



Oneida County Department of Mental Health

RFP # 2026-447

Oneida County 24/7 Crisis Services: Crisis Hotline and  
Mobile Crisis Response

## 1. INTRODUCTION

Oneida County is dedicated to sustaining and enhancing a strong, responsive crisis care continuum that ensures individuals experiencing behavioral health challenges receive timely, effective, and compassionate support. Mobile Crisis Services and the Crisis Hotline remain vital components of this system, offering immediate access to care for people of all ages, regardless of ability to pay. These services provide comprehensive triage and assessment, evidence-based crisis intervention, and follow-up support that promotes stabilization and connection to ongoing care. Our shared goal is to foster recovery, reduce harm, and support well-being through person-centered, trauma-informed approaches.

For decades, Oneida County's Mobile Crisis Assessment Team (MCAT) has been a cornerstone of local behavioral health crisis response. Recent service data from 2020 through 2025 reveal important trends that present opportunities to build on this strong foundation and further strengthen our approach. While call volumes have shifted over time, we are encouraged by the growing number of self-referrals and school-based referrals—clear indicators of increasing community engagement and awareness. These patterns affirm that people are reaching out for help, and we have an exciting opportunity to ensure that when they do, support is timely, effective, and accessible across all settings and timeframes.

Looking ahead, Oneida County is committed to advancing a more integrated and collaborative model of crisis care—one that leverages partnerships across behavioral health providers, law enforcement, schools, and community organizations. By embracing innovation, creativity, and cross-sector collaboration, we can ensure comprehensive triage, evidence-based intervention, and robust follow-up care for every individual who seeks help. The County invites proposals that align with OMH and SAMHSA best practices and reflect a shared vision of holistic, sustainable support for our community. Together, we can build a future where every person in crisis receives the care they need, when they need it.

## 2. KEY DATES AND DEADLINES

- a. Proposals will be received by the Oneida County Department of Mental Health until 4:00 P.M., Eastern Time on March 13, 2026, for: RFP # 2026-447: Oneida County Department Of Mental Health 24/7 Crisis Services: Crisis Hotline And Mobile Crisis Response.
- b. Proposals must be submitted via single emailed PDF to [mhfiscal@oneidacountyny.gov](mailto:mhfiscal@oneidacountyny.gov). No partial or incomplete proposals will be accepted.
- c. Questions regarding this RFP must be submitted via email to [mhfiscal@oneidacountyny.gov](mailto:mhfiscal@oneidacountyny.gov) no later than 4:00 PM, Eastern Time on February 23, 2026. The subject line for emailed questions should read: "RFP #2026-447: Oneida County Department Of Mental Health – MCAT Question Submission". Questions must include: the Organization Name, Contact Person, Reference to specific section/page of the RFP, and clear and concise wording of the question.
- d. A virtual question and answer meeting will be held on Friday, February 27, 2026, at 12:00 p.m. Eastern Time via Microsoft Teams. Attendance is optional but strongly encouraged. Meeting details (link and instructions) will be posted on the Oneida County website and

emailed to all contact persons at organizations that submitted questions via email. During the virtual meeting, OCDMH staff will address submitted questions. Responses provided during the meeting will be documented and shared publicly on the Oneida County website under the RFP section.

- e. All submitted questions and official responses will be compiled into a Q&A Addendum. The Addendum will be posted on the Oneida County website.
- f. Copies of this RFP may be downloaded from <https://oneidacountyny.gov/departments/purchasing/rfps/>.
- g. The County of Oneida, in order to promote its established Affirmative Action Plan invites bids from underrepresented groups. This Affirmative Action Policy regarding sealed bids and contracts applies to all persons without regard to age, race, creed, color, national origin, gender, religion, sexual orientation, disability, military status, marital status, genetic predisposition or carrier status or political affiliation or belief.
- h. Table of Dates and Deadlines

<b>Event</b>	<b>Date/Time (Eastern)</b>
Request for Proposals (RFP) Issued	January 23, 2026
Questions Due via Email	February 23, 2026 at 4:00 p.m.
Live Q&A Session via Microsoft Teams	February 27, 2026 at 12:00 p.m.
Q&A Responses Posted	March 2, 2026 (unless changed)
RFP Proposal Submissions Due	March 13, 2026 at 4:00 p.m.
Decision/Notification of Award(s)	March 25, 2026 (unless changed)
Estimated Contract State Date	June 1, 2026 (unless changed)

