



STATE OF WASHINGTON
HEALTH CARE AUTHORITY

REQUEST FOR APPLICATIONS (RFA)

RFA NO. 3882

NOTE: If you download this RFA from the Health Care Authority website, you are responsible for sending your name, address, e-mail address, and telephone number to the RFA Coordinator in order for your organization to receive any RFA amendments or Applicant questions/agency answers. HCA is not responsible for any failure of your organization to send the information or for any repercussions that may result to your organization because of any such failure.

PROJECT TITLE: Substance Use Disorder (SUD) Prevention and Mental Health Promotion Project (MHPP) and Suicide Prevention Project Community-Based Organization (CBO) Enhancement Grants

PROJECT SHORT TITLE: SUD/MHPP/Suicide Px CBO Grants

APPLICATION DUE DATE: November 1, 2019 by 2 p.m. *Pacific Time* Olympia, Washington, USA.

Only e-mailed applications will be accepted. Faxed applications will not.

ESTIMATED TIME PERIOD FOR CONTRACT:

State Opioid Response (SOR):	December 15, 2019 to September 29, 2020
Dedicated Marijuana Account (DMA):	December 15, 2019 to June 30, 2021
Mental Health Promotion Projects (MHPP):	December 15, 2019 to June 30, 2021

The Health Care Authority reserves the right to extend the Contract for up to two (2) additional one (1)-year periods at the sole discretion of the Health Care Authority.

APPLICANT ELIGIBILITY: This procurement is open to those Applicants that satisfy the minimum qualifications stated herein and that are available for work in Washington State.

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1. INTRODUCTION

1.1. PURPOSE AND BACKGROUND

The Washington State Health Care Authority, hereafter called “HCA,” is initiating this Request for Applications (RFA) to solicit Applications from entities interested in participating on projects to implement prevention services in Washington State. There are three different types of Community-based enhancement projects listed within this application:

- State Opioid Response (SOR) projects,
- Dedicated Marijuana Account (DMA) projects,
- Mental Health Promotion Projects (MHPP) and Suicide Prevention Projects.

HCA intends to award multiple Contract(s) to provide the services described in this RFA.

The HCA Division of Behavioral Health and Recovery (HCA/DBHR) intends to increase capacity to implement direct and environmental alcohol, tobacco, opioid, and other drug prevention services in high-need communities, as well Mental Health Promotion Projects and Suicide Prevention Projects. HCA/DBHR will award multiple Contracts to Tribal government or Urban Indian programs, public or private Community-Based Organizations, and government agencies (e.g. school districts, law enforcement agencies, city/county, and Educational Service Districts (ESD)) to provide quality and culturally competent Evidence-Based Programs, Research-Based Programs, and Promising Programs to address substance use prevention and Mental Health Promotion Programs or Suicide Prevention Projects.

HCA/DBHR is not excluding any organization from applying, but will give priority to organizations serving the high-need communities listed in Exhibit I.

Awards are dependent on project funding:

- SOR projects: One year funding period only for up to \$20,000 for a Single-site Application or up to \$80,000 per Multi-Site Application.
- DMA projects: Two funding years available for up to \$20,000 for a Single-Site Application or up to \$80,000 per Multi-Site Application each year.
- MHPP and Suicide Prevention Projects: Two funding years available for up to \$20,000 for a Single-Site Application or up to \$80,000 per Multi-Site Application each year.
- Single-Site Applications qualify an Applicant to serve one or more communities within a school district or public hospital district, city, or county.
- Multi-Site Applications qualify an Applicant to serve more than one Community with a regional (multiple county) or statewide service delivery. For more information, please see Section 1.8, *Definitions*.

Organizations are encouraged to partner with Community Prevention and Wellness Initiative (CPWI) Coalitions or other existing Community Coalitions when possible.

HCA reserves the right to negotiate with the Apparent Successful Applicant (ASA) for project scope, including number of individuals served, and funding amounts. Special consideration during selection may include Community geographic location(s) to ensure distribution of projects statewide, overall Community risk ranking, and past performance of HCA/DBHR contracts.

1.2. OBJECTIVES AND SCOPE OF WORK

The period of performance for this grant will vary depending on each funding source.

Applicants must complete a separate Project Narrative, Action Plan, and budget for each source of funding requested in their application. The Project Narrative will describe the needs of the communities proposed to be served; the programs chosen and plan proposed for implementation, and how Health Disparities will be addressed.

Each Project Narrative must clearly state how the Applicant will ensure the objectives for each funding source are met. The funding source objectives are as follows:

SOR: To meet Strategy 1.1 of the [SOR Plan](#), HCA/DBHR will provide grants to entities to prevent the misuse of opioids in communities. HCA/DBHR intends to increase capacity to implement direct and environmental substance use disorder prevention services in communities.

- Current HCA contractors receiving State Opioid Response (SOR) Community-based Organization (CBO) grant funding from RFA #3055 are not eligible to apply for the SOR funding through this funding application (RFA #3882). These contractors are eligible to apply for the DMA or MHPP funding sources in this application.

DMA: To address [RCW 69.50.545](#), HCA/DBHR will provide grants to entities to implement youth marijuana misuse and abuse prevention services. HCA/DBHR intends to increase capacity to implement direct and environmental substance use disorder prevention services in communities.

MHPP and Suicide Prevention Projects: To meet the [WA State Suicide Prevention Plan](#) goals, HCA/DBHR will provide grants to entities to address mental health promotion or Suicide Prevention Projects. Mental health promotion works to strengthen individuals and communities. Promotion of mental health can be achieved by working to improve your Community in a variety of ways. Here are a few examples:

- Early childhood interventions (e.g., home visiting for pregnant women, pre-school psychosocial interventions, combined nutritional and psychosocial interventions among disadvantaged populations);
- Mental health promotion activities in schools e.g., programs supporting normal transitions and changes in schools, increasing the atmosphere of child-friendly schools;
- Family education programs e.g., increasing child parent bonding, child transitions, communication skills, problem solving skills, disciplinary skills;
- Suicide Prevention Projects e.g., Community or individual training on signs of suicide and how to provide appropriate referrals; and
- Mental health interventions at work e.g., stress prevention programs.

The work of successful Applicants must include but not be limited to the following:

1. Implement the approved Action Plan located in each Exhibit G packet of the application.
 - a. The Action Plan will include approved program(s) from the list(s) of approved programs on Exhibit A: Application Face Page.
 - b. Programs must be implemented as proposed in the Applicants' approved Project Narrative, Action Plan, and Budget including; approved program(s), dates & timelines, scope, dosage, Target Audience(s), leadership, and responsible parties.
2. Funds must be used to support program costs including staff for program planning, training, implementation, reporting and evaluation.
3. Enter approved implementation Action Plan into the Substance Use Disorder Prevention and Mental Health Promotion Online Reporting System (Minerva) no more than 30 days following Contract execution.
4. Complete monthly reporting in Minerva, including all required data, by the 15th of the month following the month of services, including required pre/post-test data. Resources on the Minerva system can be found at <http://theathenaforum.org/MKB>.
5. Participate in HCA/DBHR learning Community meetings every other month, and other required trainings.
 - a. Additional information can be found on The Athena Forum Calendar at <https://www.theathenaforum.org/event-calendar/month>
6. Participate in monthly check-in phone calls with Contract Manager or designee.

HCA/DBHR is interested in receiving applications from organizations that demonstrate excellence in service delivery to the high-needs communities listed in Exhibit I, communities of color, veterans and military families, persons with disabilities, and members of LGBTQ communities. Private, for profit organizations are encouraged to partner with eligible applicants especially for proposals that would

address professions that are at high risk for substance use disorders, mental health challenges, or suicide.

Applicants are encouraged to partner with CPWI Coalitions, Drug Free Community (DFC) Coalitions, or other existing Community Coalitions when possible. However, only one legal entity may submit the Application.

Awarded contractors are required to report program level activity data input for all active services including coordination staff hours and efforts, services, participant information, training, evaluation tools and assessments. Contractors will be required to participate in statewide evaluation reporting activities.

1.3. MINIMUM QUALIFICATIONS

- 1.3.1. Licensed to do business in the state of Washington or provide a commitment that it will become licensed in Washington within 30 calendar days of being selected as the Apparent Successful Bidder.
- 1.3.2. Previous experience managing at least one (1) program with the purpose of addressing the prevention of substance abuse, mental health promotion, or suicide prevention.
- 1.3.3. A minimum of one (1) year' experience with providing substance use disorder prevention, mental health promotion, or suicide prevention services.

1.4. FUNDING

Applicants may apply for each funding source in this RFA if eligible, however a maximum of two (2) Contracts will be awarded to each Applicant.

A maximum of two (2) Multi-Site Contracts will be awarded per funding source, for a maximum of six (6) Multi-Site Contracts resulting from this RFA.

Award limits per funding source are as follows:

SOR: December 15, 2019 to September 29, 2020

HCA has budgeted an amount not to exceed twenty-thousand dollars (\$20,000) for Single-Site Applicants and eighty-thousand dollars (\$80,000) for Multi-Site Applicants for the funding period.

