

## Crisis Relief Centers Grant Application Overview

HCA Reference Number: 2024HCA1

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### Grant Overview and Purpose

The goal of this grant is to establish and operationalize 23-hour Crisis Relief Centers (CRC) in Washington State, as outlined in RCW [71.24.916](#) and certified through the standards in WAC [246-341-0903](#), to provide essential and immediate behavioral health services. These facilities aim to reduce state hospital admissions, unnecessary emergency department visits, and law enforcement involvement for people in crisis through low barrier, “no wrong door” access to crisis stabilization services.

By funding startup costs for these CRCs, the Health Care Authority (HCA) intends to create a more comprehensive crisis response system in Washington State, equitably funding facilities on both sides of the Cascade Mountains in Washington State. This is part of an effort to improve the availability and quality of crisis relief services, ultimately contributing to the overall safety and well-being of affected individuals.

This opportunity is available for any entity which meets the Eligibility Criteria identified below. This includes but is not limited to for-profit, non-profit, county, local, Indian Health Care Providers (IHCP), and Tribal government organizations.

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### Key Grant Dates

- **HCA Release of Grant:** March 24, 2025
- **Question and Answer Period:** March 24, 2025 – April 11, 2025
- **Grant Application Form Due Date:** April 16, 2025
- **HCA Release Grant Award Notices:** May 1, 2025
- **Estimated Service Date Range:** May 15, 2025 – June 30, 2025

Changes to the schedule (if any) will be announced on the Crisis Relief Center program grant [website](#). It is the responsibility of applicant organizations to regularly monitor the website for updates, changes, and important notices related to the grant process. HCA acknowledges the abbreviated timeline for this work and appreciates the efforts required by the applicant organizations to meet the expectations outlined herein.

*\*Please note: HCA reserves the right in its sole discretion to revise the above schedule. Changes will be incorporated into the posted Grant Q&A document, see Grant Question and Answer Period section below.*

## Funding

### Funding Details

- **Maximum Grant Amount:** Up to \$700,000 per application and applicant organization.
- **Limitations:** Grant awards will be generally capped at \$300,000 per application. Applicant organizations requesting funding above this threshold, up to a maximum of \$700,000, will only be considered in exceptional cases. To qualify for funding beyond \$300,000, applicant organizations must provide a compelling justification in their budget demonstrating that additional resources are critical to their success.
- **Contingencies:** Funds awarded through this grant process are contingent upon fund availability. HCA reserves the right to not award all funds advertised in this grant opportunity.

### Service Location Prioritization and Funding Limitations

To promote equitable access to grant funds across Washington State, HCA may limit the number of awards granted to applicant organizations proposing to provide services in the same area. This is further outlined in the Questions and Evaluation Criteria, Final Evaluation Process section. This limitation aims to:

- **Prevent Overlapping Services**

If multiple viable applicant organizations seek to provide services in the same area, HCA may prioritize funding based on factors such as demonstrated need, capacity to deliver services, and existing partnerships.

Any funds awarded through this HCA grant must not be utilized to duplicate any other support currently received by the applicant organization.

- **Equitable Distribution of Funds**

HCA will award all grant funds with the goal of distributing funds as equitably as possible between the eastern and western sides of Washington State to ensure the diverse regions within the state receive adequate support for crisis intervention services.

By adhering to these principles, HCA aims to enhance the statewide behavioral health crisis response system while ensuring that funding is allocated in a manner that best meets the needs of all communities in Washington State.

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## Grant Question and Answer Period

### Applicants May Submit Questions

Applicant organizations may submit questions or requests for clarification regarding the grant application process. The questions received and HCA's responses will be made available for review.

- **Question and Answer Period**

Questions may be submitted between March 24, 2025, and April 11, 2025. HCA will respond to questions received before 11:59 PM (Pacific) April 11, 2025. To maintain the key grant application dates, HCA will not respond to questions received after 11:59 PM (Pacific).

- **Submission Method**

Questions must be submitted via email to Cassie Bryden at [hcaprocurments@hca.wa.gov](mailto:hcaprocurments@hca.wa.gov) with the subject line: **2024HCA1 - Questions** and the **Organization's Name** that is applying.

