



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

RFP NO. OSCA 14-042
**TITLE: Specialized Treatment Provider
for Treatment Court**
ISSUE DATE: February 24, 2014

CONTACT: Russell Rottmann
PHONE NO.: (573)522-6766
E-MAIL: osca.contracts@courts.mo.gov

RETURN PROPOSALS NO LATER THAN: MARCH 17, 2014

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

RETURN PROPOSAL TO:

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

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

CONTRACT PERIOD: DATE OF AWARD THROUGH JUNE 30, 2015

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 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 <i>Judy Cowdry</i>		DATE 03/17/2014
PRINTED NAME Judy Cowdry		TITLE President
COMPANY NAME Community Services of MO, Inc.		
MAILING ADDRESS 1175 Cave Springs Estates Drive		
CITY, STATE, ZIP St. Peters, MO 63376		
E-MAIL ADDRESS msdaisy9002@aol.com		FEDERAL EMPLOYER ID NO. 431626726
PHONE NO. 636-441-9002	FAX NO. 636-441-4834	

NOTICE OF AWARD (OSCA USE ONLY)

ACCEPTED BY OFFICE OF STATE COURTS ADMINISTRATOR AS FOLLOWS: <i>ACCEPTED IN ITS ENTIRETY AS SUBMITTED</i>		
CONTRACT NO. <i>OSCA 14-042-09</i>	CONTRACT PERIOD <i>July 1, 2014 through June 30, 2015</i>	
CONTRACTS COORDINATOR <i>Herbert J. Lennett</i>	DATE <i>6-3-2014</i>	DEPUTY STATE COURTS ADMINISTRATOR <i>Carol Francis</i>



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CONTRACTS COORDINATOR	DATE	DEPUTY STATE COURTS ADMINISTRATOR

PRICING PAGE

The vendor must provide firm, fixed prices for the services identified below. Should a contract award be made based upon the vendor's proposal, the prices stated herein shall be legally binding for the entire contract period.

Service Description	Vendor Firm, Fixed Unit Price	Unit of Service
Assessment	\$100.00	Per assessment
Assessment option (Multi-axial)	\$175.00	Per assessment
Assessment update	\$ 25.00	Per assessment
Case Management/Community Support	\$ 12.50	Per ¼ hour
Communicable Disease Assessment/Education/Testing	Referred out	Per ¼ hour
Day Treatment	\$125.00	Per day
Detoxification (Social Setting)	Referred out	Per day
Detoxification (Modified Medical)	Referred out	Per day
Early Intervention (Intake)	\$ 25.00	Per ¼ hour
Early Intervention (Group Education)	\$ 3.25	Per ¼ hour
Early Intervention (Motivational Interviewing-Individual)	\$ 12.50	Per ¼ hour
Extended Day Treatment	\$175.00	Per day
Family Conference	\$ 12.50	Per ¼ hour
Family Therapy	\$ 12.50	Per ¼ hour
Group Counseling (Associate SA Counselor)	\$ 2.75	Per ¼ hour
Group Counseling (QSAP)	\$ 2.75	Per ¼ hour
Group Counseling (Collateral relationship)	\$ 2.75	Per ¼ hour
Group Education	\$ 2.75	Per ¼ hour
Group Education (Trauma Related)	\$ 2.75	Per ¼ hour
Individual Counseling	\$ 12.50	Per ¼ hour
Individual Counseling (Collateral Relationship)	\$ 12.50	Per ¼ hour
Individual Counseling (Co-Occurring Disorder)	\$ 15.00	Per ¼ hour
Individual Counseling (Trauma Related)	\$ 12.50	Per ¼ hour
Medication Services	Referred Out	Per ¼ hour

Medication: [Medication Assisted Treatment (MAT)]	Referred Out	Per prescription
Missouri Recovery Support Specialist (MRSS)	Referred Out	Per ¼ hour
Missouri Recovery Support Specialist Peer (MRSS-P)	Referred Out	Per ¼ hour
Relapse Prevention Counseling	\$ 12.50	Per ¼ hour
Residential Support	Referred Out	Per day
Treatment Court Day	\$ 15.00	Per ¼ hour
Virtual Counseling (Group)	Not offered	Per ¼ hour
Virtual Counseling (Individual)	Not Offered	Per ¼ hour
Drug/Alcohol Testing: Sample Collection Only (Lab conf. only)	\$ 13.75	Per test
Sample Collection with 1-panel on-site provided by vendor	\$ 7.25	Per test
Sample Collection with 2-panel on-site provided by vendor	\$ 8.00	Per test
Sample Collection with 3-panel on-site provided by vendor	\$ 8.25	Per test
Sample Collection with 4-panel on-site provided by vendor	\$ 8.75	Per test
Sample Collection with 5-panel on-site provided by vendor	\$ 9.00	Per test
Sample Collection with 6-panel on-site provided by vendor	\$ 9.50	Per test
Sample Collection with 7-panel on-site provided by vendor	\$ 10.00	Per test
Sample Collection with 8-panel on-site provided by vendor	\$ 10.25	Per test
Sample Collection with 9-panel on-site provided by vendor	\$ 10.50	Per test
Drug Testing: Sample Collection and On-Site Test (Kit provided by Treatment Court)	\$ 6.50	Per test
Drug Testing: Breathalyzer (Equipment provided by vendor)	FREE	Per test
Drug Testing: Breathalyzer (Equipment provided by Treatment Court)	FREE	Per test

