



Request for Applications

RFA # DMH27-003

Medication-Assisted Treatment (MAT) in Jails Grant Program

FUNDING AGENCY: North Carolina Department of Health and Human Services (NCDHHS)
Division of Mental Health, Developmental Disabilities and Substance Use
Services (DMH/DD/SUS)

ISSUE DATE: October 6, 2026

QUESTIONS DUE: October 19, 2026

APPLICATIONS DUE: November 13, 2026

ANTICIPATED NOTICE OF AWARD: January 8, 2027

ANTICIPATED PERIOD OF PERFORMANCE: April 1, 2027 – June 30, 2029; Initial awards will be given for the period April 1, 2027 – June 30, 2028; Continuation of funding beyond 6/30/2028 is subject to satisfactory performance and availability of funding.

INQUIRIES and DELIVERY INFORMATION:

Direct questions and the application to email: rfa.responses@dhhs.nc.gov

Electronic copies of the application are available at: <https://www.ncdhhs.gov/about/grant-opportunities/mental-health-developmental-disabilities-and-substance-abuse-services-grant-opportunities>

Applications will be received electronically until 5:00 PM ET on November 13, 2026.

Send all applications directly to the funding agency email address as indicated below:

Emailing Address: rfa.responses@dhhs.nc.gov

IMPORTANT NOTES:

1. No performance under this Grant or project shall begin until after full execution of a contract by DMH/DD/SUS and the awardee.
2. Indicate agency/organization name and Request for Applications (RFA) number in the filename of each submission and in subject line of the email.

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I. INTRODUCTION

The opioid and polysubstance epidemic continues to devastate North Carolina, with overdose death rates remaining at higher rates than before the Covid-19 pandemic. Individuals involved in the legal-carceral system are particularly vulnerable to overdose. Research has consistently shown that individuals returning to North Carolina communities after incarceration are 50 times more likely to die of an opioid overdose during the first two weeks after release. Additionally, deaths from causes fully attributable to alcohol use have increased during the past two decades in the United States.

In accordance with Session Law 2026-41 (SB 257) Section 9G.3, the North Carolina Department of Health and Human Services (NCDHHS), Division of Mental Health, Developmental Disabilities, and Substance Use Services (DMH/DD/SUS) is soliciting applications from Sheriff's Offices to establish, expand, or maintain medication-assisted treatment (MAT) programs for opioid use disorder and polysubstance use disorder in jails. MAT integrates U.S. Food and Drug Administration (FDA)-approved medications with counseling and behavioral health interventions to provide comprehensive, evidence-based treatment for individuals with substance use disorders.

Appendix B includes a non-exhaustive list of definitions and resources to which applicant agencies may refer.

ELIGIBILITY

Eligible applicants are **North Carolina Sheriff's Offices**. Previous applicants and awardees from Department of Public Safety RFA #19-RFA-RQ96528-WAX are eligible.

NOTE: Potential applicants should consider their community's readiness to support a MAT program and their agency's organizational capacity to administer grant funds, if awarded. Recipients of grant funds are expected to have established in writing certain general agency policies including personnel and financial accounting policies. Applicants that have not previously received or successfully administered state funds should consult DMH/DD/SUS compliance staff member to determine if their agency has the internal policies and procedures in place to administer a state grant at this time. Funds to grantees will be dispersed on a cost reimbursement basis only, and agencies should carefully consider if they have the capacity to implement the program under this system.

FUNDING

Of the funds appropriated to DMH/DD/SUS by the General Assembly, the sum of two million dollars (\$2,000,000) in recurring state funds beginning in the 2026-2027 fiscal year shall be used to provide competitive grants under the MAT Grant Program (MAT Grant Program or Program) established in G.S. 122C-314. The purpose of this program is to provide grants on a competitive basis to sheriffs' offices to assist in establishing, maintaining, or expanding MAT programs for opioid and polysubstance use disorder in jails.

In accordance with G.S. 122C-314, MAT programs funded through this grant must make available all FDA-approved medications for the treatment of opioid dependence, including long-acting injectable

formulations, and may include FDA-approved medications for alcohol use disorder as clinically appropriate.

1. Total Funding Available: \$3,000,000 for the initial fifteen (15) month award period of April 1, 2027 – June 30, 2028. The second award period of July 1, 2028 – June 30, 2029, will have \$2,000,000 in funding. An additional \$1,000,000 shall be kept in reserve for operational purposes to cover additional funding costs and emergency funding requirements for awarded programs.
2. The period of performance for awarded contracts is April 1, 2027 – June 30, 2028. Funding will be distributed on a cost reimbursement basis. Continuation of funding beyond 6/30/2028 is subject to satisfactory performance and availability of funding.
3. Number of Awards: DMH/DD/SUS intends to award at least six (6) contracts to eligible applicants.
4. Project budgets up to \$625,000 for the initial 15-month award period will be considered. Awardees may be asked to reduce their budgets if multiple projects are selected for funding within the same Program Category or due to other funding availability limitations.
5. Funding Period: April 1, 2027 – June 30, 2028. Funding is available for award period 1 at this time. The second award period, July 1, 2028 – June 30, 2029, will have funding of \$2,000,000 available for implementation of this grant program. Include budget for the period April 1, 2027 – June 30, 2028 and a budget for the period July 1, 2028 – June 30, 2029.
6. Pursuant to G.S. 122C-314(a), for each fiscal year funds are available for this program, the Division shall use these funds as follows for three distinct program categories (Program Categories):
 - a. Thirty-seven and one-half percent (37.5%) of the funds allocated for the MAT Grant Program shall be used to award grants for the establishment of new MAT programs.
 - b. Thirty-seven and one-half percent (37.5%) of the funds allocated for the MAT Grant Program shall be used to award grants for the expansion of existing MAT programs.
 - c. Twenty-five percent (25%) of the funds allocated for the MAT Grant Program shall be used to award grants for the maintenance of existing MAT programs.
7. In awarding grants under this program, the Division shall apply the following requirements and limitations pursuant to G.S. 122C-314(b):
 - a. No sheriff's office shall receive grants pursuant to more than one Program Category in any fiscal year.
 - b. No sheriff's office shall receive grants totaling the entire yearly allotment of funds provided for one of the Program Categories in any fiscal year.
8. Sheriffs' offices receiving grants shall be prioritized based upon the following criteria from the county in which that sheriffs' office sits:
 - a. The rate of opioid-related deaths.
 - b. The rate of opioid-related hospital admissions.
 - c. The rate of violations of probation or parole due to ongoing opioid or alcohol use.
 - d. The accessibility of mental and physical health care.
9. If qualified grant applications do not exhaust the funds allotted for one of the Program Categories in a given fiscal year, the remaining funds for that category for that fiscal year may be redistributed equally between the other two categories, in accordance with G.S. 122C-314(c).