DMA: December 15, 2019 to June 30, 2021

HCA has budgeted an amount not to exceed twenty-thousand dollars (\$20,000) for Single-Site Applicants and eighty-thousand dollars (\$80,000) for Multi-Site Applicants per year for two years.

According to RCW 69.50.545 no less than eighty-five percent (85%) of DMA funds can be used to support Evidence-Based Programs and Research-Based Programs and no more than fifteen percent (15%) can be used to support Promising Programs from the required programs list (see Exhibit Packet G-2). By 2020, grantees may be asked to adjust selected programs and strategies to follow the benefit-cost model to for effective programs.

MHPP: December 15, 2019 to June 30, 2021

HCA has budgeted an amount not to exceed twenty-thousand dollars (\$20,000) for Single-Site Applicants and eighty-thousand dollars (\$80,000) for Multi-Site Applicants per year for two (2) years.

HCA has budgeted for the amounts stated above and will not exceed those amounts unless otherwise stipulated herein. Applications in excess of these amounts per source will be considered non-responsive and will not be evaluated.

Any Contract awarded as a result of this procurement is contingent upon the availability of funding.

Grantees must use funding to supplement and not supplant existing prevention activities in their communities.

1.5. PERIOD OF PERFORMANCE

The period of performance of any Contract resulting from this RFA is tentatively scheduled to begin on or about December 15, 2019 and to end on the dates outlined below for each funding source. Amendments extending the period of performance, if any, will be at the sole discretion of HCA.

SOR: September 29, 2020

DMA: June 30, 2021

MHPP: June 30, 2021

HCA reserves the right to adjust the start date of Contracts and to extend the Contract for two (2) one-(1) year periods.

1.6. CONTRACTING WITH CURRENT OR FORMER STATE EMPLOYEES

Specific restrictions apply to contracting with current or former state employees pursuant to chapter 42.52 of the Revised Code of Washington. Applicants should familiarize themselves with the requirements prior to submitting an Application that includes current or former state employees.

1.7. DEFINITIONS

Definitions for the purposes of this RFA include:

Action Plan - Completed version of the template set forth in each Exhibit G packet of this RFA describing the Applicant's plan for implementing proposed programs described in the Project Narrative also included in the Exhibit G packets. The Action Plan must include details about goals, objectives, program(s), Target Audience, dates, dosage, leadership, and implementation partners.

Apparent Successful Applicant or ASA - The Applicant selected as the entity to perform the anticipated services under this RFA, subject to completion of Contract negotiations and execution of a written Contract.

Applicant - Individual or company interested in the RFA that submits an Application in order to attain a Contract with the Health Care Authority.

Application - A formal offer submitted in response to this solicitation.

Coalition - Formal arrangement for cooperation and collaboration between groups or sectors of a Community. Each participant in the Coalition retains its identity, but all agree to work together toward a common goal of building a safe, healthy, and drug-free Community.

Community - Geographic area within school district boundaries, or within High School Attendance Areas (HSAA), and their feeder schools.

Community-Based Organization or CBO - Public or private nonprofit organization of demonstrated effectiveness that is representative of a Community, or of significant segments of a Community, and that provides educational or related services to individuals in the Community. This includes faith-based and religious organizations.

Community Prevention and Wellness Initiative or CPWI - HCA substance use prevention delivery system that focuses prevention services in high-need communities in Washington State as selected and approved by HCA. The List of sites can be found in Exhibit J.

Contract - The agreement between HCA and the Apparent Successful Applicant (ASA) to carry out the ASA's proposed program.

The Center for Substance Abuse Prevention or CSAP - means the Substance Abuse and Mental Health Services Administration (SAMHSA) that works with federal, state, public, and private organizations to develop comprehensive prevention systems. CSAP has developed and recognized the six prevention strategy categories listed below.

CSAP Categories:

- **Alternative Activities:** Activities that involve participation by targeted groups/individuals that purposefully exclude alcohol and other substances by way of providing prosocial and healthy alternatives.
- **Community-Based Process:** Providing an organized forum to enhance prevention activities by forming a group. The group organizes, plans, and implements prevention activities through this format.
- **Education:** Activities to provide education to identified group/individuals aimed at teaching decision - making skills, refusal skills, parental management skills, social skill development etc. Education activities involve two-way communication and involve an educator teaching participants.
- **Environmental:** Establish or change Community attitudes, norms, and policies that can influence substance use occurrence within the Community.
- **Information Dissemination:** Provide information about drug use, misuse, and abuse, effects of substance use on individuals. Provide information on prevention related programs and resources available.
- **Problem Identification and Referral:** Identify individuals with misuse/abuse of substances in order to provide interventions that can deter those individuals of continued misuse through education and motivation strategies.
- **Other:** Training

Division of Behavioral Health and Recovery or DBHR - The Division of the Washington State Health Care Authority that provides program support for behavioral health including substance use disorder prevention and treatment, mental health promotion and treatment, and recovery support services.

Dedicated Marijuana Account or DMA - Revenue generated by the taxation of retail marijuana as a result of the implementation of Initiative 502 (I-502) as authorized in Chapter 4, Laws of 2015 (2nd Special Session); codified in RCW 69.50.540.

Educational Service District or ESD - Regional agency described in RCW 28A.310.010 to (1) provide cooperative and informational services to local school districts; (2) assist the superintendent of public instruction and the state board of education in the performance of their respective statutory or constitutional duties; and (3) provide services to school districts and to the Washington state center for childhood deafness and hearing loss and the school for the blind to assure equal educational opportunities.

Evidence-Based Program or EBP - Program that has been tested in heterogeneous or intended populations that can be implemented with a set of procedures to allow successful replication in Washington. An EBP has had multiple randomized and/or statistically-controlled evaluations, or one large multiple-site randomized and/or statistically-controlled evaluation, and the weight of the evidence from a systematic review demonstrates sustained improvements in at least one of the desired outcomes.

Health Care Authority or HCA - An executive agency of the state of Washington that is issuing this RFA.

Health Disparities - A particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health Disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion;

socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.

Health Equity - The attainment of the highest level of health for all people. Achieving Health Equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.

Innovative Program - Program that does not fall into the other program categories of Evidence-Based Programs, Research-Based Programs, or Promising Programs.

The Institute of Medicine Model or IOM - often referred to as a continuum of services, care, or prevention, classifies prevention interventions according to their target population. Classification by population provides clarity to the differing objectives of various interventions and matches the objectives to the needs of the target population. The IOM identifies these categories based on the level of risk, see below.

IOM Classifications:

- Universal-Indirect: Targets the general population and are not directed at a specific risk group.
- Universal-Direct: Interventions directly serve an identifiable group of participants but who have not been identified on the basis of individual risk.
- Selective: Targets those at higher-than-average risk for substance abuse; individuals are identified by the magnitude and nature of risk factors for substance abuse to which they are exposed.
- Indicated: Targets those already using or engaged in other high-risk behaviors to prevent heavy or chronic use.

Mental Health Promotion Programs or MHPP - means a program or strategy with the overall goal of maximizing mental health and well-being among populations and individuals.

Multi-Site - means a regional or statewide area, or more than one county. Examples of entities that have a regional or statewide reach may include, but not limited to, Behavioral Health Organizations, an ESD, an Accountable Community of Health (ACH), Family Youth System Partner Roundtable (FYSPRT), State Associations, Universities, organizations such as Big Brothers Big Sisters, YMCA, or Boys and Girls Clubs, the American Indian Health Commission, or workers unions.

Project Narrative - Written answers to the questions included in the Exhibit G packets: Project Narrative, that describe the Programs an Applicant seeks to carry out if awarded a Contract.

Promising Program - Program that is based on statistical analyses or a well-established theory of change, shows potential for meeting the “Evidence-Based Program” or “Research-Based Program” criteria, and could include the use of an Evidence-Based Program for outcomes other than the alternative use.

Public Agency - Examples of a Public Agency, for purposes of this RFA, include: a school district, law enforcement agency, county agency, ESD, Urban Indian Organizations, American Indian Organizations, or a Tribe.

Research-Based Program – means a program that has been tested with a single randomized and/or statistically controlled evaluation, demonstrates sustained desirable outcomes; or where the weight of the evidence from a systematic review supports sustained outcomes as identified in the term “Evidence-Based Program”, but does not meet the full criteria for “Evidence-Based Program”.

Request for Applications or RFA – means a formal procurement document in which a service or need is identified but no specific method to achieve it has been chosen. The purpose of an RFA is to permit the Applicant Community to suggest various approaches to meet the need at a given price.

Single-Site - means a single Community or site(s) within a county, city, hospital, or school district. Examples include, but are not limited to, a county public health department, public hospital, school district, or nonprofit.

State Opioid Response or **SOR** - Federal Substance Abuse and Mental Health Services Administration (SAMHSA) Grants Funding Opportunity TI-18-015 supporting implementation of this state grant project. Anticipated start date 9/30/2018; length of project period is up to two years. More information can be found at:

<https://www.samhsa.gov/sites/default/files/grants/pdf/sorfoafinal.6.14.18.pdf>

Subrecipient - means a contractor operating a federal or state assistance program receiving federal funds and having the authority to determine both the services rendered and disposition of program. See OMB Super Circular 2 CFR 200.501 and 45 CFR 75.501, "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards for additional detail.

