

Allegany County Local Behavioral Health Authority

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Cumberland, MD 21501-1745

Request for Proposals

WELLNESS AND RECOVERY CENTER

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Background and Overview

The Allegany County Local Behavioral Health Authority (LBHA) proposes this initiative to manage the peer-led Wellness and Recovery Center (WRC). The LBHA is the recipient of a Maryland Department of Health Behavioral Health Administration (BHA) state grant to provide contract management and oversight of the WRC program.

Allegany County has had a Wellness and Recovery Center (WRC) for many years. The WRC is a peer-led recovery center for adults. A “peer” is an individual with lived experience of mental health and/or substance use. Peers share a mutual understanding of the experiences of living with mental health or substance use challenges with the individuals seeking support and community through the WRC. Peer supporters offer both one-on-one and group support at the center. Individuals who attend the center can participate in various activities, such as social and wellness programs, peer support, self-advocacy, and empowerment initiatives. They can also connect with community-based services, access training opportunities, and receive help with securing benefits.

The WRC shall allow individuals living in or seeking behavioral health recovery to meet at least 1482 hours annually. The purpose of this program is to offer peer support services and provide individuals with the ability to connect with others in behavioral health while navigating local support services and overcoming barriers to their own personal recovery.

Goals

The goal of the WRC is to provide a welcoming, safe and supportive peer-run environment for individuals with mental health and substance use disorders. These services are most effective in nontraditional settings such as non-barrier community support agencies, standalone non-profit community centers, and other non-clinical behavioral health settings. Services are offered on a voluntary basis and are available to participants throughout their recovery process. These services are most effective in nontraditional settings such as non-barrier community support agencies, standalone non-profit community centers, and other non-clinical behavioral health settings. All staff providing services to individuals should have personal lived experience with behavioral health recovery.

Applicant Qualifications

The successful applicant shall meet all the following eligibility criteria to be considered for funding:

- 1. Organizational Status**

Applicants must be a not-for-profit, community support agency or other non-clinical behavioral health setting with a physical location in Allegany County. All applicants must provide proof of nonprofit status.

- 2. Program Site**

Applicants must commit to securing a brick-and-mortar location for in-person WRC programming. The site should be ADA-compliant.

- 3. Intercultural Competency**

The Award Recipient shall ensure their vendors work to actively address health disparities and gaps in care. Providers selected should represent a wide variety of programs available in the jurisdiction. Award Recipients and their vendors must ensure they are rendering services that are culturally and linguistically competent and appropriate.

Scope of Work

Wellness Recovery Centers provide behavioral health peer support services to individuals seeking behavioral health recovery. These voluntary, individual-driven, services are provided in a non-clinical setting by individuals who have a personal lived experience with behavioral health recovery. The WRC shall allow individuals living in or seeking behavioral health recovery to meet at least 1,482 hours annually. These services should include, but are not limited to:

Peer Support – Designate and provide a site that allows individuals seeking behavioral health recovery supports to meet regularly throughout the award period; **Provide 1 on 1 peer contacts** documented by either using the approved State form (Documentation of Peer Support Session) or another form of documentation that contains the same information. Peer support sessions consist of one-to-one contact (in person, virtually, or telephonically) conducted by staff and/or volunteers, lasting at least 15 minutes. **Peer support groups** that facilitate a conversation focused on a specific behavioral health topic (i.e. depression, gender-specific, trauma, substance use recovery, etc.) These groups must include three (3) or more individuals and maintain a “**warm line**” to assist individuals who have non-urgent behavioral health needs.

Recovery Support Services – **Social activities** that are designed to promote social connection and reduce isolation. These activities must involve 3 or more individuals (i.e.: board games, community meals, member outings, etc.) and **connection to Recovery and Wellness Resources** that aid in the individual’s continued recovery and wellness. Some examples of these services are: housing, funded benefits, resource assistance, employment, formal education programs, vital documents, accompanied by court or medical appointments, and formal treatment programs.