## HCA Responses Provided

HCA will review and consolidate all questions received within the question and answer period. Questions and responses will be compiled into a Grant Question and Answer (Grant Q&A) document and provided as outlined below:

- The Grant Q&A document will be available on the Crisis Relief Center program grant website at: <https://www.hca.wa.gov/about-hca/programs-and-initiatives/behavioral-health-and-recovery/23-hour-crisis-relief-centers>.
- The Grant Q&A document will be updated no less than once per week for the duration of the Question and Answer Period. It is the responsibility of the interested applicant organizations to regularly monitor the website for these updates.

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## Application Submission Instructions

Applicants must submit their completed Grant Application Forms adhering to the following instructions:

### Submission Requirements

- **Grant Application Form Due Date**

***All applications must be submitted by 11:59 PM (Pacific) on April 16, 2025.***

HCA may, at its discretion, consider late submissions in exceptional circumstances.

- **Grant Application Period**

The application period will be open from March 24, 2025, through April 16, 2025.

- **Submission Method**

Send applications via email to Cassie Bryden at [hcaprocurments@hca.wa.gov](mailto:hcaprocurments@hca.wa.gov) with the subject line: **2024HCA1 - Application** and the **Organization's Name** that is applying.

- **Format**

Applications must be submitted using the HCA provided Grant Application Form, without modification, to ensure consistency and accessibility for all applicant organizations.

- **Content**

Complete the Grant Application Form provided on the Crisis Relief Center program grant [website](#), adhering to all guidelines and instructions as outlined in this Grant Application Overview document and the Grant Application Form, ensuring clarity and completeness. No external or additional marketing materials may be submitted with the application.

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## Eligibility Criteria

**To be eligible for this grant, organizations must meet the following criteria:**

- Must have a history of providing crisis response services, including de-escalation, crisis planning, stabilization, resource connection, and follow-up support.
  - Must be licensed to operate and provide services in Washington State.
  - Must be building the operational capacity necessary to establish themselves as a licensed Behavioral Health Agency (BHA) issued by the Department of Health (DOH).
- or;
- Must have an active BHA license issued by DOH.
- Must be in the process of obtaining the appropriate DOH certification to operate and provide services in Washington State as a 23-hour Crisis Relief Center, according to [WAC 246-341-0903](#).
  - Must ensure, and demonstrate through Grant Application Form responses, the funds received through this HCA grant will not duplicate any other funding support received by the applicant organization.
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## Scope of Work

### 1. Utilization of Funds

- Funds will be used to support CRCs in meeting the certification standards as outlined in [WAC 246-341-0903](#).
- Grant funds must not be used for public works as defined in [RCW 39.04.010 \(5\)](#), including acquisition of real estate, construction, repair, or alteration costs. Grant funds must not be used for maintenance of any asset when performed by contract.
  - Any payment towards rent or lease using grant funds must be paid at a fair Market Rent Rate.

- Funding will be provided for the reimbursement of materials/training and other related expenses and upon completion of specific deliverables.

## 2. Applicant Goals

The goal of these grants is to establish and operationalize CRCs in Washington State, as outlined in [RCW 71.24.916](#) and certified through the standards in [WAC 246-341-0903](#), to provide essential and immediate behavioral health services. These facilities aim to reduce state hospital admissions, unnecessary emergency department visits, and law enforcement involvement for people in crisis through low barrier, no wrong door crisis stabilization services.

The funding is designed to assist organizations in meeting the certification standards outlined in WAC 246-341-0903, which establishes the general requirements for CRC services. Therefore, grant recipients are expected to undertake the following key activities upon receiving the grant funds:

