

Questions & Answers

RFP for Substance Use Disorder Recovery Residences

Question #1: Are we able to apply for two different residences? If we apply for two different residences, should we complete two template forms as part of the same grant proposal or two separate grant proposals?

- **Answer #1:** If the bidder is applying for multiple residences or locations, the bidder should complete a template form for each residence and/or location as part of the bidder's grant proposal. All template forms should be included in the appendix of the Narrative Proposal. Bidders should submit only one grant proposal response per organization.

Question #2: Is it correct that funds should only be used to fund new positions and should not be used to fund existing positions?

- **Answer #2:** Federal funds may not be used to supplant existing positions funded by other sources. If the bidder has existing positions that are currently funded by another source, they should be listed in the in-kind tab. If the bidder is proposing new positions funded by the Rural Health Transformation (RHT) Program, those should be in the proposal and included in the salary/fringe tab.

Question #3: If there is a portion of existing staff anticipated to be unfunded by other sources, can we apply for this fund?

- **Answer #3:** Yes. If prior funding for existing staff is time-limited and will not continue, the bidder may apply for RHT funding for those positions. Bidders should clearly describe and justify this need in their proposal.

Question #4: What is the list of attestations?

- **Answer #4:** The list of attestations is provided in Section 3.1 Transmittal Letter in the RFP.

Question #5: If the bidder operates existing residences now, will they be ineligible within the county they operate?

- **Answer #5:** No. Bidders can apply for a residence in the same county where they currently operate.

Question #6: Do other grant monies go in the in-kind cost tab?

- **Answer #6:** Yes. Any funding that supports the proposed residence should be included in the in-kind cost tab (e.g., other federal funding and state funding, fundraising, membership dues).



Question #7: Is NARR Level III the highest level of service that will be funded, or if there are clinical services onsite (NARR Level IV) that meet a higher level, and we still meet the NARR Level III requirements, is the program eligible to apply?

- *Answer #7:* The RFP is limited to NARR Level II and Level III recovery residences. Programs operating at NARR Level IV are not eligible under this RFP.

Question #8: The RFP states that on or before August 1, 2027, 100% of staff need to fulfill relevant training and credential requirements. Where would we find these requirements?

- *Answer #8:* As of now, the required staff training and credential requirements are to be determined and will be negotiated as part of the successful bidder's grant agreement.

Question #9: What are the minimum and maximum number of beds allowed? Is there a range to the number of people in a residence?

- *Answer #9:* The RFP does not establish a minimum or maximum number of beds. Bidders should propose a home-like environment, as defined in the [NARR standards](#), rather than an institutional setting.

Question #10: Can an organization apply for funding for a residence if they don't have an address for it at the time of submission, so long as an address has been identified by August 1?

- *Answer #10:* Yes. Bidders should identify the county where the residence is intended to be located in both the Narrative Proposal and Recovery Residence Proposal Template. The bidder does not need to provide a specific address if it is not known at the time of submission.

Question #11: Is there a certain number of proposals that will be selected in this process?

- *Answer #11:* Refer to Section 5.1 Grant Award in the RFP. The Vermont Department of Health's goal will be to maximize the use of available funding based on proposal scoring.

Question #12: What is meant by the "certificate for preferred provider"?

- *Answer #12:* Preferred providers are specialty substance use disorder treatment providers certified by the Vermont Department of Health. As stated in the RFP, a list of Preferred Providers is available at <https://vthelplink.org/>.

Question #13: Are there any prohibitions on Chittenden County programs under the RHT Program?

- *Answer #13:* No. Residences may be physically sited anywhere in the State, including Chittenden County, provided the residence is able to serve individuals from rural communities. Refer to the Recovery Residence Proposal Template in

Section 3.2 Recovery Residence and Services Provided in the RFP, which instructs bidders to provide a location justification. If a bidder proposes a location in a county that already has an existing recovery residence, the bidder must briefly explain why the proposed location is suitable.

Question #14: Are these recovery residences considered transitional housing?

- *Answer #14:* No. These are recovery residences as defined through NARR and VTARR, not transitional housing.

Question #15: Is there a time limit for how long a person can stay in the recovery residence?

- *Answer #15:* No, the State does not have a maximum length of time in a recovery residence.

