REQUEST FOR APPLICATIONS
The NC Perinatal Substance Use Prevalence Study

RFA Posted	April 1, 2022		
Questions Due	April 7, 2022 @ 5:00pm EST		
Applications Due	May 6, 2022 @ 5:00pm EST		
Anticipated Notice of Award	May 30, 2022		
Anticipated Performance Period	July 1, 2022 – March 14, 2023		
Service	NC Perinatal Substance Use Prevalence Study		
Issuing Agency	NC Department of Health and Human Services Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (DMH/DD/SAS)		
E-mail Applications and Questions to	DMH Contracts Team	Email	RFA.responses@dhhs.nc.gov

THIS REQUEST FOR APPLICATIONS (RFA) advertises the Division's need for the services described herein and solicits applications offering to provide those services pursuant to the specifications, terms and conditions specified herein. All applications received shall be treated as offers to contract. If the Division decides to accept an application, an authorized representative of the Division will sign in the space provided below. Acceptance shall create a contract that is effective as specified below.

THE UNDERSIGNED HEREBY SUBMITS THE FOLLOWING APPLICATION AND CERTIFIES THAT: (1) he or she is authorized to bind the named Contractor to the terms of this RFA and Application; (2) the Contractor hereby offers and agrees to provide services in the manner and at the costs described in this RFA and Application; (3) this Application shall be valid for 60 days after the end of the application period in which it is submitted.

To Be Completed By Contractor:

Contractor Name:	Catchment Area # (see p.5):
Contractor's Street Address:	E-Mail Address:
City, State & Street Address Zip:	Telephone Number:
Name & Title of Authorized Representative:	DUNS Number:
Signature of Authorized Representative:	Date:

Unsigned or Incomplete Applications Shall Be Returned Without Being Reviewed

NOTICE OF AWARD/FOR NC DHHS USE ONLY: Application accepted and Contract # _____ awarded on _____. The Contract shall begin on _____ and shall terminate on _____.

By:_____
Signature of Authorized Representative Printed Name of Authorized Representative Title of Authorized Representative

Unsigned or Incomplete Applications Shall Be Returned Without Being Reviewed

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1.0 OVERVIEW

NCDHHS' 2021-2023 Strategic Plan[1] intends to further advance the mission to improve the health, safety, and well-being of all North Carolinians through seven goals. Of specific relevance to this RFA is "(Goal 4) Turn the tide on North Carolina's opioid and substance use crisis" and "(Goal 5) Improve child and family well-being so all children have the opportunity to develop to their full potential and thrive". NCDHHS DMH/DD/SAS intends to establish the current prevalence rate of substance use during pregnancy in order to effectively address the prevention, treatment and recovery needs of women and families in North Carolina.

1.1 PURPOSE

The overarching goal of this prevalence study is to enhance outcomes of women, children and families affected by maternal substance use by determining the nature of the problem, service gaps, and extent of need.

The primary purpose of this RFA is to identify an institution or agency that has the expertise and capacity to develop and implement this study, within completion requirements.

The applicant agency awarded the RFA will be able to obtain Institutional Review Board approval within their institution or in cooperation with such institution, and develop relationships across the state with prenatal care providers with patient populations representative of:

- Rural and urban populations
- Ethnically and racially diverse populations
- Current Local Management Entity/Managed Care Organization (LME/MCO) catchment areas
- Status of insurance to include privately, publicly or not insured for prenatal care

The successful applicant will have the ability to utilize the resources available to have a sample size large enough that when disaggregated, informative conclusions can be determined.

Grant funds will be used for personnel, toxicology testing, data collection, analysis and incentives for participants.

1.2 BACKGROUND

In 1994, a North Carolina study was commissioned to determine the need of treatment for women who are pregnant and using substances. That study, by Dr. Ira Chasnoff, included information on service needs, the demographics of pregnant women in SUD treatment and prevalence of use during pregnancy.

In the 30 years or so since then, SAMHSA demonstration projects have grown into a set of initiatives, tailored to the treatment needs of pregnant and parenting women across North Carolina, and have served thousands of families. These programs are now located in 13 counties, serving the entire state.

Overall, the programs, while primarily providing treatment to mothers, also demonstrated that they were meeting the child health requirements of the SAPTBG through:

- Reduction in alcohol and other substance use;
- High engagement in prenatal care among pregnant women;
- Healthy newborn birth weights for pregnant women who enter treatment prior to delivery;
- Lower recidivism with child welfare among families enrolled in treatment services;

[1] https://www.ncdhhs.gov/media/13331/download?attachment

- Fewer number of days in out-of-home foster care placement for children of parents involved with child welfare as compared to parents with substance use problems not engaged in the services;
- Successful engagement with pediatric care for families involved with services.

These programs have been successful in collaborating with state and local child welfare and public health agencies, in addition to other human services agencies, to meet the needs of these families. Crucial opportunities exist within health and human services systems to better serve this population which interacts with and is impacted by child welfare, health, justice, and treatment systems/settings/professionals.

While much progress has been made since the initial study was completed, we continue to work towards having a more accurate understanding of the scope of the problem of substance use in pregnancy in order to measure statewide intervention efforts. This study will contribute to this gap in knowledge of this vulnerable population.

