State of Illinois Uniform Notice of Funding Opportunity (NOFO)
Summary Information

Awarding Agency Name	Human Services
Agency Contact	Barb Roberson (DHS.DBHR.GrantApp@Illinois.gov)
Announcement Type	Initial
Type of Assistance Instrument	Grant
Funding Opportunity Number	27-444-42-3841-02
Funding Opportunity Title	401 Suicide Prevention Call Center Enhancement (SPCE)
CSFA Number	444-42-3841
CSFA Popular Name	401 Suicide Prevention Call Center Enhancement (SPCE)
Anticipated Number of Awards	5
Estimated Total Program Funding	$6,712,547
Award Range	$187500 - $3487500
Source of Funding	Federal
Cost Sharing or Matching Requirements	No
Indirect Costs Allowed	Yes
Restrictions on Indirect Costs	No
Posted Date	08/06/2026
Application Date Range	08/06/2026 - 09/04/2026 : 12:00 PM
Grant Application Link	Please select the entire address below and paste it into the browser... https://www.dhs.state.il.us/page.aspx?item=179989
Technical Assistance Session	Offered : Yes Mandatory : No Date : 08/12/2026 : 12:00 PM Registration link : https://www.dhs.state.il.us/page.aspx?item=179992

English

Illinois Department of Human Services

JB Pritzker, Governor · Dulce M. Quintero, Secretary

401 Suicide Prevention Call Center Enhancement (SPCE) – (27-444-42-3841-02)

I. Basic Information

Awarding Agency Name	Illinois Department of Human Services
Agency Division Name	Division of Behavioral Health & Recovery (DBHR)
Agency Contact	Barb Roberson DHS.DBHR.GrantApp@illinois.gov
Announcement Type	Competitive
Funding Opportunity Title	401 Suicide Prevention Call Center Enhancement (SPCE)
Funding Opportunity Number	27-444-42-3841-02
Application Posting Date	August 6, 2026
Application Closing Date	September 4, 2026, 12:00 PM (Noon) Central Time
Catalog of State Financial Assistance (CSFA) Number	444-42-3841
Catalog of State Financial Assistance (CSFA) Name	401 Suicide Prevention Call Center Enhancement (SPCE)
Assistance Listing Number(s)	93.243 93.00R
Awarding Source	Federal
Estimated Total Program Funding Amount	$6,712,547 for September 30, 2026 - June 30, 2027
Anticipated Number of Awards	One (1) in Cook County Four (4) Outside of Cook County
Award Range	**Cook County** Range: $1,612,000 -$3,487,500 **Outside Cook County** Range: $187,500 - $1,125,000 Awards will fund activities from September 30, 2026, through June 30, 2027
Cost Sharing or Matching Requirement?	No
Indirect Costs Allowed?	Yes
Restrictions on Indirect Costs?	No
Technical Assistance Session Offered	Session Offered: Yes Date: 08/12/2026 Time: 12:00 p.m. Central Time Registration Link

IDHS: CSA Tracking System (state.il.us)

Centralized Repository Vault (CRV)

GATA Learning Management System (LMS)

A. Funding Details

1. Total Amount of Funding

a. The Department expects to award approximately $6,712,547 for September 30, 2026, through June 30, 2027.

b. The Department expects to award approximately $8,950,062 for each renewal year (12 months).

c. The source of funding for this program is Federal funds.

2. Number of Grant Awards

a. The Department anticipates funding approximately 5 grant awards to provide this program.

3. Expected Dollar Amount of Individual Grant Awards

a. The Department anticipates that the dollar amount of individual awards for **Cook County** will be between $1,612,000 and $3,487,500 for September 30, 2026, through June 30, 2027.

b. The Department anticipates that the dollar amount of individual awards **Outside of Cook County** will be between $187,500 and $1,125,000 for September 30, 2026, through June 30, 2027.

c. The Department anticipates that the dollar amount of individual awards for Cook County will be between $2,150,000 and $4,650,000 for each renewal (12 months).

d. The Department anticipates that the dollar amount of individual awards Outside of Cook County will be between $250,000 and $1,500,000 for each renewal (12 months).

4. Amount of Funding per Grant Award on average in previous years

a. Previous funding amounts per grant award on average were $324,601 (FY27 for 3 months)

5. Renewal of Existing Projects Eligibility

a. Applications for renewal of existing projects are eligible to compete with applications for new State awards.

b. Successful applicants under this NOFO may be eligible to receive two subsequent one-year grant renewals for this program Renewals are at the discretion of the Department and are based on sufficient appropriation and performance criteria including but not limited to:

   i. Grantee has performed satisfactorily during the previous reporting period.

   ii. All required reports have been submitted on time, unless a written exception has been provided by the Division/Department.

   iii. No outstanding issues are present (e.g., in good standing with all pre-qualification requirements and no outstanding corrective action, etc.).

6. Procurement Contract Allowability

a. Subcontractor Agreement(s) and budgets must be pre-approved by the DBHR and on file with the DBHR. Subcontractors are subject to all provisions of this Agreement. The successful applicant Agency shall retain sole responsibility for the performance and monitoring of the subcontractor.

7. Funding Restrictions

a. Pre-Award Costs

   i. Pre-Award costs are not allowable for this award.

   ii. IDHS grants are governed by 2 CFR. Part 200, Subpart E-Cost Principles and 30 ILCS 708 which include information on allowable costs, audit requirements, and financial records.

b. Indirect Costs

   i. Indirect Costs may be applied to this grant award. Indirect Cost rates must be approved through the Centralized Indirect Cost Rate System.

   ii. Per 2 CFR 200.414 (f) De minimis rate grantees may utilize a De Minimis indirect cost rate up to a maximum of 15%.

8. The release of this NOFO does not obligate the Illinois Department of Human Services to make an award.

B. Key Dates

1. Application Posting Date

a. 08/06/2026

2. The Department must receive the Preliminary Submission Materials (Letter of Intent, Etc.):

a. Not required.

3. The Department must receive the Full Application Packet:

a. Due on 09/04/2026 at 12:00 p.m. (Noon) Central Time

4. Anticipated Award Date

a. 09/30/2026

5. Anticipated Start Date and Periods of Performance for new grant awards

a. Subject to appropriation, the grant period will begin no sooner than 09/30/2026 and will continue through 06/30/2027.

C. Executive Summary

The Department of Human Services Division of Behavioral Health and Recovery is seeking to fund the capacity expansion of its Suicide and Crisis Lifelines. Entities applying are expected to answer calls that are geo-routed by county and must be able to respond to text and chat interactions that are routed statewide.

This grant is a performance-based grant. Applicants are expected to demonstrate past performance operating a Suicide and Crisis Lifeline center. For applicants without Lifeline call center experience, proposals must demonstrate the ability to meet the expectations outlined in this NOFO.

D. Agency Contact Information

1. If you have questions about this NOFO, please contact:

a. Barb Roberson only to: DHS.DBHR.GrantApp@illinois.gov

2. Questions

a. IDHS encourages inquiries concerning this funding opportunity and welcomes the opportunity to answer questions from applicants. Questions and IDHS/DBHR Responses "Q&A" will be posted on the website.

b. Deadline for Questions is 08/28/2026, 12:00 PM (Noon) Central Time

c. Questions about this NOFO will ONLY be accepted via email to: DHS.DBHR.GrantApp@illinois.gov

d. The subject line of the email MUST state:

   i. 401 Suicide Prevention Call Center Enhancement - Question(s)

E. Indirect Costs

1. An organization must have a negotiated indirect cost rate agreement (NICRA) with the State of Illinois, A Federal NICRA, or elect to use the 15% de minimis rate to be reimbursed for any indirect costs within a program. All State of Illinois grantees also have the option to select "no rate" and not claim any indirect costs.
2. Awardees must select an indirect cost election in the Grantee Portal on an annual basis. Note - The election for "no rate" and "de minimis" continue indefinitely once initially selected until a new election is made.
3. All State of Illinois grantees receiving awards from Illinois grant making agencies must substantiate or elect an indirect cost rate for their organization. Grantees that wish to negotiate a rate with the State of Illinois will start their election process in the Grantee Portal and the case will then be sent to the Crowe Resource Management Program (CRMP) to begin negotiation.