### 3. THE MOBILE CRISIS SERVICES

- a. Oneida County seeks to contract with one or more providers to implement and operate a 24/7 Mobile Crisis Service, which includes, at minimum, a crisis hotline and mobile crisis response.
- b. 24/7 Crisis Services: Crisis Hotline and Crisis Mobile Response: The winning proposer(s) shall provide Mobile Crisis – Program Code #0680 services for the County. Such proposer(s) shall provide crisis services to individuals experiencing a behavioral health crisis and their collaterals regardless of their age and ability to pay, with the purpose of response, intervention, stabilization, and referral/linkages to appropriate treatment and services. Eligible services delivered according to program and billing guidance are reimbursed by Medicaid Managed Care or Medicaid by rate codes under the State Plan

Amendment (#22-0026). The Proposer must comply with the New York State Office of Mental Health (OMH) State Plan Amendment Updates to Mobile Crises Services. The Proposer shall also follow applicable Program Guidance as it pertains to Mobile Crisis services and the Mobile Crisis Program Guidance.

c. Scope of Services

- i. Mobile Crisis services shall be available 24 hours a day, 7 days a week, and 365 days a year in a variety of settings, including community locations where the individual lives, works, attends school, engages in services, or socializes. This includes In-Person intervention within three (3) hours of determination of need. The winning proposer(s) shall maintain the capacity to respond immediately or within the timeliness standards established by the State and/or County. Mobile Crisis, which is a crisis intervention (CI) service, shall be delivered via the following modalities, with a priority for in-person face-to-face response:
- ii. Mobile Crisis Face-to-Face Response: A two-person mobile crisis response is required and shall include a Mobile Crisis Professional and a qualified Mobile Crisis staff with a one-person response permitted pursuant to OMH guidelines. When a mobile crisis response is provided by less than two (2) staff, the rationale shall be documented into the electronic medical record (EMR).
- iii. Crisis Follow Up – Face to Face: Follow-up shall include coordination with, and referrals to, health, social, other services, and supports as needed and are provided by Mobile Crisis Professionals, qualified Mobile Crisis staff with at least a bachelor's degree or qualified Peers/Advocates working within their scope of work and under the supervision of a qualified supervision.
- iv. Telephonic Crisis Response: Mobile Crisis Professionals and other qualified staff may provide crisis intervention service components via telephonic crisis response to individuals as needed. Primarily, triage services shall be completed via Telephonic Crisis Response with evaluations conducted in person, face-to-face. This service shall be provided to both children and adults.
- v. Telephonic Crisis Follow-Up: Mobile Crisis Professionals and other qualified staff may provide crisis intervention service components via telephonic crisis follow-up to individuals as needed. This service shall be provided for both children and adults.
- vi. Telehealth: Mobile Crisis programs must be approved to deliver applicable crisis intervention services via telehealth by qualified Mobile Crisis Professionals based on State guidance and guidelines outlined in Telehealth Services Guidance for OMH Applicants. Proposers must demonstrate the ability to provide telehealth crisis intervention services as an adjunct to in-person response. Telehealth shall be utilized only when clinically appropriate and in compliance with OMH Telehealth Services Guidance. Proposers must outline protocols for determining telehealth suitability, technology infrastructure, and staff training.

- vii. The Proposer shall include, at a minimum, the following service components delivered through the above crisis response methods:
  - 1. Mental health and substance use assessments and tools
  - 2. Crisis planning
  - 3. Safety planning
  - 4. Referrals to Individual and family counseling
  - 5. Care coordination
  - 6. Peer and Family Peer Support
  - 7. 911 (or other emergency services/resources) diversion for behavioral health.
  - 8. Critical Incident Group Debriefing and/or Critical Incident Stress Management
- viii. The Proposer shall ensure that they maintain a proper staffing composition to be able to deliver the services requested. Each Mobile Crisis Applicant shall continuously have an adequate number of licensed staff and an appropriate staff composition to carry out its goals and objectives 24 hours a day, 7 days a week and 365 days a year. The Proposer shall have a staffing plan that documents staff qualifications, including training, clinical experience and education. The plan shall demonstrate sufficient coverage by qualified staff to prioritize known peak operating hours.
- ix. Services shall be delivered by staff as outlined above.
- x. Staff providing direct services shall do so under the supervision of a qualified supervisor operating within their scope of practice or work.
- xi. Only a Mobile Crisis Professional or CASAC under the direct supervision of a qualified supervisor can facilitate mental health and substance use assessments and tools.
- xii. Certified/Credentialed and Provisionally Certified/Credentialed Peers may provide peer, youth, and family peer support services via crisis follow up and/or mobile crisis response under the direct supervision of a qualified supervisor operating within their scope of practice or other mobile crisis staff approved to supervise Certified/Credentialed Peers. Peers shall receive regular supervision from a qualified mental health professional.
- xiii. The Proposer shall utilize the definitions of staffing types (Mobile Crisis Professionals, Mobile Crisis Staff and Qualified Peers).