Suicide Prevention Projects - means programs and strategies designed to decrease the risk of suicide.

Substance Use Disorder Prevention and Mental Health Promotion Online Reporting System or **Minerva** - Online data entry system for documenting and reporting prevention services.

<https://www.theathenaforum.org/minerva>

Target Audience - Indicated program participant a service is designed for based on the program design. A Community may determine Target Audience by geography or sub-population to ensure effective program delivery.

1.8. ADA

HCA complies with the Americans with Disabilities Act (ADA). Applicants may contact the RFA Coordinator to receive this RFA in Braille or on tape.

2. GENERAL INFORMATION FOR APPLICANTS

2.1. RFA COORDINATOR

The RFA Coordinator is the sole point of contact in HCA for this procurement. All communication between the Applicant and HCA upon release of this RFA must be with the RFA Coordinator, as follows:

Name	Cassie Bryden
E-Mail Address	contracts@hca.wa.gov

Any other communication will be considered unofficial and non-binding on HCA. Applicants are to rely on written statements issued by the RFA Coordinator. Communication directed to parties other than the RFA Coordinator may result in disqualification of the Applicant.

2.2. ESTIMATED SCHEDULE OF PROCUREMENT ACTIVITIES

Request for Applications Released	9/26/2019
Questions Due	10/4/2019– 5 p.m. PT
Answers Posted	10/08/2019
Pre-Application Conference	10/9/2019 - 11-1 p.m. PT
Answers to RFA Questions Posted	10/11/2019
Applications Due	11/1/2019 – 2 p.m. PT
Evaluate Applications	11/7-11/14/2019
Announce “Apparent Successful Applicant” Notification sent via e-mail to unsuccessful Applicants	11/22/2019
Debrief Conference Request Due Date	11/25/2019-11/27/2019 - 5 p.m. PT
Hold Debriefing Conferences	12/2/2019-12/4/2019
Begin Contract Work	12/15/2019

HCA reserves the right in its sole discretion to revise the above schedule.

2.3. PRE-APPLICATION CONFERENCE

A pre-application conference is scheduled to be held on October 9, 2019 from 11:00 a.m. to 1:00 p.m., Pacific Time. The pre-application conference is via webinar and you can register at: <https://attendee.gotowebinar.com/register/354590702643905282> Webinar ID: 950-450-123. All prospective Applicants should attend; however, attendance is not mandatory.

HCA will be bound only to HCA written answers to questions. Questions arising at the pre-application conference or in subsequent communication with the RFA Coordinator will be documented and answered in written form. A copy of the questions and answers will be posted on Washington’s Electronic Bid System (WEBS), at <https://fortress.wa.gov/ga/webs/>, and on the HCA Bids and Contracts page at <https://www.hca.wa.gov/about-hca/bids-and-contracts>.

2.4. SUBMISSION OF APPLICATIONS

ELECTRONIC APPLICATIONS:

The Application must be received by the RFA Coordinator no later than the Application Due deadline in Section 2.2, *Estimated Schedule of Procurement*.

Applications must be submitted electronically as an attachment to an e-mail to the RFA Coordinator at the e-mail address listed in Section 2.1. Attachments to e-mail should be in Microsoft Word format or PDF. Zipped files cannot be received by HCA and cannot be used for submission of Applications. The cover submittal letter and the Certifications and Assurances form must have a scanned signature of the individual within the organization authorized to bind the Applicant to the offer. HCA does not assume responsibility for problems with Applicant's e-mail. If HCA e-mail is not working, appropriate allowances will be made.

Applications may not be transmitted using facsimile transmission.

Applicants should allow sufficient time to ensure timely receipt of the Application by the RFA Coordinator. Late Applications will not be accepted and will be automatically disqualified from further consideration, unless HCA e-mail is found to be at fault. All Applications and any accompanying documentation become the property of HCA and will not be returned.

2.5. PROPRIETARY INFORMATION / PUBLIC DISCLOSURE

Applications submitted in response to this RFA will become the property of HCA. All Applications received will remain confidential until the Apparent Successful Applicant is announced; thereafter, the Applications will be deemed public records as defined in chapter 42.56 of the Revised Code of Washington (RCW).

Any information in the Application that the Applicant desires to claim as proprietary and exempt from disclosure under chapter 42.56 RCW, or other state or federal law that provides for the nondisclosure of a document, must be clearly designated. The information must be clearly identified and the particular exemption from disclosure upon which the Applicant is making the claim must be cited. Each page containing the information claimed to be exempt from disclosure must be clearly identified by the words "Proprietary Information" printed on the lower right hand corner of the page. Marking the entire Application exempt from disclosure or as Proprietary Information will not be honored.

If a public records request is made for the information that the Applicant has marked as "Proprietary Information," HCA will notify the Applicant of the request and of the date that the records will be released to the requester unless the Applicant obtains a court order enjoining that disclosure. If the Applicant fails to obtain the court order enjoining disclosure, HCA will release the requested information on the date specified. If an Applicant obtains a court order from a court of competent jurisdiction enjoining disclosure pursuant to chapter 42.56 RCW, or other state or federal law that provides for nondisclosure, HCA will maintain the confidentiality of the Applicant's information per the court order.

A charge will be made for copying and shipping, as outlined in RCW 42.56. No fee will be charged for inspection of Contract files, but 24 hours' notice to the RFA Coordinator is required. All requests for information should be directed to the RFA Coordinator.

The submission of any public records request to HCA pertaining in any way to this RFA will not affect the procurement schedule, as outlined in Section 2.2, unless HCA, in its sole discretion, determines that altering the schedule would be in HCA's best interests.

2.6. REVISIONS TO THE RFA

If HCA determines in its sole discretion that it is necessary to revise any part of this RFA, then HCA will publish addenda on Washington's Electronic Bid System (WEBS), at <https://fortress.wa.gov/ga/webs/>. Addenda will also be posted to the HCA Bids and Contracts internet page at <https://www.hca.wa.gov/about-hca/bids-and-contracts>. For this purpose, the published

questions and answers and any other pertinent information will be provided as an addendum to the RFA and will be placed on above referenced websites.

HCA also reserves the right to cancel or to reissue the RFA in whole or in part, prior to execution of a Contract.

2.7. ACCEPTANCE PERIOD

Applications must provide one hundred twenty (120) calendar days for acceptance by HCA from the due date for receipt of Applications.

2.8. COMPLAINT PROCESS

- 2.8.1. Vendors may submit a complaint to HCA based on any of the following:
 - 2.8.1.1. The RFA unnecessarily restricts competition;
 - 2.8.1.2. The RFA evaluation or scoring process is unfair or unclear; or
 - 2.8.1.3. The RFA requirements are inadequate or insufficient to prepare a response.
- 2.8.2. A complaint must be submitted to HCA prior to five business days before the Application response deadline. The complaint must:
 - 2.8.2.1. Be in writing;
 - 2.8.2.2. Be sent to the RFA Coordinator in a timely manner;
 - 2.8.2.3. Clearly articulate the basis for the complaint; and
 - 2.8.2.4. Include a proposed remedy.

The RFA Coordinator will respond to the complaint in writing. The response to the complaint and any changes to the RFA will be posted on WEBS. The Director of HCA will be notified of all complaints and will be provided a copy of HCA's response. An Applicant or potential Applicant cannot raise during an Application protest any issue that the Applicant or potential Applicant raised in a complaint. HCA's action or inaction in response to a complaint will be final. There will be no appeal process.

2.9. RESPONSIVENESS

The RFA Coordinator will review all Applications to determine compliance with administrative requirements and instructions specified in this RFA. An Applicant's failure to comply with any part of the RFA may result in rejection of the Application as non-responsive.

HCA also reserves the right at its sole discretion to waive minor administrative irregularities.

3. APPLICATION CONTENTS

Applications must be written in English and submitted electronically to the RFA Coordinator in the order noted below:

- A. Application Face Page (Exhibit A)
- B. Signed Certifications and Assurances (Exhibit B)
- C. Diverse Business Inclusion Plan (Exhibit C)
- D. Signed Contractor Certification Executive Order 18-03 (Exhibit D)
- E. Applicant Intake Form (Exhibit E)
- F. FFATA Form (Exhibit F)
- G. Funding Source Packets (Exhibit(s) G)

Each Funding Source Packet must include the following:

- (1) Funding Source Program Selection Form
- (2) Project Narrative
- (3) Action Plan
- (4) Budget (Exhibit(s) H)

- H. Letter(s) of Support

Applications must provide information in the same order as presented in this document with the same headings to be considered responsive.

Items marked “**mandatory**” must be included as part of the Application for the Application to be considered responsive; however, these items are not scored. Items marked “**scored**” are those that are mandatory and awarded points as part of the evaluation conducted by the evaluation team.