Evidence Based Program and Practice curriculum being utilized:

Which Cognitive Behavioral intervention staff is qualified to deliver:

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.

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) that your agency shall provide services. Check the appropriate level of service and the applicable gender that shall be provided: DWI, Adult, Veterans, Family and Juvenile.

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							
4	Gentry							
4	Holt							
4	Nodaway							
4	Worth							
5	Andrew							
5	Buchanan							
6	Platte							
7	Clay							
8	Carroll							
8	Ray							
9	Chariton							
9	Linn							
9	Sullivan							
10	Marion							
10	Monroe							
10	Ralls							
11	St. Charles	X	X				X	X
12	Audrain	X	X				X	X

OSCA 14-042 Treatment Court Specialized Service Providers

12	Montgomery	X	X				X	X
12	Warren	X	X				X	X
JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
13	Boone							
13	Callaway							
14	Howard							
14	Randolph							
15	Lafayette							
15	Saline							
16	Jackson							
17	Cass							
17	Johnson							
18	Cooper							
18	Pettis							
19	Cole							
20	Franklin							
20	Gasconade	X	X				X	X
20	Osage							
21	St. Louis	X	X				X	X
22	St. Louis City							
23	Jefferson	X	X				X	X
24	Madison							
24	St. Francois							
24	Ste. Genevieve							
24	Washington							
25	Maries	X	X				X	X
25	Phelps	X	X				X	X
25	Pulaski	X	X				X	X
25	Texas	X	X				X	X

OSCA 14-042 Treatment Court Specialized Service Providers

26	Camden							
26	Laclede							
26	Miller							

JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
26	Moniteau							
26	Morgan							
27	Bates							
27	Henry							
27	St. Clair							
28	Barton							
28	Cedar							
28	Dade							
28	Vernon							
29	Jasper							
30	Benton							
30	Dallas							
30	Hickory							
30	Polk							
30	Webster							
31	Greene	X	X				X	X
32	Bollinger	X	X				X	X
32	Cape Girardeau	X	X				X	X
32	Perry	X	X				X	X
33	Mississippi							
33	Scott							
34	New Madrid	X	X				X	X
34	Pemiscot	X	X				X	X
35	Dunklin	X	X				X	X
35	Stoddard	X	X				X	X
36	Butler							
36	Ripley							
37	Carter	X	X				X	X
37	Howell	X	X				X	X

OSCA 14-042 Treatment Court Specialized Service Providers

37	Oregon	X	X				X	X
37	Shannon	X	X				X	X
JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
38	Taney							
38	Christian							
39	Barry							
39	Lawrence							
39	Stone							
40	McDonald							
40	Newton							
41	Macon							
41	Shelby							
42	Crawford	X	X				X	X
42	Dent	X	X				X	X
42	Iron	X	X				X	X
42	Reynolds	X	X				X	X
42	Wayne	X	X				X	X
43	Caldwell							
43	Clinton							
43	Daviess							
43	DeKalb							
43	Livingston							
44	Douglas	X	X				X	X
44	Ozark	X	X				X	X
44	Wright	X	X				X	X
45	Lincoln	X	X				X	X
45	Pike	X	X				X	X

RENEWAL OPTION

The Office of State Courts Administrator shall have the sole option to renew the contract for in one (1) year increments or any portion thereof for a maximum total of five (5) additional years.

Prices for the renewal period shall be requested no later than 90 days prior the effective renewal.