- xiv. Staffing Plan: The Proposer shall submit its current staffing plan to the County quarterly, or if any significant staffing changes arise. Submission of the staffing plan shall be due to the County 30 days prior to the beginning of a quarter (i.e. April-June staffing plan would be due March 1). The Staffing Plan shall include the following components:
  - 1. Staff names
  - 2. Title
  - 3. Qualifications (licensure, degree, etc.)
  - 4. Work hours
  - 5. Work location
  - 6. Supervisor name and title
- xv. If the staff member is working under any other additional program(s) within the proposing agency.
- xvi. Identify which program the staff member is working under at the time of scheduling.
- xvii. Standard weekly schedules and the plan for call-ins.
- xviii. Co-Response Staffing and Law Enforcement Integration: To enhance crisis response capacity and ensure safety during high-acuity behavioral health emergencies, the County encourages Proposers to incorporate co-response models in partnership with local law enforcement agencies. Proposers proposing co-response services must meet the following requirements:
  - 1. LPHA Availability: A credentialed LPHA must be available 24/7 to support co-response deployments, either in-person or via telehealth, and provide clinical decision-making for behavioral health interventions during law enforcement-assisted calls.
  - 2. Role Definition: LPHAs shall lead behavioral health assessments, safety planning, and disposition decisions during co-response events, ensuring compliance with NYS OMH Mobile Crisis Program Guidance and SPA #22-0026 standards.
  - 3. Training and Competency: LPHAs assigned to co-response duties must receive training in trauma-informed care, harm reduction, and law enforcement collaboration protocols, including Crisis Intervention Team (CIT) principles.

4. Documentation: All co-response encounters must be documented in the Proposer's electronic medical record (EMR) system, including LPHA recommendations, safety plans, and rationale for law enforcement involvement.
  5. Coordination: Proposers shall maintain written protocols and Memoranda of Understanding (MOUs) with law enforcement agencies outlining roles, responsibilities, and communication pathways for co-response operations. Proposers shall outline clear criteria for activating co-response teams, including safety indicators and coordination with 911 and 988 systems.
- xix. The Supervision plan shall be included and must meet the criteria outlined in Mobile Crisis Program Guidance (2019).
  - xx. Supervision plan must include:
    1. Availability of a Mobile Crisis Professional to provide supervision to scheduled Mobile Crisis Staff 24 hours a day.
    2. Mobile Crisis professionals and staff shall have access to routine clinical supervision.
    3. Individuals the staff member supervises
    4. Frequency of supervision (for both the staff member and who they supervise)
    5. Staff debrief plan.

#### 4. AWARD STRUCTURE:

- a. The Oneida County Department of Mental Health reserves the right to award contracts and/or funding to one or more qualified Proposers, or to a consortium of agencies based on demonstrated capacity to meet the requirements outlined in this RFP. Proposers may propose delivering all required services or a subset of services, provided that the proposal includes:
  - i. A comprehensive service delivery plan detailing how the Proposer (or consortium) will ensure 24/7/365 coverage for crisis hotline and mobile crisis response services in accordance with NYS OMH Program Guidance and SAMHSA best practices.
  - ii. A staffing plan that demonstrates adequate licensed and qualified personnel, supervision, and coverage during peak operating hours, as well as contingency plans for surge and overnight response.
  - iii. Clear protocols for coordination and integration among consortium partners, including delineation of roles, responsibilities, and communication pathways to ensure seamless service delivery.

