget categories for expenses and revenues: A. Personnel, B. Consultants and Professionals, C. Materials & Supplies, D. Facilities Costs, E. Specific Assistance to Clients, F. Other, General and Administrative Distribution, and Revenues including Client Generated Fees, Public & Private Grants and Other Agency Funds. Utilize the Excel budget template which will be emailed based on the attendance list from the Mandatory Bidders Conference. The budget must be presented in two (2) clearly labeled separate columns:
  - a. One column detailing the full annualized operating costs excluding one-time costs; and
  - b. One column detailing the one-time costs.
     \*\*Please note that housing subsidies are not to be incorporated in the bidder's budget. Housing subsidies will be provided by the Supportive Housing Connection, administered by the NJHMFA.
- 2. Budget Notes that may be useful to help explain costs and assumptions made for certain non-salary expenses and the calculations behind various revenue estimates. The State's proposal reviewers need to fully understand the bidder's budget projections from the information presented in its proposal. Failure to provide adequate information could result in lower ranking of the proposal. Budget Notes, to the extent possible, should be displayed on the budget template file itself.
- 3. The name and address of each organization other than third-party payers providing support and/or money to help fund the program for which the proposal is being made.
- 4. For personnel line items, staff position titles, i.e., not staff names, and hours per workweek.
- 5. The number of hours per clinical consultant such that cost/hour may be evaluated.
- 6. Staff fringe benefit expenses, which may be presented as a percentage factor of total salary costs, should be consistent with the bidder's current fringe benefit percentage.
- 7. If applicable, General & Administrative (G&A) expenses, otherwise known as indirect or overhead costs, should be included if attributable and allocable to the proposed program. Since administrative costs for existing DMHAS programs reallocated to a new program do not require new DMHAS resources, a bidder that currently contracts with DMHAS should limit its G&A expense projection to "new" G&A only by showing the full amount of G&A as an expense and the off-set savings from other programs' G&A in the revenue section.

- 8. Written assurance that if the bidder receives an award pursuant to this RFP, it will:
  - a. Pursue all available sources of revenue and support upon award and in future contracts, including agreement to pursue Medicaid certification. Failure to obtain approval and maintain certification as a Medicaid-eligible provider may result in termination of the service contract;
  - b. Pursue available resources (i.e. grants, vouchers, rental assistance, etc.) and collaborate with local housing authorities and/or other related housing development entities to develop, expand, and/or enhance housing options for enrolled consumers:
  - c. Work in cooperation with the regional and central offices of DMHAS, County Mental Health Boards and State psychiatric hospitals to identify consumers to be served, meet data collection requirements, and participate in any standardized affiliation agreements that may be developed;
  - d. Comply with DMHAS reporting requirements specific to this initiative; and
  - e. Provide the full range of services delineated in the DMHAS and related regulations to all enrolled consumers.

#### **Appendices**

The following items must be included as appendices with the bidder's proposal, limiting appendices to a total of 40 pages:

- 1. Bidder mission statement;
- 2. Organizational chart;
- 3. Job descriptions of key personnel;
- 4. Resumes of key personnel if on staff, limited to 2 pages each;
- 5. A description of all pending and in-progress audits, the requestor, the firm's name and telephone number, and the audit type;
- 6. List of the board of directors, officers and terms of office of each;
- 7. Documentation of the bidder's charitable registration status:
- 8. Original and/or copies of letters of commitment/support;
- 9. Department of Human Services Statement of Assurances (RFP Attachment C);
- 10. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions (RFP Attachment D);
- 11. Source Disclosure Certification Form; and
- 12. Disclosure of Investment in Iran (RFP Attachment E).

The documents listed below are required with the proposal, unless the bidder has a current contract with DMHAS and these documents are already on file with DMHAS.

- 1. Most recent single audit report (A133) or certified statements (submit only hard two copies); and
- 2. Any other audits performed in the last two (2) years (submit only two [2] hard copies).