EXHIBIT A

PRIOR EXPERIENCE

The offeror should copy and complete this form for each reference being submitted as demonstration of the offeror and subcontractor's prior experience. In addition, the offeror is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

Offeror Name or Subcontractor Name: _____	
Reference Information (Prior Services Performed For:)	
Name of Reference Company:	
Address of Reference Company: <input checked="" type="checkbox"/> Street Address <input checked="" type="checkbox"/> City, State, Zip	
Reference Contact Person Information: <input checked="" type="checkbox"/> Name <input checked="" type="checkbox"/> Phone # <input checked="" type="checkbox"/> E-mail Address	
Dates of Prior Services:	
Dollar Value of Prior Services:	
Description of Prior Services Performed:	

As the contact person for the reference provided above, my signature below verifies that the information presented on this form is accurate. I am available for contact by OSCA for additional discussions regarding my company's association with the offeror referenced above:

Signature of Reference Contact Person

Date of Signature

EXHIBIT B

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. <u>Alan Carney, B.A., RSAP, QSAP</u> (Name) <u>Clinical Director</u> (Title) <u>Counselor</u> (Proposed Role/Function)	Twenty-eight years in substance abuse treatment. Experience in supervision management, program development, counseling and Drug Court Program administration.
2. <u>Jim Perkins, M.A., QSAP, RSAP</u> (Name) <u>Counselor</u> (Title) <u>Counselor</u> (Proposed Role/Function)	Twenty-three years in substance abuse treatment. Past program coordinator of St. Charles County Drug Court thru Bridgeway Counseling Services.
3. <u>Jim Browning, B.S., CASAC, QSAP</u> (Name) <u>Counselor</u> (Title) <u>Counselor</u> (Proposed Role/Function)	Fifteen years in substance abuse treatment. Past program coordinator of St. Charles County Drug Court thru Bridgeway Counseling Services.
4. <u>Mike Goodman, M.ED., LPC, QSAP</u> (Name) <u>Counselor</u> (Title) <u>Counselor</u> (Proposed Role/Function)	Twenty years in comprehensive mental health and substance abuse counseling, with some focus on families and adolescents. Past work experience with Drug court thru St. Charles County Family court 2004-2005.
5. <u>Robert H. Conner, Jr., M.ED., LPC, QSAP, CCGC</u> (Name) <u>Counselor</u> (Title) <u>Counselor</u> (Proposed Role/Function)	Twenty-three years in substance abuse treatment counseling.
6. <u>Arlene O'Brien, M.A., QSAP, CASC II</u> (Name) <u>Counselor</u> (Title) <u>Counselor</u> (Proposed Role/Function)	Fifteen years in substance abuse treatment, private probation officer.

EXHIBIT C

AFFIDAVIT OF WORK AUTHORIZATION

Comes now Judy Cowdry as President first being duly sworn on my oath
(NAME) (OFFICE HELD)
 affirm Community Services of Mo is enrolled and will continue to participate in a federal work
(COMPANY NAME)
 authorization program in respect to employees that will work in connection with the contracted services
 related to OSCA 14-042 for the duration of the contract, if awarded, in accordance with
(RFP NUMBER)
 RSMo Chapter 285.530 (2). I also affirm that Community Services of Mo does not and will not knowingly
(COMPANY NAME)
 employ a person who is an unauthorized alien in connection with the contracted services related to
OSCA 14-042 for the duration of the contract, if awarded.
(RFP NUMBER)

In Affirmation thereof, the facts stated above are true and correct (The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 285.530, RSMo).

Judy Cowdry Judy Cowdry
 Signature (person with authority) Printed Name
President 3/17/14
 Title Date

Subscribed and sworn to before me this 17 of March 2014 I am
(DAY) (MONTH, YEAR)
 commissioned as a notary public within the County of St Charles, State of
(NAME OF COUNTY)
MO, and my commission expires on 9-20-17.
(NAME OF STATE) (DATE)

M-E. Sandorf 3-17-14
 Signature of Notary Date



EXHIBIT D

MISCELLANEOUS INFORMATION

Outside United States

If any products and/or services bid are being manufactured or performed at sites outside the continental United States, the bidder MUST disclose such fact and provide details in the space below or on an attached page.

Are products and/or services being manufactured or performed at sites outside the continental United States?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Describe and provide details:		

RFP OSCA 11-036

EXHIBIT E

Certification Regarding

Debarment, Suspension, Ineligibility and Voluntary Exclusion

Instructions for Certification

1. By signing and submitting this proposal, the prospective recipient of Federal assistance funds is providing the certification as set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective recipient of Federal assistance funds knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the Department of Labor (DOL) may pursue available remedies, including suspension and/or debarment.
3. The prospective recipient of Federal assistance funds shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective recipient of Federal assistance funds learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective recipient of Federal assistance funds agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the DOL.
6. The prospective recipient of Federal assistance funds further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may but is not required to check the List of Parties Excluded from Procurement or Nonprocurement Programs.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntary excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the DOL may pursue available remedies, including suspension and/or debarment.

Certification Regarding
Debarment, Suspension, Ineligibility and Voluntary Exclusion