Important Note: DMH/DD/SUS reserves the right to withdraw the award for any reason at any time prior to the parties' full execution of a contract. No performance under this Grant or project shall begin until after the full execution of a contract by DMH/DD/SUS and the awardee from this RFA.

If awarded, Applicant as well as all SubGrantees of the Applicant must certify the following whenever applying for funds, requesting payment, and submitting financial reports:

“I certify to the best of my knowledge and belief that the information provided herein is true, complete, and accurate. I am aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and 3801-3812.”

II. BACKGROUND

The Division of Mental Health, Developmental Disabilities, and Substance Use Services at the North Carolina Department of Health and Human Services supports the well-being of all North Carolinians by building systems, services, and supports for mental health, intellectual/developmental disabilities, substance use, traumatic brain injury, and problem gambling.

From 2012 to 2021, the number of overdose deaths in NC increased by 216%, from 1,278 to 4,041. Among populations of people who use drugs, those who are also involved with the justice system are a particularly vulnerable population, and drug overdose is the leading cause of death among formerly incarcerated people worldwide.

To address the overdose crisis overall, NCDDHS worked across sectors and solos to develop the North Carolina Opioid and Substance Use Action Plan (NC OSUAP). Recognizing the increased vulnerability of individuals with justice-involvement, NC OSUAP includes provisions specific to increasing treatment access for this population and encourages the use of medication-assisted treatment during and after incarceration. Additionally, the DMH/DD/SUS Strategic Plan for 2024-2029 prioritizes both the prevention of overdose and the expansion of services for individuals in the justice system.

Medication-assisted treatment has been shown to improve patient survival, increase retention in treatment, reduce illegal activity, and decrease risk of overdose. MAT combines FDA-approved medications with counseling and behavioral health interventions to treat substance use disorders comprehensively. Research shows that a combination of medication and therapy can successfully treat these disorders, and for some people struggling with addiction, MAT can help sustain recovery. MAT is also used to prevent or reduce opioid overdose.

Consistent with Session Law 2026-41 (Senate Bill 257), Section 9G.3, the purpose of this RFA is to provide funding for North Carolina Sheriff's Offices to establish, expand, or maintain MAT programs for alcohol or opioid use disorder in local jails. This opportunity advances DMH/DD/SUS's commitment to increasing access to evidence-based treatment, promoting recovery, and improving outcomes for individuals involved in the justice system.

The purpose of this Medication Assisted Treatment (MAT) in Jails RFA is to fund sheriff's offices to establish, expand, or maintain MAT programs in local detention centers. This opportunity is in line with DMH/DD/SUS's commitment to driving innovation and positive change for North Carolinians through increased access to services and opportunities to assist individuals in leading self-directed lives and maintaining recovery.

III. SCOPE OF WORK

NCDHHS DMH/DD/SUS is issuing this RFA to comply with Session Law 2026-41 and G.S. 122C-314 in order to establish, expand, or maintain medication assisted treatment (MAT) programs for opioid and polysubstance use disorder in local jails.

This section describes the expectations, responsibilities, and required activities for Sheriff's Offices receiving funds under the MAT Grant Program established in G.S. 122C-314. Applicants must clearly demonstrate in their proposal how they will meet all programmatic requirements outlined below.

1. PROGRAMMATIC REQUIREMENTS AND PRIORITIES

Grantees shall establish, expand, or maintain medication-assisted treatment (MAT) programs for opioid and polysubstance use disorder in local jails, consistent with Session Law 2026-41 and G.S. 122C-314. Funded programs must:

- a. Make available all FDA-approved medications for the treatment of opioid use disorder, including long-acting injectable formulations.
- b. Provide access to FDA-approved medications for alcohol use disorder and other substance use disorders when clinically appropriate.
- c. Integrate medications with counseling and/or behavioral health interventions.
- d. Ensure timely screening of individuals entering the jail for substance use disorders.
- e. Facilitate continuity of care during incarceration, including medication administration and clinical follow-up.
- f. Coordinate discharge planning and warm handoffs to community-based treatment providers upon release.
- g. Track key outcomes related to opioid-related deaths, opioid-related hospitalizations, and probation/parole violations related to opioid or alcohol use, as referenced in G.S. 122C-314(b)(3).
- h. Comply with all applicable federal, state, and local regulations governing MAT service delivery in correctional settings.