4. To begin the indirect cost rate election process and obtain access to resources and points of contact to assist your organization in completing this process please visit the Centralized Indirect Cost Rate System.

II. Eligibility

A. Eligible Applicants

1. The specific types of applicants that may apply for the grant award are:
    a. Government Organizations
    b. Nonprofit Organizations
    c. For-profit Organizations
2. The applicant must meet the Registration, Pre-qualification, and any other Mandatory Requirements listed in this funding opportunity.
    a. Applicants must provide the following information via the Grantee Portal annually to be registered with the State of Illinois as an awardee:
        i. Organization Name and Contact Information
        ii. Federal Employee Identification Number (FEIN)
        iii. Unique Identity Number (UEI)
        iv. Organization Type
    b. Applicants must be prequalified; therefore, applications from entities that have not prequalified prior to the due date of this application will NOT be reviewed and will NOT be considered for funding.
        a. Unique Entity Identifiers and SAM Registration. Each applicant (unless the applicant is an individual or State awarding agency that is exempt from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the Federal or State awarding agency under 2 CFR § 25.110(d)) is required to:
            - Be registered in SAM.gov before the application due date.
            - Provide a valid unique entity identifier (UEI) in its application.
            - Continue to maintain an active SAM registration with current information at all times during which it has an active award or an application or plan under consideration by the awarding agency.
            - The State Agency may not make an award until applicant has fully complied to all UEI and SAM requirements.
            - The State Agency may determine that an applicant is not qualified if they have not complied to requirements and use that determination as a basis to award another applicant or applicants.
        b. Must be in "good standing" with the Illinois Secretary of State if the Illinois Secretary of State requires the entity's organization type to be registered.
        c. Must not be on the Illinois Stop Payment List.
        d. Must not be on the SAM.gov Exclusion List.
        e. Must not be on the Medicaid Sanctions List.
3. Additional Eligibility Restrictions (i.e. Geographic Area)
    a. Not Applicable
4. Successful Applicants will not receive an award if pre-award requirements are not met. Qualified status is re-verified nightly. If the entity's status changes, an email notice is sent to the designated entity representative with a link to the Grantee Portal.
5. See Section number I(A)(7) for funding restrictions.
6. Other factors that would disqualify an applicant or application include:
    a. Not Applicable.
7. Limit on Number of Applications: More than one application per entity is permitted.
    a. A separate application must be submitted for Cook County

b. Applications outside of Cook County may apply to cover multiple counties on a single application. Counties your agency is applying for must be clearly identified in the application and Program Narrative.

B. Cost Sharing

1. Providers are not required to participate in cost sharing or provide match.

III. Program Description

Building a Unified Crisis Continuum

The Illinois Department of Human Services - Division of Behavioral Health and Recovery (DBHR) and the Department of Healthcare and Family Services (HFS) are partnering closely, under the leadership of the Chief Behavioral Health Officer (CBHO), to advance a unified, comprehensive crisis response framework known as the Illinois Unified Crisis Continuum (UCC). Using the UCC framework, Illinois is adapting and implementing the Three Essential Elements of SAMHSA's 2025 National Guidelines for a Behavioral Health Coordinated System of Crisis Care: someone to contact, someone to respond, and a safe place for help. In doing so, the State is ensuring that individuals experiencing behavioral health crises, regardless of insurance status or ability to pay, have equitable access to timely, appropriate, high-quality crisis care and follow up in a community setting.

Achieving this vision requires interagency alignment on crisis service definitions and expectations, allowing for the maximization of federal financial participation through the Illinois Medicaid program whenever possible. Doing so reserves DBHR's grant funding for serving individuals who receive crisis services and are uninsured or underinsured, including those not enrolled in one of the medical assistance programs administered by HFS.

988 supports the someone to contact element of the continuum in alignment with the State's overall UCC vision and plan. 988 is operated through strong partnership between 988 Suicide and Crisis Contact Centers (CCC), the State of Illinois, SAMHSA, and the Lifeline Administrator.

Behavioral Health Crisis

For the purposes of 988 in Illinois, a behavioral health crisis is defined as a situation in which an individual no longer knows how to respond to, or lacks the capacity to resolve, an escalating situation for themselves or a loved one and is consequently in emotional and/or physiological distress. Such a crisis requires time-sensitive intervention and may involve imminent risks, including but not limited to suicidal ideation, substance use challenges, risk of harm to self or others, or other dangerous behaviors. A behavioral health crisis may stem from mental health challenges, substance use challenges, or a combination of both.

Partnership with SAMHSA and The Lifeline Administrator

Per the Substance Abuse and Mental Health Service Administration (SAMHSA) Cooperative Agreements for States and Territories to Improve Local 988 Capacity, CCCs must ensure (no later than 90 days after award):

a. Proper routing of 988 crisis contacts, including calls, texts, and chats.

b. Development and maintenance of necessary workforce capacity including efforts to support workforce wellbeing and retention.

c. Continuously improving service outcomes in order to meet performance targets, including answering at least 90 percent of total calls, chats, and texts (i.e., total number answered out of total reported routed contacts for each service) originating in your state or territory routed to the CCC, as reported in monthly reports from SAMHSA's 988 Network Administrator.

d. Crisis contact center acceptance of National Back Up and other applicable 988 Crisis Contact Center warm transfers through SAMHSA's 988 Network Administrator's Crisis Contact Center referral process

988 Primary Contact Center Services: Program Overview

The Grantee will directly operate a CCC in alignment with guidance from SAMHSA.

988 service should be equitable, efficient, reliable, and timely access across call, chat and text; consistent experience and receipt of high-quality, culturally responsive, and trauma informed care by the help seeker; tailored services for populations that face higher risk of suicide; consistent branding and messaging; and coordination with State, local and Tribal partners to meet ongoing service, treatment, recovery and harm reduction needs.

Grantees in this program are expected to ensure that all calls originating in Illinois are first routed to and answered by the local CCC, that response times meet minimum key performance indicators, and that center capacity meets 988 crisis contact demand.

The Grantee is expected to:

1. Operate a 988 Suicide and Crisis Lifeline Crisis Contact Center (CCC) 24 hours a day, 7 days a week, 365 days a year (24/7/365);
2. Provide crisis counseling to individuals seeking help via call, chat, and text;
3. Utilize a standardized acuity screen, sentinel event policy, and other protocols provided by the State or by the Lifeline Network Administrator;
4. If an individual is determined to need an in-person response, dispatch a Mobile Crisis Response Team or transfer to 911 for a higher acuity response, as is appropriate, including a warm handoff;
5. Develop or maintain a local and statewide database containing resources for referrals including behavioral, mobile crisis response, domestic violence, housing, healthcare, substance use, immigrant services, etc. and tools for finding resources (e.g., DHS BEACON, DCFS SPIDER, etc.);
6. Provide a warm handoff to ongoing care following a crisis episode;
7. Maintain a high standard of cybersecurity, working in tandem with DBHR and the Lifeline Network Administrator;
8. Comply with all data collection requirements of DBHR and the Lifeline Network Administrator; and
9. Maintain the following metrics:
    a. 100% of 988 staff complete required trainings within 45 days of employment.
    b. 90% of 988 calls are answered within 20 seconds or less,
    c. 90% of chats are answered
    d. 90% of texts are answered
    e. 5% or less of contacts are abandoned
    f. 10% or less of contacts roll over to the national backup system
    g. Follow referral and follow-up protocol for 100% of contacts

A. Funding Purpose

1. The general purpose of this program's funding is to Prioritize equitable, efficient, reliable and timely access across call, chat and text for persons experiencing a behavioral health or other crisis. To expand contact center capacity to response to calls, chats and texts in Illinois.

B. Funding Priorities or Focus Areas

1. IDHS is working to counteract systemic racism and inequity, and to prioritize and maximize diversity throughout its service provision process. This work involves addressing existing institutionalized inequities, aiming to create transformation, and operationalizing equity and racial justice. It also focuses on the creation of a culture of inclusivity for all regardless of race, gender, religion, sexual orientation, or ability.