- iv. Evidence of the Proposer's ability to comply with all reporting, quality assurance, and performance standards specified in this RFP.
- b. The County may allocate funds to multiple successful proposers or consortium partners to achieve geographic coverage, specialized service capacity (e.g., youth/family, co-occurring MH/SUD), and equitable access for all residents of Oneida County. Award decisions will prioritize proposals that demonstrate collaboration, efficiency, and fidelity to regulatory and best practice standards.
- c. Training: The successful proposer(s) shall ensure that all individuals providing mobile crisis/crisis intervention services receive the proper training to provide quality services. All staff are required to receive training on the administration of opioid antagonists (Narcan), trauma-informed care, de-escalation strategies, and harm reduction. Staff completion of required trainings shall be documented in their personnel file and in the program's records.
- d. The Proposer will provide a training plan to include what trainings are to be completed and by which roles.
- e. NYS Mental Hygiene Law §9.45: If approved by the Oneida County Commissioner of Mental Health, the Proposer's staff shall execute Mental Hygiene Law §9.45 to local §9.39 hospitals for further evaluation.
  - i. There must be an individual scheduled for each shift that is an approved §9.45 designee.
  - ii. The Proposer shall maintain internal protocols for deciding when it is appropriate to utilize a NYS MHL §9.45 order as per the regulations.
  - iii. The Proposer shall provide such protocols to the County.
  - iv. The Proposer shall use the minimum necessary amount of information needed to execute a §9.45 removal and shall not require in-depth assessments to determine if an individual shall be removed or not.
  - v. If the Proposer determines that an individual meets §9.45 removal criteria, they shall not have other entities evaluate the individual for removal (i.e. law enforcement or the County) and should immediately execute a §9.45 removal to a §9.39 hospital.
  - vi. The Proposer shall have its staff members participate in trainings on appropriate §9.45 removal. Trainings must be approved and/or facilitated by OCDMH.
  - vii. The Proposer shall send copies of executed §9.45 removals to the County immediately after execution.
  - viii. The Proposer shall provide follow-up to individuals removed via §9.45.



- ix. The Proposer shall work to apply for NYS designation as an approved mobile crisis outreach team for the purposes of issuing MHL §9.58 removals.

## 5. REPORTING

- a. **REPORTING REQUIREMENTS:** The Proposer agrees to comply with the County's contract monitoring process, which in addition to the completion and submission of quarterly progress reports (as outlined below), may include participation in contract compliance evaluations, completion of quality assurance participant surveys, and/or other measures deemed necessary by the County to ensure contract compliance.
- b. **Performance Indicators:** The Proposer shall collect, maintain, and report on the following metrics:
  - i. **Timeliness of Response:** Percentage of in-person crisis responses initiated within three (3) hours of determination of need.
  - ii. **Volume of Contacts:** Total number of crisis calls triaged, in-person mobile responses, telephonic follow-ups, and MHL §9.45 transports.
  - iii. **Disposition Outcomes:** Percentage of crisis events diverted from emergency departments or inpatient hospitalization.
  - iv. **Follow-Up Engagement:** Percentage of individuals who receive follow-up within 24 hours and/or within 14 days of the initial crisis episode.
  - v. **Staff Coverage and Supervision:** Ratio of licensed to non-licensed staff per shift, and verification of 24/7 supervisory availability.
  - vi. **Documentation Compliance:** Percentage of records containing completed LPHA recommendation, safety plan, and crisis documentation consistent with OMH guidance.
- c. **Performance Reporting:** The Proposer agrees to develop, and submit to the County, on the last business day of the following month at the end of each quarter (e.g. January-March report due April 30th), a quarterly progress report containing relevant contract-related performance measures, outcomes, impacts, de-identified success stories, and updates for that reporting period. After developing the performance report, the Proposer shall receive approval by the County. Such report is subject to changes at the discretion of the County. The Proposer shall also submit a yearly report on the overall outcomes and impacts of their services, which may be shared publicly with the community.
  - i. **Performance Thresholds:** The County shall, in consultation with OMH and consistent with SPA #22-0026, establish minimum thresholds (e.g., 90% of in-person responses within 3 hours). Failure to meet these thresholds triggers the corrective actions described below.

- ii. **Corrective Action Requirement:** If the Proposer fails to meet performance standards for two consecutive reporting periods, it shall submit a Quality Performance Review (QPR) within fifteen (15) business days. The QPR shall identify deficiencies, describe corrective steps, assign responsible parties, and provide an implementation timeline.
- iii. **County Review and Enforcement:** The County will review the QPR within ten (10) business days. Continued failure to meet performance expectations may result in mandatory technical assistance or audit visits and/or contract termination in accordance with the Termination Clause.
- iv. **Data Sharing:** The Proposer shall submit to the County any and all data pertaining to the services provided through this Agreement and will produce, at minimum, quarterly formal reports to OCDMH with impacts and statistics of the project. The Proposer shall also produce a yearly report that may be shared publicly. The Proposer shall provide increased direct and regular reporting of data to the County if requested. The Proposer shall present at local coalition meetings or platforms, if requested, to share progress, impact, data, and lessons learned. In addition to quarterly reports, the Proposer shall:
  - 1. Submit de-identified raw data exports (in CSV or Excel format) from the electronic medical record or other tracking systems, reflecting timeliness, service volume, and outcomes. –
  - 2. Proposers shall collect and report data differentiating in-person and telehealth responses, including timeliness, disposition outcomes, and follow-up engagement. Reports must include modality-specific metrics for children, youth, and adults, and be submitted quarterly to OCDMH.
  - 3. Permit the County to conduct random file reviews and audits of response times, documentation, and service quality.
  - 4. Ensure all data aligns with OMH Program Code 0680 reporting standards and Mental Health Applicant Data Exchange (MHPD) requirements.
  - 5. The Proposer shall submit monthly performance dashboards and quarterly summary reports to the County. Reports shall include trend analysis, data sources, and explanations for deviations or missing data. The County reserves the right to require additional data as needed.