2. GRANTEE RESPONSIBILITIES

Grantees shall:

- a. Establish communication and a working relationship with the NC State Opioid Treatment Authority for assistance with the identification of and connection to community-based providers; adherence to best-practice standards; and other relevant needs
- b. Develop and maintain written policies and procedures for MAT service delivery.
- c. Contract with or employ medical providers authorized to prescribe and administer FDA-approved medications.
- d. Maintain agreements or partnerships with behavioral health providers for counseling/therapy.
- e. Implement protocols for safe storage, handling, and administration of medications.
- f. Ensure staff training in MAT, withdrawal management, and trauma-informed care.
- g. Conduct screenings, assessments, and ongoing clinical monitoring for individuals enrolled in MAT.
- h. Provide evidence-based behavioral health interventions.
- i. Maintain documentation consistent with state and federal requirements.

- j. Implement discharge planning processes and ensure connection to community-based treatment providers.
- k. Participate in any technical assistance or learning collaboratives established by DMH/DD/SUS or the MAT Grant Program working group under G.S. 122C-314(d).
- l. Submit timely and accurate reports as outlined in the Reporting Requirements section.

3. PERFORMANCE STANDARDS AND EXPECTATIONS

Grantees must demonstrate performance in the following areas:

- a. Timely intake and initiation of MAT for eligible individuals.
- b. Availability of all FDA-approved opioid medications and appropriate alcohol use disorder medications.
- c. Continuity of medication administration without interruption.
- d. Direct provision or contracted provision of behavioral health interventions.
- e. Discharge planning initiated prior to release, with documented referral or handoff.
- f. Accurate and timely reporting of required data elements.
- g. Compliance with relevant federal, state, and local regulations, including:
 - i. FDA standards for medication administration
 - ii. Drug Enforcement Administration (DEA) regulations for controlled substances
 - iii. Jail operational and medical standards
 - iv. HIPAA and 42 CFR Part 2 confidentiality requirements
- h. Demonstrated efforts to reduce overdose risk and improve access to treatment within the jail.

4. REPORTING REQUIREMENTS

Grantees must submit the following:

- a. **Monthly reports** including program enrollment, medication utilization, behavioral health services delivered, and discharge/continuity metrics.
- b. **Quarterly reports** detailing progress toward program goals, barriers, outcomes, and performance measures.
- c. Ad hoc reports as requested by DMH/DD/SUS or the MAT Grant Program working group.
- d. Fiscal documentation sufficient to support cost reimbursement payment requests.
- e. **Annual reports** summarizing program performance, expenditures, outcomes, and alignment with statutory priorities.

5. OTHER GRANTEE REQUIREMENTS

- a. Maintain all required licensure, certification, and operational authority to deliver MAT in a correctional setting.
- b. Ensure culturally responsive, trauma-informed service delivery.
- c. Maintain compliance with all DMH/DD/SUS fiscal and administrative requirements.
- d. Safeguard all protected health information in accordance with HIPAA and 42 CFR Part 2.
- e. Utilize evidence-based practices for MAT delivery.

6. GRANTEE QUALIFICATIONS AND CAPACITY

Applicants must demonstrate:

- a. **Organizational Capacity**
 - i. Administrative and operational ability to implement MAT in a jail setting.
 - ii. Experience delivering medical or behavioral health services (either directly or through contracted partners).

- iii. Adequate staffing, including prescribing providers and behavioral health clinicians.
 - iv. Fiscal stability and ability to manage cost-reimbursement funds.
- b. **Staff Qualifications**
 - i. Medical providers authorized to prescribe FDA-approved medications.
 - ii. Staff trained in MAT, withdrawal management, trauma informed care, and correctional health operations.
- c. **Board/Leadership Qualifications**
 - i. Commitment to evidence-based treatment and support for MAT in jail settings.
- d. **Fiscal Management**
 - i. Financial systems meeting state requirements.
 - ii. Recent audit reports demonstrating fiscal integrity.
 - iii. Policies for cost tracking, documentation, and reimbursement.
- e. **Partnerships and Collaboration**
 - i. Formal partnerships with community treatment providers for continuity of care.
 - ii. Coordination with probation/parole as applicable.
- f. **Experience and Past Projects**
 - i. Prior experience implementing MAT or related health services (if applicable).
 - ii. Relevant subcontractors and their qualifications.

IV. GENERAL INFORMATION ON SUBMITTING APPLICATIONS

1. Award or Rejection

All qualified applications will be evaluated and award made to that agency or organization whose combination of budget and service capabilities are deemed to be in the best interest of the MAT Grant Program. The funding agency reserves the unqualified right to reject any or all offers if determined to be in best interest of the MAT Grant Program under G.S. 122C-314. Successful applicants will be notified by January 8, 2027.

2. Cost of Application Preparation

Any cost incurred by an agency or organization in preparing or submitting an application in response to this RFA is the agency's 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 be evaluated.

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, and will be incorporated into the funding agency's Contract.

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 conditions by any agency or organization may be grounds for rejection of that agency or organization's application. Funded agencies and organizations specifically agree to the conditions set forth in the Contract.

9. Advertising

In submitting its application, agencies and organizations agree not to use the results thereof 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 the 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, telephone number, and email address 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 that work will be subcontracted. All requirements, terms, and conditions of a contract shall be passed through to all subcontractors performing programmatic work on behalf of the agency as the agency's sub awardee. All information required about the prime grantee is also required for each proposed subcontractor.

Agencies and organizations shall also ensure that subcontractors are not on the state's Suspension of Funding List available at: <https://www.osbm.nc.gov/stewardship-services/state-grants-management/suspension-funding-list>.

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. Contract

The Division will issue a contract to the recipient of the RFA funding (Grantee). Expenditures can only begin following full execution of a contract between DMH/DD/SUS and grantee. DMH/DD/SUS reserves the right to withdraw the award for any reason at any time prior to the execution of a contract.