C. Performance Requirements

1. Provider Eligibility

Grantee must have a current network agreement with the Lifeline Network Administrator to operate a Suicide & Crisis Contact Center within the State of Illinois or enter into a network agreement within 90 days of accepting the State award.

2. Grantee Policies

a. Personnel

Grantee must establish and maintain a comprehensive set of personnel policies and procedures for contact center operations that, at minimum, address hiring, training, evaluation, discipline, termination, and other associated workforce management topics.

The personnel policy should include a staff retention plan.

Grantee must report significant staffing and/or operations changes (center closings, unexpected outages, etc.) to the DBHR Program Manager promptly.

b. Cybersecurity

Grantee must have formal information security and privacy policies to address cybersecurity issues. This must include:

i. Reporting on cybersecurity vulnerabilities and incidents;

ii. Ensuring physical locations meet the security requirements of the Mental Health and Developmental Disabilities Code and the Mental Health and Developmental Disabilities Confidentiality Act.;

iii. Ensuring compliance with the SUPPORT for Patients and Communities Reauthorization Act of 2025 (Public Law 119-44 is) HB2483 sec 108 by completing the DBHR Cybersecurity incidents form, which will be provided by DBHR to the Grantee, within 90 days of the contract award date; and

iv. Ensuring technical system requirements of the Lifeline are met and monitored regularly.

c. Program Handbook

i. Grantee must create a program handbook based on the template provided by DBHR. The handbook will include an overview of operations and workflow. DBHR will provide a template and work with the Grantee to finalize the handbook by the end of Year 1.

d. Imminent Risk of Suicide

i. Before beginning service delivery, Grantee must develop and maintain a plan to identify those at imminent risk of suicide and refer them to emergency intervention.

3. Individuals Served

Grantee shall serve all individuals who contact the CCC, which may include connecting them with another level of care, including in-person services such as a Mobile Crisis Response team or additional resources via 911. Grantee shall serve individuals of all ages experiencing a behavioral health crisis, as well as individuals calling on behalf of someone in crisis.

The Grantee will determine the appropriate level of care using the standardized acuity assessment provided by DBHR once it is available. This acuity assessment is being developed by DBHR in collaboration with HFS, 988 providers, and other behavioral health crisis system stakeholders.

CCC personnel must attend all trainings required by DBHR to ensure crisis counselors and other critical staff are equipped to support all individuals seeking support.

4. Stationary Location and Equipment Requirements

a. Physical Location

A physical location is not required for this grant. If a Grantee chooses to have a physical location, it must meet the requirements outlined in this section. If a Grantee chooses not to have a physical location, they must meet the virtual/remote work requirements outlined in Section 5.

The physical location must include a safe and secure work area where CCC staff can work without disruption and without others overseeing or overhearing their work. Staff must be able to engage in conversations via call, chat, or text with individuals who contact 988, ensuring the protection of clients' rights and privacy consistent with the Mental Health and Developmental Disability Confidentiality Act and any additional expectations of the Lifeline Network Administrator.

The work area must be well-ventilated, free of smoke, away from extreme heat/cold, out of flood/water danger, have adequate electrical outlets, and good lighting.

b. Technology and Telephony Requirements

The grantee must ensure multiple phone lines are available for calls routed through the Administrator's system. These phone lines will not receive any other types of calls not directly routed from the Lifeline Administrator.

The Grantee must pass the following tests of its telephony system:

i. Ensure the phone system has dual tone multifrequency (DTMF);

ii. Enable real-time quality assurance by the Lifeline Administrator and agree to network performance targets;

iii. Must use the 988 Lifeline platform for call routing;

iv. Must use the 988 Lifeline Administrator's (Lifeline Administrator) system for chat/text routing;

v. The center cannot use cellular telephones to answer incoming 988 Lifeline calls;

vi. The center cannot forward incoming Lifeline calls, chats, or texts to a third party unless authorized by the Lifeline Administrator;

vii. The center cannot use an automated attendant or voice mail on the termination line receiving Lifeline calls;

viii. The center cannot use an Interactive Voice Response (IVR) message for incoming 988 calls received from the Lifeline Administrator; and

ix. The center cannot use a voicemail service affiliated with the line or any other mechanism by which a caller would be asked to leave a message.

5. Virtual/Remote Work

Virtual/remote work is allowable. The following conditions must be met:

a. The Grantee must develop policies and procedures to ensure staff protect the privacy of individuals in crisis, have sole access to CCC devices, and meet all requirements outlined in 4.b.

b. CCC staff must have access to a stable internet connection.

c. CCC staff are expected to arrange for dependent care during scheduled work hours. Staff who have others at home must prevent people in their home or other virtual environment from accessing their work computer or mobile phone.

d. CCC staff must also maintain the confidentiality of all conversations, particularly involving Personally Identifiable Information (PII) and/or Protected Health Information (PHI) or any other confidential information regulated by the State and/or Federal government, such as the Health Insurance Portability and Accountability Act (HIPAA) and the Illinois Mental Health and Developmental Disabilities Confidentiality Act (MHDDCA). CCC staff must ensure that their calls cannot be overheard.

e. Meet all cybersecurity requirements outlined in 2.b.

6. Hours of Operation

Grantees must operate their CCC 24/7/365.

7. Service Areas

Grantee service areas must be comprised of a full county or counties. Covered counties do not need to be contiguous.

Timeframe	Calls Routed	Calls Answered	Chats Routed	Chats Answered	Texts Routed	Texts Answered
June 2025-June 2026	207,169	186,421				
March 2026-June 2026			28,648	8638		
March 2026-June 2026					51,975	16,688

County level call data covering June 2025-June 2026. Counties not listed had call volume under 100.

County	Calls Routed	County	Calls Routed	County	Calls Routed
Adams	2,089	La Salle	2,613	Sangamon	12,332
Boone	409	Lake	7,971	Stephenson	591
Bureau	264	Lee	468	Tazewell	5,465
Cass	178	Livingston	653	Union	153
Champaign	6,053	Logan	343	Vermilion	1,912
Christian	276	Macon	1,395	Wabash	855
Clark	519	Macoupin	600	Washington	145
Clinton	146	Madison	6,031	Whiteside	1,114

County	Calls Routed	County	Calls Routed	County	Calls Routed
Coles	602	Marion	374	Will	10,053
Cook	98,861	Marshall	160	Williamson	2,096
Dekalb	4,983	Mason	326	Winnebago	5,973
Dupage	12,593	Massac	173	Woodford	243
Effingham	2,205	Mcdonough	540		
Franklin	290	McHenry	4,270		
Fulton	196	Mclean	5,581		
Grundy	495	Monroe	140		
Hancock	133	Montgomery	179		
Henderson	134	Morgan	684		
Henry	574	Moultrie	174		
Iroquois	627	Ogle	258		
Jackson	1,438	Peoria	4,555		
Jefferson	707	Perry	209		
Jersey	144	Piatt	461		
Kane	8,022	Randolph	777		
Kankakee	3,021	Rock Island	5,059		
Kendall	1,081	Saint Clair	7,321		
Knox	2,279	Saline	198		

8. Staffing Requirements

a. Staffing 24/7/365

The Grantee must build and maintain a staffing plan to safely manage coverage of call, chat, and text 24/7/365. The plan must include provisions to ensure the continuation of 24/7 operations in the event of unexpected circumstances (call outs, resignations, surge in volume, weather, etc.).

b. Program Director

Grantee shall designate a Program Director who is responsible for oversight of all CCC service requirements including, but not limited to:

- Meeting the definition of a Qualified Mental Health Professional (QMHP) as defined in IL Adm Code 59 Part 132.25;
- Serving as the Center supervisor;
- Serving as the primary liaison with the DBHR Program Manager;
- Supervising all CCC staff, including training, supervision, and quality assurance;
- Collaborating throughout the grant cycle with the DBHR Program Manager on CCC processes and response rates to align key performance indicators with individual center outcomes;
- Attending all trainings, technical assistance sessions, cluster meetings, learning collaboratives, and other meetings called by DBHR or DBHR's partners, and including MCR staff as needed;
- Working with DBHR and local entities to implement CESSA, including the relevant CESSA Regional Advisory Committee(s) and any other service coordination and protocol processes; and
- Coordinate with DBHR on 988 marketing activities.

c. Crisis Counselors

Crisis Counselors must not be expected to answer calls, chats, or texts for any other support lines while on shift for 988.

d. Availability of QMHP

CCC staff must have immediate access to a QMHP who is available for consultation and supervision of contact center operations. Access may be face-to-face or virtual. The QMHP can be the Program Director or other staff with another primary role.

e. Availability of a Substance Use Professional

Within 6 months after the contract start date, CCC staff must have 24/7/365 access to a Certified Alcohol and Drug Counselor (CADC) or comparable substance use professional for consultation, as approved by DBHR. This timeline may be extended at the discretion of DBHR. The QMHP and CADC (or comparable credential) may be the same individual and may be the Program Director or other staff with another primary role.