Training **Allocate 1.0 % of the program budget for training activities and supplies.** Use allocated funds to cover the costs associated with increasing the professional development of program staff (paid or volunteer) and board members. This includes expenses related to administrative training courses, training materials, CPRS/RPS training registration fees, and other application fees that cover CPRS or RPS credentialing. Training events can be facilitated either on-site, or participants can attend training sessions off-site. Funding may not be used for travel or lodging expenses; Participate in management/**fiscal training** on topics relevant to running a nonprofit Wellness & Recovery Center that focuses on the promotion, development, or management of peer-operated organizations (i.e.: grant writing budget management, data collection, human resources training, etc.).

Assessment – Performance of an annual **Community Wellness and Recovery Needs Assessment** of individuals utilizing funded program services, which identify the training, education, and recovery resource needs of individuals engaging in behavioral health recovery supports.

Education – Provide **Informational presentations** delivered by outside organizations that present information on specific community resources or whole health topics i.e., behavioral health recovery, heart disease, sexual health, SSDI, etc. Maintain a library of resources to assist individuals utilizing funded services that reduce barriers and enhance connections that support long-term wellness and recovery, such as entitlements, fair housing, access to employment, advance directives, and patient rights.

Marketing – Publish and distribute **monthly newsletters and/or calendar** of center events that serve as a monthly guide of activities planned for the center which is available to the community and individuals using the center; Conduct **outreach presentations** to community organizations and/or staffed display tables at community events, which provide information and resources about Wellness & Recovery, peer support and peer organizations. These outreach presentations are intended to increase the number of individuals who utilize program services.

Supervision - Maintain a relationship with a Registered Peer Supervisor (as evidenced by an RPS certificate on file) who will provide supervision hours to staff and/or volunteers seeking or maintaining their Certified Peer Recovery Specialist credential.

Training - Provide funding for a minimum of three (3) individuals (staff, individuals receiving support services, and/or board members) to attend a peer-led conference hosted in the state of Maryland (i.e. On Our Own of Maryland's Annual Conference).

The WRC will, at a minimum:

1. Develop or provide a site that allows individuals living in or seeking behavioral health recovery to meet at least 1,482 hours per year.
2. Provide Wellness Recovery Center services to an unduplicated count of one hundred seventy-five individuals per fiscal year. To calculate this data, each unique individual receiving Peer to Peer services should only be counted *once* per Fiscal Year.
3. Facilitate fifty (50) one-on-one peer contacts; each lasting at a minimum of 15 minutes and documented using either the "Documentation of Peer Support Session" form or another form of documentation that contains the same information. One-on-one Peer Support Sessions can be facilitated in person, virtually or telephonically.
4. Facilitate fifty (50) behavioral health peer support groups focused on a specific topic. Peer Support Groups can be facilitated in person or virtually.
5. Facilitate twelve (12) activities designed to promote social connection and reduce isolation.
6. Provide twelve (12) informational presentations delivered by outside speakers about specific community resources.
7. Expend the allocated 1% of the budget on training activities and supplies as identified within the scope of work.
8. Participate in a minimum of two (2) management/fiscal training courses.

9. Provide twelve (12) outreach presentations to community organizations.
10. Facilitate (1) annual Community Wellness and Recovery Needs Assessment.
11. Publish and distribute (12) monthly newsletters and/or calendars.
12. Track and collect data on the number of individuals who obtained Recovery Support Services in the following categories: housing, funded benefits, resource assistance, employment, enrolled in a formal education program, vital documents, accompanied to court or medical appointment, and enrolled in a treatment program.
13. Ensure an Annual Independent Financial Audit is completed.
14. Maintain a relationship with a Registered Peer Supervisor (RPS) (*as evidenced by a RPS certificate on file*) who will provide supervision hours to staff and/or volunteers seeking or maintaining their Certified Peer Recovery Specialist credential.
15. Maintain a library of resources to assist individuals utilizing funded services that reduce barriers and enhance connections, which support long-term recovery and wellness.
16. Maintain a “warm line” to provide assistance to individuals who have non-urgent behavioral health needs.
17. Sponsor a minimum of three staff, individuals receiving support, and/or board members to attend a peer-led conference in the State of Maryland.
18. Collect demographic data.
19. Submit monthly reports by the 15th of the previous month’s services.
20. Attend LBHA and BHA meetings, as requested.
21. Make available a program director and/or peer support specialist staff who are trained appropriately and able to lead peer groups and training that shall include but are not limited to: The Wellness Recovery Action Plan (WRAP); Mental Health First Aid (MHFA); Naloxone Training; Social Security Insurance/Social Security Disability Insurance Outreach, Access and Recovery (SOAR) training.