V. APPLICATION PROCUREMENT PROCESS AND APPLICATION REVIEW

The following is a general description of the process by which applicants will be selected for funding for this project.

1. Announcement of the Request for Applications (RFA)

The announcement of the RFA and instructions for receiving the RFA will be posted at the following DHHS website on 10/06/2026:

<https://www.ncdhhs.gov/about/grant-opportunities/mental-health-developmental-disabilities-and-substance-abuse-services-grant-opportunities> and may be sent to prospective agencies and organizations via direct mail, email, and/or the MAT Grant Program's website.

2. Distribution of the RFA

RFAs will be posted on the Program's website <https://www.ncdhhs.gov/about/grant-opportunities/mental-health-developmental-disabilities-and-substance-abuse-services-grant-opportunities> and may be sent via email to interested agencies and organizations beginning 10/06/2026.

3. Information Session and Question & Answer Period

All prospective applicants are encouraged to attend an Information Session on October 14, 2026, at 12:00 p.m. via Zoom. Register at the following link:

https://www.zoomgov.com/meeting/register/w2nZ92gpSK2Oa6_hnPMpdw#/registration

Written questions concerning the specifications in this Request for Applications will be received until October 19, 2026. As an addendum to this RFA, a summary of all questions and answers will be placed on <https://www.ncdhhs.gov/about/grant-opportunities/mental-health-developmental-disabilities-and-substance-abuse-services-grant-opportunities> website by October 27, 2026.

4. Applications

Applicants shall submit their application as one single, consolidated PDF file with all required attachments and scanned signatures to rfa.responses@dhhs.nc.gov. Paper, mailed and faxed applications will not be accepted.

5. Format

The application must be typed on 8.5" x 11" pages with 1" margins. Line spacing should be single-spaced. The font should be Arial and sized 11-point. All pages should be numbered. Use appropriate headings for each section.

6. Space Allowance

Page limits are clearly marked in each section of the application. Refer to *VIII.3 Applicant's Response* for specifics.

7. Application Deadline

All applications must be received by 5:00 p.m. on November 13, 2026. Only emailed applications will be accepted (scanned signatures are acceptable). Faxed or mailed applications will not be accepted.

8. Receipt of Applications

Applications from each responding agency or organization will receive an email confirmation if application is received on time. Indicate agency/organization name and Request for Applications (RFA) number in the filename of each submission and in subject line of the email.

9. Review of Applications

Applications will be reviewed by a multi-disciplinary committee of public health and human services subject matter experts. Staff from applicant agencies may not participate as reviewers.

Applications will be reviewed and evaluated by a committee for completeness, content, agency's experience with similar projects, ability of the agency's or organization's staff, and benefit of the proposal to the State. Please refer to section VII below for review criteria. DMH/DD/SUS reserves the right to conduct site visits as part of the application review and award process. 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 State. Agencies and organizations are cautioned that this is a request for applications, and the funding agency reserves the unqualified right to reject any and all applications which do not meet the requirements of the MAT Grant Program under G.S. 122C-314 and this RFA.

10. Request for Additional Information

At their option, the application reviewers 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 reviewers are not required to request clarification. Therefore, all applications should be complete and reflect the most favorable terms available from the agency or organization.

11. Audit

Please be advised that successful applicants may be required to have an audit in accordance with [09 NCAC 03M .0205](#). Per 09 NCAC 03M .0205 (amended effective retroactive to July 1, 2024), there are two reporting levels established for recipients and subrecipients receiving grants. Reporting levels are based on the allocated funds from all grants disbursed through the State of North Carolina during the entity's fiscal year. The reporting levels are:

- a. Level I – A recipient or subrecipient that receives, holds, uses, or expends grants in an amount less than the dollar amount requiring audit as listed in the Code of Federal Regulations 2 CFR 200.501(a) within its fiscal year.
- b. Level II - A recipient or subrecipient that receives, holds, uses, or expends grants in an amount equal to or greater than the dollar amount requiring audit as listed in 2 CFR 200.501(a) within its fiscal year.

The dollar amount requiring audit listed in 2 CFR 200.501(a) is herein incorporated by reference, including subsequent amendments and editions, and can be accessed free of charge at <https://www.ecfr.gov/>.

Level II grantees shall have a single or program-specific audit prepared and completed in accordance with Generally Accepted Government Auditing Standards, also known as the Yellow Book NC G.S. 143C-6-22 and NC G.S. 143C-6-23 as applicable to the agency's status.

Unless prohibited by law, the costs of audits made in accordance with the provisions of this Rule

shall be allowable charges to State and Federal awards. The charges may be considered a direct cost or an allocated indirect cost, as determined in accordance with cost principles outlined in the Code of Federal Regulations, 2 CFR Part 200, which is herein incorporated by reference, including subsequent amendments and editions, and can be accessed free of charge at <https://www.ecfr.gov>. The cost of any audit not conducted in accordance with this Subchapter shall not be charged to State awards.

12. Assurances

The contract may include assurances that the successful applicant would be required to execute prior to receiving a contract as well as when signing the contract.

13. Additional Documentation to Include with Application

All applicants are required to include documentation of their tax identification number.

14. Federal Certifications - Reserved

15. Unique Entity Identifier (UEI) - Reserved

16. Additional Documentation Prior to Contract Execution

Contracts require more documentation prior to contract execution. After the award announcement, agencies will be contacted about providing the following documentation:

All grantees receiving funds through the State of North Carolina are required to execute Contractor Certifications Required by North Carolina Law. A copy of the certifications is included in this RFA for your reference (see Appendix A). Contractor Certifications should NOT be signed or returned with application.