Applications must be written in English and submitted in 12 point Calibri or Times New Roman font. Applicant must include page numbers, RFA short-title, and RFA number in the footer of each page.

Only complete Applications will be considered. For the purposes of this RFA, a complete Application must include all required forms and supporting documents. All questions must be restated prior to the response, and all responses must completely answer each question. All pertinent information must be included in each response, the Applicant must not direct evaluators to another response or location for additional information.

Funding is dependent on interest, Application scores, statewide distribution and geographic distribution, Community population size, numbers served, and risk ranking.

To be considered responsive all pertinent information must be included in each response, the Applicant must not direct evaluators to another response or location for additional information.

3.1. APPLICATION FACE PAGE (EXHIBIT A) (MANDATORY)

The Application Face Page (Exhibit A) must be completed, then signed and dated by a person authorized to legally bind the Applicant to a contractual relationship, e.g., the President or Executive Director if a corporation, the managing partner if a partnership, or the proprietor if a sole proprietorship. The Application Face Page is used for tracking incoming Applications, contractor information, and proposed service areas. The Application Face Page is to include by attachment the following information about the Applicant and any proposed subcontractors:

- 3.1.1. Legal status of the Applicant (sole proprietorship, partnership, corporation, etc.) and the year the entity was organized to do business as the entity now substantially exists.
- 3.1.2. Location of the facility from which the Applicant would operate.
- 3.1.3. Identify any state employees or former state employees employed or on the firm's governing board as of the date of the Application. Include their position and responsibilities within the Applicant's organization. If following a review of this information, it is determined by HCA that a conflict of interest exists, the Applicant may be disqualified from further consideration for the award of a Contract.
- 3.1.4. Any information in the Application that the Applicant desires to claim as proprietary and exempt from disclosure under the provisions of RCW 42.56 must be clearly designated. The page must be identified and the particular exemption from disclosure upon which the Applicant is making the claim must be listed. Each page claimed to be exempt from disclosure must be clearly identified by the word "Proprietary" printed on the lower right hand corner of the page. In your Application Face Page, please list which pages and sections that have been marked "Proprietary" and the particular exemption from disclosure upon which the Applicant is making the claim.

3.2. CERTIFICATIONS AND ASSURANCES (EXHIBIT B) (MANDATORY)

The Certifications and Assurances form (Exhibit B) must be signed and dated by a person authorized to legally bind the Applicant to a contractual relationship, e.g., the President or Executive Director if a corporation, the managing partner if a partnership, or the proprietor if a sole proprietorship. Name, address, and telephone number of each principal officer (President, Vice President, Treasurer, Chairperson of the Board of Directors, etc.).

3.3. DIVERSE BUSINESS INCLUSION PLAN (EXHIBIT C) (MANDATORY)

Applicants will be required to submit a Diverse Business Inclusion Plan (Exhibit C) with their Application. The information provided in Exhibit C is used by HCA to track the amount and types of contracted and subcontracted work with small businesses, minority-owned businesses, and women-owned businesses. HCA requires this Exhibit C for accurate and complete data collecting and reporting purposes. In accordance with legislative findings and policies set forth in RCW 39.19, the state of Washington encourages participation in all Contracts by firms certified by the Office of Minority and Women's Business Enterprises (OMWBE), set forth in RCW 43.60A.200 for firms certified by the Washington State Department of Veterans Affairs, and set forth in RCW 39.26.005 for firms that are Washington Small Businesses. Participation may be either on a direct basis or on a subcontractor basis. However, no preference on the basis of participation is included in the evaluation of Diverse Business Inclusion Plans submitted, and no minimum level of minority- and women-owned business enterprise, Washington Small Business, or Washington State certified Veteran Business participation is required as a condition for receiving an award. Any affirmative action requirements set forth in any federal governmental regulations included or referenced in the Contract documents will apply.

3.4. EXECUTIVE ORDER 18-03 (EXHIBIT D) (SCORED)

Pursuant to RCW 39.26.160(3) and consistent with Executive Order 18-03 - Supporting Workers' Rights to Effectively Address Workplace Violations (dated June 12, 2018), HCA will evaluate Applications for best value and provide an Application preference in the amount two (2) points to any Applicant who certifies, pursuant to the certification attached as Exhibit D, Contractor Certification for Executive Order 18-03 - Workers' Rights, that their firm does not require its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waiver. If Applicant's firm does require its employees, as a condition of employment, to sign or

agree to mandatory individual arbitration clauses or class or collective action waiver, the firm will receive zero (0) points for this section.

3.5. APPLICANT INTAKE FORM (EXHIBIT E) (MANDATORY)

The Applicant Intake Form must be completed to provide the necessary information for Contract development.

3.6. FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (EXHIBIT F) (MANDATORY)

If the resulting Contract is supported by federal funds, such Contract may require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how federal funds are spent.

To comply with the act and be eligible to enter into this Contract, the Apparent Successful Bidder's organization must have a Data Universal Numbering System (DUNS®) number. A DUNS® number provides a method to verify data about your organization. If the organization does not already have one, it may receive a DUNS® number free of charge by contacting Dun and Bradstreet at www.dnb.com.

A Federal Funding Accountability and Transparency Act (FFATA) Data Collection Form is required from each Applicant.

Required information about the Contracting organization and this Contract will be made available on USASpending.gov by the Washington State Health Care Authority as required by P.L. 109-282. As a tool to provide the information, HCA encourages registration with the Central Contractor Registry (CCR) because less data entry and re-entry is required on behalf of both HCA and the contracting organization. Registration can be done with CCR online at <https://www.uscontractorregistration.com/>.

3.7. PROJECT NARRATIVE(S) (EXHIBIT G PACKETS) (SCORED)

Each Application will be scored according to how well the requirements in each section of the Project Narrative have been addressed. The Project Narrative must be completed in the order presented and adhere to the following requirements:

- 3.7.1. Applicants must prepare a separate Project Narrative for each funding source being applied for SOR, DMA, and/or MHPP. For example, if the Applicant is applying for both DMA and MHPP, two Project Narratives are required.
- 3.7.2. Applicant responses will be evaluated and scored based on clear and complete responses to each question included in the Project Narrative.
- 3.7.3. You may not combine two or more questions or refer to another section of the Project Narrative in your response. Only information included in the appropriate question will be considered by reviewers.
 - 3.7.3.1. EXCEPTION: In response to Project Narrative Section 3, *Implementation*, question d, Applicant may include up to three (3) letters of support with each Project Narrative for a maximum of nine (9) letters of support per Applicant.
 - 3.7.3.2. Letters of Support should originate from a local Coalition, task force, or committee to demonstrate the Applicant's current or previous coordination with these organizations. This is not scored and will not count against your page limit.

- 3.7.4. Each response must begin with a restatement or paraphrasing of the question being addressed. If Applicant cannot answer a specific question, they must provide the reason(s) within the answer to the question.
- 3.7.5. Each Project Narrative, excluding the letters of support pages, must not exceed ten (10) pages total. Project Narratives exceeding the page limit may be disqualified from further consideration.
- 3.7.6.

3.8. ACTION PLAN(S) (EXHIBIT G PACKETS) (SCORED)

The Action Plan must be completed in the order presented. Applicants must prepare a separate Action Plan for each funding source project (SOR, DMA, and/or MHPP). For example, if the Applicant is applying for both DMA and MHPP, two Action Plans are required.

The Action Plan(s) will be scored based on how well the Applicant completes the table outlining the programs and strategies that the Applicant intends to implement. Applicant responses will be evaluated based on clear and complete responses. If Applicant cannot answer a specific section on the Action Plan, they must provide the reason(s) within the table.

3.9. BUDGET(S) (EXHIBIT(S) H) (SCORED)

The Budget (Exhibit(s) H) must be completed in the order presented. Applicant must prepare a separate Budget for each funding source project (SOR, DMA, and/or MHPP). For example, if the Applicant is applying for both DMA and MHPP, two budgets are required.

The Budget(s) will be scored based on how well the Applicant answers each question. Applicant responses will be evaluated based on clear and complete responses. If Applicant cannot fill out a specific section, they must provide an explanation.

4. EVALUATION AND CONTRACT AWARD

4.1. EVALUATION PROCEDURE

Responsive Applications will be evaluated strictly in accordance with the requirements stated in this RFA and any addenda issued. The evaluation of Applications will be accomplished by an evaluation team(s), to be designated by HCA, which will determine the ranking of the Applications. Evaluations will only be based upon information provided in the Applicant's Application.

Those Applicants submitting Applications to serve the identified high-needs communities or CPWI sites are eligible for additional points. Please refer to Exhibit I, *High-Need Community Lists and the CPWI list*. HCA/DBHR is not excluding any organization from applying, you may submit your Application for consideration even if your Community is not on the prioritized list.

All Applications received by the stated deadline, Section 2.2, *Estimated Schedule of Procurement Activities*, will be reviewed by the RFA Coordinator to ensure that the Applications contain all of the required information requested in the RFA. Only responsive Applications that meet the requirements will be evaluated by the evaluation team. Any Applicant who does not meet the stated qualifications or any Application that does not contain all of the required information will be rejected as non-responsive.