#### VIII. Submission of Proposals

DMHAS assumes no responsibility and bears no liability for costs incurred by the bidder in the preparation and submittal of a proposal in response to this RFP. The narrative portion should be single-spaced with one (1") inch margins, no smaller than 12 point Arial, Courier New or Times New Roman font, and not exceed 20 pages in length. For example, if the bidder's narrative starts on page 3 and ends on page 23 it is 21 pages long, not 20 pages. DMHAS will not consider any information submitted beyond the page limit for scoring purposes. Budget detail and appendix items do not count towards the narrative page limit. Proposals must be submitted no later than 5:00 p.m. Eastern Time on February 17, 2015. Five (5) copies and one (1) original of the proposal narrative, budget and appendices (six (6) total proposal packages) must be submitted to the following address:

For U.S .Postal Service delivery:

Alicia Meyer
Division of Mental Health and Addiction Services
PO Box 700
Trenton, NJ 08625-0700

or

For private delivery vendor such as UPS or FedEx:

Alicia Meyer
Division of Mental Health and Addiction Services
222 South Warren Street, 3<sup>rd</sup> Floor
Trenton, NJ 08608

The bidder may mail or hand-deliver its proposal, however, DMHAS is not responsible for items mailed but not received by the due date. Note that the U.S. Postal Service two-day priority mail delivery to the post office box listed above, may result in the bidder's proposal not arriving timely and, therefore, being deemed ineligible for contract award. The bidder will not be notified that its proposal has been received. The State will not accept facsimile transmissions of proposals.

In addition to the required hard copies, bidders must also submit its proposal in a PDF formatted file via email to <a href="mailto:RFP.submissions@dhs.state.nj.us">RFP.submissions@dhs.state.nj.us</a>. The email "subject" should include the bidder's name and the proposal name.

The bidder must also submit the completed budget template file as an excel attachment to RFP.submissions@dhs.state.nj.us.

Proposal(s) must also be submitted to the County Mental Health Administrator(s) for the county(ies) in which the bidder is proposing services. Please refer to Attachment F

regarding the submission preference for each of the County Mental Health Administrators, as some require hard copies while others prefer an electronic version or both methods. For those counties requiring postal mail submission, submit four (4) hard copies.

#### IX. Review of Proposals

Proposals received after the due date and time will not be evaluated. There will be a review process for all timely submitted proposals. DMHAS will convene a review committee of public employees to conduct a review of each proposal accepted for review.

The bidder must obtain a minimum score of 70 points out of 100 points in order to be considered eligible for funding, as well as meet the threshold score for budget and scope of work sections. Criteria scores and thresholds will become available when proposals become available for public inspection.

Bidders who affirm that 1/3 (one-third) of their proposed staffing (supervisors/direct care) consists of individuals who have a CPRP and/or demonstrate that the staffing in their current services includes psychiatric rehabilitation practitioners will receive five (5) bonus points. To earn these points bidder must also indicate recruitment and retention efforts for CPRP.

Award decisions will be based on such factors as the proposal scope, quality and appropriateness, as well as budget reasonableness. The review committee will look for evidence of cultural competence in each section of the narrative. The review committee may choose to visit bidder's existing program(s) and/or review any programmatic or fiscal documents in the possession of DMHAS. The bidder is advised that contract award may be conditional upon contract negotiation. The requested changes, along with their requested implementation dates, will be communicated to the prospective awardees prior to final award.

DMHAS reserves the right to reject any and all proposals when circumstances indicate that it is in its best interest to do so. DMHAS' best interests in this context include, but are not limited to, loss of funding, inability of the bidder(s) to provide adequate services, and indication of misrepresentation of information and/or non-compliance with State and federal laws and regulations, existing DHS Contracts, and procedures set forth in DHS Policy

Circular

P1.04
(http://www.state.nj.us/humanservices/ocpm/home/resources/manuals/index.html).

DMHAS recognizes the invaluable perspectives and knowledge that consumers, family members and County Mental Health Boards possess. Input from these groups is an integral component of a system that holds Wellness and Recovery principles at its core. Consequently, DMHAS will convene an advisory group consisting of consumers and family members to provide input to the review committee regarding the proposals submitted.

County Mental Health Boards recommendations and comments will be received by DMHAS no later than March 12, 2015. This input will be incorporated in the final deliberations of the review committee.

DMHAS will notify all bidders of awards, contingent upon the satisfactory final negotiation of a contract, by March 25, 2015.