Note: At the start of each calendar year, all agencies with current DMH/DD/SUS contracts are required to update their contract documentation. These agencies will be contacted a few weeks prior to the due date and will be provided the necessary forms and instructions.

17. Registration with Secretary of State - Reserve

18. Registration in NC e-Procurement via NC Electronic Vendor Portal (eVP)

Successful applicants must be registered in NC eProcurement via the Electronic Vendor Portal (eVP) in order to receive reimbursement payments. This registration does not change your organization's grantee status or how the organization will be treated by DMH/DD/SUS.

19. Federal Funding Accountability and Transparency Act (FFATA) Data Reporting Requirement - Reserved

20. Iran Divestment Act

The Iran Divestment Act of 2015, as amended, prohibits State agencies from investing in or contracting with individuals and companies engaged in certain investment activities in Iran. Any organization identified engaging in investment activities in Iran, as determined by appearing on the Final Divestment List created by the NC Department of the State Treasurer, is ineligible to contract with the State of North Carolina or any political subdivision of the State. Refer to NC General Statutes Chapter 147 Article 6E.

21. Boycott Israel Divestment Policy

The Divestments from Companies Boycotting Israel Act of 2017, as amended, prohibits State agencies from making investments in, and contracts with, companies that are engaged in a boycott of Israel, as defined by this Act. Any organization that boycotts Israel, as determined by appearing on the Final Divestment List created by the NC Department of the State Treasurer, is ineligible to contract with the State of North Carolina or any political subdivision of the State. Refer to NC General Statutes Chapter 147 Article 6G.

22. Application Process Summary Dates

10/06/2026: Request for Applications released to eligible applicants

10/14/2026: Information Session

10/19/2026: End of Q&A period. All questions due in writing by 5 p.m.

10/27/2026: Answers to Questions released to all applicants, as an addendum to the RFA

11/13/2026: Applications must be received by DMH/DD/SUS by 5 p.m.

01/08/2027: Successful applicants will be notified

04/01/2027: Proposed Contract begins

VI. PROJECT BUDGET

Budget and Justification

Applicants must submit a budget, which requires a line-item budget for each year of funding and a narrative justification.

Narrative Justification for Expenses

A narrative justification must be included for every expense listed in the budget. Each justification should show how the amount on the line-item budget was calculated, and it should be clear how the expense relates to the project.

Travel Reimbursement Rates

Mileage reimbursement rates must be based on rates determined by the North Carolina Office of State Budget and Management (OSBM). Because mileage rates fluctuate with the price of fuel, the OSBM will release the “Change in IRS Mileage Rate” memorandum to be found on OSBM’s website when there is a change in this rate. The current state mileage reimbursement rate is \$0.76 cents per mile.

For other travel-related expenses, please refer to the current rates for travel and lodging reimbursement, presented in the chart below. However, please be advised that reimbursement rates periodically change. The Division of Mental Health, Developmental Disabilities and Substance Use Services will only reimburse for rates authorized in OSBM’s North Carolina Budget Manual or adopted by means of an OSBM Budget Memo. These documents are located here:

<https://www.osbm.nc.gov/budget/budget-manual>.

Current Rates for Travel and Lodging

Meals	In State	Out of State
Breakfast	\$16.00	\$16.00
Lunch	\$19.00	\$19.00
Dinner	\$28.00	\$28.00
<i>Total Meals Per Diem Per Day</i>	<i>\$63.00</i>	<i>\$63.00</i>
Lodging (Maximum rate per person, excludes taxes and fees)	\$110.00	\$110.00
Total Travel Allowance Per Day	\$173.00	\$173.00
Mileage	\$0.76 per mile	

Other Restrictions (if applicable)

Audits

Level II Grantees (refer section V.11 for details) are required to submit a “Yellow Book” audit. Only Level II Grantees may include audit expenses in the budget. Audit expenses shall be pro-rated based on the ratio of the grant to the total grant funds received by the entity. The chart below details the Level II audit threshold amounts from all grants disbursed through the State of North Carolina during the entity’s fiscal year:

If the Grantee's Fiscal Year End (FYE) Date is:	The following audit thresholds apply for that fiscal year end:		
	Federal	State Local Government	State Non-Government (nonprofits)
September 30, 2025, and after	\$1,000,000	\$750,000 or \$1,000,000*	\$1,000,000

Indirect Cost

Indirect cost is the cost incurred for common or joint objectives which cannot be readily identified but are necessary to the operations of the organization, e.g., the cost of operating and maintaining facilities, depreciation, and administrative salaries. Regulations restricting the allocation of indirect cost vary based on the funding source.

Per NC Session Law 2023-65: For Grantees, including nonprofit grantees, that (i) are receiving financial assistance and do not have a federally approved indirect cost rate from a federal agency or (ii) have a previously negotiated but expired rate, the Department may allow the grantee, in accordance with 2 C.F.R. § 200.332(a)(4) or 2 C.F.R. § 200.414(f), to use the de minimis rate or fifteen percent (15%) of modified total direct costs. Alternatively, the grantee may negotiate or waive an indirect cost rate with the Department. If State or federal law or regulations establish a limitation on the amount of funds the grantee may use for administrative purposes, then that limitation controls, in accordance with 2 C.F.R. § 200.414(c)(3).

State Funds

Where the applicant has a Federally Negotiated Indirect Cost Rate (FNICR), the total modified direct cost identified in the applicant's FNICR shall be applied up to the limit defined above. The total modified direct cost identified in the applicant's FNICR shall be applied. A copy of the FNICR must be included with the applicant's budget.