DBHR will provide an exception request form for providers to request approval for an alternate credential.

f. Peer Staffing

The Grantee will work with DBHR to establish a peer role or roles to support CCC staff and individuals contacting the CCC. This will be a collaborative process that takes place throughout the grant cycle, with peer staff anticipated to start no later than Year 2.

9. Training Requirements

a. Required Training

CCC staff must meet training requirements outlined by DBHR and the Lifeline Administrator. This will include trainings related to substance use, de-escalation, cultural competency and others. Trainings will be provided by DBHR and the Lifeline Administrator or their designees.

b. Additional Training

CCC staff must also receive training on working with populations at higher risk of suicide in their communities, including resource awareness for referral purposes.

10. Service Requirements

The CCC Program Director and other relevant staff will work with DBHR to meet the following service requirements within 90 days of award.

a. Contact types

CCCs must be able to respond to individuals in crisis via call, chat, and text.

b. Volume

The Grantee staffing plan must allow for response to sudden and large spikes in call, chat and text volumes following a public service announcement, disaster or other type of traumatic event.

c. Mobile Crisis Response Team Warm Transfer

CCCs must follow Mobile Crisis Response Team warm transfer policies and procedures. This includes connecting with MCR Teams via their crisis line to complete a warm handoff to the MCR Team if an in-person response is needed. CCC still will make decisions regarding a warm handoff using the standardized acuity assessment once it is available.

Grantee will develop, implement, and maintain a technical plan to address requirements for text and chat contacts to have access to a warm handoff to MCR Teams.

d. Connecting with 911 Public Safety Answering Points

CCCs must be able to interact with 911 Public Safety Answering Points (PSAP) to transfer calls that require an in-person response outside the scope of MCR Teams. This includes developing, implementing, and maintaining a technical plan to address requirements for text and chat response sufficient for transfer to Illinois' emergency response systems.

Grantee must report problematic interactions, delays in service access, and adverse outcomes using protocols established by DBHR and the Lifeline Administrator.

e. Referral database

Grantee must develop and maintain a referral database with relevant local and statewide resources and make it available to CCC staff.

f. Referral, Linkage, and Follow-Up

DBHR will work with the grantee to establish and implement follow-up protocols for CCCs.

These protocols should include scheduling outpatient follow-up appointments to support ongoing care following a crisis episode. Follow-up must include services for those experiencing suicidal ideation, thoughts of self-harm, or who have experienced an overdose event, regardless of suicidal intent. Two follow-up conversations must be offered, with at least three contact attempts made to reach the individual. The first follow-up contact should occur within 24-72 hours of the initial contact.

11. Quality Assurance and Monitoring

DBHR will be the primary monitoring and support agency for grantees. The Grantee will work with the State to meet all quality assurance and monitoring requirements set by DBHR, SAMHSA, and the Lifeline Network Administrator.

DBHR will monitor fiscal and programmatic activities regularly, with potential for quarterly adjustments to workforce management and coverage areas.

12. Data Collection and Evaluation

a. Monthly data

Grantee will be expected to collect and report on data monthly, including but not limited to:

- Call volume and answer rates
- Chat volume and response rates
- Text volume and response rates
- Average speed to answer rates
- Contact (call, chat and text) disposition categories
- Sentinel events (based on DBHR's sentinel events policy
- Data discrepancies greater than 5% between internal platform and Lifeline Network Administrator's platform

b. Evaluation activities

Grantees must participate in any evaluation activities required by DBHR, SAMHSA, or the Lifeline Network Administrator.

c. Submission of PRTP and PFR Forms Online

DBHR is developing an online system for the submission of PRTP and PFR forms that will replace the submission of electronic forms by email. This system is being developed so that it can be accessed and used by organizations with existing computer resources.

When the online system has been fully developed and all users have been trained, this online system will fully replace the email option. At that time, the online system is expected to be the only methodology for submitting PRTP and PFR documentation to DBHR.

Other forms may still be required to be submitted by email.

D. Performance Measures

Please note that performance measures and performance standards are subject to change following the release of the SAMHSA federal funding that supports this program.

1. Number of crisis counselors at the end of the reporting period
2. Number of crisis counselors on staff at the end of the reporting period who were retained from previous reporting period
3. Number of crisis counselors hired during this reporting period
4. Number of crisis counselors who have completed required trainings
5. Number of Lifeline calls routed
6. Number of Lifeline calls responded
7. Number of Lifeline chats routed
8. Number of Lifeline chats responded
9. Number of chats monitored where feedback was given to counselor
10. Number of Lifeline texts routed

11. Number of Lifeline texts responded
12. Number of texts monitored where feedback was given to counselor
13. Number of MCRT referrals made
14. Number of Living Room Program referrals made
15. Number of calls resulting in a transfer to a 911 Public Safety Answer Point for emergency dispatch
16. Number of individuals reporting suicidal ideation
17. Number of individuals who received a follow up attempt within 24 hours of reporting suicidal ideation
18. Number of individuals reporting an overdose
19. Number of individuals who received a follow up attempts within 24 hours of reporting an overdose
20. Number of individuals screened for mental health or related interventions
21. Number of individuals who consented to follow up
22. Number of individuals who received follow up attempts in 24-72 hours
23. Number of individuals reached for follow up in 24-72 hours
24. Number of Lifeline concerns, grievances or feedback received through the Lifeline Administrator for any modality offered during reporting period
25. Number of Lifeline complaints received through the Lifeline Administrator resolved for any modality during reporting period

E. Performance Standards

Please note that performance measures and performance standards are subject to change following the release of the SAMHSA federal funding that supports this program.

1. 100% of staff working in the Crisis Contact Center have completed all required training (new hires only-do not count staff who already completed the training)
2. Answered 90% or better of calls routed to center
3. Responded to 90% of chats routed to center
4. Responded to 90 % of texts routed to center
5. Number of follow ups completed
6. Number of staff who completed ongoing trainings (current month only)

F. Cooperative Agreements

1. Not Applicable.

G. Unallowable Costs

1. All applicants will use grant funds according to the guidelines, conditions, and parameters set forth in this funding notice and in compliance with federal statutes, regulations and the terms and conditions of any applicable federal awards.
2. Please refer to 2 CFR 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, PART 200 Subpart E - Cost Principles to determine the appropriateness of costs.
3. Allowable costs are those that are necessary and reasonable based on the activity(ies) contained in the scope of work, are justified in the Budget Narrative, and are allowable under Subpart E of 2 CFR 200. It is expected that administrative costs, both direct and indirect, will represent a small portion of the overall program budget. Any budget deemed to include inappropriate or excessive administrative costs will not be approved. Program budgets and narratives must detail how all proposed expenditures are necessary for program implementation.
4. Unallowable costs: Please refer to 2 CFR 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, PART 200 Subpart E - Cost Principles to determine the appropriateness of costs.