Ability to Integrate with Existing System

The applicants must address their financial ability to provide the scope of services requested and at the quality desired and address the legal liability issues associated with the operation of the proposed services. Applicants having current contracts with BHA or local authorities must have demonstrated success in meeting outcome and contract requirements.

As part of its offer, each applicant is to provide a list of all contracts with any entity of the State of Maryland that it is currently performing, or which have been completed within the last 5 years. For each identified contract the applicant is to provide:

- The State contracting entity and employee contact person

- A brief description of the services/goods provided
- The dollar value of the contract
- The term of the contract
- Specify whether the contract was terminated before the end of the term specified in the original contract, including whether any available renewal option was not exercised.

Pre-Bid Conference

A pre-bid conference will be held on December 22, 2025, at 11:00am virtually. The purpose of the conference is to address questions concerning the expectations of the project. All interested parties should register with the Allegany County LBHA by December 19, 2025, by noon (12:00pm) email to achd.bhso@maryland.gov

Application Submission and Closing Date

Issuing Office:

Allegany County Health Department
Local Behavioral Health Authority
12501 Willowbrook Road
Cumberland, Maryland 21502
301-759-5070
achd.bhso@maryland.gov

Please submit proposal and all supporting documentation to: achd.bhso@maryland.gov

Due Date: February 16, 2026, by 5:00pm

All applications received after the application submission deadline will not be accepted.

Any costs incurred by applicants in preparing or submitting proposals are the sole responsibility of the applicants. The LBHA will not reimburse any applicants for any costs incurred in making a proposal or subsequent pre-contract discussions, presentations, or negotiations.

Application Format & Content Requirements

The Application should address all points outlined in this RFP and should be clear and precise in response to the information and requirements described. The application should not exceed twenty (15) pages and should contain the following sections:

1. Wellness and Recovery Center – I. Transmittal Letter
2. Wellness and Recovery Center – II. Technical Application
3. Wellness and Recovery Center – III. Financial Capability/Budget Analysis

1. Transmittal Letter

A transmittal letter should accompany the application. The sole purpose of this letter is to submit the application. It should include the name and signature of the individual who is authorized to commit the applicant to the services and requirements as stated in this RFP, address, email and phone number.

2. Technical Application Content

a. Philosophy and Approach to Service Delivery

The applicant must provide a detailed discussion of their organization history and related experience, addressing both the requirements of the scope of work and their foundational understanding of mental health services. This discussion should clearly articulate their approach, methods, and techniques for meeting the RFP's requirements, specifically demonstrating their ability to integrate with the existing system and noting any additional requirements they identify that would help achieve the RFP's objectives. Furthermore, the applicant's response must encompass their basic values and beliefs about mental health services, their knowledge of the target population and the Wellness and Recovery Action Plan (WRAP) concept, and familiarity with the Maryland Public Behavioral Health System. Crucially, the discussion should emphasize the importance of active participant involvement and recovery, while demonstrating a clear priority for the most vulnerable populations and their entitlements to recovery and self-direction.

b. Quality and Outcomes

The proposal should offer a narrative explanation detailing the plan for meeting the performance measures and other requirements of the grant by first clearly stating the expected program outcomes. This explanation must then outline comprehensive methods for documenting and assessing performance, specifically listing how the progress of the scope of work requirements will be measured and recorded. Furthermore, the narrative needs to describe distinct strategies and efforts to ensure active participant involvement throughout the program. The applicant must also demonstrate robust procedures to maintain confidentiality and secure records, outlining the protocols in place to protect sensitive information. Finally, the proposal should detail how technology will be utilized to enhance the quality, efficiency, and overall effectiveness of program implementation.

c. Staffing/Work Plan

Provide an organizational flow chart for grant funded staff and their supervisors. Include the position description, the experience, qualifications, and education of the staff to be assigned. It is essential that the Applicant assign and provide sufficient qualified staff who have experience in aspects related to the objectives and scope of the application. Include a breakdown of how job duties required by the grant will be assigned. The applicant should explain which backup professional personnel are available to substitute for the loss of professional personnel identified as necessary in the application.