If the applicant does not have an FNICR and no indirect cost rate is currently established by a CPA, then the applicant may claim indirect cost up to the limit as defined above or the de minimis indirect cost rate of 15% whichever is less. The applicant may elect to claim a lesser portion of the allowed indirect cost rate. If claiming the de minimis or some portion thereof, it may not exceed the limit of the modified total direct costs in the proposed budget as defined by 2 CFR 200.1 "Modified Total Direct Cost (MTDC)". Applicants must indicate in the budget narrative that they wish to use the de minimis rate, or some part thereof. Applicants who do not wish to claim any indirect cost must enter "No indirect cost requested" in the indirect cost line item of the budget narrative.

State legislation provides \$2,000,000 in recurring funds each fiscal year. Continuation of funding beyond the first award term is subject to satisfactory performance.

VII. EVALUATION CRITERIA

As NCDHHS DMH/DD/SUS strives for transparency and equity in the RFA process, we recognize that all applicants would benefit from seeing how their application will be evaluated. Below is the process we will take on these applications. It is broken into two phases: Qualifying and Scoring. Any application that does not pass Phase I will not continue to Phase II and will be disqualified from consideration.

PHASE I: INITIAL QUALIFYING CRITERIA

The applicant's proposal must meet all of 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	Was the application received by the deadline specified in the RFA?	<u>V</u>		
2	Proposal includes all required affirmative statements, assurances and certifications signed by the vendor's responsible representative, as described in Section 5 of the RFA.	<u>V</u>		
3	Applicant meets eligibility and minimum qualification requirements as stated in Section 1.	<u>I</u>		

PHASE II: CRITERIA FOR SCORING PROPOSAL/APPLICATIONS

Qualifying applications 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 MAT Grant Program. 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 core evaluation criteria set forth below. NCDHHS will consider scores, organizational capacity, and regional distribution of MAT in Jails programs, and variety of quality improvement plans in determining awards. Please note that applicants not meeting the qualifying requirements as stated in Phase I will not be scored.

Evaluation Criteria	Score
Proposal Summary (250 words or less)	5 points Evaluates whether the applicant clearly summarizes their intent, vision, and alignment with the RFA.

Evaluation Criteria	Score
Organizational Background and Qualifications (page limit: 1 page)	10 points Considerations may include: • Experience delivering health or behavioral health services • Jail medical staffing capacity • Prior MAT experience (if any) • Partnerships with providers for counseling, therapy, and re-entry services • Demonstrated organizational stability
Assessment of Need (page limit: 1.5 pages)	15 points Should include: • Opioid-related death rates • Opioid-related hospitalization rates • Violations of probation/parole due to opioid and/or polysubstance use • Barriers to care in the county (e.g., rural healthcare access) This criterion directly reflects the prioritization factors written into the statute.
Project Description (page limit: 2 pages)	25 points Evaluates: • How the MAT program will be implemented in the jail • Screening, induction, continuation, and discharge workflows • Medication access (including all FDA-approved opioid medications, long-acting injectables, plus AUD meds) • Behavioral health counseling integration • Staffing, workflows, dosage protocols, and logistics • Continuity-of-care planning • Alignment with evidence-based MAT standards This component of the RFA captures the bulk of the required programmatic detail.
Collaboration and Community Support (page limit 1.5 pages)	10 points Includes: • Partnerships with community providers including opioid treatment program(s) • Re-entry coordination • Coordination with probation/parole

Evaluation Criteria	Score
Potential Impact (page limit 1.5 pages)	10 points Evaluates: • Expected outcomes • How the program will reduce overdose mortality • Anticipated changes to opioid/alcohol-related violations • Alignment with statewide strategies (NC OSUAP and DMH/DD/SUS Strategic Plan)
Budget and Budget Narrative	10 points Evaluates: • Cost-reasonableness • Alignment with project description • Proper use of State funds • Adherence to OSBM reimbursement rates • Correct calculation of direct/indirect cost
Supporting Documentation (no page limit)	15 points Application must include letters of commitment or support from collaborating agencies and community partners. Examples of these include: • Jail health providers • Office-based MAT providers • Opioid treatment programs • Local health departments • Peer-run organizations • Certified community behavioral health clinics • Letters of support or MOUs
Total Score	100

VIII. APPLICATION

Application Checklist

The following items must be included in the application:

1. **Cover Letter**
2. **Application Face Sheet**
3. **Applicant's Response/Form**
4. **Project Budget**
Include a budget in the format provided.
5. **Indirect Cost Rate Approval Letter** (if applicable)
6. SubGrantee / SubContractor Information
7. **Letters of Commitment or Statements of Support**
8. **IRS Letter Documenting Your Organization's Tax Identification Number** (public agencies)

1. Cover Letter

The application must include a cover letter, on agency letterhead, signed and dated by an individual authorized to legally bind the Applicant.

Include in the cover letter:

- the legal name of the Applicant agency
- the RFA number
- the Applicant agency's federal tax identification number
- the closing date for applications.

2. Application Face Sheet

This form provides basic information about the applicant and the proposed project with NCDHHS DMH/DD/SUS, including the signature of the individual authorized to sign “official documents” for the agency. This form is the application’s cover page. Signature affirms that the facts contained in the applicant’s response to RFA # DMH27-003 are truthful and that the applicant is in compliance with the assurances and certifications that follow this form and acknowledges that continued compliance is a condition for the award of a contract. Please follow the instructions below.