- **Facility Startup and/or Development**
  - Create and implement any policy and/or procedures necessary to meet and maintain the licensing and certification standards of a CRC as established under WAC 246-341-0903 and RCW 71.24.916.
  - Procure necessary furniture, equipment, and supplies.
  - Hire and train appropriate staffing levels to address safety and security, and ensure a multidisciplinary team is available 24 hours a day, seven days a week.
  - Prepare facility locations to meet health, safety, and security standards as listed in WAC 246-341-0903.
    - Grant funds must not be used for public works as defined in [RCW 39.04.010 \(5\)](#), including acquisition of real estate, construction, repair, or alteration costs. Grant funds must not be used for maintenance of any asset when performed by contract.
  - Build relationships with law enforcement agencies, EMT/fire departments, outpatient mental health providers, and other social service providers in the community.
  - Build relationships with IHCPs and Tribal governments; establish policies to ensure smooth care coordination for members of Tribal Nations and American Indian/Alaska Native (AI/AN) individuals.
- **Prepare for Core Services to be Provided**
  - Crisis Stabilization and Intervention  
Immediate care for individuals in behavioral health crises to de-escalate situations and stabilize conditions.
  - Care Coordination  
Person-centered care planning for on-going support and services post-discharge.

- Peer Support Services  
Peer support from trained individuals with lived experience which can include one-on-one support, symptom management strategies, advice for navigating ongoing care and support services, and post-discharge follow-ups.
- Medication Management  
Ability to prescribe, administer, and monitor medications as needed for mental health stability.
- Physical Health Services  
Capacity to assess physical health needs, treat non-acute physical health conditions, manage stable chronic conditions, and provide minor wound care.
- No Wrong Door Assistance  
Accept self-referrals or referrals from law enforcement and first responders; if an individual needs a higher level of care than the facility can provide, the facility will arrange and transport the individual to more appropriate accommodations.
  - All referrals, regardless of the source, must be accepted by the CRC until and unless full capacity is met.
  - Referrals from law enforcement must be accepted regardless of capacity status.
- Referral Assistance  
Referrals and warm hand-offs to long-term mental health providers, housing, or other resources as needed.
- **Policy and Procedure Development**
  - Develop policies and procedures to establish operational sustainability and day-to-day operations.
  - Establish insurance billing processes; identify and pursue additional funding opportunities as needed for long term viability.
  - Implement data collection and reporting systems to measure key performance metrics, such as:
    - Individuals served;
    - Individuals transferred to a higher level of care; and
    - In-coming referrals from law enforcement and EMT/fire departments.

### 3. Monthly Reporting

Grant recipients will be required to submit monthly reports detailing progress toward achieving the grant's objectives, using the key performance metrics gathered. *(See Policy and Procedure Development above.)*

Each report must include the following components:

- Narrative Summary - Provide a concise overview of progress made during the reporting period, including any milestones reached and challenges encountered.
- Staffing Updates - Report on the number of staff hired including job titles and roles.
- Licensing or Certification Status Updates - Detail the status and progress of obtaining the required staff licensure, BHA licensure, and/or CRC certification.
- Community Partnership Updates - Detail the steps taken to build relationships with law enforcement, Tribal governments, outpatient mental health care providers, IHCP, and other social service providers.
- Operational Progress - Detail the status of equipment purchased, including any issues faced in securing or deploying the equipment.
- Challenges and Solutions - Identify any challenges faced in meeting grant goals, along with strategies implemented to address these issues
- Timeline Progress - Summarize progress made within the applicant's outlined timeline. Include actions completed, purchases made, milestones achieved, and/or any adjustments needed to the timeline.
  - This must include a detailed outline of the purchases and/or expenses paid during the applicable reporting period with receipts and documentation as applicable.
- Next Steps - Outline plans to ensure sustainability of services for the upcoming quarter including objectives, anticipated challenges, and strategies for addressing them.

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## Questions and Evaluation Criteria

Applicant organizations must address the following questions to demonstrate eligibility and capacity to achieve the grant's objectives. Responses will be evaluated based on the criteria outlined below.

All responses must be submitted using the provided Grant Application Form provided separately.

### 1. Staffing Plan (15 Points)

**a. Describe your organization's staffing structure and/or provide a detailed staffing plan.**

What roles are essential for your CRC, how many staff are needed to reach the 24/7 operating requirements identified in WAC 246-341-0903?

**Scoring metrics:**

5 points – The applicant organization provides a comprehensive and clearly defined staffing structure, including specific roles and responsibilities for each position essential to the CRC.

2 points – Basic staffing information but limited details on roles or contributions.

0 points – Incomplete or unclear staffing plan.