The RFA Coordinator may, at his or her sole discretion, contact the Applicant for clarification of any portion of the Applicant's Application. Applicants should take every precaution to ensure that all answers are clear, complete, and directly address the specific requirement.

Responsive Applications will be reviewed and scored by an evaluation team using a weighted scoring system, Section 4.2, *Evaluation Weighting and Scoring*. Applications will be evaluated strictly in accordance with the requirements set forth in this RFA and any addenda issued.

In the case of multiple successful Applicants proposing to serve the same geographic population or segments of the same geographic population, the higher score determined by the criteria below may determine the successful Applicant. Exceptions may be made in the case of tribal Applicants proposing to serve similar geographic populations as other Applicants.

Multiple Contracts may be awarded to one geographical area at HCA's sole discretion if it is deemed to be in the best interest of HCA and the state of Washington.

Final award will be based on the funding available, the risk and needs of the communities being served, population density, and proposed numbers served.

4.2. EVALUATION WEIGHTING AND SCORING

Responses that pass all Mandatory requirements will be further evaluated and scored. Evaluators will evaluate and assign a score to each Scored requirement based on how well the Applicant's response matches the requirement.

The following points will be assigned to the Application for evaluation purposes:

PROJECT NARRATIVE	MAXIMUM POINTS Available
1. Overview	20
2. Plan for Advancing Health Equity	10
3. Implementation	30
4. Budget	10

5. Contractor Certification Executive Order 18-03	2
APPLICATION TOTAL	72
6. Bonus Points Available • See <i>Bonus Points</i> table below.	10
APPLICATION TOTAL - WITH BONUS POINTS	82

HCA reserves the right to award the Contract to the Applicant whose Application is deemed to be in the best interest of HCA and the state of Washington.

Each question is assigned a total of five (5) possible points. For example, the Project Narrative Overview includes four (4) questions and has a total value of 20 points. Evaluators will assign each question a score on a scale of zero (0) to five (5) where the end and midpoints are defined as follows:

QUALITATIVE ASSESSMENT	DESCRIPTION
5 = Excellent	The Applicant organization provides substantive descriptions and relevant details in addressing the narrative question. A sound understanding of the topic is demonstrated and includes pertinent examples. All criteria are fully addressed without identified weaknesses.
4 = Very Good	The Applicant organization provides substantive descriptions and relevant details in addressing the narrative question but the response is not fully comprehensive. Any identified weaknesses will likely have minor impact on the successful implementation of proposed project.
3 = Acceptable	The Applicant organization provides a basic response to the narrative question but does not include sufficient detail or supporting documentation. There are some gaps and/or lack of clarity in describing how the Application will be implemented. Identified weaknesses will likely have some impact on the successful implementation of proposed project.
2 = Marginal	The Applicant organization provides minimal details and insufficient descriptions that do not completely answer the narrative question. Limited information is presented or the Applicant merely repeats back information included in the RFA. The Applicant may answer part of the narrative question but miss a key point or there are major gaps in the information presented. Application has some strengths but includes identified weaknesses that will likely impact the successful implementation of proposed project.
1 = Unacceptable	The Applicant organization does not explicitly address the narrative question. The Applicant organization states the question, but does not elaborate on the response. As a result, the answer is completely deficient in addressing the narrative question.
0= Nonresponsive	The Applicant organization skips or otherwise ignores the question or includes irrelevant information that does not answer the question. As a result, the answer is nonresponsive.

A score of a zero (0) or one (1) on any Scored requirement may cause the entire Applications to be eliminated from further consideration.

Up to five (5) bonus points may be awarded if Applicant serves the high-need Community(ies) listed in Exhibit I, and up to five (5) bonus points may be awarded if the Applicant plans to collaborate with the existing CPWI Community(ies) or coalition(s). Bonus points will be awarded as follows:

BONUS POINTS		
Points Assigned	High-Need Communities Served	Coalitions in Collaboration
5	8 or more high-need communities	6 or more coalitions
4	6-7 high-need communities	4-5 coalitions
3	4-5 high-need communities	3 coalitions
2	2-3 high-need communities	2 coalitions
1	1 high-need community	1 coalitions

4.3. SUBSTANTIALLY EQUIVALENT SCORES

Substantially equivalent scores are scores separated by two points or less in the final points scored. If multiple Applications receive a Substantially Equivalent Score, HCA may leave the matter as scored, or select as the ASA the Applications that are deemed by HCA, in its sole discretion, to be in HCA's best interest relative to the overall purpose and objective as stated in Sections 1.1 and 1.2 of this RFA.

If applicable, HCA's best interest will be determined by HCA managers and executive officers, who have sole discretion over this determination. The basis for such determination will be communicated in writing to all Applicants with equivalent scores.

4.4. NOTIFICATION TO APPLICANTS

HCA will notify the ASA of their selection in writing upon completion of the evaluation process. Applicants who's Applications were not selected for further negotiation or award will be notified separately by e-mail.

4.5. DEBRIEFING OF UNSUCCESSFUL APPLICANTS

Any Applicant who has submitted an Application and been notified it was not selected for Contract award may request a debriefing. The request for a debriefing conference must be received by the RFA Coordinator no later than 5:00 p.m., local time, in Olympia, Washington, within three business days after the Unsuccessful Applicant Notification is e-mailed to the Applicant. The debriefing will be held within three business days of the request, or as schedules allow.

Discussion at the debriefing conference will be limited to the following:

- 4.5.1. Evaluation and scoring of the Applicant's Application;
- 4.5.2. Critique of the Application based on the evaluation; and
- 4.5.3. Review of the Applicant's final score in comparison with other final scores without identifying the other Applicants.

Topics an Applicant could have raised as part of the complaint process (Section 2.8) cannot be discussed as part of the debriefing conference, even if the Applicant did not submit a complaint.

Comparisons between Applications, or evaluations of the other Applications will not be allowed. Debriefing conferences may be conducted in person or on the telephone and will be scheduled for a maximum of thirty (30) minutes.

4.6. PROTEST PROCEDURE

An application protest may be made only by Applicants who submitted a response to this RFA and who have participated in a debriefing conference. Upon completing the debriefing conference, the Applicant is allowed five business days to file a protest with the RFA Coordinator. Protests must be received by the RFA Coordinator no later than 4:30 p.m., local time, in Olympia, Washington on the fifth business day following the debriefing. Protests may be submitted by e-mail or by mail.

Applicants protesting this RFA must follow the procedures described below. Protests that do not follow these procedures will not be considered. This protest procedure constitutes the sole administrative remedy available to Applicants under this RFA.

All protests must be in writing, addressed to the RFA Coordinator, and signed by the protesting party or an authorized agent. The protest must state (1) the RFA number, (2) the grounds for the protest with specific facts, (3) complete statements of the action(s) being protested, and (4) the relief or corrective action being requested.

- 4.6.1. Only protests alleging an issue of fact concerning the following subjects will be considered:
 - 4.6.1.1. A matter of bias, discrimination, or conflict of interest on the part of an evaluator;
 - 4.6.1.2. Errors in computing the score; or
 - 4.6.1.3. Non-compliance with procedures described in the RFA or HCA requirements.

Protests based on anything other than those items listed above will not be considered. Protests will be rejected as without merit to the extent they address issues such as: 1) an evaluator's professional judgment on the quality of an Application; or 2) HCA's assessment of its own needs or requirements.

Upon receipt of a protest, HCA will undertake a protest review. The HCA Director, or an HCA employee delegated by the HCA Director who was not involved in the RFA, will consider the record and all available facts. If the HCA Director delegates the protest review to an HCA employee, the Director nonetheless reserves the right to make the final agency decision on the protest. The HCA Director or his or her designee will have the right to seek additional information from sources he or she deems appropriate in order to fully consider the protest.

If HCA determines in its sole discretion that a protest from one Applicant may affect the interests of another Applicant, then HCA may invite such Applicant to submit its views and any relevant information on the protest to the RFA Coordinator. In such a situation, the protest materials submitted by each Applicant will be made available to all other Applicants upon request.

- 4.6.2. The final determination of the protest will:
 - 4.6.2.1. Find the protest lacking in merit and uphold HCA's action; or
 - 4.6.2.2. Find only technical or harmless errors in HCA's acquisition process and determine HCA to be in substantial compliance and reject the protest; or
 - 4.6.2.3. Find merit in the protest and provide options to the HCA Director, which may include:
 - 4.6.2.3.1. Correct the errors and re-evaluate all Applications; or
 - 4.6.2.3.2. Issue a new solicitation document and begin a new process; or

- 4.6.2.3.3. Make other findings and determine other courses of action as appropriate.

If the protest is not successful, HCA will enter into a Contract with the ASA(s), assuming the parties reach agreement on the Contract's terms.

4.7. MOST FAVORABLE TERMS

HCA reserves the right to make an award without further discussion of the Application submitted. Therefore, the Application should be submitted initially on the most favorable terms which the Applicant can propose. HCA reserve the right to contact an Applicant for clarification of its Application.