Question #16: Are space requirements 50+ square feet per person?

- *Answer #16:* Yes.

Question #17: What distinguishes a NARR Level II residence from a NARR Level III residence? Can a Level III serve as a Level II if there are other services that might be virtual or onsite?

- *Answer #17:* For information on the NARR levels, refer to Section 2.1 Required Certification in the RFP and the [NARR website](#) for definitions of each level. Proposals can include a combination of virtual and in-person services. The bidder should explicitly state in the proposal which services will be offered in person, and which will be virtual and provide justification for this approach.

Question #18: What is the expectation around integration of peer supports and clinical supports?

- *Answer #18:* Refer to Section 2.5 Required Health Care and Social Support Services in the RFP.

Question #19: Will funding cover food and essential needs for the residents?

- *Answer #19:* No, food for residents cannot be covered by RHT funding. Refer to Section 4.3 Allowable Costs and 4.4 Unallowable Costs. Essential needs will need to be defined and negotiated as part of the successful bidder's grant agreement.

Question #20: Are exits and returns to use detailed in the RFP or NARR requirements?

- *Answer #20:* Information on exits and returns to use will be addressed in the grant agreements.

Question #21: If the community around the proposed location does not have a local Recovery Center, is virtual linkage or transportation to the nearest Turning Point center acceptable?

- *Answer #21:* Yes. Virtual linkage or transportation to the nearest Recovery Center is acceptable.

Question #22: Is medically assisted opioid treatment allowed?

- *Answer #22:* Yes. The state supports the use of prescribed medications including medications for opioid use disorder in recovery residences.

Question #23: Could the Department of Health provide a description of how marijuana use interfaces with NARR Level II and Level III since marijuana is legal in Vermont?

- *Answer #23:* Please refer to [NARR](#) and [VTARR](#) standards.

Question #24: Where can I find criteria for successful transition to an in-home model?

- *Answer #24:* The RFP requires transition to permanent housing, not an in-home model. The Vermont Agency of Human Services (AHS) defines permanent housing as a housing unit with no limit on the length of occupancy, distinguishing it from emergency, temporary, or seasonal shelter. Permanent housing can be rental, owned, or a home with another individual(s) which is owned. It represents a stable, non-time-limited living situation. Refer to Section 3.4.8 of the RFP for how the bidder must describe exit criteria to assist people with transition to permanent housing.

Question #25: Will the Department of Health prioritize proposals in counties based on the number of recovery residences they have?

- *Answer #25:* Submitted proposals will first be reviewed for completeness and responsiveness to the RFP requirements. Location will also be considered. The bidder may propose residences in counties with existing recovery residences but should provide justification for the proposed location.

Question #26: Has an RHT Notice of Funding Opportunity for building renovations been posted yet?

- *Answer #26:* No. For additional information on opportunities, refer to the RHT Program RFPs/NOFOs here ([RHT Program RFPs/NOFOs | Health Care Reform](#)). Please refer to the RHT Fund link here for additional information ([H.R.1/Rural Health Transformation Fund | Health Care Reform](#))

Question #27: Can the Department of Health differentiate between mortgage and purchase in the allowable and unallowable costs?

- *Answer #27:* RHT funds may not be used to purchase a building outright. However, if the bidder already owns a building being repurposed or is using other funding for a down payment and has a resulting mortgage, RHT funds may be used to support mortgage payments.

Question #28: Can we prioritize corrections-involved persons in our narrative proposal and project scope?

- *Answer #28:* Yes. The bidder may propose any population that is appropriate for the programming and consistent with the RFP requirements.

Question #29: If site proposal will support more than two beds, are we also required to have the site/project licensed as a community residence through the Division of Licensing and Protection?

- *Answer #29:* No. Recovery housing is not a therapeutic community residence licensed through the Department of Disabilities, Aging and Independent Living (DAIL).

Question #30: Are we required to charge a room and board fee for all residents? If so, is there a threshold we need to meet?

- *Answer #30:* Refer to [NARR](#) and [VTARR](#) standards.

Question #31: If we pursue a Level II residence and don't identify a senior resident, are we required to have the house staffed 24/7/365?

- *Answer #31:* Refer to [NARR](#) and [VTARR](#) standards.