National data from 2019 on substance use in pregnancy from the National Survey on Drug Use and Health (NSDUH), found that in the past month, self-reported use of alcohol (9.5%), tobacco (9.6%) and illicit substances (5.8%) occurred in the general population of women who were pregnant. While we do not yet have current information for North Carolina that corresponds to this national data, we do have some indicators that contribute to a picture of the impact. [2]

The Pregnancy Risk Assessment Monitoring System or PRAMS survey is an ongoing, population-based surveillance system sponsored by the Centers for Disease Control and Prevention (CDC) in conjunction with the NCDHHS. It is comprised of nationally standardized core questions that monitor maternal and infant health related issues. Included in the core survey are questions related to nicotine use prior to and during pregnancy. Two questions on the survey are related to alcohol consumption including “During the last 3 months of your pregnancy, how many alcoholic drinks did you have in an average week? ”. Eight percent of the respondents agreed that they had consumed alcohol in the last 3 months of pregnancy, in a context where there is no known safe amount or time in pregnancy to consume alcohol due to the teratogenic impact on developing fetuses. There are no other questions regarding other substance use around pregnancy.[3]

Neonatal Abstinence Syndrome (NAS) or Neonatal Opioid Withdrawal Syndrome (NOWS) is generally accepted as an indicator of opioid use in pregnancy, though it is inclusive of women in recovery with medication for an opioid use disorder (MOUD) as part of their treatment. In North Carolina, in 2018 there were 10.1 cases of NAS/NOWS per 1,000 hospital births, compared to 6.8 cases per 1,000 hospital births nationally.[4]

The 2019 Annual Progress and Services Report (APSR) for the North Carolina Child and Family Services Plan, that NCDHSS, Division of Social Services (DSS) develops annually, identified infants who were “substance-affected” as being at the highest risk for parental maltreatment. In that year, 4,631 infants were identified as meeting criteria of ‘substance affected’. [5,6]

In state fiscal year 2021, according to the NCDHSS Consumer Data Warehouse (CDW), 19,894 women of child-bearing age received publicly funded treatment in North Carolina, for a primary SUD. Of those women, 838 women or 4%, were pregnant at some point in their treatment episode.

The American College of Obstetrics and Gynecologists recommends universal verbal screening of all women seeking prenatal care to identify women consuming substances while pregnant, in order to provide an

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[2] National Survey on Drug Use and Health, 2019

[3] 2019 North Carolina Pregnancy Risk Assessment Monitoring System Survey Results, Alcohol Use. NC Center for State Health Statistics. NCDHHS. https://schs.dph.ncdhhs.gov/data/prams/2019/DRK83L_A.html. Accessed 3.16.22

[4] Healthcare Cost and Utilization Project, Fast Stats - Neonatal Abstinence Syndrome (NAS) Among Newborn Hospitalizations. Agency for Healthcare Research and Quality. https://www.hcup-us.ahrq.gov/. Accessed 3/14/22

[5] 2021 Annual Progress and Services Report for the North Carolina Child and Family Services Plan 2020-2024, NC DHHS, Division of Social Services Child Welfare Services. https://www.ncdhhs.gov/m[5]edia/10939/download .Accessed 3/15/22

[6] NC DHHS Infant Plan of Safe Care, Place of Delivery.https://www.ncdhhs.gov/divisions/mental-health-developmental-disabilities-and-substance-abuse/infant-plan-safe-care/place-delivery. Accessed 3/15/22

opportunity to educate, and if warranted connect to services to support her in ceasing use. Publicly insured women in North Carolina are required to be asked standardized questions about their relationship with substances, however, this is not true of women who are privately insured. Of the positive responses, we do not know what percentage of the 'expected population that is using substances' this represents. Due to a variety of barriers we continue to face a nationwide challenge in prenatal care providers addressing the health issue of substance use through universal screening, and connecting them to appropriate services[7]

In collaboration with our partners, NCDHHS provides essential services to improve the health, safety, and well-being of all North Carolinians by advancing innovative solutions that foster independence, improve health, and promote well-being in collaboration with a wide array of partners and stakeholders. Much of this work involves managing the provision of services to North Carolina's most vulnerable populations, including women, children, and families.

With more accurate data on prevalence of use in pregnancy, each of the NCDHHS Divisions will be able to impact policy and target services, funding, and support for women and families. This will include information that can positively impact policy and practice to more effectively screen women of child-bearing age for substance use, including women who are pregnant. Data can support the delivery of trauma informed outreach, early identification, intervention strategies and evidence based treatment to areas most in need. Lastly, data will allow for an ability to more accurately assess outcomes of ongoing and new policies and strategies.

2.0 ELIGIBILITY

Applicant agencies should:

- Be an established research organization with experience working with health care providers in North Carolina
- Have experience in community based research
- Have experience in data analytics and sampling
- Have an internal Institutional Review Board or access to an Institutional Review Board
- Have established process for internal quality review of their analysis
- Have a Lead Principal Investigator that must be in good standing under a licensing or certification board

Applicants must be non-profit.

An applicant agency will have documented experience with managing state or federal grant funds.

Applicants must demonstrate that they are able to provide the study specifications and standards set forth in this RFA. Award recipients must meet all applicable DMH/DD/SAS regulations and policies, and conditions and requirements for the SAPTBG grant.

3.0 AWARD INFORMATION

The maximum award for this RFA is $300,000 for one entity, for the period of July 1, 2022 through March 14, 2023. Funds are contingent upon availability.

Awards will be made based on a thorough review of all submitted complete applications and will be allocated and monitored through DMH/DD/SAS. **Administrative costs should not exceed 10% and must be clearly defined. Cost sharing or matching is not required.**

3.1 SOURCE OF FUNDS AND PASS-THROUGH REQUIREMENTS

Federal Award Identification Number: 1B08TI083540-01

Federal Award Date: March 11, 2021

[7] Wright,T. et al. The role of screening, brief intervention and referral to treatment in the perinatal period. American Journal of Obstetrics and Gynecology. 2016

Subaward Period of Performance: July 1, 2022 – March 14, 2023

Amount of Federal Funds Obligated by this Action: $300,000

Total Amount of Federal Funds Obligated to the Subrecipient: $300,000

Total Amount of the Federal Award: $42,171,280

Federal Award Project Description: "The SAPTBG program allows states and territories to plan, implement and evaluate activities to prevent, treat and help more people recover from substance use disorder. This funding will also allow recipients to make investments in existing prevention, treatment and recovery infrastructure, promote support for providers and address unique local needs to deliver substance use disorder services."[8]

Federal Awarding Agency: SAMHSA

DUNS #: 8097853630000

CFDA Number: 93.959

CFDA Name: Substance Abuse Prevention and Treatment Block Grant, Coronavirus Response and Relief Supplement Appropriations Act, 2021

3.2 FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA)

As a subrecipient of federal funds, each selected grant recipient will be required to provide certain information required by the Federal Funding Accountability and Transparency Act (FFATA), including the organization's DUNS number. Please see https://fedgov.dnb.com/webform for free registration. Additional information about FFATA is available at https://www.fsrs.gov/.