HCA also reserves the right to use a Best and Final Offer (BAFO) before awarding any Contract to further assist in determining the ASA(s).

The ASA should be prepared to accept this RFA for incorporation into a Contract resulting from this RFA. The Contract resulting from this RFA will incorporate some, or all, of the Applicant's Application. The Application will become a part of the official procurement file on this matter without obligation to HCA.

4.8. CONTRACT AND GENERAL TERMS & CONDITIONS

The ASA will be expected to enter into a Contract drafted by HCA. HCA will not accept any draft contracts prepared by any Applicant. If you would like to review the HCA Contract template you may request a copy via email sent to the RFA Coordinator. The Applicant may submit exceptions as allowed in the Certifications and Assurances form, Exhibit B to this RFA. All exceptions must be submitted as an attachment to Exhibit B. HCA will review requested exceptions and accept or reject the same at its sole discretion.

If, after the announcement of the ASA, and after a reasonable period of time, the ASA and HCA cannot reach agreement on acceptable terms for the Contract, the HCA may cancel the selection and Award the Contract to the next most qualified Applicant.

4.9. COSTS TO APPLY

HCA will not be liable for any costs incurred by the Applicant in preparation of an Application submitted in response to this RFA, in conduct of a presentation, or any other activities related in any way to this RFA.

4.10. RECEIPT OF INSUFFICIENT NUMBER OF APPLICATIONS

If HCA receives only one responsive Application as a result of this RFA, HCA reserves the right to either: 1) directly negotiate and contract with the Applicant; or 2) not award any Contract at all. HCA may continue to have the Applicant complete the entire RFA. HCA is under no obligation to tell the Applicant if it is the only Applicant.

4.11. NO OBLIGATION TO CONTRACT

This RFA does not obligate HCA to enter into any contract for services specified herein.

4.12. REJECTION OF APPLICATIONS

HCA reserves the right, at its sole discretion, to reject any and all Applications received without penalty and not to issue any contract as a result of this RFA.

4.13. COMMITMENT OF FUNDS

The Director of HCA or his/her delegate is the only individual who may legally commit HCA to the expenditures of funds for a contract resulting from this RFA. No cost chargeable to the proposed contract may be incurred before receipt of a fully executed contract.

4.14. ELECTRONIC PAYMENT

The state of Washington prefers to utilize electronic payment in its transactions. The ASA will be provided a form to complete with the contract to authorize such payment method.

4.15. INSURANCE COVERAGE (ADD OTHER INSURANCE AS REQUIRED)

As a requirement of the resultant Contract, the ASA is to furnish HCA with a certificate(s) of insurance executed by a duly authorized representative of each insurer, showing compliance with the insurance requirements set forth below.

The ASA must, at its own expense, obtain and keep in force insurance coverage which will be maintained in full force and effect during the term of the Contract. The ASA must furnish evidence in the form of a Certificate of Insurance that insurance will be provided, and a copy must be forwarded to HCA within 15 days of the Contract effective date.

4.15.1. Liability Insurance

- 4.15.1.1. Commercial General Liability Insurance: ASA will maintain commercial general liability (CGL) insurance and, if necessary, commercial umbrella insurance, with a limit of not less than \$1,000,000 per each occurrence. If CGL insurance contains aggregate limits, the General Aggregate limit must be at least twice the "each occurrence" limit. CGL insurance must have products-completed operations aggregate limit of at least two times the "each occurrence" limit. CGL insurance must be written on ISO occurrence form CG 00 01 (or a substitute form providing equivalent coverage). All insurance must cover liability assumed under an insured contract (including the tort liability of another assumed in a business contract), and contain separation of insureds (cross liability) condition.

Additionally, the ASA is responsible for ensuring that any subcontractors provide adequate insurance coverage for the activities arising out of subcontracts.

- 4.15.1.2. Business Auto Policy: As applicable, the ASA will maintain business auto liability and, if necessary, commercial umbrella liability insurance with a limit not less than \$1,000,000 per accident. Such insurance must cover liability arising out of "Any Auto." Business auto coverage must be written on ISO form CA 00 01, 1990 or later edition, or substitute liability form providing equivalent coverage.

4.15.2. Employers Liability ("Stop Gap") Insurance

In addition, the ASA will buy employers liability insurance and, if necessary, commercial umbrella liability insurance with limits not less than \$1,000,000 each accident for bodily injury by accident or \$1,000,000 each employee for bodily injury by disease.

4.15.3. Cyber-Liability Insurance / Privacy Breach Coverage. For the purposes of this section the following definitions apply:

Breach – means the unauthorized acquisition, access, use, or disclosure of Data shared under any resulting Contract that compromises the security, confidentiality, or integrity of the Data.

Confidential Information – is information that is exempt from disclosure to public or other unauthorized persons under 42.56 RCW or other federal or state laws. Confidential Information includes, but is not limited to, Personal Information and Protected Health Information.

Data – means information that is disclosed or exchanged between HCA and Apparent Successful Applicant. Data includes Confidential Information.

Personal Information – means information identifiable to any person, including but not limited to, information that relates to a person's name, health, finances, education, business, use, or receipt of governmental services or other activities, addresses, telephone numbers, social security numbers, driver's license numbers, credit card numbers, any other identifying numbers, and any financial identifiers.

Protected Health Information (PHI) – means information that relates to the provision of health care to an individual, the past, present, or future physical or mental health or condition of an individual, the past, present, or future payment for provision of health care to an individual. PHI includes demographic information that identifies the individual or about which there is reasonable basis to believe, can be used to identify the individual. PHI is information transmitted, maintained, or stored in any form or medium. PHI does not include education records covered by the Family Educational Right and Privacy Act, as amended.

For the term of any resulting Contract and three (3) years following its termination or expiration, ASA must maintain insurance to cover costs incurred in connection with a security incident, privacy Breach, or potential compromise of Data, including:

- 4.15.3.1. Computer forensics assistance to assess the impact of a Data Breach, determine root cause, and help determine whether and the extent to which notification must be provided to comply with Breach notification laws;
- 4.15.3.2. Notification and call center services for individuals affected by a security incident, or privacy Breach;
- 4.15.3.3. Breach resolution and mitigation services for individuals affected by a security incident or privacy Breach, including fraud prevention, credit monitoring, and identity theft assistance; and
- 4.15.3.4. Regulatory defense, fines, and penalties from any claim in the form of a regulatory proceeding resulting from a violation of any applicable privacy or security law(s) or regulation(s).

4.15.4. Additional Provisions

Above insurance policy must include the following provisions:

- 4.15.4.1. Additional Insured. The state of Washington, HCA, its elected and appointed officials, agents and employees must be named as an additional insured on all general liability, excess, umbrella and property insurance policies. All insurance provided in compliance with this Contract must be primary as to any other insurance or self-insurance programs afforded to or maintained by the state.

- 4.15.4.2. Cancellation. State of Washington, HCA, must be provided written notice before cancellation or non-renewal of any insurance referred to therein, in accord with the following specifications. Insurers subject to 48.18 RCW (Admitted and Regulation by the Insurance Commissioner): The insurer must give the state 45 days advance notice of cancellation or non-renewal. If cancellation is due to non-payment of premium, the state must be given ten days advance notice of cancellation. Insurers subject to 48.15 RCW (Surplus lines): The state must be given 20 days advance notice of cancellation. If cancellation is due to non-payment of premium, the state must be given ten days advance notice of cancellation.
- 4.15.4.3. Identification. Policy must reference the state's Contract number and the Health Care Authority.
- 4.15.4.4. Insurance Carrier Rating. All insurance and bonds should be issued by companies admitted to do business within the state of Washington and have a rating of A-, Class VII or better in the most recently published edition of Best's Reports. Any exception must be reviewed and approved by the Health Care Authority Risk Manager, or the Risk Manager for the state of Washington, before the Contract is accepted or work may begin. If an insurer is not admitted, all insurance policies and procedures for issuing the insurance policies must comply with chapter 48.15 RCW and 284-15 WAC.
- 4.15.4.5. Excess Coverage. By requiring insurance herein, the state does not represent that coverage and limits will be adequate to protect ASA, and such coverage and limits will not limit ASA's liability under the indemnities and reimbursements granted to the state in this Contract.

4.15.5. Workers' Compensation Coverage

The ASA will at all times comply with all applicable workers' compensation, occupational disease, and occupational health and safety laws, statutes, and regulations to the full extent applicable. The state will not be held responsive in any way for claims filed by the ASA or their employees for services performed under the terms of this Contract.