#### X. Appeal of Award Decisions

An appeal of any award decision may be made only by a respondent to this RFP. All appeals must be made in writing and received by DMHAS at the address below no later than 5:00 p.m. Eastern Time on April 1, 2015. The written request must clearly set forth the basis for the appeal.

Appeal correspondence should be addressed to:

Lynn A. Kovich, Assistant Commissioner Division of Mental Health & Addiction Services 222 South Warren Street, 3<sup>rd</sup> Floor PO Box 700 Trenton, NJ 08625-0700

Please note that all cost incurred in connection with appeals of DMHAS decision are considered unallowable cost for the purpose of DMHAS contract funding.

DMHAS will review all appeals and render a final decision by April 8, 2015. Contract award(s) will not be considered final until all timely appeals have been reviewed and final decisions rendered.

#### **XI. Post Award Required Documentation**

Upon award announcement, the successful bidder(s) must be prepared to submit, at a minimum, one (1) copy of the following documentation (if not already submitted with the proposal) in order to process the contract in a timely manner, as well as any other documents required by DMHAS.

- 1. Most recent IRS Form 990/IRS Form 1120, and Pension Form 5500 (if applicable) (submit only hard two [2] copies);
- 2. Copy of the Annual Report-Charitable Organization (for information visit: <a href="http://www.state.nj.us/treasury/revenue/dcr/programs/ann\_rpt.shtml">http://www.state.nj.us/treasury/revenue/dcr/programs/ann\_rpt.shtml</a>);
- 3. A list of all current contracts and grants as well as those for which the bidder has applied for from any Federal, state, local government or private agency during the contract term proposed herein, including awarding agency name, amount, period of performance, and purpose of the contract/grant, as well as a contact name for each award and the phone number;
- 4. Proof of insurance naming the State of New Jersey, Department of Human Services,

- Division of Mental Health and Addiction Services, PO Box 700, Trenton, NJ 08625-0700 as an additional insured;
- 5. Board Resolution authorizing who is approved for entering into a contract and signing related contract documents;
- 6. Current Agency By-laws;
- 7. Current Personnel Manual or Employee Handbook;
- 8. Copy of Lease or Mortgage;
- 9. Certificate of Incorporation;
- 10. Co-occurring policies and procedures;
- 11. Policies regarding the use of medications, if applicable;
- 12. Policies regarding Recovery Support, specifically peer support services;
- 13. Conflict of Interest Policy;
- 14. Affirmative Action Policy;
- 15. Affirmative Action Certificate of Employee Information Report, newly completed AA 302 form, or a copy of Federal Letter of Approval verifying operation under a federally approved or sanctioned Affirmative Action program. (AA Certificate must be submitted within 60 days of submitting completed AA302 form to Office of Contract Compliance);
- 16. A copy of all applicable licenses;
- 17. Local Certificates of Occupancy;
- 18. Current State of New Jersey Business Registration;
- 19. Procurement Policy;
- 20. Current Equipment inventory of items purchased with DHS funds (Note: the inventory shall include: a description of the item, a State identifying number or code, original date of purchase, date of receipt, location at the Provider Agency, person(s) assigned to the equipment, etc.);
- 21. All subcontracts or consultant agreements, related to the DHS Contracts, signed and dated by both parties;
- 22. Business Associate Agreement (BAA) for Health Insurance Portability Accountability Act of 1996 compliance, if applicable, signed and dated; and
- 23. Updated single audit report (A133) or certified statements, if differs from one submitted with proposal.

#### XII. Attachments

Date Received

## STATE OF NEW JERSEY DEPARTMENT OF HUMAN SERVICES

Division of Mental Health and Addiction Services Proposal Cover Sheet

Name of RFP			
Incorporated Name of Bio	lder:		
			Hospital-Based
			icable)
Address of Bidder:			
Contact Person Name an	d Title:		
Phone No.:			
Total dollar amount reque	sted:	Fiscal Year End	d:
Funding Period: From		to	
Total number of unduplica	ated consumers to	be served:	
County in which services	are to be provided	d:	
Brief description of service	es by program nar	me and level of service to	be provided:
Authorization: Chief Exec	eutive Officer (print	ted name):	
Signature:		Date:	

#### Attachment B - Addendum to RFP for Social Service and Training Contracts

#### STATE OF NEW JERSEY DEPARTMENT OF HUMAN SERVICES

#### ADDENDUM TO REQUEST FOR PROPOSAL FOR SOCIAL SERVICE AND TRAINING CONTRACTS

Executive Order No. 189 establishes the expected standard of responsibility for all parties that enter into a contract with the State of New Jersey. All such parties must meet a standard of responsibility that assures the State and its citizens that such parties will compete and perform honestly in their dealings with the State and avoid conflicts of interest.