4.0 DEFINITIONS, ACRONYMS AND ABBREVIATIONS

APSR: Annual Progress and Services Report
CDW: Client Data Warehouse
DHHS: Department of Health and Human Services
DMH/DD/SAS: Division of Mental Health, Developmental Disabilities and Substance Abuse Services
EHR: Electronic Health Record
FSR: Financial Status Report
IRB: Institutional Review Board
PRAMS: Pregnancy Risk Management
SUD: Substance use disorder

5.0 SCOPE OF WORK

5.1 Programmatic requirements

Successful applicants for these funds will have the following expectations:

- Develop a community based research study for the purpose of determining prevalence of substance use in a population representative of the general population of pregnant people in North Carolina.
- Implement the study developed, including site recruitment and data gathering, in partnership with statewide agencies and prenatal healthcare providers.

[8] https://www.samhsa.gov/newsroom/press-announcements/202105181200

- Provide a formal final report of findings along with ad hoc data reports requested by NCDHHS utilizing data collected through the study.

- Comply with reporting requirements outlined in section 5.4 of this RFA

5.2 Identified Population

Pregnant people who are consuming alcohol, tobacco and/or illicit substances. This population will be representative of the demographics, population density, and LME/MCO catchment areas of North Carolina. The pregnant population's insurance status will be representative of the following:

- Medicaid
- 3rd party payers
- Uninsured

The following racial and ethnic categories will be used, consistent with Federal SAMHSA data collection categories: African American, Caucasian, American Indian/Native American, Asian, Pacific Islander, Alaska Native, Multi-Racial, and Other.

Information shall be collected related to other health conditions including co-occurring mental disorders. Information regarding employment status, housing status, criminal justice involvement shall also be included.

Information will be provided on the following substances taken during pregnancy: opioids including prescription opioid analgesic compounds, benzodiazepines, barbiturates, cocaine, marijuana, methadone (and its metabolites), buprenorphine, amphetamines, nicotine, and alcohol and any other emerging substance.

The successful applicant will have the ability and capacity to collect and evaluate a large data set in collaboration with community health care providers.

5.3 PERFORMANCE STANDARDS AND EXPECTATIONS

Applicants shall comply with all federal and state requirements for subawards. The North Carolina State Budget Manual outlines parameters for allowable and unallowable costs at the state level, and the code of federal regulations, title 2, part 200 outlines requirements and restrictions for sub awardees receiving federal awards. Sub awardees must comply with all uniform guidance related to the SAPTBG COVID-19 Supplement funding, CFDA: 93.959.

5.4 REPORTING REQUIREMENTS

Successful applicants must create a mid-study report and a final report approved by DMH/DD/SAS, ready for dissemination by the conclusion of the funding, March 14, 2023.

The mid-study report will include:

- Status of staff in place
- Status of site recruitment
- Status of data gathering
- Sample size to date
- Sample characteristics (insurance status, race/ethnicity, age, location) to date
- Report of preliminary key findings

The final report will include:

- Summary of Methods, Data Collection approach, Data Analytic Techniques, Discussion, Key Findings and Key Recommendations

- Sample characteristics (insurance status, race/ethnicity, age, location)
- Co-occurring health conditions
- Descriptive characteristics of population and stratification based on employment, housing, criminal justice status and any other relevant stratification
- Substances used and rates of use
- Rates and types of use stratified by sample characteristics
- Up to 5 short reports (less than 3 pages) utilizing data collected from study. (NCDHHS will work with awardee to determine topic of these reports)

5.5 QUALIFICATIONS AND CAPACITY

Sub awardees must have internal controls in place and use generally accepted accounting principles (GAAP). Successful applicants will show no more than two audit findings in their most recent audit. Successful applicants will have a proven track record of collaboration with community partners to conduct community based health research.

6.0 PERFORMANCE OVERSIGHT

DMH/DD/SAS assumes responsibility for monitoring the performance of the selected applicant and the outcome of this project.

7.0 TERM OF AWARD, OPTIONS TO EXTEND

The performance period for this project begins July 1, 2022 and ends March 14, 2023. At this time, there is no indication that funds will be available beyond March 14, 2023. Any extension will be contingent upon successful implementation of strategies and deliverables as defined by DMH/DD/SAS, as evidenced by the selection of an awardee, and contingent upon award of such funds by the federal grantor.

8.0 BUDGET

Funds for the NC Perinatal Substance Use Prevalence Study will be awarded to the Agency/Institution that achieves the highest score on the evaluation criteria below (see Section 13).

The line-item budget shall constitute the total cost to DMH/DD/SAS for the complete performance in accordance with the requirements and specifications herein, including all applicable expenses such as administrative cost. The applicant shall not invoice for any amounts not specifically allowed for in the line-item budget of this RFA.

The total budget is inclusive of the following services:

- Administration and review of data collection and analysis
- Staff recruitment and retention
- Personnel to carry out community, administrative and data analytics activities
- Subcontracts in place for urine toxicology screens with a Clinical Laboratory Improvement Amendments (CLIA) certification.
- Urine toxicology panels inclusive of opioids including prescription opioid analgesic compounds, benzodiazepines, barbiturates, cocaine, marijuana, methadone (and its metabolites), buprenorphine, amphetamines, nicotine, and alcohol.
- Travel related to data gathering and other study related travel.
- Administrative costs may not exceed 10% (these costs must be clearly defined)

Applicants should note in their budget the estimated number of individual study participants.

9.0 REIMBURSEMENT

Upon award, a contract will be executed between NCDHHS and the awardee. Funds assoicated with this RFA will be provided to the successful applicant on a reimbursement basis. The successful applicant will be required to submit a Financial Status Report (FSR) by the 10th of each month, detailing expediture during the reporting period. The FSR will be reviewed by the contract administrator against the approved budget. The FSR will then be processed for reimbursement.