RFA EXHIBITS

- Exhibit A Application Face Page
- Exhibit B Certifications and Assurances
- Exhibit C Diverse Business Inclusion Plan
- Exhibit D Contractor Certification Executive Order 18-03
- Exhibit E Applicant Intake Form
- Exhibit F FFATA Form
- Exhibit G FUNDING SOURCE PACKETS
 - Exhibit G-1 - SOR Packet
 - Exhibit G-2 - DMA Packet
 - Exhibit G-3 - MHPP Packet
- Exhibit H Budget
 - Exhibit H-1 - SOR Budget
 - Exhibit H-2 - DMA Budget
 - Exhibit H-3 - MHPP Budget
- Exhibit I High-Need Communities Lists
- Exhibit J Existing HCA/DBHR CPWI Coalitions

APPLICATION FACE PAGE

The RFA packet contains the program details and reporting deadlines required for this funding opportunity. This opportunity is available to Tribes, Community-based and public organizations, government and public agencies, and local Community-Based Organizations that serve high-need communities within Washington State. The Applicant must currently provide quality and culturally competent replications of Evidence-Based Programs and Research-Based Programs focused on substance use prevention, mental health promotion and suicide prevention. The programs selected should match the needs of the Community being served.

Note: Not all applications will be awarded. Funding is dependent on interest and application scores. The program funding amounts awarded may vary. See scoring criteria in Section 4.2, Evaluation Weighting and Scoring.

1. Organization Name	
2. Organization Mailing Address	
3. Organization contact person name	
4. Organization contact person title	
5. Organization contact person email	
6. Organization contact person phone number	
7. Organization's DUNS number	
8. Organization's Zip code + 4 (assigned by the US Postal Service)	
9. Total amount of funding requested	
10. Counties served with programs	
11. Applicant type	<input type="checkbox"/> Tribe <input type="checkbox"/> Government/Public Agency <input type="checkbox"/> Community-Based Organization (non-governmental)

FUNDING SOURCE	SINGLE-SITE APPLICANT Funding Request Up to \$20,000 per year	MULTI-SITE APPLICANT Funding Request Up to \$80,000 per year
<input type="checkbox"/> State Opioid Response	Funding amount requested: Click or tap here to enter text.	Funding amount requested: Click or tap here to enter text.
<input type="checkbox"/> Dedicated Marijuana Account	Funding amount requested: Click or tap here to enter text.	Funding amount requested: Click or tap here to enter text.
<input type="checkbox"/> Mental Health Promotion Project	Funding amount requested: Click or tap here to enter text.	Funding amount requested: Click or tap here to enter text.
Total amount of funding requested	Click or tap here to enter text.	Click or tap here to enter text.

12. Are you collaborating with a Community Coalition?

- Yes No (Skip to #13)
- a. If yes, how is this Coalition funded? (i.e., HCA/DBHR CPWI, Drug Free Communities)
 - b. If yes, please identify the Community Coalition contact person and email address.
 - c. If yes, we suggest including a letter of support from the Community Coalition(s) as listed in Exhibit J.

13. In a separate document describe in detail the following:
- How you meet the Minimum Qualifications listed in Section 1.3; and
 - The legal status and year the entity was organized, see subsection 3.1.1;
 - The location from which you will operate, see subsection 3.1.2;
 - Identify any state employees or former state employees you currently employ, see subsection 3.1.3; and
 - Identify any information you wish to claim as proprietary, see subsection 3.1.4.

Please refer to Section 3.1 for additional requirement details.

14. **Is your application complete?** Please check box indicating that your application includes the following:

- Application Face Page (Exhibit A)
- Signed Certifications and Assurances (Exhibit B)
- Diverse Business Inclusion Plan (Exhibit C)
- Contractor Certification Executive Order 18-03 (Exhibit D)
- Applicant Intake Form (Exhibit E)
- FFATA Form (Exhibit F)
- Funding Source Packet(s) (Exhibit(s) G)
 - Funding Source Program Selection Form
 - Project Narrative
 - Action Plan
 - Budget (Exhibit(s) H)
- Letters of Support

The individual with Contractor signature authority, as indicated on the Applicant Intake Form, is aware of this application and supportive of its submission. **Please copy this individual in the email when submitting the application materials.**

On behalf of the Applicant submitting this Application, my name below attests to the accuracy of the above and attached statements and by signing below I certify that, on behalf of the Applicant agency, I am authorized to submit this application to provide the described services.

SIGNATURE	NAME AND TITLE	DATE

CERTIFICATIONS AND ASSURANCES

I/we make the following certifications and assurances as a required element of the Application to which it is attached, understanding that the truthfulness of the facts affirmed here and the continuing compliance with these requirements are conditions precedent to the award or continuation of the related contract:

1. I/we declare that all answers and statements made in the Application are true and correct.
2. The prices and/or cost data have been determined independently, without consultation, communication, or agreement with others for the purpose of restricting competition. However, I/we may freely join with other persons or organizations for the purpose of presenting a single Application.
3. The attached Application is a firm offer for a period of 120 days following receipt, and it may be accepted by HCA without furtherfurthr negotiation (except where obviously required by lack of certainty in key terms) at any time within the 120-day period.
4. In preparing this Application, I/we have not been assisted by any current or former employee of the state of Washington whose duties relate (or did relate) to this Application or prospective contract, and who was assisting in other than his or her official, public capacity. If there are exceptions to these assurances, I/we have described them in full detail on a separate page attached to this document.
5. I/we understand that HCA will not reimburse me/us for any costs incurred in the preparation of this Application. All Applications become the property of HCA, and I/we claim no proprietary right to the ideas, writings, items, or samples, unless so stated in this Application.
6. Unless otherwise required by law, the prices and/or cost data which have been submitted have not been knowingly disclosed by the Applicant and will not knowingly be disclosed by him/her prior to opening, directly or indirectly, to any other Applicant or to any competitor.
7. I/we agree that submission of the attached Application constitutes acceptance of the solicitation contents and the attached sample contract and general terms and conditions. If there are any exceptions to these terms, I/we have described those exceptions in detail on a page attached to this document.
8. No attempt has been made or will be made by the Applicant to induce any other person or firm to submit or not to submit a Application for the purpose of restricting competition.
9. I/we grant HCA the right to contact references and other, who may have pertinent information regarding the ability of the Applicant and the lead staff person to perform the services contemplated by this RFA.
10. If any staff member(s) who will perform work on this contract has retired from the State of Washington under the provisions of the 2008 Early Retirement Factors legislation, his/her name(s) is noted on a separately attached page.

On behalf of the Applicant submitting this Application, my name below attests to the accuracy of the above statement. We are submitting a scanned signature of this form with our Application.

Signature of Applicant

Title

Date

DIVERSE BUSINESS INCLUSION PLAN

The information provided in Exhibit C is used by HCA to track the amount and types of contracted and subcontracted work with small businesses, minority-owned businesses, and women-owned businesses. HCA requires this Exhibit C for accurate and complete data collecting and reporting purposes.

- Do you anticipate using, or is your firm, a State Certified Minority Business? Y/N
- Do you anticipate using, or is your firm, a State Certified Women’s Business? Y/N
- Do you anticipate using, or is your firm, a State Certified Veteran Business? Y/N
- Do you anticipate using, or is your firm, a Washington State Small Business? Y/N

If you answered No to all of the questions above, please explain:

Please list the approximate percentage of work to be accomplished by each group:

- Minority ___%
- Women ___%
- Veteran ___%
- Small Business ___%

Please identify the person in your organization to manage your Diverse Inclusion Plan responsibility.

Name: _____

Phone: _____

E-Mail: _____

CONTRACTOR CERTIFICATION EXECUTIVE ORDER 18-03

WORKERS' RIGHTS - WASHINGTON STATE GOODS & SERVICES CONTRACTS

Pursuant to the Washington State Governor's Executive Order 18-03 (dated June 12, 2018), the Washington State Health Care Authority is seeking to contract with qualified entities and business owners who certify that their employees are not, as a condition of employment, subject to mandatory individual arbitration clauses and class or collective action waivers.

**SOLICITATION: Prevention Community-Based Enhancement Grants
RFP #: 3882**

I hereby certify, on behalf of the firm identified below, as follows (check one):

No Mandatory Individual Arbitration Clauses and Class or Collective Action Waivers for Employees.
This firm does NOT require its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers.

OR

Mandatory Individual Arbitration Clauses and Class or Collective Action Waivers for Employees.
This firm requires its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers.

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the certifications herein are true and correct and that I am authorized to make these certifications on behalf of the firm listed herein.

FIRM NAME: _____
Name of Contractor/Bidder – Print full legal entity name of firm

By: _____
Signature of authorized person

Print Name of person making certifications for firm

Title: _____
Title of person signing certificate

Place: _____
Print city and state where signed

Date: _____

APPLICANT INTAKE FORM

1. IDENTIFYING INFORMATION

A) Applicant Legal Name:		B) DBA or Facility Name:	
C) WA Uniform Business Identifier (UBI) Number:		D) Taxpayer Identification Number (TIN):	
E)*If the Applicant does not have a UBI number, the Applicant must confirm, that it will become licensed in Washington within 30 calendar days of being selected as the Apparent Successful Applicant. By signing below the Applicant indicates their agreement to section 1, <i>Identifying information</i> , subsection E of this form.			
AUTHORIZED SIGNATURE		NAME - TITLE	DATE

2 – APPLICANT ADDRESS

A) Number, Street, Apartment/Suite:	
B) City, State, Zip Code+4: , -	
C) Email Address:	D) Phone Number: () -

3 – APPLICANT PRIMARY CONTACT

A) Full Name:	B) Job Title:
C) Email Address:	D) Phone Number: () -
Authorized to Sign Contracts? <input type="checkbox"/> Yes <input type="checkbox"/> No - If 'No' selected – Section Four (4) is REQUIRED	

4 – APPLICANT PRIMARY SIGNATORY

A) Full Name:	B) Job Title:
C) Email Address:	D) Phone Number: () -

5 – ADDITIONAL APPLICANT STAFF TO BE NOTIFIED

A) Full Name:	B) Email Address:
C) Full Name:	D) Email Address:

Federal Funding Accountability and Transparency Act (FFATA) Data Collection Form

This Contract is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how federal funds are spent.