As used in this document, "provider agency" or "provider" means any person, firm, corporation, or other entity or representative or employee thereof that offers or proposes to provide goods or services to or performs any contract for the Department of Human Services.

In compliance with Paragraph 3 of Executive Order No. 189, no provider agency shall pay, offer to pay, or agree to pay, either directly or indirectly, any fee, commission, compensation, gift, gratuity, or other thing of value of any kind to any State officer or employee or special State officer or employee, as defined by N.J.S.A. 52:13D-13b and e, in the Department of the Treasury or any other agency with which such provider agency transacts or offers or proposes to transact business, or to any member of the immediate family, as defined by N.J.S.A. 52:13D-13i, of any such officer or employee, or any partnership, firm, or corporation with which they are employed or associated, or in which such officer or employee has an interest within the meaning of N.J.S.A. 52:13D-13g.

The solicitation of any fee, commission, compensation, gift, gratuity or other thing of value by any State officer or employee or special State officer or employee from any provider agency shall be reported in writing forthwith by the provider agency to the Attorney General and the Executive Commission on Ethical Standards.

No provider agency may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment, contract or other agreement, express or implied, or sell any interest in such provider agency to, any State officer or employee or special State officer or employee having any duties or responsibilities in connection with the purchase, acquisition or sale of any property or services by or to any State agency or any instrumentality thereof, or with any person, firm or entity with which he is employed or associated or in which he has an interest within the meaning of N.J.S.A. 52:13D-13g. Any relationships subject to this provision shall be reported in writing forthwith to the Executive Commission on Ethical Standards, which may grant a waiver of this restriction upon application of the State officer or employee or special State officer or employee upon a finding that the present or proposed relationship does not present the potential, actuality or appearance of a conflict of interest.

No provider agency shall influence, or attempt to influence or cause to be influenced, any State officer or employee or special State officer or employee in his official capacity in any manner which might tend to impair the objectivity or independence of judgment of said officer or employee.

No provider agency shall cause or influence, or attempt to cause or influence, any State officer or employee or special State officer or employee to use, or attempt to use, his official position to secure unwarranted privileges or advantages for the provider agency or any other person.

The provisions cited above shall not be construed to prohibit a State officer or employee or special State officer or employee from receiving gifts from or contracting with provider agencies under the same terms and conditions as are offered or made available to members of the general public subject to any guidelines the Executive Commission on Ethical Standards may promulgate.

#### Attachment C - Statement of Assurances

## Department of Human Services Statement of Assurances

As the duly authorized Chief Executive Officer/Administrator, I am aware that submission to the Department of Human Services of the accompanying application constitutes the creation of a public document that may be made available upon request at the completion of the RFP process. This may include the application, budget, and list of applicants (bidder's list). In addition, I certify that the applicant:

- Has legal authority to apply for the funds made available under the requirements of the RFP, and has the institutional, managerial and financial capacity (including funds sufficient to pay the non-Federal/State share of project costs, as appropriate) to ensure proper planning, management and completion of the project described in this application.
- Will give the New Jersey Department of Human Services, or its authorized representatives, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with Generally Accepted Accounting Principles (GAAP). Will give proper notice to the independent auditor that DHS will rely upon the fiscal year end audit report to demonstrate compliance with the terms of the contract.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. This means that the applicant did not have any involvement in the preparation of the RLI, including development of specifications, requirements, statement of works, or the evaluation of the RLI applications/bids.
- Will comply with all federal and State statutes and regulations relating to non-discrimination. These include but are not limited to: 1) Title VI of the Civil Rights Act of 1964 (P.L. 88-352;34 CFR Part 100) which prohibits discrimination based on race, color or national origin; 2) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794; 34 CFR Part 104), which prohibits discrimination based on handicaps and the Americans with Disabilities Act (ADA), 42 U.S.C. 12101 et seq.; 3) Age Discrimination Act of 1975, as amended (42 U.S.C. 6101 et. seq.; 45 CFR part 90), which prohibits discrimination on the basis of age; 4) P.L. 2975, Chapter 127, of the State of New Jersey (N.J.S.A. 10:5-31 et. seq.) and associated executive orders pertaining to affirmative action and non-discrimination on public contracts; 5) federal Equal Employment Opportunities Act; and 6) Affirmative Action Requirements of PL 1975 c. 127 (NJAC 17:27).
- Will comply with all applicable federal and State laws and regulations.