10.0 THE SOLICITATION PROCESS

The following is a general description of the process by which agencies or organizations will be selected to complete the goal or objective.

1) Written questions concerning the RFA specifications will be received until the date specified on the cover sheet of this RFA. A summary of all questions and answers will be posted on the RFA website.
2) Applications will be received from each agency or organization. The application must be signed and dated by an official authorized to bind the agency or organization.
3) All applications must be received by the funding agency not later than the date and time specified on the cover sheet of the RFA. Faxed applications will not be accepted.
4) Applications from each responding agency and organization will be logged in at the date and time received.
5) At their option, the evaluators may request additional information from any or all applicants for the purpose of clarification or to amplify the materials presented in any part of the application. However, agencies and organizations are cautioned that the evaluators are not required to request clarification; therefore, all applications should be complete and reflect the most favorable terms available from the agency or organization.
6) Applications will be evaluated according to completeness, content, experience with similar projects, ability of the agency's or organization's staff, cost, etc. The award of a grant to one agency and organization does not mean that the other applications lacked merit, but that, all facts considered, the selected application was deemed to provide the best service to the North Carolina residents.
7) Agencies and organizations are cautioned that this is an RFA, and the funding agency reserves the unqualified right to reject any and all applications when such rejections are deemed to be in the best interest of the funding agency.

11.0 GENERAL INFORMATION ON SUBMITTING APPLICATIONS

1) Award or Rejection
   All qualified applications will be evaluated and awarded to the agency or organization whose capabilities are deemed to be in the best interest of the funding agency. The funding agency reserves the unqualified right to reject any or all offers if determined to be in its best interest.

   Successful applicants will be notified no later than June 15, 2022.
2) Cost of Application Preparation
   Any cost incurred by an agency or organization in preparing or submitting an application is the agency or organization’s sole responsibility; the funding agency will not reimburse any agency or organization for any pre-award costs incurred.
3) Elaborate Applications
   Elaborate applications in the form of brochures or other presentations beyond that necessary to

present a complete and effective application are not desired.

4) Oral Explanations
The funding agency will not be bound by oral explanations or instructions given at any time during the competitive process or after awarding the grant.

5) Reference to Other Data
Only information that is received in response to this RFA will be evaluated; reference to information previously submitted will not suffice.

6) Titles
Titles and headings in this RFA and any subsequent RFA are for convenience only and shall have no binding force or effect.

7) Form of Application
Each application must be submitted on the form provided by the funding agency.

8) Exceptions
All applications are subject to the terms and conditions outlined herein. All responses will be controlled by such terms and conditions. The attachment of other terms and condition by any agency and organization may be grounds for rejection of that agency or organization's application.

9) Advertising
In submitting its application, agencies and organizations agree not to use the results therefrom or as part of any news release or commercial advertising without prior written approval of the funding agency.

10) Right to Submitted Material
All responses, inquiries, or correspondence relating to or in reference to the RFA, and all other reports, charts, displays, schedules, exhibits, and other documentation submitted by the agency or organization will become the property of the funding agency when received.

11) Competitive Offer
Pursuant to the provision of G.S. 143-54, and under penalty of perjury, the signer of any application submitted in response to this RFA thereby certifies that this application has not been arrived at collusively or otherwise in violation of either Federal or North Carolina antitrust laws.

12) Agency and Organization's Representative
Each agency or organization shall submit with its application the name, address, and telephone number of the person(s) with authority to bind the agency or organization and answer questions or provide clarification concerning the application.

13) Subcontracting
Agencies and organizations may propose to subcontract portions of work, provided that their applications clearly indicate the scope of the work to be subcontracted, and to whom. All information required about the prime grantee is also required for each proposed subcontractor.

14) Proprietary Information
Trade secrets or similar proprietary data which the agency or organization does not wish disclosed to other than personnel involved in the evaluation will be kept confidential to the extent permitted by NCAC TO1: 05B.1501 and G.S. 132-1.3 if identified as follows: Each page shall be identified in boldface at the top and bottom as "CONFIDENTIAL." Any section of the application that is to remain confidential shall also be so marked in boldface on the title page of that section.

15) Participation Encouraged
Pursuant to Article 3 and 3C, Chapter 143 of the North Carolina General Statutes and Executive Order No. 77, the funding agency invites and encourages participation in this RFA by businesses owned by minorities, women and the disabled including utilization as subcontractor(s) to perform functions under this Request for Applications.

16) Federal Certifications
    i) Agencies or organizations receiving Federal funds will be required to execute Federal Certifications regarding Non-discrimination, Drug-Free Workplace, Environmental Tobacco Smoke, Debarment, Lobbying, and Lobbying Activities. Federal Certifications should NOT be signed or returned with the application.

12.0 APPLICATION CONTENT AND INSTRUCTIONS

This section includes what the applicant organization is required to provide DMH/DD/SAS with its application response. The applicant must clearly demonstrate (describe) in its proposal response how the applicant's organization will meet or address the programmatic requirements described in the scope of work section of the RFA. The applicant proposal shall include the following items in this specific order and clearly marked as such. Applications must be 10 pages or less, not including any attachments or appendices. See each section below for detailed information.

Whenever possible, use appendices to provide details, supplementary data, references, and information requiring in-depth analysis. These types of data, although supportive of the proposal, if included in the body of the design, could detract from its readability. Appendices provide the proposal reader with immediate access to details if clarification of an idea, sequence or conclusion is required. Timetables, work plans, schedules, activities, and methodologies, legal papers, personal vitae, letters of support, and endorsements are examples of appendices.

Applicants shall populate all attachments of this RFA that require the applicant to provide information and include an authorized signature where requested. Applicant RFA responses shall include the following items and those attachments should be arranged in the following order: Number each page consecutively. (Please provide the order of arrangement and content and page count if applicable).