To comply with the act and be eligible to enter into this Contract, your organization must have a Data Universal Numbering System (DUNS®) number. A DUNS® number provides a method to verify data about your organization. If you do not already have one, you may receive a DUNS® number free of charge by contacting Dun and Bradstreet at www.dnb.com.

Required Information about your organization and this Contract will be made available on USASpending.gov by the Washington State Health Care Authority (HCA) as required by P.L. 109-282. As a tool to provide the information, HCA encourages registration with the Central Contractor Registry (CCR) because less data entry and re-entry is required by both HCA and your organization. You may register with CCR on-line at <https://www.uscontractorregistration.com/>.

Contractor must complete this form and return it to the Health Care Authority (HCA).

CONTRACTOR

1. Legal Name	2. DUNS Number												
3. Principle Place of Performance													
3a. City	3b. State												
3c. Zip+4	3d. Country												
4. Are you registered in CCR (https://www.uscontractorregistration.com/)? <input type="checkbox"/> YES (skip to page 2. Sign, date and return) <input type="checkbox"/> NO													
5. In the preceding fiscal year did your organization:													
a. Receive 80% or more of annual gross revenue from federal contracts, subcontracts, grants, loans, subgrants, and/or cooperative agreements; and													
b. \$25,000,000 or more in annual gross revenues from federal contracts, subcontracts, grants, loans, subgrants, and/or cooperative agreements; and													
c. The public does not have access to information about the compensation of the executives through periodic reports filled with the IRS or the Security and Exchange Commission per 2 CFR Part 170.330													
<input type="checkbox"/> NO (skip the remainder of this section - Sign, date and return)													
<input type="checkbox"/> YES (You must report the names and total compensation of the top 5 highly compensated officials of your organization).													
<table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: #e0e0e0;"> <th style="width: 70%;">Name Of Official</th> <th style="width: 30%;">Total Compensation</th> </tr> </thead> <tbody> <tr><td>1.</td><td></td></tr> <tr><td>2.</td><td></td></tr> <tr><td>3.</td><td></td></tr> <tr><td>4.</td><td></td></tr> <tr><td>5.</td><td></td></tr> </tbody> </table>		Name Of Official	Total Compensation	1.		2.		3.		4.		5.	
Name Of Official	Total Compensation												
1.													
2.													
3.													
4.													
5.													
<p>Note: "Total compensation" means the cash and noncash dollar value earned by the executive during the sub-recipient's past fiscal year of the following (for more information see 17 CFR 229.402 (c)(2)).</p>													

By signing this document, the Contractor Authorized Representative attests to the information.

Signature of Contractor Authorized Representative	Date
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HCA will not endorse the Contractor's subaward until this form is completed and returned.

FOR HEALTH CARE AUTHORITY USE ONLY

HCA Contract Number: _____
Sub-award Project Description (see instructions and examples below)

Instructions for Sub-award Project Description:

In the first line of the description provide a title for the sub-award that captures the main purpose of the Subrecipients work. Then, indicate the name of the Subrecipient and provide a brief description that captures the overall purpose of the sub-award, how the funds will be used, and what will be accomplished.

Example of a Sub-award Project Description:

Increase Healthy Behaviors: Educational Services District XYZ will provide training and technical assistance to chemical dependency centers to assist the centers to integrate tobacco use into their existing addiction treatment programs. Funds will also be used to assist centers in creating tobacco free treatment environments.

POSTED SEPARATELY

DEDICATED MARIJUANA ACCOUNT PACKET

POSTED SEPARATELY

MENTAL HEALTH PROMOTION PROJECTS PACKET

POSTED SEPARATELY

STATE OPIOID RESPONSE BUDGET

POSTED SEPARATELY

DEDICATED MARIJUANA ACCOUNT BUDGET

POSTED SEPARATELY

MENTAL HEALTH PROMOTION PROJECTS BUDGET

POSTED SEPARATELY

HIGH-NEEDS COMMUNITIES LISTS**SOR Projects High-Need Community List**

District/High School Service Area Name(s)	County	ESD
Lind	Adams	101
Finley	Benton	123
Port Angeles	Clallam	114
Vancouver: Columbia River HS	Clark	112
Kelso	Cowlitz	112
Bridgeport	Douglas	171
Soap Lake	Grant	171
Oakville Ocosta	Grays Harbor	113
South Kitsap	Kitsap	114
White Salmon	Klickitat	112
Mossyrock	Lewis	113
Okanogan Tonasket	Okanogan	171
Fife Tacoma: Lincoln HS Tacoma: Mount Tahoma HS Tacoma: Stadium HS	Pierce	121
Burlington-Edison	Skagit	189
Lakewood Sultan	Snohomish	189
Medical Lake Riverside West Valley (Spokane)	Spokane	101
Colville	Stevens	101
Rainier Rochester Yelm	Thurston	113
Grandview Granger Selah West Valley	Yakima	105

DMA Projects High-Need Community List

District/High School Service Area Name(s)	County	ESD
Lind	Adams	101
Finley	Benton	123
Port Angeles	Clallam	114
Vancouver: Columbia River HS	Clark	112
Bridgeport	Douglas	171
Soap Lake	Grant	171
North Beach Ocosta Oakville	Grays Harbor	113
Quilcene	Jefferson	114
South Kitsap	Kitsap	114
White Pass	Lewis	113
Orting Tacoma: Mount Tahoma HS	Pierce	121
Granite Falls Sultan	Snohomish	189
Riverside West Valley (Spokane)	Spokane	101
Colville	Stevens	101
Rochester Yelm	Thurston	113
Waitsburg	Walla Walla	123
Grandview Granger Mabton	Yakima	105

MHPP Projects High-Need Community List

District/High School Service Area Name(s)	County	ESD
Finley	Benton	123
Manson	Chelan	171
Port Angeles	Clallam	114
Soap Lake	Grant	171
Elma North Beach Oakville Ocosta	Grays Harbor	113
South Kitsap	Kitsap	114
Napavine White Pass	Lewis	113
Odessa	Lincoln	101
Okanogan	Okanogan	171
Tacoma: Mount Tahoma HS	Pierce	121
Lakewood Sultan	Snohomish	189
Medical Lake Riverside West Valley (Spokane)	Spokane	101
Rainier Rochester Yelm	Thurston	113
Grandview Granger	Yakima	105

EXISTING HCA/DBHR
COMMUNITY PREVENTION AND WELLNESS INITIATIVE (CPWI) COALITIONS

CPWI Coalition Community or High School Service Area (HSSA)	County	CPWI Coalition Community or High School Service Area (HSSA)	County
Othello	Adams	Chimacum Port Townsend	Jefferson
Clarkston	Asotin	Auburn Central Seattle Highline SE Seattle Vashon Island West Seattle	King
Benton City Kennewick Pasco SD	Benton	Bremerton North Kitsap	Kitsap
Wenatchee	Chelan	Cle-Elum-Roslyn Ellensburg School District	Kittitas
Crescent / Joyce Forks	Clallam	Klickitat/Lyle Goldendale	Klickitat
Castle Rock Washougal West Vancouver / Discovery	Clark	Centralia Morton	Lewis
Dayton	Columbia	Reardon	Lincoln
Castle Rock Longview	Cowlitz	Longview	Longview
Waterville	Douglas	North Mason Shelton	Mason
Republic	Ferry	Omak	Okanogan
Prosser	Franklin	Long Beach - WellSpring South Bend	Pacific
Pomeroy	Garfield	Cusick Newport Selkirk	Pend Oreille
Moses Lake Quincy Wahluke SD	Grant	Bethel School District City of Lakewood Franklin Pierce School District	Pierce
Aberdeen Hoquiam	Grays Harbor	San Juan SD	San Juan
Oak Harbor South Whidbey School District	Island	Tenino Tumwater	Thurston
Concrete Mt. Vernon Sedro Woolley	Skagit	Cathlamet	Wahkiakum
Skamania	Skamania	Walla Walla	Walla Walla
Darrington Marysville School District Monroe School District	Snohomish	Ferndale Mt Baker Shuksan - Bellingham	Whatcom
Cheney East Valley Rogers HS Shadle Park West Central	Spokane	Tekoa SD	Whitman

Springdale Wellpinit	Stevens	Highland Mt Adams School District/White Swan Sunnyside School District Wapato School District Yakima SD - Safe Yakima	Yakima
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