## 6. QUALITY ASSURANCE:

- a. The Proposer shall participate in Quarterly Quality Review Meetings with the County to review performance data, audit findings, and quality trends.
- b. The County shall conduct an Annual Compliance Review to assess program performance, staffing qualifications, supervision documentation, and training compliance.

- c. The Proposer shall maintain a Continuous Quality Improvement (CQI) Plan consistent with OMH Crisis Intervention standards and use performance data to guide ongoing quality improvements.

## 7. PROPOSAL REQUIREMENTS

- a. All proposals must include the elements listed/numbered below. If you are unable or unwilling to include certain elements, please indicate why. Please attach any additional relevant information or documentation that you feel would aid Oneida County in their selection process and provide specific page number references. A non-responsive or incomplete proposal may be removed from consideration.

- i. Proposal Cover Sheet
- ii. Proposal Narrative
- iii. Budget for 18 months from Award date (6/1/2026 – 12/31/2027)
- iv. Letters of Support
- v. Signed copies of the Certifications accompanying this RFP.

### b. NARRATIVE & BUDGET GUIDELINES

- i. Full Proposal Narrative and Budget must specifically address each of the required elements below:

#### 1. Technical Capability

- a. Capability, Capacity, and Qualifications of the Proposer – Please provide a detailed description of the Proposer’s experience. A list of relevant community-based partnerships/relationships/collaborations must be provided, to include names of agencies, addresses and phone numbers.
- b. Provide a brief background on Proposer’s history, mission, core values and goals, areas served, and target demographic. Note if your organization has gone through significant changes in leadership, size, mission, or practice. Please include a description of founding date, ownership, current officers and a copy of your most recent financial statement.
- c. Provide description of current staffing and the professional qualifications of key operations and program administration personnel. List the total number of full-time and contract employees.
- d. Describe Proposer’s organizational infrastructure as it relates to its capacity to deliver the proposed services, including information on the expertise and experience of key executives, staff, and directors.

- e. Describe the nature and frequency of management reports indicating service utilization, referrals, follow-up, and member satisfaction. Please provide samples of all available reports.
- f. If the proposer is partnering with another agency/organization to submit a collaborative/joint proposal, please include information for both proposer organizations, as well as an explanation of partnership history.

## 2. Project Description & Activities

- a. Provide a description of your approach to providing the MCAT services.
- b. Provide a detailed implementation timeline, phased approach allowable, outlining project start-up through complete model delivery with a focus on staffing to meet all service delivery needs that does not exceed eighteen months (18 months) from award date. The timeline must demonstrate how full-service delivery needs will be met progressively and sustainably within the contract term.
- c. Describe the service delivery model, including which services would be delivered, how frequently services would be delivered, where the services will be delivered, and by whom services will be delivered for the target populations. Include the number of clients your organization intends to serve at different points in time.

## 3. Collaboration

- a. Identify any other organizations that will have a significant role in the delivery of proposed services and clearly explain each role.
- b. Provide an explanation of how all partners will work together in a collaborative manner to achieve the project's stated goal(s).
- c. Describe governance and decision-making structures for joint or consortium proposals.
- d. Outline shared protocols for referrals, data sharing, and quality assurance.
- e. Demonstrate how collaboration will reduce duplication, improve timeliness, and ensure continuity of care for individuals in crisis.

## 4. Outcomes & Impact

- a. Identify, track and monitor anticipated outcome measures of proposed project, including a plan (if applicable) for tracking and monitoring outcomes within an electronic system, and any plans for quality improvement/assurance.