1. Legal Name of Agency:	
2. Name of individual with Signature Authority:	
3. Mailing Address (include zip code+4):	
4. Address to which checks will be mailed:	
5. Street Address:	
6. Contract Administrator: Name: Title:	Telephone Number: Fax Number: Email Address
7. Agency Status (check all that apply): ☐ Public ☐ Private Non-Profit ☐ LME/MCO	
8. Agency Federal Tax ID Number:	9. Agency UEI:
10. Agency’s URL (website):	
11. Agency’s Financial Reporting Year:	
12. Current Service Delivery Areas (county(ies) and communities):	
13. Proposed Area(s) To Be Served with Funding (county(ies) and communities):	
14. Amount of Funding Requested	
15. Projected Expenditures: Do applicant’s state and/or federal expenditures exceed \$500,000 for applicant’s current fiscal year (excluding amount requested in #14) Yes ☐ No ☐	
The governing body of the applicant has duly authorized this document and I am authorized to represent the applicant. I certify to the best of my knowledge and belief that the information provided herein is true, complete, and accurate. I am aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and 3801-3812.”	
16. Signature of Authorized Representative:	17. Date

3. Applicant's Response

a. Proposal Summary (5 points)

Provide a brief (no more than 250 words) overview of the planned project. Describe your proposed program, including which category of program is being proposed: establishing a new MAT program; OR expanding an existing MAT program; OR maintaining an existing MAT program.

b. Organizational Background and Qualifications (10 points) page limit: 1 page

Describe the readiness of the jail to establish, expand, or maintain a MAT program. Include operational capacity, current jail health services offered, any current or previous experience providing MAT and/or substance use services, relevant external partnerships (ex. established relationship with a local MAT provider or opioid treatment program), and staff training/education received.

c. Assessment of Need/Problem Statement (15 points) page limit: 1.5 pages

- i. Describe the county or area you will be serving. Include information about the population(s) who live there, the size and geographic diversity of the area, and any other factors that may impact your program (e.g., urban/rural, historically marginalized populations, transportation, industry and economic conditions, recent events, etc.). Include data on overdose (deaths, emergency department visits, hospitalizations), accessibility of mental health & substance use care, and the rate of probation and/or post-release violations due to ongoing opioid or polysubstance use.
- ii. Provide an estimate of the number of people who will be served by the program, identified needs of the population being served, and the ability of the program to meet the needs of that population.

d. Project Description (25 points) page limit: 2 pages

- i. Clearly identify which category of program is being proposed.
- ii. Describe in detail your proposed project including:
 - 1) How you plan to implement the program
 - 2) How you will identify individuals to be served, including screening and assessment tools
 - 3) How the program will provide or maintain linkage to MAT providers in the community
 - 4) How the program will plan for warm transfers to appropriate community services and supports (may include use of peer supports, community health workers, care coordinators and/or case managers)
 - 5) How the program will be staffed
- iii. Describe any challenges you anticipate as you develop, implement, or maintain your proposed MAT program and how they will be addressed.
- iv. Provide a program implementation plan and timeline.

e. Collaboration and Community Support (10 points) page limit: 1.5 pages

- i. Describe how you will collaborate with organizations experienced in the provision of MAT for opioid and/or alcohol use disorder.

- ii. Describe the process to ensure continuity of care after release, including how you will address referrals to community providers, the hand-off for continued care, and scheduling of aftercare appointments.
- iii. Describe how you will collaborate with other relevant community organizations

f. Potential Impact (10 points) page limit: 1.5 pages

Describe the anticipated outcomes of the proposal. Include estimates about the reduction of overdose mortalities and anticipated changes to opioid/alcohol-related violations. Include your proposal's alignment with statewide strategies (NC OSUAP and DMH/DD/SUS Strategic Plan as examples).

g. Budget and Budget Narrative (10 points) page limit: N/A; Excel spreadsheet provided.

h. Supporting Documentation, Evidence of Collaboration, Letters of Support (15 points) page limit: N/A

Include letters of commitment or support from collaborating agencies and community partners.

Examples of these include:

- 1) Jail health providers
- 2) Office-based MAT providers
- 3) Opioid treatment programs
- 4) Local health departments
- 5) Peer-run organizations
- 6) Certified community behavioral health clinics

4. Project Budget

Use the following budget guide to develop the program budget. Include budget for the period April 1, 2027 – June 30, 2028, and a budget for the period July 1, 2028 – June 30, 2029. The budgets should be program specific. Every item that appears in the budget should be clearly explained. Ensure that requested budget amounts, particularly staffing, subcontracts, and materials, are realistic and appropriate for the proposed project. Confirm that salaries are commensurate to the required competencies and job duties of the position. The budget may include the costs of medications being provided.



Master Line Item
Budget Template.xlsx

5. Indirect Cost Rate Approval Letter (if applicable)

6. SubContractor/SubGrantee Information

In accordance with 09 N.C. Administrative Code 03M.0703, Required Contract Provisions, the Applicant must provide the required information for every subcontractor and subgrantee included in the Project Budget. If the Applicant has no subcontractor and subgrantee, indicate that in the first line under "Name." If the Applicant plans to have subcontractors or subgrantees but they are unknown at this time, that must be indicated in the first line under "Name" for as many as are planned. When they are known, this information shall be submitted to the Division for review prior to the Applicant contracting with the entity. Attach additional pages as necessary.

SubContractor/SubGrantee Name:

Position Title (if applicable):

EIN or Tax ID:

Street Address or PO Box:

City, State and ZIP Code:

Contact Name:

Contact Email:

Contact Telephone:

Fiscal Year End Date (for organizations):

Is this organization functioning as a "SubGrantee" of the Applicant?

Is this organization functioning as a vendor "SubContractor" of the Applicant?