Provide a clear and concise work plan and timelines, orientation, training, and supervision, process and content of WRAP, record keeping, reports requirements, problem-solving, if encountered, and the grievance procedures.

d. Letter of Support

Applicants are required to provide at least two (2) letters of support with their proposals. Each reference must include the name of a contact person who is familiar with the applicant's work, along with their telephone number.

3. Financial Capability/Budget Analysis Content

a. Overall Budget

Applicants must demonstrate sufficient financial capacity to successfully manage and carry out the work outlined in the RFP. This includes providing audited financial statements for the past two years to verify fiscal stability and accountability, as well as submitting a complete FY27 432 Budget Justification Template to ensure transparency and alignment between proposed activities and available resources.

The total funding available for this project for the Fiscal Year 2027 is approximately \$159,190. A complete budget must be submitted using the HD/LBHA 432 Budget Justification forms. All expected sources of revenue should be clearly outlined in the budget submission. The HD/LBHA 432 Budget Justification Form is included below as an icon and also attached as a separate document.

b. Personnel Detail Page

A personnel detail page including the qualifications and titles of staff, the hours/days of employment anticipated, the salary per hour/day, and any agency adjustments, should be detailed. All consultant costs should be detailed, including type of consultant (if known) and an hourly rate for each consultant hired.

c. Eligible and Ineligible Use of Funds

i. Eligible Use of Funds –

Funds shall be used for Wellness Recovery Center services, including

- a. Staffing
- b. Training costs
- c. Supplies and IT equipment
- d. Administrative costs
- e. Rent and utilities
- f. Any other related expenses as approved by BHA/LBHA.

ii. Ineligible Use of Funds

- a. Funds shall not be used for gift cards or clinical services that are reimbursable through Maryland Medicaid.
- b. Funding designated for a 1% training allocation may not be used for travel or lodging expenses.

- c. Funds shall not be used to support peer positions providing services to individuals enrolled in Medicaid Provider Type 50 settings (Community Based Substance Use Disorder Programs licensed under COMAR 10.63.03 as OP Level 1, IOP Level 2.1, and/or PHP Level 2.5), Medicaid Provider Type 32 settings (Opioid Treatment Programs) or Provider Type 34 settings (Federally Qualified Health Centers) serving individuals with substance use disorders.
- d. These funds may not be used for cash payments directly to consumers. It is the intent of the BHA that these funds are limited to use for members of the Public Behavioral Health System (PBHS) receiving substance use disorder (SUD), mental health (MH) disorder, or co-occurring SUD and MH disorder treatment and/or services and supports. The subgrantee contract does not fund services and supports that are already included within the fee-for-service (FFS) rate structure or are otherwise reimbursable by Medicaid.
- e. Treatment services that are reimbursable by Medicaid.
- f. The funding of programs that would deny a patient access to their program, because of their use of any of the Food and Drug Administrations (FDA) approved Medication Assisted Treatment (MAT) medications.
- g. Payment for promotional items including, but not limited to, clothing or commemorative items such as pens, mugs/cups, folders/folios, lanyards, and conference bags, unless otherwise specified in the program deliverables as a part of the provision of services to the designated population.
- h. The purchase or construction of any building or structure to house any part of the program.
- i. Direct payments to individuals to enter treatment or the continuation of participation in prevention or treatment services.
- j. Grant funds may not be used, directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder.
- k. Grant funds also cannot be provided to any individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders. See, e.g., 45 C.F.R. §75.300(a) (requiring HHS to “ensure that Federal funding is expended . . . in full accordance with U.S. statutory . . .

requirements.”); 21 U.S.C. §§ 812(c)(10) and 84 (prohibiting the possession, manufacture, sale, purchase or distribution of marijuana). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the DEA and under an FDA- approved investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned controlled substance under federal law.

- I. Funds shall not be used for gift cards.
- m. Funding designated for a 1% training allocation may not be used for travel or lodging expenses.
- n. Funds shall not be used to support mutual support groups (such as NA, AA, etc.).