- b. What metrics, if any, will Proposer use to measure the effectiveness of the intervention?
  - c. Describe any data-driven, evidence-based screening/assessment tools Proposer will use.
- 5. Data Sharing
  - a. Describe process for sharing data and project information with OCDMH and other partner organizations (e.g. Direct and regular reporting of data to OCDMH, presentations during local coalition meetings, etc.).
- 6. Budget & Justification
  - a. Budget format: OCDMH requires a line-item budget for all funded projects.
  - b. Please use budget template provided.
  - c. A detailed budget justification should accompany all budgets and should include an explanation for each line item in narrative format. Budget justification must also detail Proposer's plans for sustainability. Justification may be included in the Budget Template, in body of the proposal or as a separate attachment.
- 7. Organizational Contribution/In Kind support: Contributions of non-personnel goods and services should be quantified. State the total in-kind support in the budget justification. Include in-kind staff time within the line-item budget.
- 8. Other Elements
  - a. Demonstrate the ability and flexibility of your organization to adapt or refine to changing needs of the target population and to meet outcome targets while maintaining fidelity to agency/program model. Describe specific experiences where possible.
  - b. Explain any modifications to current or ongoing operations that may be necessary to implement your proposed program/project.
- 9. LIMITATIONS
  - a. No limit on the number of proposals eligible organizations can submit.
  - b. Proposed budgets should not exceed approximately \$1.2 million dollars annually.
- 10. FORMAT OF PROPOSALS
  - a. Double spaced, 1-inch margins, pages numbered

- b. Tables, charts, etc. do not need to be double spaced
- c. 12-point font
- d. Proposal Narrative Page Limit: 25 pages (excluding the cover sheet)
- e. Page limit does not include Letters of Support, Budgets, or other attachments.
- f. Proposals should be submitted as a single PDF. Please label your file:  
<Organization Name><Proposal Title>OCDMH 2026 Proposal

#### 11. SUBMISSION PROCESS

- a. Please submit single PDF electronic copy of your full proposal. All proposals must be received by 4:00 p.m. Eastern Time on March 13, 2026.
- b. Proposals must be sent to [mhfiscal@oneidacountyny.gov](mailto:mhfiscal@oneidacountyny.gov) with the subject line “RFP #2026-447: Oneida County Department Of Mental Health 24/7 Crisis Services: Crisis Hotline And Mobile Crisis Response”. If your email system does not allow for large attachments to be sent via email or if you have any questions prior to submission, please contact OCDMH for alternative electronic submission options. It is the proposer’s responsibility to ensure electronic copies are received by OCDMH by the appropriate date and time. No late submissions will be accepted.

#### 8. SCORING & EVALUATION

- a. The Oneida County Department of Mental Health and its Community Services Board have reviewed and approved the Evaluation Criteria listed below and the Full Proposal Scoring & Evaluation Rubric. Please carefully review all criteria for details on scoring and evaluation of submissions.
- b. EVALUATION OF FULL PROPOSALS:
  - i. The County reserves the right to cancel this RFP, and to accept, reject, or award any or all proposals received, in its sole discretion.
  - ii. All full proposals will be reviewed and scored by a Technical Review Committee made up of members from the Oneida County Department of Mental Health and its Community Services Board. Proposals will be judged based on the Proposer’s ability to meet criteria identified in the Scoring & Evaluation Rubric.
  - iii. Oneida County reserves the right to make such investigations as it deems necessary to determine the ability of the Proposer to provide services meeting a satisfactory level of performance in accordance with Oneida County's requirements.

- iv. Points will be assigned based on the Proposer’s clear demonstration of their abilities to complete the proposed work, apply appropriate methods to complete the work, create innovative/improvement solutions, sustain program beyond demonstration period, and a host of other relevant criteria (listed below).
- v. Proposers may be required to submit additional written information or be asked to make an oral presentation before the Technical Review Committee to clarify statements made in their proposal so that the Technical Review Committee is able to better understand and compare the Proposers' capabilities.
- vi. Proposals will be reviewed, rated and ranked in order of highest score based on the following point system:

1. Technical Capability	3
2. Project Description & Activities	3
3. Priority Area	3
4. Demonstrated Need	3
5. Sustainability	3
6. System of Care Engagement	6
7. Outcomes & Impact	3
8. Budget/Justification	3
9. Data Sharing	3
10. TOTAL POSSIBLE POINTS	30 Points

c. CONTACT INFORMATION:

- i. (315) 768-3660
- ii. Mhfiscal@oneidacountyny.gov

9. CONTRACT CONSIDERATIONS

- a. The length/duration of awarded contracts will be determined by the County upon review of awardee’s proposal and budget submissions.
- b. This RFP and each successful proposal will become attachments to the resulting contracts or agreements. All information contained within an RFP, proposals received, and county contracts is subject to public inspection and copying if not otherwise protected by federal or state law.