**b. Key Staff**

What are the qualifications of your organization’s key staff overseeing the CRC, and how do their skills and experience align with the specific needs of this program? Please provide detailed information about the qualifications of key staff responsible for overseeing the CRC. (No personal information.)

**Scoring metrics:**

5 points – Key staff are highly qualified, with specific and relevant credentials and extensive professional experience Clear alignment of staff qualifications with program needs, including specific roles and expertise. Staff experience directly addresses all aspects of the CRC.

3 points – Some qualified staff identified, but gaps in necessary expertise.

0 points – Incomplete or unclear response.

**c. Certified Peer Counselors Inclusion**

How will Certified Peer Counselors be incorporated as a best practice within your organization’s response team?

**Scoring metrics:**

5 points – Clear well defined plan demonstrating integration of Certified Peer Counselors as a core component of services.

2 points – Certified Peer Counselors are included, but the plan lacks details or full clarity on their specific roles/impact.

0 points – Underdeveloped plan.

**2. Crisis Response Capability (23 Points)**

**a. Hours of Operation**

How will your organization ensure 24/7 facility access is available and ensure open doors during critical hours?

**Scoring metrics:**

5 points – Comprehensive plan for 24/7 coverage.

2 points – Partial coverage or unclear justification.

0 points – Inadequate plan.

**b. Collaboration**

How will your organization build relationships, and maintain collaboration with local law enforcement agencies, EMT/fire departments, Tribal governments, IHCPs, outpatient mental health providers, and other social service providers within the community?

**Scoring metrics:**



10 points – Detailed engagement strategy and a process or plan to ensure and maintain clear communication between the CRC and the community providers.

5 points – Engagement strategy and communication plan provided but some details are missing or unclear.

0 points – Inadequate plan.

**c. Community Provider Support**

Provide at least one (1) but no more than three (3) letters of support from other social service providers within the community where the applicant organization will provide services. This may include local law enforcement agencies, EMT/fire departments, outpatient mental health providers, etc.

**Scoring metrics:**

3 points – Three (3) letters submitted.

2 points – Two (2) letters submitted.

1 point – One (1) letter submitted.

0 points – Inadequate support plan.

**d. Timeline**

Provide a detailed timeline outlining the steps your organization will take to ensure the facility is open and operating with the three phases listed below accomplished within the estimated service date range of April 15, 2025 – June 30, 2025. Include costs and purchases necessary for each phase, as identified in your organization’s responses in the Budget section below.

- Phase 1: Facility preparation and hiring
- Phase 2: Service rollout and community management
- Phase 3: Monitoring and optimizations

**Scoring metrics:**

5 points – Clear, realistic timeline with milestones and plan for timely opening and full facility operation.

2 points – Workable timeline with milestones but some details are missing or unclear.

0 points – Timeline is vague or lacks key milestones with minimal understanding of endorsement process.

**3. Community Engagement and Cultural Humility (20 Points)**

**\*+5 Bonus Points Available**

**a. Community Needs Assessment**

What are the key mental health and crisis service gaps in the community you will serve? How will your organization meet the needs of identified gaps in your community?

**Scoring metrics:**

- 5 points – Clear assessment with gaps identified.
- 3 points – Assessment provided but lacking some details.
- 0 points – Inadequate assessment.

**b. Culturally Responsive Services**

1. How will your organization ensure cultural humility while providing these services for Black, AI/AN individuals, People of Color, and bi-cultural individuals?

**Scoring metrics:**

- 5 points – Comprehensive strategy with specific actions.
- 3 points – General mention but lacking specifics.
- 0 points – Inadequate mention

2. How does your organization currently ensure services while maintaining cultural humility?

**Scoring metrics:**

- 5 points – Comprehensive strategy with specific actions.
- 3 points – General mention but lacking specifics.
- 0 points – Inadequate mention.

**c. Trauma Informed Services**

How will your organization ensure trauma informed services are provided to other marginalized communities such as rural communities, Tribal communities, members of the LGBTQ+ community, and individuals with disabilities?

**Scoring metrics:**

- 5 points – Comprehensive strategy with specific actions.
- 3 points – General mention but lacking specifics.
- 0 points – Inadequate mention.