Question #32: If a developer was interested in partnering with multiple recovery agencies to acquire appropriate properties and rent to recovery groups, would that contractor be considered a subgrantee? Are security deposits a covered expense under this RFP?

- *Answer #32:* This question has been elevated to the RHT team and will be posted as an addendum once the Department of Health receives an answer. Please include any anticipated costs in the Budget Proposal. Refer to Section 4.3 Allowable Costs and 4.4 Unallowable Costs in the RFP.

Question #33: I see Broadband is an eligible expense; Are the other utilities (electric / heat / water / sewer...) and property maintenance eligible expenses?

- *Answer #33:* This question has been elevated to the RHT team and will be posted as an addendum once the Department of Health receives an answer. Please include any anticipated costs in the Budget Proposal. Refer to Section 4.3 Allowable Costs and 4.4 Unallowable Costs in the RFP.

Question #34: What KPIs will be used to determine eligibility for funding extensions into years 2-5? (Referencing Section 1.3 Grant Period)

- *Answer #34:* Key Performance Indicators (KPIs) will be determined during the negotiation process as part of the successful bidders grant agreement. At a minimum, KPIs will include occupancy rate expectations for Year 1.

Question #35: Unfortunately, our authorized representative was unable to attend the bidders conference scheduled on March 13, 2026. Will there be any other bidder conferences that we could attend? If not, is there any other way we could satisfy the bidder conference requirement?”

- *Answer #35:* No, there will not be a second bidders conference. As stated in the RFP, attendance at the mandatory bidders conference held on March 13, 2026, was a required condition of eligibility. At least one authorized representative of each bidder was required to attend the entire conference for the proposal to move forward for evaluation.

Question #36: Could you please let me know if a recording of the pre-bid conference is available? I was unable to attend the Zoom session and would appreciate it if you could share the link or file with me.

- *Answer #36:* No, there is no recording of the mandatory bidders conference publicly available. As stated in the RFP, attendance at the mandatory bidders conference held on March 13, 2026, was a required condition of eligibility. At least one authorized representative of each bidder was required to attend the entire conference for the proposal to move forward for evaluation.

Question #37: If an organization with a Recovery Residence grant were to receive an unexpected large bequest (money/assets gifted to the organization in a will), can we still draw down the full grant award?

- *Answer #37:* Yes, the organization may draw down the full grant award amount, even if they receive an unexpected large bequest. Any funding known at the time of application must be included in the in-kind tab in the Budget Proposal.

Question #38: If an organization with a Recovery Residence grant were to over-perform on fundraising relative to our anticipated operating budget, can it still draw down the full grant award?

- *Answer #38:* Yes, the organization can draw down the full grant award amount, even if they receive more funding through fundraising than expected. Any funding known at the time of application must be included in the in-kind tab in the Budget Proposal.

Question #39: If food is part of programming, is it an allowable expense under training/education and/or supplies?

- *Answer #39:* No, food cannot be covered by RHT funding. Refer to Section 4.3 Allowable Costs and 4.4 Unallowable Costs in the RFP.

Question #40: Are the costs associated with partnering with the health providers the responsibility of the lead applicant to cover under this RFP, or should we create a pathway of least resistance for referrals?

- *Answer #40:* Refer to Section 1.6 Community Partner and Section 2.5 Required Health Care and Social Support Services in the RFP. Preferred Providers must be used for Substance Use Disorder Treatment Services and Medication Management Services.

Question #41: Most of our program sites would have more than one local option for services, like MAT for example. We also want to give our participants options. Can we name more than one provider on the Recovery Residence Proposal Template OR could a resident choose another provider?

- *Answer #41:* Yes, the Recovery Residence Proposal Template can include multiple community partners. Refer to Section 1.6 Community Partner and Section 2.5 Required Health Care and Social Support Services in the RFP. Preferred Providers must be used for Substance Use Disorder Treatment Services and Medication Management Services.

Question #42: Do all beds in a house need to be designated as Recovery Residence beds? For example, can a house be certified if only half of the beds are certified?

- *Answer #42:* Yes, all beds in the recovery residence locations need to be designated Recovery Residence beds. This RFP is for recovery residence beds only. Refer to Section 2 Recovery Residence Requirements in the RFP.