- c. All Proposers are hereby advised that the County reserves the right to contact parties name in Letters of Support provided as a part of any proposal and may solicit and secure background information based on the information, including references, provided in response to this RFP. By submission of a proposal, all Proposers agree to such activity and release the County from all claims arising from such activity.
- d. Proposals may be modified or withdrawn at any time prior to the deadline for submission, upon written notice to the County.
- e. Any award resulting from this RFP shall be subject to approval by the Oneida County Board of County Legislators, in its sole discretion.

## 10. INSURANCE & INDEMNIFICATION

11. The chosen Proposer(s) shall provide insurance and indemnification to the County in accordance with the provisions below, and the same shall be included in the contract between the chosen Proposer and the County.

### a. INSURANCE

- i. The chosen Proposer shall purchase and maintain insurance of the following types of coverage and limits of liability with an insurance carrier qualified and admitted to do business in the State of New York. The Insurance carrier must have at least an A- (excellent) rating by A. M. Best. Accepted proposals which do not require each of the following types of coverage, in the discretion of the County, may be permitted by the County to omit such type of coverage from the subsequent Agreement.

1. Commercial General Liability (CGL) coverage with limits of Insurance of not less than \$1,000,000 each occurrence and \$3,000,000 Annual Aggregate.

- a. CGL coverage shall be written on ISO Occurrence form CG 00 01 1001 or a substitute form providing equivalent coverage and shall cover liability arising from premises, operations, independent contracts, products-completed operations, and personal and advertising injury.

- b. Oneida County, and all other parties required of Oneida County, shall be included as additional insureds. Coverage for the additional insureds shall apply as Primary and Non-contributing Insurance before any other insurance or self-insurance, including any deductible or self-insured retention, maintained by, or provided to, the additional insureds. Coverage for these additional insured shall include completed operations.

- c. Abuse and Molestation coverage must be included.

2. Professional Liability coverage with limits of \$1,000,000 each occurrence and \$2,000,000 aggregate.



- a. Coverage for review of cases and resulting Professional assessment.
  - b. Coverage for abuse and molestation
- 3. Automobile Liability
  - a. Business Auto Liability with limits of at least \$1,000,000 each accident.
  - b. Business Auto coverage must include coverage for liability arising out of all owned, leased, hired and non-owned automobiles.
  - c. Oneida County shall be included as an additional insured on the auto policy. Coverage for the additional insured shall apply as Primary and Non-contributing Insurance before any other insurance or self-insurance, including any deductible or self-insured retention, maintained by, or provided to, the additional insured.
- 4. Commercial Umbrella
  - a. Umbrella limits must be at least \$5,000,000.
  - b. Umbrella coverage must include as additional insureds all entities that are additional insureds on the CGL.
  - c. Umbrella coverage for such additional insureds shall apply as primary and non-contributing before any other insurance or self-insurance, including any deductible or self-insured retention, maintained by, or provided to, the additional insured other than the CGL, Auto Liability and Employers Liability coverages maintained by the County of Oneida.
- 5. Workers' Compensation and Employers Liability.
- 6. Statutory limits apply.
- ii. The chosen Proposer shall waive all rights against Oneida County and their agents, officers, directors and employees for recovery of damages to the extent these damages are covered by Commercial General Liability, Professional Liability, Automobile Liability, Umbrella Liability or Workers' Compensation and Employers Liability insurance maintained per requirements stated above.
- iii. Prior to the start of any work the chosen Proposer shall provide a certificate of insurance to the County. Attached to each certificate of insurance shall be a copy of the Additional Insured Endorsement that is part of the chosen Proposer's Commercial General Liability Policy. These certificates and the insurance policies required above shall contain a provision that coverage afforded under the policies will not be canceled or allowed to expire until at least 30 days' prior written notice has been given to the County.



