Office of State Courts Administrator
P.O. Box 104480
2112 Industrial Drive
Jefferson City, Missouri 65110- 4480

CONTRACT RENEWAL 001
RFP NO. OSCA-14-042
TITLE: Specialized Treatment Provider for Treatment Court
ISSUE DATE: February 10, 2015

CONTACT: Beth Rodeman

PHONE NO.: (573)522-2617
E-MAIL: osca.contracts@courts.mo.gov

RETURN PROPOSAL NO LATER THAN: March 6, 2015

MAILING INSTRUCTIONS: Print or type **RFP Number** and **Return Due Date** on the lower left hand corner of the envelope.

RETURN PROPOSAL TO:

(U.S. Mail)
Office of State Courts Administrator
Attn: Contract Unit
PO Box 104480
Jefferson City Mo 65110 - 4480

or

(Courier Service)
Office of State Courts Administrator
Attn: Contract Unit
2112 Industrial Dr
Jefferson City Mo 65109

CONTRACT PERIOD: JULY 1, 2015 THROUGH JUNE 30, 2016

DELIVER SUPPLIES/SERVICES FOB DESTINATION TO THE FOLLOWING ADDRESS:

VARIOUS LOCATIONS THROUGHOUT THE STATE OF MISSOURI

The vendor hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions of the Request for Proposal. The vendor further agrees that the language of this RFP shall govern in the event of a conflict with his/her proposal. The vendor further agrees that upon receipt of an authorized purchase order or when this RFP is countersigned by an authorized official of the Office of State Courts Administrator, a binding contract shall exist between the vendor and the Office of State Courts Administrator.

SIGNATURE REQUIRED

AUTHORIZED SIGNATURE: Michelle Jones COO NBSCG	DATE: 3/31/2015
PRINTED NAME: Michelle Jones	TITLE: COO
COMPANY NAME: New Beginnings Counseling Group, Inc.	
MAILING ADDRESS: 318 North Main Street	
CITY, STATE, ZIP: Maryville, MO 64468	
E-MAIL ADDRESS: nubeginningscc@gmail.com	FEDERAL EMPLOYER ID NUMBER: [redacted]
PHONE NUMBER: 660-562-3000	FAX NUMBER: 660-562-3002

NOTICE OF AWARD (OSCA USE ONLY)

ACCEPTED BY OFFICE OF STATE COURTS ADMINISTRATOR AS FOLLOWS: In its entirety as submitted.		
CONTRACT NUMBER: OSCA 14-042-23		CONTRACT PERIOD: July 1, 2015 through June 30, 2016
CONTRACTS PRINCIPLE MANAGEMENT ANALYST: Russell W. Gottmann	DATE: 4/1/15	DEPUTY STATE COURTS ADMINISTRATOR: Earl Boomer

CONTRACT RENEWAL 001 to OSCA 14-042-23

TITLE: SPECIALIZED TREATMENT PROVIDER FOR TREATMENT COURT

CONTRACT RENEWAL PERIOD: JULY 1, 2015 THROUGH JUNE 30, 2016

The Office of State Courts Administrator desires to renew the above referenced contract.

Due to budget shortfalls and the expansion of Treatment Courts, the Office of State Courts Administrator requests there not be any increase in cost for this contract period.

Whether or not conditions and provisions of the contract shall remain the same and apply hereto. The vendor is to date, sign and return this document with a completed pricing page on or before the date indicated.

PRICING PAGE – RENEWAL 001

The vendor must provide firm, fixed prices for the services identified below. The prices stated herein shall be legally binding for the entire contract period.

Service Description	Vendor Firm, Fixed Unit Price	Unit of Service
Assessment	65.00	per assessment
Assessment option (Multi-axial)	75.00	per assessment
Assessment update	32.50	per assessment
HIV or TB Post test counseling		per ¼ hour
Individual Counseling	11.00	per ¼ hour
Individual Counseling (Co-Occurring Disorder)	11.00	per ¼ hour
Individual Counseling (Trauma related)	11.00	per ¼ hour
Individual Counseling (Collateral Relationship)	11.00	per ¼ hour
Relapse Prevention Counseling	10.00	per ¼ hour
Case Management		per ¼ hour
Family Conference	10.00	per ¼ hour
Codependency Individual Counseling	10.00	per ¼ hour
Codependency Group Counseling	10.00	per ¼ hour
Family Counseling	10.00	per ¼ hour
Social Setting Detoxification		per day
Residential Support		per day
Day Treatment		per day
Extended Day Treatment		per day
Group Counseling	2.75	per ¼ hour
Group Counseling (Collateral relationship)		per ¼ hour
Group Education	2.75	per ¼ hour
Group Education (Trauma Related)	2.75	per ¼ hour
Medication Services		per ¼ hour
MAT Medication		per dosage