- Will comply with the Davis-Bacon Act, 40 U.S.C. 276a-276a-5 (29 CFR 5.5) and the New Jersey Prevailing Wage Act, N.J.S.A. 34:11-56.27 et seq. and all regulations pertaining thereto.
- Is in compliance, for all contracts in excess of \$100,000, with the Byrd Anti-Lobbying amendment, incorporated at Title 31 U.S.C. 1352. This certification extends to all lower tier subcontracts as well.
- Has included a statement of explanation regarding any and all involvement in any litigation, criminal or civil.
- Has signed the certification in compliance with federal Executive Orders 12549 and 12689 and State Executive Order 34 and is not presently debarred, proposed for debarment, declared ineligible, or voluntarily excluded. The applicant will have signed certifications on file for all subcontracted funds.
- Understands that this provider agency is an independent, private employer with all the rights and obligations of such, and is not a political subdivision of the Department of Human Services.
- Understands that unresolved monies owed the Department and/or the State of New Jersey may preclude the receipt of this award.

Applicant Organization	Signature:	Chief Executive Officer or Equivalent
Date	 Typed Nam	e and Title

## Attachment D – Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions

READ THE ATTACHED INSTRUCTIONS BEFORE SIGNING THIS CERTIFICATION. THE INSTRUCTIONS ARE AN INTEGRAL PART OF THE CERTIFICATION.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion
Lower Tier Covered Transactions

- 1. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by an Federal department or agency.
- 2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Name and Title of Authorized Representative	
Signature	Date

This certification is required by the regulations implementing Executive order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510

#### Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions

#### **Instructions for Certification**

- 1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
- 2. The certification in this clause is a material representation of facts upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
- 3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
- 4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
- 5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
- 6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- 7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Non-Procurement Programs.
- 8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

## Attachment E – Disclosure of Investment Activities in Iran

	DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN
Applicant / Bidder:	
	DART 4 OFFICIATION
ADDI ICANI	PART 1: CERTIFICATION
	7 / BIDDER MUST COMPLETE PART 1 BY CHECKING EITHER BOX.
	ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE.
	v 2012, c. 25, any person or entity that submits a bid or proposal or otherwise
	or renew a contract must complete the certification below to attest, under penalty of
	or entity, or one of the person or entity's parents, subsidiaries, or affiliates, is not
	he web at <a href="http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf">http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf</a> ) created
	e New Jersey Department of the Treasury as a person or entity engaging in
	Iran. If the Director finds a person or entity to be in violation of the principles which
	law, s/he shall take action as may be appropriate and provided by law, rule or
	not limited to, imposing sanctions, seeking compliance, recovering damages,
	efault and seeking debarment or suspension of the person or entity.
	ıant to Public Law 2012, c. 25, that neither the bidder listed above nor any of
	parents, subsidiaries, or affiliates is listed on the NJ Department of the
Treasury's list	of entities determined to be engaged in prohibited activities in Iran pursuant
to P.L. 2012, c	. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I
am an officer	or representative of the entity listed above and am authorized to make this
certification or	n its behalf. I will skip Part 2 and sign and complete the Certification below.
OR	
	o certify as above because the bidder and/or one or more of its parents,
	or affiliates is listed on the Department's Chapter 25 list. I will provide a
	rate and precise description of the activities in Part 2 below and sign and
	Certification below. Failure to provide such will result in the proposal being
	nonresponsive and appropriate penalties, fines and/or sanctions will be
	rovided by law.
	OVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN
IRAN	SVIDE FORTILE IN ORMATION RELATED TO INVESTMENT ACTIVITIES IN
	s, provide a detailed, accurate and precise description of the activities of the
	, or one of its parents, subsidiaries or affiliates, engaging in the investment
activities in Iran outlin	
activities in trail outili	leu above.
Cartification, I bains	duly average vector and note have by some and atota that the foresting
	duly sworn upon my oath, hereby represent and state that the foregoing
	attachments thereto to the best of my knowledge are true and complete. I
	orized to execute this certification on behalf of the above-referenced person
	dge that the State of New Jersey is relying on the information contained
	cknowledge that I am under a continuing obligation from the date of this
	he completion of any contracts with the State to notify the State in writing of
	nswers of information contained herein. I acknowledge that I am aware that it
	o make a false statement or misrepresentation in this certification, and if I do
so, I recognize that	I am subject to criminal prosecution under the law and that it will also
	breach of my agreement(s) with the State of New Jersey and that the State at
its option may declare	e any contract(s) resulting from this certification void and unenforceable.
Full Name (print):	
. ,	
Signature:	
Title:	