H. Program beneficiaries or program participants must meet the following requirements:

1. Not Applicable.

I. Authorizing Statutes or Regulations

1. 59 Ill. Admin, Code 132 (Rule 132), Section 132.150g
2. IL Adm Code 59 Part 132.25
3. Mental Health Community Services Act (405 ILCS 30/ Section (f))
4. Illinois Administrative Code Part 7000 Grant Accountability and Transparency Act
5. Substance Abuse and Mental Health Services Projects of Regional and National Significance
6. 988 and Behavioral Health Crisis Services Programs

IV. Application Contents and Format

A. Content and Form of Application Submission

1. Pre-applications, letters of intent, or white papers

Are not required and will not be reviewed during the Merit Review process.

2. Required Content of Application

a. Applications must include the required documents and demonstrate that the program eligibility requirements have been met. Applicants that do not include all the following documents will be considered substantially incomplete and will not be considered for funding. Refer to Section V. Submission Requirement and Deadlines for details.

3. Program Narrative Content and Attachments

a. Program Narrative: The program narrative makes up the bulk of the application. Please provide a complete response as specified in Section VI Application Review Information. If the program narrative is missing from your application packet, your application will receive a score of zero points, and your agency will not meet the criteria to receive a grant under this notice of funding opportunity.

b. Program Narrative Content and Attachments: If the applicant believes that the subject has been adequately addressed in another part of the application narrative, then provide the cross-reference to the appropriate part of the narrative. If a cross-reference is not included in the section, the reviewer will not consider content contained within that specific section.

4. Budget and Budget Narrative

a. Applicants must enter an FY27 budget electronically in the CSA Tracking System.

b. Budget must be electronically signed and submitted in the CSA Tracking System. Budget must be signed by the Provider's Chief Executive Officer and/or Chief Financial Officer.

c. **IMPORTANT**: Please be sure each budget status in CSA Tracking System says "GATA Budget signed and submitted to program review." This status will appear after the budget is electronically signed by the agency CEO or CFO and submitted to IDHS. See IDHS CSA Tracking System webpage for additional information on CSA at IDHS: CSA Tracking System (state.il.us). A copy is not to be submitted along with the application packet.

d. Applicants proposing to serve Cook County and county(ies) outside of Cook County are required to submit separate budgets.

e. A single budget is required for all proposed counties outside of Cook County, regardless of the number of areas proposed to serve.

f. Each application must include its own corresponding budget, and budget narrative. For example, an applicant proposing to serve Cook County and counties outside of Cook County must submit two budgets: one for Cook County and one for all proposed counties outside of Cook County.

g. For Cook County, a suffix must be used as follows

    i. Under the "Grant Suffix" Column in the CSA Tracking System you must include the suffix CCO.

h. The budget and narrative must tie fiscal activity to program objectives and deliverables and demonstrate that all proposed costs are:
   i. Reasonable and necessary
   ii. Allocable, and
   iii. Allowable as defined by program regulatory requirements and the Uniform Guidance (2CFR 200), as applicable.

i. Deadline for submission of the budget, in the CSA Tracking System, is the same as the application deadline.

j. Applicants will NOT be issued an award without the applicant's fully approved budget in the CSA Tracking System.

k. **NOTE**: The Illinois Department of Innovation & Technology (DoIT) is now disabling external Illinois.gov IDs if they have not been used for 114 days. If you receive the error "HPDIA0309W This account is disabled," your ID has been disabled and cannot be re-activated by changing your password. You need to contact the DoIT HelpDesk at [217-524-DoIT (3648) or 312-814-DoIT (3648)] or their website at Report A Problem. Request that they create an incident to re-enable your external ID. You will need to provide your external ID (firstname.lastname@external.illinois.gov) and the error message (this account is disabled). Please be sure to Reset Your Password every 3 months so your account is not disabled.

l. There is space when preparing the budget on each line item for the budget narrative. For each line in the budget the applicant will describe why each expenditure is necessary for program implementation and how the amount was determined. Please include cost allocations as necessary. The Budget narrative (including MTDC base exclusions as appropriate) must clearly identify indirect costs, direct program costs, direct administrative costs, and describe how the specified resources and personnel have been allocated for the tasks and activities within each line item. Each budget should be prepared for September 30, 2026, through June 30, 2027.

m. Subcontractor budget(s), If applicable
   i. If applicant is planning to use a subcontractor, a copy of the subcontractor budget must be submitted as a separate document with the other application materials. Subcontractor budgets must be submitted for each application submitted as outlined above.
   ii. For more information see Section I(A)(6).
   iii. Subcontractor Agreement(s) and budgets must be pre-approved by the DBHR and on file with the DBHR. Subcontractors are subject to all provisions of this Agreement. The successful applicant Agency shall retain sole responsibility for the performance and monitoring of the subcontractor.

5. Required Forms

a. Uniform Application for State Grant Assistance: The Uniform Application for State Grant Assistance is a three-page document used to formalize organization's request to apply for funding.
   i. A single application is required for all proposed counties outside of Cook County, regardless of the number of areas proposed to serve.
   ii. A separate application is required for proposals for services in Cook County.

b. Each application must include its own corresponding application, budget, and program narrative. For example, an applicant proposing to serve Cook County and counties outside of Cook County must submit two applications, two program narratives and two budgets: one for Cook County and one for all proposed counties outside of Cook County.
   i. The document requires the electronic or wet (ink) signature and email address of the organization's authorized representative. This email address will be used for official communication between the Department and the applicant organization for matters regarding this application.
   ii. Page one of the application is pre-populated with the appropriate information. Applicants must not complete anything on Page one.
      - On Page three, applicants will need to include the amount for each individual application which they are applying and sign.
   iii. The correct application must be used.

c. Grantee Conflict of Interest Disclosure - The grantee Conflict of Interest Disclosure is required for all grant award programs regardless if the grantee has identified a potential conflict or not. The document requires agencies to identify actual or potential conflicts of interest. The form must have a printed name and be signed by a representative of the organization.

6. Required Format

a. The narrative portion must follow the page maximums where prescribed and must be organized in the format outlined or points may be deducted. A Program Narrative for each application is required.

b. The department may determine that an applicant is not qualified if they have not complied with the requirements listed in this Notice of Funding Opportunity and use that determination as a basis to award another applicant.

c. Each Program Narrative shall not exceed 10 pages. If there are more than 10 pages, the remaining pages will not be reviewed or scored.

d. All documents must be typed using Times New Roman 12-point type, 100% magnification and use black typeface on a white background, Except for letterhead.

e. For charts and tables only, Times New Roman 10-point with color may be used.

f. Each Program Narrative must be typed, single-spaced with 1-inch margins on all sides.

g. Each submission must be on 8 1/2 x 11-inch page size using pdf.

h. Attachments: attachments are required as part of this NOFO and must be submitted at the time of the application as separate documents.

i. A Signed Vibrant Network Agreement OR proof that an agreement is in process with the Lifeline Administrator that will be finalized within 90 days of accepting the State award.

ii. A copy of accreditation from one of eight providers as follows:

- American Association of Suicidology (AAS)
- International Council for Helplines (formerly CONTACT USA)
- Alliance of Information and Referral Systems (AIRS)
- The Joint Commission
- Commission on Accreditation of Rehabilitation Facilities (CARF)
- Council on Accreditation (COA)
- Utilization Review Accreditation Commission (URAC)
- DNV Healthcare, Inc.

iii. Programmatic Risk Assessment

V. Submission Requirements and Deadlines

A. Address to Request Application Package

1. The complete application package (this Notice of Funding Opportunity, including links to required forms) is available through the Illinois Catalog of State Financial Assistance and the Mental Health Grants - FY 2027 website.
2. Each Applicant must have access to the internet. The Department's website will contain information regarding the NOFO and materials necessary for submission. Questions and answers will also be posted on the Department's website as described in this announcement (Section I(D)(2). It is the responsibility of each applicant to monitor the website and comply with any instructions or requirements related to the NOFO.