Application Evaluation Criteria

A. Process

A Review Committee shall first review any submitted technical portions for compliance with essential technical requirements as expressed in this RFP. Applications will be evaluated first for technical content without consideration of costs, then for costs. The Review Committee will convene to making the selection based on its review of the results. Failure to comply with any requirement of this RFP will disqualify a proposal.

B. Criteria

I. Acceptable Offers

The Committee will classify the proposals as acceptable or not acceptable based on the technical merit. Applicants whose proposals are classified as not acceptable will be notified. Scoring by the Review Committee of each proposal shall be in accordance with the Evaluation Criteria.

Each member of the Review Committee will complete a preliminary technical evaluation. All applicants who receive an average rating of 80% or more of total points possible on the technical application evaluation from the Review Committee will be eligible for consideration. The following is the weighted scale for each component:

II. Unacceptable Offers

Those for whom the Review Committee evaluates with an average technical rating of less than 80% of the total possible points will not be considered further.

III. Technical Scores

Applications will be given a score based on the philosophy and approach to service delivery, quality and outcomes, and implementation and operations strategy. Attachment 1 WRC Rating Sheet includes additional information regarding what should be included in each section. The weight criteria is as follows:

I. Transmittal Letter - 5

II. Technical Proposal - 85

- a. Philosophy and Approach to Service Delivery (20)
- b. Quality and Outcomes (25)
- c. Staffing/Work Plan (35)
- d. Letter of Support (5)

III. Budget Analysis - 10

Duration of Offer

Estimated Number of Awards

One award will be granted. This grant cannot be subcontracted by the Awardee.

BHA has provided funding for the grant. The current grant award period is during Fiscal Year 2027 from July 1, 2026, through June 30, 2027. After this period, there will be the option to renew for up to 4 additional one-year periods, subject to availability of Allegany County LBHA, BHA funds, and performance of grant Awardee.

Contract Requirements

Contract Type

The selected Applicant will be required to enter into a cost-reimbursement contractual agreement with the LBHA. The contents of this RFP and the Application of the successful applicant will be incorporated by reference into the resulting agreement. The LBHA will enter a contract only with the selected applicant and the selected applicant will be required to comply with, and provide assurance of, certification as to certain contract requirements and provisions.

Human Services Agreement Manual

The Human Services Agreement Manual (HSAM) is a manual that specifies administration and fiscal policy for grants and contracts, cost reimbursement contracts, and purchase of services contracts for human services funding, which are made by the Maryland Department of Health (MDH). This manual does not address programmatic issues. This manual shall, by reference, become part of each MDH funded contract agreement and the provisions are extended to all subgrantees. Subgrantees shall refer to the HSAM Standards for Audit of Human Services Sub-Vendors for additional details.

Insurance Requirements

The selected applicant shall perform services with the degree of skill and judgment, which is normally exercised by recognized professionals, paraprofessionals and voluntary service organizations with respect to services of a similar nature.

The selected applicant shall take proper safety and health precautions to protect the work environment, employees, the public and the property of others from any damage or injury resulting solely from the performance of work described herein.

The selected applicant must show evidence of commercial insurance coverage for the following exposures:

WORKER'S COMPENSATION: An insurance policy complying with the requirements of the statutes of the jurisdiction(s) in which the work will be performed. The selected applicant will provide coverage for these exposures on an "if any" basis. The coverage under such an insurance policy or policies shall have limits not less than:

Worker's Compensation: MARYLAND STATE STATUTORY LIMITS

Employer's Liability: Each Accident \$500,000

Disease Policy Limits \$500,000

Disease - Each Employee \$500,000

COMMERCIAL GENERAL LIABILITY INSURANCE (CGL): An insurance policy covering the liability of the selected applicant for all work or operations under or in connection with prospective project; and all obligations assumed by the selected applicant under the prospective project. Products, Completed Operations and Contractual Liability must be included. The coverage under such an insurance policy or policies shall have limits not less than:

BODILY INJURY AND PROPERTY DAMAGE LIABILITY

\$1,000,000/\$2,000,000 per occurrence/ aggregate

PREMISES MEDICAL PAYMENTS \$5,000

PERSONAL INJURY / ADVERTISING \$1,000,000

Physical and Sexual Abuse \$100,000/\$300,000 per occurrence

Miscellaneous PROFESSIONAL LIABILITY INSURANCE: A separate insurance policy to pay on behalf of the selected applicant all costs that the selected applicant shall become legally obligated to pay as damages due to any claim caused by any negligent act, error or omission of the selected applicant or any other person for whose acts the selected applicant is legally liable arising out of the performance of services under the prospective project. The coverage under such an insurance policy shall have a limit of liability not less than:

\$1,000,000 per occurrence

Should any of the described insurance policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.