**+Bonus Points:** Applicant demonstrates functional capability and successful strategies in providing culturally relevant services to populations in their service area with the least access to behavioral health services. The response clearly shows the applicant’s ability and commitment to prioritizing those with the greatest needs, with specific examples of outreach, engagement, or tailored care models.

**4. Financial Sustainability (10 Points)**

**a. Sustainability Plan**

How will your organization maintain the ability to provide services beyond the initial grant funding?

**Scoring metrics:**

- 7 points – Well-developed realistic plan with identified funding sources.
- 4 points – General mention but no clear sources.
- 0 points – Inadequate plan.

**b. Duplicate Support**

If your organization utilizes other grant funds to support this work, please outline in detail how HCA’s grant funds will be utilized without duplicating any other support currently received.

**Scoring metrics:**

- 3 points – Detailed, realistic plan to prevent duplicate support.
- 2 points – General outline but no clear process.
- 0 points – Inadequate plan.

**5. Organizational Capacity (15 Points)**

**a. Organizational Readiness**

Outline the current status of your BHA credential, detailing either:

Where your organization is in the process of obtaining a BHA license with the DOH, including any projected complications;

Or, if the applicant organization already has a BHA license with DOH:

Identify the status of your organization’s BHA license, including DOH license number and, if different from the organization applying for this grant, information on the contracted BHA.

**Scoring metrics:**

- 5 points – Detailed explanation of BHA licensing status including implementation, history, current status, and if pending, any projected complications to becoming licensed.
- 3 points – General explanation of the above, but lacking specifics.
- 0 points – No or unclear explanation on status of receiving license.

**b. Experience**

Describe your organization’s history in crisis intervention and/or behavioral health services.

**Scoring metrics:**

- 5 points – Detailed history with documented successes.
- 3 points – Some experience but limited evidence.
- 0 points – No relevant experience.

**c. Addressing Physical Health Needs**

Outline how your organization currently handles the assessment of physical health needs, the treatment of non-acute physical health conditions, the management of stable chronic conditions, and provides minor wound care. Will any changes be implemented with the grant funds?

If your organization does not yet address physical health needs, provide a detailed outline of how your organization will implement the services identified above.

**Scoring metrics:**

5 points – Demonstrates practical experience in providing physical health services -or- outlines a clear, realistic, and timely plan to implement physical health services.

3 point – General explanation of the above, but lacking specifics.

0 points – No or inadequate process.

## 6. Service Area and Impact (8 Points)

**\*+5 Bonus Points Available**

### a. Geographic Scope

Organizations applying for this grant must clearly define the geographic areas they intend to serve, specifically identifying on which side of the Washington State Cascade mountains services will be provided. Each service location should be aligned with community needs, considering factors such as population density, existing service availability, and specific local challenges related to behavioral health crisis.

**Scoring metrics:**

5 points – Clearly defined area that aligns with needs and funding principles.

3 points – Area defined but lacking alignment.

0 points – Unclear description.

### b. Projected Impact

What is the expected impact to the geographic areas your organization intends to serve?

**Scoring metrics:**

3 points – Detailed projections of impact, including outcomes that focus on specific geographic outcomes.

1 point – General projections but lacking specifics.

0 points –Unclear projected impact.

**+5 Bonus Points:** Applicant organization demonstrates functional capability and successful strategies in providing services to geographic areas/communities with the least access to behavioral health services. The response clearly shows the organization’s ability and commitment to prioritizing the

communities with the highest level of need/scarcity, with specific examples of outreach, engagement, or tailored care models.

## 7. Data Collection and Evaluation (9 Points)

### a. Data Collection

How will your organization track client outcomes and referral sources?

#### Scoring metrics:

5 points – Clear data collection plan with relevant metrics.

2 points – Basic plan but lacking depth or sustainability.

0 points – No or inadequate plan.

### b. Evaluation and Improvement

What is your organization's process for evaluating program performance?

#### Scoring metrics:

4 points – Well-defined process for evaluation.

1 point – General mention but lacking specifics.

0 points – Inadequate process.