A. Cover Page (at the beginning of this RFA) with all fields completed, signed by an authorized official of the applicant organization (not inclusive in the 10-page limit)

B. Face Page

1) The applicant's name, principal place of business and location(s) where project activities will take place.
2) The applicant's legal status as a non-profit or not-for-profit agency.

C. Proposal Summary (5 points)

The summary should be prepared after the application has been developed to encompass all the key points necessary to communicate the objectives of the project. It is the document that becomes the cornerstone of the proposal, and the initial impression it gives will be critical to the success of the venture. In many cases, the summary will be the first part of the proposal package seen by the agency and very possible could be the only part of the package that is carefully reviewed before the decision is made to consider the project any further.

D. Organization Background and Qualifications (5 points)

Describe the organization and its qualifications for funding including:

1) Mission and goal of the Organization.
2) A brief overview of the applicant's history.
3) Describe the applicant's experience with working with community health organizations including perinatal health (organizations past achievements and accomplishments and evidence of its impact).
4) Brief overview of all community based research provided by the applicant within the last three years, including (if applicable):

a) The beginning and ending dates of any contracts.
b) The services provided under those contracts.
c) The total number of applicant employees assigned to service each contract.
d) Whether any of those contracts were extended or renewed at the end of their initial terms.
e) Whether any of those contracts were terminated early for cause by either party to the contract.
f) The "lessons learned" from each of those contracts.

5) Qualifications/background on organization's Key Staff.
6) Provide evidence of partnerships with other relevant agencies.
7) The details of:
    a) Any criminal investigations pending against the applicant or any of their officers, directors, employees, agents, or subcontractors of which the applicants have knowledge or a statement that there are none.
    b) Any regulatory sanctions levied against any of the applicants or any of their officers, directors, employees, agents, or subcontractors by any state or federal regulatory agencies within the past three years of which the applicant s have knowledge or a statement that there are none. As used herein, the term "regulatory sanctions" includes the revocation or suspension of any license or certification, the levying of any monetary penalties or fines, and the issuance of any written warnings.
    c) Any regulatory investigations pending against of any of the applicants or any of their officers, directors, employees, agents, or subcontractors by any state or federal regulatory agencies of which the applicants have knowledge or a statement that there are none.
    Note: The Department may reject a proposal solely based on this information.
    d) Any of the applicant's directors, partners, proprietors, officers, or employees or any of the proposed project staff are related to any DHHS employees. If such relationships exist, identify the related individuals, describe their relationships, and identify their respective employers and positions.
    e) Assurance that the Applicant and the proposed Applicant staff are not excluded from participation by Medicaid or the Office of the Inspector General of the United States Department of Health and Human Services.
8) Other major donors and summary of dollar amounts of contribution(s).

E. Assessment of Need/s (Problem Statement) (15 points)

1) Establish what problem the study is addressing
2) Describe the demographic information of the population to be studied
3) Include statistical facts and figures (national, state and regional).
4) Describe how the study results may impact policy, outreach, services and outcomes.
5) Describe what your organization is and why your agency is interested in conducting this study, with this population.

F. Project Description and Narrative (40 points)

1) Describe your proposed project. This should include detail on the proposed study design, staffing and training to implement this study successfully. This should also include the goals, objectives, and anticipated outcomes of the study.

2) Provide the sampling design proposed to determine a sample reflective of North Carolina general population of pregnant women, inclusive of rural, urban, and the range of insurance status.

3) Provide information on what the sampling plan is, including selection sample sites, and recruitment of prenatal care sites.

4) Explain how you plan to engage the prenatal care provider sites for the proposed study.

5) Include timelines for project implementation with specific program objectives as they relate to performance measures and budget (e.g., hiring staff or contractors, sample design, sample site selection, engaging participants, etc.).

6) Describe the toxicologic process you plan to be utilized.

7) Provide the data analysis methods to be utilized.

8) Address any human subject issues.

9) Identify potential challenges the project may face (site participation, data collection, logistic, or other constraints) and discuss how these challenges will be addressed and/or minimized.

G. Collaboration and Support (10 points)

All applicant agencies must:

1) Describe how they will collaborate on this project with other relevant organizations, such as NC ACOG or the NC Division of Public Health.
2) Describe the reasons for collaborating with specific organizations.
3) Include letters of support for your agency to engage in this study, from relevant organizations. These letters should be included with your grant application as an appendix and will not count toward the narrative page limit of this RFA. Please do not have letters sent separately to the Division. They will not be included in your application and will not be read by reviewers.

H. Potential Impact (15 points)

Explain why the proposed project is a good use of federal dollars. Describe the potential health impact and other effects on North Carolina and its residents. Whenever possible, quantify the possible economic savings and/or gains brought about by the study through specific data.

I. Line Item Budget and Budget Narrative (10 points) (Not inclusive in the 10 page limit)

Line-Item budget: Appendix C is a line-item budget template that is to be submitted with this RFA. This does not count towards the page limit of this RFA.

Budget Narrative: The budget narrative should be included in the body of the proposal and will count towards the page limit of this RFA.

Every item that appears in the budget should be explained clearly, so the evaluator/reviewer will understand it. The budget narrative should explain how the numbers in the budget were calculated and how each expense is related to the proposed project. The Budget Narrative is the justification of 'how' and/or 'why' a line item helps to meet the program deliverables. It is also used to determine if the cost in the contract is reasonable and permissible.

The budget should be for the period July 1, 2022 through March 14, 2023:

- Salary Detail – Staff salaries and expenses for temporary/contract staff should be entered by position type in the appropriate section. For employed staff and temporary/contract staff, enter the average number of hours to be worked per week for each position type on the project.
- Cost of toxicologics, related transport of samples to lab site, and processing
- Cost of incentives, if any
- Cost of travel, per diem
- Summary – Detailed cost breakdown for the project and all sources of funding identified for the project.

- Narrative – Expanded details for specific line items in the budget.

Funds may not be used for purchase of land or buildings, nor may renovations be completed with these funds. Equipment, such as computers, or software, may not be purchased with these funds.

The applicant agency shall use the budget template found in ATTACHMENT C to create the Line Item Budget.