B. Unique Entity Identifier (UEI) and System for Award Management (SAM.gov)

1. Each Applicant Must:
   a. Be registered in SAM.gov before submitting its application;
   b. Provide a valid Unique Entity Identifier (UEI) in its application; and
   c. Continue to maintain an active registration in SAM.gov with current information at all times during which it has an active award or an application or plan under consideration.
2. The Department may not make an award until applicant has fully complied with all UEI and SAM Requirements.
3. The department may determine that an applicant is not qualified if they have not complied with all requirements and use that determination as a basis to award to another applicant.

4. If individuals are eligible to apply, they are exempt from this requirement under 2 CFR 25.110(b).
    a. Individuals are not eligible to apply.

C. Submission Instructions

1. Actions needed prior to applying:
    a. Applicants must be registered with the State of Illinois and Pre-qualified in the GATA portal prior to applying for Illinois awards. Instructions for creating an account and registering are located at the following link: Illinois GATA Grantee Portal. Additionally, detailed instructions for registration and prequalification requirements, including the expected amount of time for completion are located here: Grant Applicant Pre-Qualification and Pre-Award Requirements (pdf)
    b. Registration in CSA is required. The IDHS: CSA Tracking System (state.il.us) is the system the IDHS utilizes for approving budgets and issuing grant awards. It is strongly recommended that if an applicant entity is not already registered in the CSA Tracking System, they should begin the registration as soon as possible so they may submit a signed budget in CSA. Successful applicants will NOT be issued an award without a fully approved budget in the CSA Tracking System.
2. The Methods for submitting the application:
    a. Applicants must electronically submit, via email, the complete application packet which includes the following materials as separate pdf documents:
        i. Uniform Application for State Grant Assistance
        ii. Program Narrative
        iii. Grantee Conflict of Interest Disclosure
        iv. Budget (entered into the CSA Tracking System as described in section (IV)(A)(4)
        v. Subcontractor Budgets, if applicable
        vi. A copy of accreditation from one of the following eight providers:
            - American Association of Suicidology (AAS)
            - International Council for Helplines (formerly CONTACT USA)
            - Alliance of Information and Referral Systems (AIRS)
            - The Joint Commission
            - Commission on Accreditation of Rehabilitation Facilities (CARF)
            - Council on Accreditation (COA)
            - Utilization Review Accreditation Commission (URAC)
            - DNV Healthcare, Inc.
        vii. Programmatic Risk Assessment
    b. Applications must be submitted via email to DHS.DBHR.GrantApp@illinois.gov. The application will be electronically time-stamped upon receipt. Application submissions or delivery to any other email address or contact, including other IDHS offices or employees, will not be considered for review or funding. Applications will not be accepted if received by fax machine, hard copy, disk, or thumb drive.
    c. Include the following in the subject line:
        i. Your Entity Name
        ii. Program 401
    d. Documents must NOT include a password.
    e. Software or Electronic Capabilities
        i. Each applicant must have access to the internet. The Department's website will contain information regarding the NOFO and materials necessary for submission. Questions and answers will also be posted on the Department's website as described in this announcement. It is the responsibility of each applicant to monitor that website and comply with any instructions or requirements relating to the NOFO.

f. Applicants are required to notify the Department within 48 hours of the deadline, if they did not receive an email notifying them that their application was received. If the applicant does not receive an email and does not notify the Department within 48 hours, their application will be considered a late submission and will NOT be reviewed or scored. The applicant will NOT have the right to protest the submission/receipt of their application to the Department after the 48 hours. In the event of a dispute the applicant bears the burden of proof that the application was received on time at the email location listed above (and that the budget was submitted into the CSA Tracking System on time).

g. For this NOFO, DBHR will prescreen applications submitted at least seven calendar days before the application deadline (on or before 08/28/2026 at 12:00 p.m. (Noon) Central Time) for administrative completeness and specified curable errors. Early submission is optional. The prescreening will not include substantive advice or evaluation of the application and will not affect the merit review or scoring process. DBHR will notify the applicant of any identified curable errors in accordance with the process and timeframe stated in this NOFO (within 2 business days). The applicant remains responsible for submitting a complete application by the application deadline. For your internal use, you can use the NOFO checklist to ensure all application components are included.

3. Pre-application materials must be submitted as follows:

   a. Not Applicable.

4. If you are experiencing system problems or technical difficulties submitting your application, you may contact:

   a. Name: Barb Roberson

   b. Email: DHS.DBHR.GrantApp@illinois.gov

D. Submission Dates and Times

1. Full applications are due on 09/04/2026 at 12:00 p.m. (Noon) Central Time.
2. Missed Deadlines

   a. a. Applications received after the due date and time will not be considered for review or funding. All applicants/applications determined to be non-compliant or otherwise determined to be disqualified from consideration will be separately notified in writing, by email, upon determination. This email will be sent to the email addresses provided in the application and will identify the reason for disqualification.

   b. For your records, please keep a copy of your submission with the date and time the application was submitted along with the email address to which it was sent. The deadline will be strictly enforced.

   c. **IMPORTANT**: It is strongly recommended that the applicant not wait until the last minute to submit an application in case they experience technical difficulties with the submission process. Applicants should keep copies of all documentation that may prove their application was submitted to the correct location and that it was received by IDHS on or before the deadline. Applicants should also maintain all electronic documentation, including screen shots, email correspondence, help desk ticket numbers, etc. that would document any unforeseen difficulties the applicant may have encountered regarding the timely submission of the application.

E. Intergovernmental Review

1. This funding opportunity is NOT subject to Executive Order 12372, "Intergovernmental Review of Federal Programs.

VI. Application Review Information

A. Responsiveness Review

1. Applications that are received at least seven calendar days before the application deadline (on or before 08/28/2026 at 12:00 p.m. (Noon) Central Time) will be reviewed within 2 business days to ensure they meet the criteria for consideration. Applications that do not meet the criteria in paragraph B below will be rejected and not entered into the Merit Review process. For your internal use, you can use the NOFO checklist to ensure all application components are included.
2. The following are the criteria that must be met for eligibility:

   a. Applicant has a current registration with the State of Illinois in the Grantee Portal.

   b. Applicant has an active Sam.gov public account.

c. Applicant has an active Unique Entity Identifier (UEI) with Sam.gov

d. Applicant is in "good standing" with the Secretary of State.

e. Applicant is not on the DHS Stop Payment List Service or the Illinois Stop Payment List.

f. Applicant is not on the Sam.gov Exclusion List.

g. Applicant is not on the Illinois Medicaid Sanctions List.

h. Program specific eligibility restrictions

- Not applicable

3. Restrictions on eligibility for State awards are referenced in 44 Ill Admin Code 7000.70. Program specific eligibility restrictions are referenced in this Notice of Funding Opportunity.
4. All applicants/applications determined to be non-compliant or otherwise determined to be disqualified from consideration will be notified. This email will be sent to the email addresses provided in the application and will identify the reason for disqualification.

B. Review Criteria

1. Evaluation criteria is based upon requirements set forth in 44 Ill Admin Code 7000.350 Merit Review of Applications and the IDHS Merit Review Manual. The review criterion and sub-criterion include the following:

   a. Label each section of the Program Narrative utilizing the format provided below. It must be organized in the format outlined below or points may be deducted. Information must be provided in the section in which it is requested.

   b. Please see Section IV(A)(6) as you are preparing the Program Narrative for the required format. The Program Narrative shall not exceed 10 pages. If there are more than 10 pages, the remaining pages will not be reviewed or scored.

   c. To be successful in the application process, applicants must submit the following information as part of the grant application process. Please provide a complete response to the following sections:

      i. **Need** - Point Value 10:

      The purpose of this section is for the applicant to provide a clear and accurate picture of the need for these services within proposed county(ies), an understanding of the communities and behavioral health service landscape of the county(ies) and demonstrate how the proposed project will address identified needs at a high level. Examples and data that demonstrate how the proposal supports the Mobile Crisis Response grant should be included. Please include examples, ideally with narrative details and data, highlighting your agency's relevant experience whenever possible.