## Required Certifications

(Sign and Return With Proposal)

It is understood and agreed by the Offeror that:

1. This Request for Proposals (hereinafter "RFP") does not commit the County of Oneida (hereinafter the "County") to award any contracts, pay the costs incurred in the preparation of response to this RFP, or to procure or contract services. The County reserves the right to accept or reject any or all proposals that do not completely conform to the instructions given in the RFP.
2. The County reserves the right to amend, modify or withdraw this RFP, and to reject any proposals submitted, and may exercise such right at any time, without notice and without liability to any offeror (hereinafter the "Applicant") or other parties for their expenses incurred in the preparation of a proposal or otherwise. Proposals will be prepared at the sole cost and expense of the Applicant.
3. Submission of a proposal will be deemed to be the consent of the Applicant to any inquiry made by the County of third parties with regard to the Applicant's experience or other matters relevant to the proposal.
4. The awarded agreement may be terminated in whole or in part, by the County. Such termination shall not affect obligations incurred under the awarded agreement prior to the effective date of such termination.
5. Funds shall not be paid in advance and shall be used only for service as approved by the County. The County shall have no liability to anyone beyond funds appropriated by New York State Office of Mental Health and made available for the contract.
6. Any significant revision of the approved proposal shall be requested in writing by the Applicant prior to enactment of the change.
7. Necessary records and accounts, including financial and property controls, shall be maintained and made available to County for audit purposes.
8. All reports of investigations, studies, publications, etc., made as a result of this proposal, information concerning individuals served, and/or studies under the project, are confidential and such information shall not be disclosed to unauthorized persons. Applicants acknowledge that the County is subject to Article 6 of the Public Officers Law.

All references to time contained in this RFP are Eastern Standard Time. Applicants are encouraged to make their submissions in advance of the submission date, as the dates and times specified in this RFP may not be extended in the event Oneida County offices are closed for any reason, including, but not limited to, inclement weather.

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Legal Name of Organization

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Signature

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Date

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Printed Name/Title

## NON-COLLUSION CERTIFICATE

(GML § 103-d)

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid, each party thereto certifies as to its own organization, under penalty of perjury, that to the best of his/her knowledge and belief:

1. The prices in this bid have been arrived at independently without collusion, consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor;
2. Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or to any competitor; and
3. No attempt has been made or will be made by the bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

I further certify that I have not, nor has my organization, been disqualified to contract with any municipality and I am, and/or my organization is, in a position to accept any contract subject to the provision of Section 103-d of the General Municipal Law.

*The word "bid" shall be construed as if it read "proposal" and the word "bidder" shall be construed as if it read "Applicant", whenever the sense of this certification so requires.*

\_\_\_\_\_  
Legal name of organization

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

## **SEXUAL HARRASSMENT PREVENTION CERTIFICATE**

(Lab. Law § 201-g)

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid, each party thereto certifies as to its own organization, under penalty of perjury, that the bidder has, and has implemented, a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of his/her/its employees. Such policy, at a minimum, meets the requirements of Section 201-g of the Labor Law.

*The word "bid" shall be construed as if it read "proposal" and the word "bidder" shall be construed as if it read "Applicant", whenever the sense of this certification so requires.*

\_\_\_\_\_  
Legal name of organization

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

**IRAN DIVESTMENT ACT COMPLIANCE**  
**CERTIFICATION**

(GML § 103-g)

By submitting a bid in response to this solicitation or by assuming the responsibility of a contract awarded hereunder, each bidder, any person signing on behalf of any bidder and any assignee or subcontractor and, in the case of a joint bid, each party thereto, certifies, under penalty of perjury, that to the best of his/her/its knowledge and belief, that each bidder and any subcontractor or assignee is not identified on the Prohibited Entities List created pursuant to State Finance Law § 165-a (3) (b).

Additionally, the bidder is advised that any bidder seeking to renew, extend or assume a contract award in response to this solicitation, must certify at the time the contract is renewed, extended or assigned, that it is not included on the Prohibited Entities List.

During the term of the Contract, should the County receive information that a bidder is in violation of the above-referenced certification, the County will offer the person or entity an opportunity to respond. If the person or entity fails to demonstrate that he/she/it has ceased engagement in the investment that is in violation of the Act within ninety (90) days after the determination of such violation, then the County shall take such action as may be appropriate including, but not limited to, imposing sanctions, seeking compliance, recovering damages or declaring the bidder in default.

The County reserves the right to reject any bid from, or request for assignment for, a bidder that appears on the Prohibited Entities List prior to the award of a contract and to pursue a responsibility review with respect to any bidder that is awarded a contract and subsequently appears on the Prohibited Entities List.

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid, each party thereto certifies as to its own organization, under penalty of perjury, that to the best of his/her knowledge and belief, she/he/it is not identified on the Prohibited Entities List.

*The word “bid” shall be construed as if it read “proposal” and the word “bidder” shall be construed as if it read “Applicant”, whenever the sense of this certification so requires.*

\_\_\_\_\_  
Legal name of organization

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title