J. Supporting Documents (not inclusive of the 10-page limit)

1) An organizational chart identifying the personnel who will be assigned to work on this
2) Federal and State certifications (provided with RFA).
3) Other documents outlined above.

Submit the complete Application, including signature of authorized representative, to RFA.responses@dhhs.nc.gov no later than 5:00 pm EST on Monday, May 16, 2022.

13.0 EVALUATION CRITERIA AND SCORING

PHASE I: INITIAL QUALIFYING CRITERIA

The applicant's proposal must meet all the following Phase I application acceptance criteria in order to be considered for further evaluation. Any proposal receiving a "no" response to any of the following qualifying criteria shall be disqualified from consideration.

ITEM	APPLICATION ACCEPTANCE CRITERIA	RFA Section	YES	NO
1	Application received by the deadline specified in the RFA			
2	Proposal includes all required affirmative statements, assurances and certifications signed by the applicant's responsible representative, as described in Appendix A & B of the RFA			
3.	Included in those certifications, the contractor states that it is not excluded from entering a contract with DHHS/State due to restrictions related to the federal debarment list, etc.			
4	Applicant meets eligibility requirements as stated in Section 2.0			
5	Applicant meets the minimum Qualification Requirements as described in Section 5.5			
6.	Program's review of the Contractor verifies that the vendor is not excluded from contracting with DHHS/State for any unresolved finding for recovery.			

PHASE II: CRITERIA FOR SCORING PROPOSAL/APPLICATIONS

Qualifying application proposals will be collectively scored by the proposal review team. All qualified applications will be evaluated, and awards made based on the following criteria considered, to result in awards most advantageous to the State of North Carolina. Applications will be scored on the content, quality, and completeness of the responses to the items in the scope of work and to how well each response addresses the following core factors. DMH/DD/SAS will consider scores, organizational capacity, and distribution among catchment areas, and variety of quality improvement plans in determining awards. Please note that applicants

not meeting the eligibility requirements or any of the minimum or mandatory requirements as stated in Phase I: Initial Qualifying Criteria will not be scored.

Evaluation Criteria	**Score**
Proposal Summary	5 points
Organizational Background and Qualifications	5 points
Assessment of Need / Approach to the Project	15 points
Project Description and Narrative	40 points
Collaboration Support	10 points
Potential Impact	15 points
Line Item Budget/Budget Narrative	10 points
Supporting Documentation	0 points
Total Possible Score	**100 points**

14.0 PERINATAL SUBSTANCE USE RESOURCES

The following is a list of various resources related to perinatal substance use. This list is not a complete or comprehensive collection of resources and should not be used as the sole source of information related to perinatal substance use. The resources listed below are provided to aid applicants in understanding perinatal substance use, substance use disorder, and co-occurring needs.

- American College of Obstetricians and Gynecologists (ACOG) Opioid Use and Opioid Use in Pregnancy
- Centers for Disease Control and Prevention (CDC) About Opioid Use in Pregnancy
- National Institute on Drug Abuse (NIDA) Drug Facts: Substance Use in Women
- NC Department of Health and Human Services (NCDHHS) North Carolina Infant Plan of Safe Care
- Substance Abuse and Mental Health Services Administration (SAMHSA) A Collaborative Approach to the Treatment of Pregnant Women with Opioid Use Disorders
- Substance Abuse and Mental Health Services Administration (SAMHSA) Screening, Brief Intervention and Referral to Treatment (SBIRT)
- Substance Abuse and Mental Health Services Administration (SAMHSA) Clinical Guidance for Treating Pregnant and Parenting Women with Opioid Use Disorder and Their Infants
- Substance Abuse and Mental Health Services Administration (SAMHSA) Addressing the Specific Needs of Women for Treatment of Substance Use Disorders

Appendix A and B

Conflict of Interest Verification (Annual)

We, the undersigned entity, hereby testify that our Organization's Conflict of Interest Acknowledgement and Policy adopted by the Board of Directors/Trustees or other governing body, is on file with the North Carolina Department of Health and Human Services (DHHS). If any changes are made to the Conflict of Interest Policy, we will submit a new Conflict of Interest Acknowledgment and Policy to the Department (DHHS).

Name of Organization	
Contractor's Authorized Agent	Date
Printed Name of Contractor's Authorized Agent	Title
Signature of Witness	Date
Printed Name of Witness	Title

FEDERAL CERTIFICATIONS

The undersigned states that:

1. He or she is the duly authorized representative of the Provider named below;

2. He or she is authorized to make, and does hereby make, the following certifications on behalf of the Provider, as set out herein:

    a. The Certification Regarding Nondiscrimination;
    b. The Certification Regarding Drug-Free Workplace Requirements;
    c. The Certification Regarding Environmental Tobacco Smoke;
    d. The Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions; and
    e. The Certification Regarding Lobbying;

3. He or she has completed the Certification Regarding Drug-Free Workplace Requirements by providing the addresses at which the contract work will be performed;

4. [Check the applicable statement]

   [ ] He or she **has completed** the attached **Disclosure Of Lobbying Activities** because the Provider **has made, or has an agreement to make**, a payment to a lobbying entity for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action;

   OR

   [ ] He or she **has not completed** the attached **Disclosure Of Lobbying Activities** because the Provider **has not made**, and **has no agreement to make**, any payment to any lobbying entity for influencing or attempting to influence any officer or employee of any agency, any Member of Congress, any officer or employee of Congress, or any employee of a Member of Congress in connection with a covered Federal action.

5. The Provider shall require its subcontractors, if any, to make the same certifications and disclosure.

Signature **Title**

Provider Name **Date**

[This Certification Must be Signed by the Same Individual Who Signed the Proposal Execution Page]

I. Certification Regarding Nondiscrimination

The Provider certifies that it will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (h) the Food Stamp Act and USDA policy, which prohibit discrimination on the basis of religion and political beliefs; and (i) the requirements of any other nondiscrimination statutes which may apply to this Agreement.