      - Describe the demographic characteristics of the counties that your organization plans to serve with your Crisis Contact Center (CCC) and the experiences that prepare you to serve those communities
      - Describe how your organization's CCC will complement and work with other crisis services in the proposed service area, using the Three Essential Elements outlined in SAMHSA's 2025 National Guidelines for a Behavioral Health Coordinated System of Crisis Care (someone to contact, someone to respond, and a safe place for help) as a framework.

      ii. **Capacity** - Point Value 40:

      The purpose of this section is for the applicant to provide a more detailed plan and demonstration of capacity to meet the needs described above (Community Identification and Need). Please include examples, ideally with narrative details and data, highlighting your agency's relevant experience whenever possible.

      - Describe your organization's plan for obtaining a physical space and/or meeting all virtual/remote work requirements
      - Describe your organization's plan for obtaining a network agreement with the Lifeline Network Administrator within 90 days of State contract. Having an existing agreement results in full points for this question
      - Describe your organization's plan for securing technology and other equipment required for meeting the following telephony requirements:
        - Ensure the phone system has dual tone multifrequency (DTMF);
        - Enable real-time quality assurance by the Lifeline Administrator and agree to network performance targets;
        - Must use the 988 Lifeline platform for call routing;
        - Must use the 988 Lifeline Administrator's (Lifeline Administrator) system for chat/text routing;

- The center cannot use cellular telephones to answer incoming 988 Lifeline calls;
- The center cannot forward incoming Lifeline calls, chats, or texts to a third party unless authorized by the Lifeline Administrator;
- The center cannot use an automated attendant or voice mail on the termination line receiving Lifeline calls;
- The center cannot use an Interactive Voice Response (IVR) message for incoming 988 calls received from the Lifeline Administrator; and
- The center cannot use a voicemail service affiliated with the line or any other mechanism by which a caller would be asked to leave a message.

- Describe a detailed recruitment, staffing, and retention plan that:
  - Ensures they are prepared to staff a center quickly and efficiently;
  - Staff are reflective of the demographics of the community served;
  - Includes a Program Director;
  - Allows for 24/7/365 CCC operations covering call, chat, and text;
  - Includes access to a QMHP and Substance Use Professional 24/7/365; and
  - Includes hiring and retention experience for a CCC if relevant.
- Describe your organization's experience with the hiring of and retention of peer recovery staff, including details of how your agency recognizes and emphasizes the importance of adhering to Core Values of Peer Support according to the National Practice Guidelines for Peer Specialists.
- Describe your organization's plan for fulfilling all training requirements for CCC staff.

iii. **Quality** - Point Value 40:

The purpose of this section is to ensure accountability at all levels of service provision, aligned with IDHS' practice of performance-based contracting with its Grantee agencies. The articulation and achievement of measurable outcomes help to ensure that we are delivering the most effective mobile crisis response services possible. At a minimum, Grantees will be expected to collect, and report data indicators and measures as described in this NOFO. Be as specific as possible and include examples, ideally with narrative details and data, highlighting your agency's relevant experience whenever possible.

- Describe a credible plan for how your agency plans to provide CCC services to individuals via call, chat, and text, including handling spikes in volume for all of these modalities. If applicable, include your experience providing these services in the past utilizing data and examples.
- Describe how your CCC will provide warm transfers to appropriate Mobile Crisis Response Teams, including the use of the standardized acuity assessment (once it is available). Additionally, describe how your CCC will warm transfer contacts to a 911 Public Safety Answering Point if needed.
- Describe how your CCC will provide warm transfers to 988 subnetworks, as appropriate, to meet the needs of all individuals who call.
- Describe your organization's plan for referral and follow-up, covering at least the following:
  - Existing referral database and, if not already created, how you plan to develop one within 90 days of award; and
  - Experience providing follow-up services and, if none, how the ways in which you already provide follow-up services if relevant.

iv. **Data Collection, Evaluation and Reporting Criteria** - - Point Value 10:

The purpose of this section is to ensure accountability at all levels of service provision, aligned with IDHS' practice of performance-based contracting with its Grantee agencies. The articulation and achievement of measurable outcomes help to ensure that we are delivering the most effective mobile crisis response services possible. At a minimum, Grantees will be expected to collect, and report data indicators and measures as described in this NOFO. Be as specific as possible and include examples, ideally with narrative details and data, highlighting your agency's relevant experience whenever possible.

- Describe how your organization will collect, and report data on the performance measures and standards as described in this NOFO, referencing any relevant systems and technology.
- Describe how your organization will formalize cybersecurity and privacy policies.

- Describe your organization's quality improvement process to ensure compliance with stated CCC design, including the incorporation of feedback from individuals served, including your agency's risk management strategy and related protocols. State if your agency has already developed a CCC specific QI plan.

v. **Executive Summary** - Not Scored

2. All competitive grant applications are subject to merit review.
3. Cost sharing will not be considered when evaluating the application.
4. IDHS/DBHR staff familiar with the requirements of the program will score and review the application packet.
5. Review team members will have no conflicts of interest and will read and evaluate application packets independently.
6. Applications that fail to meet the criteria described in Section II. Eligibility will not be scored and/or considered for funding.
7. Applications must follow the instructions in Section V. Submission Requirements and Details.

C. Review and Selection Process

1. The process for evaluation of the application is as follows:
   a. The numerical score may not be the sole award criterion.
   b. The Department reserves the right to consider other factors such as: geographical distribution, demonstrated need, and agency past performance as a state awardee, etc.
   c. While the recommendation of the review panel will be a key factor in the funding decision, the Department maintains final authority over funding decisions and considers the findings of the reviewers to be non-binding recommendations. Any internal documentation used in scoring or awarding of grants shall not be considered public information.
2. In the event of a tie with insufficient funding for all tied applications, the Department may choose to elect one of the following options:
   a. Apply one or more of the additional factors for consideration described above to prioritize the applications; or
   b. Partially fund each of the tied applications; or
   c. Not fund any of the tied applications.
3. The Department reserves the right to negotiate with applicants to adjust award amounts, targets, deliverables, etc. These negotiations do not obligate IDHS to provide funding, nor should an applicant draw any conclusions about the Department's intentions to fund or not fund the application.
4. Anticipated Announcement and State Award Dates a. Anticipated announcement of awards is September 15, 2026, with a grant start date of September 30, 2026.
5. Merit Based Review Appeal Process
   a. Competitive grant appeals are limited to the evaluation process. Evaluation scores may not be protested. Only the evaluation process is subject to appeal and shall be reviewed by IDHS' Appeal Review Officer (ARO).
      i. Submission of Appeal
         - Appeals submission IDHS contact information:
            - Contact Name: Barb Roberson
            - Email Address: DHS.DBHR.GrantApp@illinois.gov
            - Email Subject Line: Applicant Name - 401 Suicide Prevention Call Center Enhancement (SPCE) - Appeal
         - An appeal must be submitted in writing to appeals submission IDHS contact listed above, who will send to the IDHS Appeal Review Officer (ARO) for consideration.
         - An appeal must be received within 14 calendar days after the date that the Notice of Non-Selection was sent.
         - The written appeal shall include at a minimum the following:
            - Name and address of the appealing party
            - Identification of the grant; and
            - Statement of the reasons for the appeal

- Supporting documentation, if applicable

ii. Response to appeal

- IDHS will acknowledge receipt of an appeal within 14 calendar days from the date the appeal was received.
- IDHS will respond to the appeal within 60 days or supply a written explanation to the appealing party as to why additional time is required.
- The appealing party must supply any additional information requested by IDHS within the time period set in the request

iii. Resolution

- The ARO will make a recommendation to the Agency Head or designee as expeditiously as possible after receiving all relevant requested information.
- In determining the appropriate recommendation, the ARO shall consider the integrity of the competitive grant process and the impact of the recommendation on the State Agency.
- The Agency will resolve the appeal by means of written determination.
- The determination shall include, but not be limited to:
  - Review of the appeal;
  - Appeal determination; and
  - Rationale for the determination