Date:

## Attachment F - County Mental Health Administrators RFP Submission Preference (as of 12/2014)

County	Mental Health Administrator	Submission Type
Atlantic	Sally Williams, Mental Health Administrator Email: williams_sally@aclink.org	Email
Bergen	Michele Hart-Loughlin, Program Coordinator Email: mhartlo@co.bergen.nj.us	Email
Burlington	Barbara Biglin, Mental Health Administrator Email: bbiglin@co.burlington.nj.us	Email
Camden	Rashid M. Humphrey, Mental Health Services Community Planning & Advocacy Council 2500 McClellan Avenue - Suite 110 Pennsauken NJ 08109 Email: rhumphrey@cpachvi.org	Email + Postal Mail
Cape May	Patricia Devaney, Mental Health Administrator Email: devaneyp@co.cape-may.nj.us	Email
Cumberland	Juanita Nazario, Mental Health Administrator Email: juanitana@co.cumberland.nj.us	
Essex	Joseph Scarpelli, D.C., Administrator Essex County Mental Health Board 204 Grove Avenue Cedar Grove NJ 07009 Email: jscarpelli@health.essexcountynj.org	Email + Postal Mail
Gloucester	Kathy Spinosi Budd Boulevard Complex 115 Budd Blvd. West Deptford NJ 08096 Email: kspinosi@co.gloucester.nj.us	Email + Postal Mail
Hudson	Robin F. James, Mental Health Administrator Email: rjames@hcnj.us	Email
Hunterdon	Cathy Zahn, Mental Health Planner Department of Human Services	Email + Postal Mail

8 Gauntt Place - PO Box 2900 Flemington NJ 08822-2900

Email: czahn@co.hunterdon.nj.us

Mercer Michele Madiou, Administrator

Postal Mail

Division of Mental Health 640 South Broad Street

PO Box 8068 Trenton NJ 08650

Middlesex Penny Grande, Administrator

Email

Email: penny.grande@co.middlesex.nj.us

Monmouth Barry W. Johnson, Administrator

Email: barry.johnson@co.monmouth.nj.us Email

Morris Laurie Becker, Mental Health Administrator Email

Email: lbecker@co.morris.nj.us

Ocean Tracy Maksel, Assistant Mental Health Administrator Email

Email: tmaksel@co.ocean.nj.us

Passaic Francine Vince, Director Email

Email: francinev@passaiccountynj.org

Salem Kathy Spinosi, Mental Health Administrator Email + Postal Mail

Department of Mental Health

94 Market Street Salem NJ 08079

Email: kspinosi@co.gloucester.nj.us

Somerset Pam Mastro, Mental Health Administrator Email

Email: mastro@co.somerset.nj.us

Sussex Christine Florio, Mental Health Administrator Email

Email: cflorio@sussex.nj.us

Union Sara Thode, Mental Health Administrator Email

Email: sthode@ucnj.org

Warren Shannon Brennan, Mental Health Administrator/

Email

Youth Services Administrator

Email: sbrennan@co.warren.nj.us