II. Certification Regarding Drug-Free Workplace Requirements

1. The Provider certifies that it will provide a drug-free workplace by:

   a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Provider's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

   b. Establishing a drug-free awareness program to inform employees about:

      i. The dangers of drug abuse in the workplace;

      ii. The Provider's policy of maintaining a drug-free workplace;

      iii. Any available drug counseling, rehabilitation, and employee assistance programs; and

      iv. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

   c. Making it a requirement that each employee be engaged in the performance of the agreement be given a copy of the statement required by paragraph (a);

   d. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the agreement, the employee will:

      i. Abide by the terms of the statement; and

      ii. Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction;

   e. Notifying the Department within ten days after receiving notice under subparagraph (d)(ii) from an employee or otherwise receiving actual notice of such conviction;

   f. Taking one of the following actions, within 30 days of receiving notice under subparagraph (d)(ii), with respect to any employee who is so convicted:

      i. Taking appropriate personnel action against such an employee, up to and including termination; or

      ii. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency; and

   g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

2. The sites for the performance of work done in connection with the specific agreement are listed below (list all sites; add additional pages if necessary):

Address

_____

Street

_____

City, State, Zip Code

_____

3. Provider will inform the Department of any additional sites for performance of work under this agreement.

4. False certification or violation of the certification may be grounds for suspension of payment, suspension or termination of grants, or government-wide Federal suspension or debarment. 45 C.F.R. 82.510.

III. Certification Regarding Environmental Tobacco Smoke

Public Law 103-227, Part C-Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1,000.00 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Provider certifies that it will comply with the requirements of the Act. The Provider further agrees that it will require the language of this certification be included in any subawards that contain provisions for children's services and that all subgrantees shall certify accordingly.

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

Instructions

[The phrase "prospective lower tier participant" means the Provider.]

1. By signing and submitting this document, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of the fact 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 originate may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant will 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 has 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 meanings set out in the Definitions and Coverage sections of rules implementing

Executive Order 12549, 45 CFR Part 76. You may contact the person to whom 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 any lower tier covered transaction with a person who is debarred, suspended, determined 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 document that it will include the 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 debarred, suspended, ineligible, or voluntarily excluded from covered transaction, 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 Nonprocurement List.

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 in 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 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.

Certification

1. **The prospective lower tier participant certifies,** by submission of this document, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any 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.

V. Certification Regarding Lobbying

The Provider certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federally funded

contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form SF-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

3. The undersigned shall require that the language of this certification be included in the award document for subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) who receive federal funds of $100,000.00 or more and that all subrecipients shall certify and disclose accordingly.

4. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000.00 and not more than $100,000.00 for each such failure.

VI. Disclosure Of Lobbying Activities

Instructions

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.

1. Identify the status of the covered Federal action.

2. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.

3. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or sub-award recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.

4. If the organization filing the report in Item 4 checks "Subawardee", then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.

5. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.

6. Enter the Federal program name or description for the covered Federal action (Item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.

7. Enter the most appropriate Federal Identifying number available for the Federal action identified in Item 1 (e.g., Request for Proposal (RFP) number, Invitation for Bid (IFB) number, grant announcement number, the contract grant, or loan award number, the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."

8. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in Item 4 or 5.
9. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in Item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name and Middle Initial (MI).

10. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (Item 4) to the lobbying entity (Item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.

11. Check the appropriate boxes. Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.

12. Check the appropriate boxes. Check all boxes that apply. If other, specify nature.

13. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.

14. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.

15. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Disclosure of Lobbying Activities
(Approved by OMB 0344-0046)

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

1. Type of Federal Action:	2. Status of Federal Action:	3. Report Type:
☐ a. contract ☐ b. grant ☐ c. cooperative agreement ☐ d. loan ☐ e. loan guarantee ☐ f. loan insurance	☐ a. Bid/offer/application ☐ b. Initial Award ☐ c. Post-Award	☐ a. initial filing ☐ b. material change **For Material Change Only:** Year_____ Quarter_____ Date Of Last Report:_____

4. Name and Address of Reporting Entity:	5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime:
☐ Prime ☐ Subawardee Tier (if known) _____ Congressional District (if known) _____	Congressional District (if known) _____
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number (if applicable) _____
8. Federal Action Number (if known)	9. Award Amount (if known) $
10. a. Name and Address of Lobbying Entity (*if individual, last name, first name, MI*): (*attach Continuation Sheet(s) SF-LLL-A, if necessary*)	b. Individuals Performing Services (*including address if different from No. 10a.*) (*last name, first name, MI*): (*attach Continuation Sheet(s) SF-LLL-A, if necessary*)
11. Amount of Payment (*check all that apply*): $ _____ □ actual □ planned	13. Type of Payment (*check all that apply*): ☐ a. retainer ☐ b. one-time fee ☐ c. commission ☐ d. contingent fee ☐ e. deferred ☐ f. other; specify: _____
12. Form of Payment (*check all that apply*): ☐ a. cash ☐ b. In-kind; specify: Nature _____ Value _____	

14. Brief Description of Services Performed or to be Performed and Date(s) of Services, including officer(s), employee(s), or Member(s) contacted, for Payment Indicated in Item 11(*attach Continuation Sheet(s) SF-LLL-A, if necessary*):	
15. Continuation Sheet(s) SF-LLL-A attached: ☐ Yes ☐ No	
16. Information requested through this form is authorized by title 31 U. S. C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U. S. C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.	Signature: _____ Print Name: _____ Title: _____ Telephone No: _____ Date: _____
Federal Use Only	Authorized for Local Reproduction Standard Form - LLL

IRS Tax Exemption Verification Form (Annual)

We, the undersigned entity, hereby testify that the 501 (c) (3) status is on file with the North Carolina Department of Health and Human Services is still in effect.

Name of Agency _____

_____
Chairman, Executive Director, or other Authorized Official

Sworn to and subscribed before me, this _____ day of _____.