D. Risk Review

1. IDHS conducts risk assessments for all awardees, prior to the award being issued.
   a. An agency wide FY27 Internal Control Questionnaire (ICQ) is to be completed by the awardee within the Grantee Portal. The ICQ evaluates fiscal, administrative, and programmatic risk in the following categories:
      i. Quality of Management Systems
      ii. Financial and Programmatic Reporting
      iii. Ability to Effectively Implement Award Requirements
      iv. Awardee Audits
   b. The deadline to submit the FY27 ICQ is at the same time as the application packet.
   c. A program specific Programmatic Risk Assessment conducted by the awarding agency to evaluate the following categories:
      i. Programmatic financial stability
      ii. Management systems and standards that would affect the program.
      iii. Programmatic audit and monitoring findings
      iv. Ability to effectively implement program requirements.
      v. External partnerships
      vi. Programmatic reporting
   d. Risk assessments are not intended to be punitive in nature, rather they are conducted in order to evaluate the support, technical assistance, and training that may be needed for the awardee and the level of monitoring that is needed for the award.
   e. Risk assessments may result in Specific Conditions being placed on the award to include more frequent monitoring or the implementation of a corrective action plan.
2. Simplified Acquisition Threshold - Federal and State awards
   a. It is anticipated that grants under this award may receive an award over the Simplified Acquisition Threshold (as defined in 48 CFR part 2, subpart 2.1; the dollar amount set by the Federal Acquisition Regulation (FAR), currently at $250,000 (with some exceptions)). Potential grantees under this notice of funding opportunity may receive an award in excess of the simplified acquisition threshold of $250,000. Therefore, the grantee is subject to the simplified acquisition threshold and related requirements.

i. Prior to making an award with a total amount greater than the simplified acquisition threshold, IDHS is required to review and consider any information about the applicant that is in the designated integrity and performance system accessible through SAM. (Currently FAPIIS) (See 41 U.S.C. 2313).

ii. That an applicant, at its option, may review information in the designated integrity and performance systems accessible through SAM and comment on any information about itself that a State or Federal awarding agency previously entered and is currently in the designated integrity and performance system accessible through SAM.

iii. IDHS will consider any comments by the applicant, in addition to the other information in the designated integrity and performance system, in making a judgment about the applicants' integrity, business ethics, and record of performance under State and Federal awards when completing the review of risk posed by applicants as described in 2 CFR 200.206.

VII. Award Notices

A. State Award Notices

1. Applicants recommended for funding under this NOFO following the review and selection process will receive a Notice of State Award (NOSA). The NOSA shall include:
   a. Grant award amount
   b. The terms and conditions of the award
   c. Specific conditions, if any, assigned to the applicant based on the fiscal and administrative risk assessment (ICQ), programmatic risk assessments (PRA), and the Merit Review.
2. **Note**: The Department cannot issue a NOSA until the successful applicant has an FY27 approved budget entered into the CSA Tracking System. The applicant shall receive the NOSA through the Grantee Portal. The NOSA must be accepted/declined by the grants officer (or equivalent) within the Grantee Portal. This NOSA effectively accepts the state award amount and all conditions set forth within the notice. The NOSA is the document authorizing the department to proceed with issuing an agreement.
3. The NOSA is NOT an authorization to begin performance (to the extent that it allows charging to State awards of pre-award costs; pre-award costs are incurred at the non-State entities own risk unless they have received written prior approval to begin performance).
4. The authorizing document to begin performance is the fully executed Uniform Grant Agreement (UGA) signed by the grants officer, or equivalent. This is the official document that obligates funds. The UGA is sent to the non-State entity via the CSA Tracking System. The non-State entity will print and sign the signature page of the UGA and return signature page to DHS.OCA.SignaturePages@Illinois.gov. A final signed copy of the UGA will be provided to the non-State entity via an upload into the CSA Tracking System Tracking System.
5. Applicants who are not eligible due to registration or pre-qualification issues, or late applications will be notified that they are ineligible for consideration when their application is processed.
6. A written Notice of Non-Selection shall be sent to the applicants not receiving an award following the Merit Review process.

VIII. Post-Award Requirements and Administration

A. Administrative and National Policy Requirements

1. The agency awarded funds shall provide services as set forth in the IDHS grant agreement and shall act in accordance with all State and Federal statutes and administrative rules applicable to the provision of the services.
2. You can find a sample of the grant agreement at IDHS Uniform Grant Agreement.
3. Payment Terms
   a. Grantees will be paid using the Reimbursement Method.
   b. The Monthly Invoice IL444-5257 Template must be used for all DBHR programs and submitted no later than 15 days after the end of the month. All invoices shall be HIIPA compliant and encrypted utilizing DHS approved encryption software and emailed to DBHR at the email address listed below.
      i. Invoice and PFR Email Address for General Grants: DHS.DBHR.QuarterlyReports@Illinois.gov
      ii. Invoice and PFR Email Address for Williams Consent Decree: DHS.DBHR.WilliamsInvoices@Illinois.gov

iii. Invoice and PFR Email Address for Colbert Consent Decree: DHS.DBHR.ColbertInvoices@Illinois.gov

4. Payment Forms

a. Monthly Invoice (IL444-5257)

B. Reporting

1. Reporting, upon execution of the grant agreement, shall be in accordance with the requirements set forth in the UGA and related exhibits which include but is not limited to the following:

a. Periodic Financial Reports submitted electronically in accordance with instructions in the UGA no more frequent than quarterly and no less frequent than annually, unless unusual circumstances exist.

b. Periodic Programmatic Reports submitted electronically in accordance with instructions in the UGA no more frequent than quarterly and no less frequent than annually, unless unusual circumstances exist.

c. Close-out Performance Reports and Financial Reports as instructed in the UGA.

d. Other Unique Programmatic Reporting Requirements: additional annual performance data may be collected as directed by the Department and in the format prescribed by the Department.

e. If the State share of any State award may include more than $500,000 over the period of performance applicants are also subject to the reporting requirements reflected in Appendix XII to 2 CFR 200.

f. Non-compliance with any of the identified reports may lead to being placed on the Illinois Stop-Payment List.

g. Grantee shall submit these reports) to the appropriate email address listed below. Reported expenses should be consistent with the approved annual grant budget. Any expenditure variances require prior Grantor approval in accordance with Article VI of the UGA to be reimbursable.

i. PFR Email Address for General Grants: DHS.DBHR.QuarterlyReports@Illinois.gov

ii. PFR Email Address for Williams Consent Decree: DHS.DBHR.WilliamsInvoices@Illinois.gov

iii. PFR Email Address for Colbert Consent Decree: DHS.DBHR.ColbertInvoices@Illinois.gov

iv. PPR and PRTP Email Address for All Grants: DHS.DBHR.QuarterlyReports@Illinois.gov

h. DBHR reporting templates and detailed instructions for submitting reports can be found in the Provider section of the IDHS website.

IX. Other Information

A. Credentials

QMHP as defined in IL Adm Code 59 Part 132.25

B. Program Accomplishments

Over the last SFY, Illinois contact centers met or exceeded the 90% call answer rate benchmark for six months.

C. Related Programs

Program 400 National Suicide Prevention Lifeline (NSPL) Call Center

D. Example Projects

Program 401 Suicide Prevention Call Center Enhancement (SPCE)

Program 403 Suicide Prevention Call Center Expansion Cook

E. Program Websites

1. Mental Health Grants - FY 2027

2. IDHS Grants
3. IDHS website

F. Mandatory Forms and Submissions

1. Uniform Application for State Grant Assistance
2. Program Narrative
3. Budget submitted in the CSA Tracking System
4. Subcontractor Budget, if applicable submit as a separate attachment
5. Grantee Conflict of Interest Disclosure submit as a separate attachment
6. A Signed Vibrant Network Agreement OR proof that an agreement is in process with Lifeline Administrator that will be finalized within 90 days of accepting the State award.
7. A copy of accreditation from one of the following eight providers
    a. American Association of Suicidology (AAS)
    b. International Council for Helplines (formerly CONTACT USA)
    c. Alliance of Information and Referral Systems (AIRS)
    d. The Joint Commission
    e. Commission on Accreditation of Rehabilitation Facilities (CARF)
    f. Council on Accreditation (COA)
    g. Utilization Review Accreditation Commission (URAC)
    h. DNV Healthcare, Inc.
8. Programmatic Risk Assessment