SubContractor/SubGrantee Name:

Position Title (if applicable):

EIN or Tax ID:

Street Address or PO Box:

City, State and ZIP Code:

Contact Name:

Contact Email:

Contact Telephone:

Fiscal Year End Date (for organizations):

Is this organization functioning as a "SubGrantee" of the Applicant?

Is this organization functioning as a vendor "SubContractor" of the Applicant?

7. Letters of Commitment OR Statement of Support

Letters of commitment should be included from any agency or community organization integral to the success or implementation of the proposed activities. Include letters of support from MAT providers.

8. IRS Documentation

Public Agencies:

Provide a copy of a letter from the IRS which documents your organization's tax identification number. The organization's name and address on the letter must match your current organization's name and address.

This IRS determination letter can also satisfy the documentation requirement of your organization's tax identification number.

Appendix A Forms for Reference

Do **NOT** complete these documents at this time **nor return them** with the RFA response.

They are for reference only.

STATE CERTIFICATIONS

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 word 'Contractor' includes Grantees. 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): <https://ethics.nc.gov/media/242/download?attachment>
- 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:
- (a) He or she is a duly authorized representative of the Contractor named below;
- (b) He or she is authorized to make, and does hereby make, the foregoing certifications on behalf of the Contractor; and
- (c) He or she understands that any person who knowingly submits a false certification in response to the requirements of G.S. 143-59.1 and -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.

Confirmation of Registration and Login NC Electronic Vendor Portal (eVP) and eProcurement

Grantees and contractors under contract with the NCDHHS Division of Mental Health, Developmental Disabilities, Substance Use Services (DMH/DD/SUS) must be registered in the NC Electronic Vendor Portal (eVP) to receive reimbursements and payments. When registering, grantees must choose NC eProcurement as their registration type. There is no fee to register.

Please note that grantees and contractors **must login to NC eVP at least once a year** to keep your account active and out of inactive status.

In order to avoid payment delays, please provide your eVP Customer Number below and confirm that you have logged in to eVP to keep your account active. When you login to eVP, your Customer Number can be found on your Main Page and also under the Company Information Tab.

Confirmed by:

eVP Customer Number

Name of Organization

Signature of Organization Official

Date

Appendix B Definitions and Resources

The following definitions and resources are provided to applicant agencies for reference only. Unless the context clearly indicates otherwise, the words and phrases listed below have the meanings given to them in this section.

1. **Assessment:** The use of an evidence-based, standardized evaluation and collateral data collection process(es) to determine the presence of substance use disorder and whether medication for addiction treatment is medically necessary.
2. **Community-based provider:** An entity that primarily provides treatment services in the community rather than in an institution or isolated setting to individuals with substance use disorder and/or mental health conditions and may include off-site opioid treatment programs.
3. **Correctional setting, correctional facility or correctional institution:** A jail, prison, adult or juvenile detention center, or other environment in which a person is confined by a state or local entity.
4. **Diversion:** The transfer of a legally prescribed controlled substance, including medication for addiction treatment, from the individual for whom it was prescribed to another person for illicit use.
5. **Evidence-based:** An approach to medicine that emphasizes the practical application of the findings of the best available current research.
6. **Health care practitioner:** An individual who is licensed or otherwise authorized by the state to administer, dispense, or prescribe medication for addiction treatment.
7. **Medication for addiction treatment:** Drugs approved by the U.S. Food and Drug Administration for the treatment of substance use disorder.
 - a. **Methadone:** A long-acting opioid agonist that reduces opioid craving and withdrawal and blunts or blocks the effects of opioids.
 - b. **Buprenorphine:** An opioid partial agonist that reduces withdrawal and cravings and increases safety in cases of overdose.
 - c. **Naltrexone:** An opioid antagonist that blocks opioid receptors.
8. **Opioid treatment program:** A substance use disorder treatment program that is certified by the Substance Abuse and Mental Health Services Administration (SAMHSA) and accredited by an independent SAMHSA approved accrediting body and is regulated by 42 C.F.R. Part 8 [and state law or regulation governing opioid treatment programs, if applicable].
9. **Overdose reversal medication:** A medication approved by the U.S. Food and Drug Administration to reverse an overdose.
10. **Peer support worker:** An individual who provides nonclinical care and assistance that encompasses a range of activities and interactions between people who share similar experiences of navigating substance use disorder in an effort to aid individuals in long-term recovery. Peer support specialists are also known as peer specialists, peer recovery coaches, peer advocates, and peer recovery support specialists.
11. **Program participant:** An incarcerated individual with substance use disorder for whom medication for addiction treatment is clinically indicated and who elects to participate in such treatment.
12. **Program categories:** The three types of programs established in G.S. 122C-314(a) for the MAT Grant Program:
 - a. Funding for the establishment of new MAT programs;
 - b. Funding for the expansion of existing MAT programs; and
 - c. Funding for the maintenance of existing MAT programs.

13. **Recovery:** A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.
14. **Screening:** An evidence-based strategy used to:
 - a. Identify conditions or risk markers for substance use disorder;
 - b. Determine whether an individual needs treatment for substance use disorder;
 - c. Assess the extent of the individual's treatment needs; and
 - d. Ensure that the individual receives access to the recommended treatment.
15. **Substance use disorder:** A pattern of use of drugs leading to clinical or functional impairment, in accordance with the definition in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, or in any subsequent editions, and includes, but is not limited to, alcohol use disorder, opioid use disorder, and stimulant use disorder.
16. **Telemedicine:** The delivery of health care services, including diagnosis, consultation, treatment, and prescribing, through the use of interactive remote conferencing technology, such as audio, video, or other electronic media.
17. **Withdrawal management:** The medical and psychological care of patients who are experiencing withdrawal symptoms as a result of ceasing or reducing use of their drug of dependence.