_____
Notary Public

My Commission expires: _____

STATE GRANT CERTIFICATION – NO OVERDUE TAX DEBTS

Instructions: Grantee/Provider should complete this certification for all state funds received. Entity should enter appropriate data in the yellow highlighted areas. The completed and signed form should be provided to the state agency funding the grant to be attached to the contract for the grant funds. A copy of this form, along with the completed contract, should be kept by the funding agency and available for review by the Office of State Budget and Management.

Entity's Letterhead

[Date of Certification (mmddyyyy)]

To: State Agency Head and Chief Fiscal Officer

Certification:

We certify that the *[insert organization's name]* does not have any overdue tax debts, as defined by N.C.G.S. 105-243.1, at the federal, State, or local level. We further understand that any person who makes a false statement in violation of N.C.G.S. 143C-6-23(c) is guilty of a criminal offense punishable as provided by N.C.G.S. 143-34(b).

Sworn Statement:

[Name of Board Chair] and [Name of Second Authorizing Official] being duly sworn, say that we are the Board Chair and [Title of the Second Authorizing Official], respectively, of [insert name of organization] of [City] in the State of [Name of State]; and that the foregoing certification is true, accurate and complete to the best of our knowledge and was made and subscribed by us. We also acknowledge and understand that any misuse of State funds will be reported to the appropriate authorities for further action.

_____
Board Chair

_____
Title of Second Authorizing Official

Sworn to and subscribed before me on the day of the date of said certification.

_____ My Commission Expires: _____
(Notary Signature and Seal)

If there are any questions, please contact the state agency that provided your grant. If needed, you may contact the North Carolina Office of State Budget and Management: NCGrants@osbm.nc.gov (919)807-4795

[1] G.S. 105-243.1 defines: Overdue tax debt. – Any part of a tax debt that remains unpaid 90 days or more after the notice of final assessment was mailed to the taxpayer. The term does not include a tax debt; however, if the taxpayer entered into an installment agreement for the tax debt under G.S. 105-237 within 90 days after the notice of final assessment was mailed and has not failed to make any payments due under the installment agreement.

State Certifications
Contractor Certifications Required by North Carolina Law

Instructions: The person who signs this document should read the text of the statutes and Executive Order listed below and consult with counsel and other knowledgeable persons before signing. The text of each North Carolina General Statutes and of the Executive Order can be found online at:

- Article 2 of Chapter 64: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/ByArticle/Chapter_64/Article_2.pdf
- G.S. 133-32: http://www.ncga.state.nc.us/gascripts/statutes/statutelookup.pl?statute=133-32
- Executive Order No. 24 (Perdue, Gov., Oct. 1, 2009): http://www.ethicscommission.nc.gov/library/pdfs/Laws/EO24.pdf
- G.S. 105-164.8(b): http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_105/GS_105-164.8.pdf
- G.S. 143-48.5: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter_143/GS_143-48.5.html
- G.S. 143-59.1: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_143/GS_143-59.1.pdf
- G.S. 143-59.2: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_143/GS_143-59.2.pdf
- G.S. 143-133.3: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter_143/GS_143-133.3.html
- G.S. 143B-139.6C: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_143B/GS_143B-139.6C.pdf

Certifications

(1) **Pursuant to G.S. 133-32 and Executive Order No. 24 (Perdue, Gov., Oct. 1, 2009)**, the undersigned hereby certifies that the Contractor named below is in compliance with, and has not violated, the provisions of either said statute or Executive Order.

(2) **Pursuant to G.S. 143-48.5 and G.S. 143-133.3**, the undersigned hereby certifies that the Contractor named below, and the Contractor's subcontractors, complies with the requirements of Article 2 of Chapter 64 of the NC General Statutes, including the requirement for each employer with more than 25 employees in North Carolina to verify the work authorization of its employees through the federal E-Verify system." E-Verify System Link: www.uscis.gov

(3) **Pursuant to G.S. 143-59.1(b)**, the undersigned hereby certifies that the Contractor named below is not an "ineligible Contractor" as set forth in G.S. 143-59.1(a) because:

(a) Neither the Contractor nor any of its affiliates has refused to collect the use tax levied under Article 5 of Chapter 105 of the General Statutes on its sales delivered to North Carolina when the sales met one or more of the conditions of G.S. 105-164.8(b); **and**

(b) [check **one** of the following boxes]

☐ Neither the Contractor nor any of its affiliates has incorporated or reincorporated in a "tax haven country" as set forth in G.S. 143-59.1(c)(2) after December 31, 2001; **or**

☐ The Contractor or one of its affiliates **has** incorporated or reincorporated in a "tax haven country" as set forth in G.S. 143-59.1(c)(2) after December 31, 2001 **but** the United States is not the principal market for the public trading of the stock of the corporation incorporated in the tax haven country.

(4) **Pursuant to G.S. 143-59.2(b)**, the undersigned hereby certifies that none of the Contractor's officers, directors, or owners (if the Contractor is an unincorporated business entity) has been convicted of any violation of Chapter 78A of the General Statutes or the Securities Act of 1933 or the Securities Exchange Act of 1934 within 10 years immediately prior to the date of the bid solicitation.

(5) **Pursuant to G.S. 143B-139.6C**, the undersigned hereby certifies that the Contractor will not use a former employee, as defined by G.S. 143B-

139.6C(d)(2), of the North Carolina Department of Health and Human Services in the administration of a contract with the Department in violation of G.S. 143B-139.6C and that a violation of that statute shall void the Agreement.

(6) The undersigned hereby certifies further that:

6. He or she is a duly authorized representative of the Contractor named below;
7. He or she is authorized to make, and does hereby make, the foregoing certifications on behalf of the Contractor; and
8. He or she understands that any person who knowingly submits a false certification in response to the requirements of G.S. 143-59.1and -59.2 shall be guilty of a Class I felony.

Contractor's Name: _____

Contractor's Authorized Agent:

Signature _____ Date _____

Printed Name _____ Title _____

Witness:

Signature _____ Date _____

Printed Name _____ Title _____

The witness should be present when the Contractor's Authorized Agent signs this certification and should sign and date this document immediately thereafter.