Quality Standards

The LBHA and MDH are committed to ensuring that WRC services are of high quality and responsive to the needs of eligible adults living in or seeking behavioral health recovery. The selected applicant that does not meet the requirements as outlined in this RFP shall be subject to a Corrective Action Plan, with additional follow-up monitoring by the LBHA to ensure that the requirements are met. If the selected applicant is unable or unwilling to meet the requirements as specified by this RFP, the MDH or the LBHA reserves the right to reissue a competitive solicitation for a replacement WRC provider.

Contract Monitoring

The LBHA and the MDH shall engage in ongoing, periodic monitoring activities to evaluate the quality-of-service delivery and essential elements of the program. Providers selected through this RFP shall be required to participate in all monitoring and evaluation activities.

Activities shall include, but are not limited to the following:

- Participation in a site visit at least, but not limited to, annually to evaluate and document compliance with administrative and programmatic requirements.
- Review of policy and personnel records to ensure administrative compliance.
- Participation in any provider meetings and state-required meetings as required by the LBHA.
- Collection and submission of programmatic data and progress reports, as required by the LBHA.

Attachment 1: Wellness and Recovery Center Rating Sheet

I. TRANSMITTAL LETTER

Letter signed by an authorized official with the requested contact information

Letter on Applicant's stationery

II. TECHNICAL APPLICATION

a. Philosophy and Approach to Service Delivery

- i. Organization History
- ii. Highlight of Related Experience
- iii. Basic values and beliefs about mental health services
- iv. Knowledge of population and Wellness and Recovery Action Plan (WRAP) concept
- v. Knowledge of Maryland Public Behavioral Health System
- vi. Importance of active participant involvement & recovery
- vii. Clear priority for most vulnerable populations and entitlements to recovery and self-direction

b. Quality and Outcomes

- i. Clearly stated outcomes
- ii. Clearly list how the progress of scope of work requirements will be measured and recorded
- iii. Efforts or method to ensure participant involvement
- iv. Confidentiality and record security
- v. Use of technology to improve quality and efficiency

c. Staffing/Work Plan

- i. Description of organizational structure
- ii. Explanation of how the project will relate to the whole
- iii. Description of duties and qualifications of staff assigned
- iv. Number and credentials of staff indicates high probability of meeting project outcomes
- v. Supervisory/administrative support adequate to meet project outcomes.
- vi. Ability to cover for staff turnover and leave
- vii. Attachment/inclusion of the Organization chart
- viii. Clear and concise work plan and timelines
- ix. Orientation, training and supervision
- x. Process and content of WRAP
- xi. Record keeping
- xii. Report requirements
- xiii. Problem-solving, if encountered
- xiv. Grievance procedures

d. Letters of Support

- i. A minimum of (2) letters attached

e. **FINANCIAL CAPABILITY/BUDGET ANALYSIS**

- i. Description of Applicant financial capability to carry out work of RFP
- ii. Audited financial statements for the past two years
- iii. Submission of complete LBHA 432 Budget Package

Attachment 2: Wellness and Recovery Center Application Timeline

Steps to Completion	Completion Date
RFP is Issued (E-Mail/Webpage/Newspaper)	December 8, 2025
Register for Pre-Proposal Office Hours RSVP at achd.bhso@maryland.gov Submit questions ahead of conference call to achd.bhso@maryland.gov	December 19, 2025, by Noon
Pre-Proposal Office Hours	December 22, 2025, at 11:00am
Proposal Submission Deadline Email to the Allegany County LBHA at: achd.bhso@maryland.gov	February 16, 2026 by COB
Contract Award Announcement Email/call to successful offeror	March 2, 2026
Work to begin on or about	July 1, 2026