Medication: [Medication Assisted Treatment (MAT)]		Per prescription
Missouri Recovery Support Specialist (MRSS)		Per ¼ hour
Missouri Recovery Support Specialist Peer (MRSS-P)		Per ¼ hour
Relapse Prevention Counseling	10.00	Per ¼ hour
Residential Support		Per day
Treatment Court Day	10.00	Per ¼ hour
Virtual Counseling (Group)		Per ¼ hour
Virtual Counseling (Individual)		Per ¼ hour
Drug/Alcohol Testing: Sample Collection Only (Lab conf. only)		Per test
Sample Collection with 1-panel on-site provided by vendor		Per test
Sample Collection with 2-panel on-site provided by vendor		Per test
Sample Collection with 3-panel on-site provided by vendor		Per test
Sample Collection with 4-panel on-site provided by vendor		Per test
Sample Collection with 5-panel on-site provided by vendor		Per test
Sample Collection with 6-panel on-site provided by vendor		Per test
Sample Collection with 7-panel on-site provided by vendor		Per test
Sample Collection with 8-panel on-site provided by vendor		Per test
Sample Collection with 9-panel on-site provided by vendor	10.00	Per test
Drug Testing: Sample Collection and On-Site Test (Kit provided by Treatment Court)	5.00	Per test
Drug Testing: Breathalyzer (Equipment provided by vendor)		Per test
Drug Testing: Breathalyzer (Equipment provided by Treatment Court)	2.00	Per test

Evidence Based Program and Practice curriculum being utilized:

Motivational Interviewing and CBT.

Which Cognitive Behavioral intervention staff is qualified to deliver:

Dr. Carla Edwards, Michele Tower + Diane Courtney

Please indicate if Medication Assisted Treatment (MAT) is provided. If you do not provide MAT, how and with whom MAT services are arranged and how all services are coordinated.

New Beginnings Counseling Group, Inc. screens and assesses every individual seeking treatment services with Saint Joseph Metro Treatment Center. The Addiction Severity Index is utilized during the intial assessment. When the Addiction Severity Index indicators identify heavy and /or long term use of opiates, an additional assessment tool will be used such as Clinical Opiate Withdrawal Scale. The use of this tool will bes dtermine patient approriateness for referral to a medication assisted treatment program for services. The following protocol is used when scores on these assessment tools indicate current opiate withdrawal: New Beginnings Counseling Group Inc. staff will contact St. Francis Hospital and Health Services for further assessment and treatment as required. Once the patient is stabilized additional referrals for the patient to receive medication assisted treatment services will be made to provivider of these services.

All patients referred to a Medication Assisted Treatment provider will sign an authorization to release confidenial information which will allow for consultation and communication between New Beginnings Counseling Group, Inc and the specializedf service provider.

The authorization to release confidential information will provide for two way communication which will facilitate coordination of treatment services between programs. New Beginnings Counseling Group, Inc and the medication assisted treatment provider shall consult on patient progress regularly, but at least every 30 days.

MOU with Saint Joseph Metro Treament Center to provide these services.

Pricing Page Continued

Instructions: Below is a list of the judicial circuits and counties in the state of Missouri. Check either the applicable counties or the entire judicial circuit(s) your agency shall provide services. Check the appropriate level of service that shall be provided: DWI, Adult, Family, Veterans and/or Juvenile. Check the applicable gender for which services shall be provided.

JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
1	Clark							
1	Schuyler							
1	Scotland							
2	Adair							
2	Knox							
2	Lewis							
3	Grundy							
3	Harrison							
3	Mercer							
3	Putnam							
4	Atchison	x	x	x	x	x	x	x
4	Gentry	x	x	x	x	x	x	x
4	Holt	x	x	x	x	x	x	x
4	Nodaway	x	x	x	x	x	x	x
4	Worth	x	x	x	x	x	x	x
5	Andrew							
5	Buchanan							
6	Platte							
7	Clay							
8	Carroll							
8	Ray							
9	Chariton							
9	Linn							
9	Sullivan							

23	Jefferson							
24	Madison							
24	St. Francois							
24	Ste. Genevieve							
24	Washington							
25	Maries							
25	Phelps							
25	Pulaski							
25	Texas							
26	Camden							
26	Laclede							
26	Miller							

EXHIBIT D

PERSONNEL EXPERTISE SUMMARY

(Complete this Exhibit for personnel proposed. Resumes or summaries of key information may be provided)

Personnel	Background and Expertise of Personnel and Planned Duties
1. William Sean Prescott (Name) Counselor/ Operations Officer (Title) Service Provider (Proposed Role/Function)	CADC, MBA, BS in Psychology. Has been a substance abuse counselor for 7 years. Will be providing and is qualified to provide all listed services in the RFP. Is a DOT certified collector, DOT certified SAP, SATOP certified provider in OMU, OEP, and WIP and is credentialed as a SATOP Qualified Professional.
2. Michelle Ann Jones (Name) Counselor, COO (Title) Service Providor (Proposed Role/Function)	COO,LMSW,CRADC,CS. . Has been in the mental health and treatment field for 17 years in various capacities. Will be providing and is qualified to provide all listed services in the RFP.
3. Carla E. Edwards (Name) PhD (Title) Licensed Psychologist (Proposed Role/Function) Service Provider	PhD. Has been in the mental health and substance abuse treatment field for over 20 years in various capacities. Will be providing and is qualified to provide all listed services in the RFP.
4. Diane Courtney (Name) Substance Abuse Counselor (Title) Service Provider (Proposed Role/Function)	BS,CRADC,SOP,CS. Has been a substance abuse counselor for a 11 years. Will be providing and is qualified to provide all listed services in the RFP. Is DOT certified collector, SATOP certified provider in OMU, OEP, and WIP and is credentialed as a SATOP Qualified Professional.
5. (Name) (Title) (Proposed Role/Function)	
6. (Name) (Title) (Proposed Role/Function)	