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## 8. Budget (10 Points)

### Budget Instructions

Applicants must provide a budget estimate for the period of April 15, 2025 – June 30, 2025, covering the proposed goals and activities. The budget must include a narrative statement explaining how the costs were determined and the necessity of each item, and a budget table which reflects the narrative costs and clearly specifies the amounts requested. All budget items must align with the proposed activities outlined in the Grant Application Form and reflect how the grant funds will be used. The budget must only reflect the costs associated with the proposed activities funded by this grant, not the applicant organization's full operational expenses.

The proposed budget must not exceed \$700,000, however applicant organizations applying for funding beyond \$300,000 must provide compelling justification within their budget demonstrating that additional resources are critical to their success by responding to the supplementary question below the budget table. The amount of funding awarded will be determined during the Evaluation Process.

Any contract award resulting from this grant is contingent upon the availability of funding.

Applications must be submitted using the HCA provided Grant Application Form, without modification, to ensure consistency and accessibility for all applicant organizations. All budget submissions must use the provided budget table in the Grant Application Form provided separately.

### a. Budget Narrative

Using the Budget Categories below, outline an explanation of how the numbers in the Budget Table were generated and an explanation for each of the proposed expenses.

#### Scoring metrics:

5 points – Budget aligns with the application responses, it is accurate and understandable with each cost clearly justified, and it demonstrates sustainability after completion of the grant.

3 point – Lacking specifics or alignment with application responses.

0 points – Inadequate information.

### b. Budget Table

The Budget Table must include detailed line items which clearly specify the amounts requested, the applicable Budget Category, and explain the necessity of each item. All budget items must align with the proposed activities outlined in the application responses and accurately reflect how the grant funds will be used.

#### Scoring metrics:

5 points – Budget aligns with the application responses, it is accurate and understandable with each cost clearly justified, and it demonstrates sustainability after completion of the grant.

3 point – Lacking specifics or alignment with application responses.

0 points – Inadequate information.

## Budget Categories

Below are the required budget categories for both your Budget Narrative and Budget Table responses.

### 1. Salary and Wages

Include total costs, job titles, salaries, fringe benefits, estimated Full-Time Equivalent (FTEs), and projected roles.

### 2. Training/Licensing Costs

Outline expenses related to training, e.g., instructor fees, materials, and venue costs.

Outline expenses related to obtaining a Behavioral Health Agency (BHA) license.

### 3. Travel

Estimate travel costs, including purpose and staff roles, with justification.

### 4. Administrative/Office Supplies

Provide justification for routine supplies and costs.

### 5. Medical/Behavioral Health Service Supplies

Provide justification for routine supplies and costs.

## 6. Interim Rent/Leasing Fees

The applicant organization shall ensure payment towards rent or lease using grant funds is paid at a fair Market Rent Rate and provide an outline identifying how the rate to be paid was determined to be a fair Market Rent Rate.

## 7. Other

Briefly describe any additional costs that do not fall under the above categories.

## Budget Justification for Additional Funding (If Applicable)

If an applicant organization's funding request exceeds \$300,000, the applicant organization must provide a detailed justification outlining the specific needs and objectives that require additional resources. Applicant organizations must explain how the additional funding (up to \$700,000 total) will enhance the overall impact and success of their work. Applicant organizations must include relevant data, cost analysis, or other supporting information to substantiate their request.

If an applicant organization's request is considered for funding but does not meet the full \$700,000 threshold, the evaluation panel will determine which parts of the application and budget to fund based on the available budget, the alignment of the requested funds with the proposed activities, and the grant objectives. In such cases, the panel may reduce the funding amount and will prioritize funding the most critical components of the application. Applicant organizations will be notified of the final funding decision, including any adjustments to their requested amount.

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# Evaluation Process

## Initial Evaluation

An evaluation team at HCA will review each Grant Application Form to score responses. Initial evaluation scores will be the average of the individual scores assigned by each team member, calculated out of 110 points and rounded up to the nearest whole number. Bonus points will only be awarded if the majority of evaluators agree that the bonus point criteria are met.

Applications will be scored based on the above criteria, with a total of **110 points** available. A minimum of **65 points** is required for funding consideration.

## Final Evaluation Process

Following the initial evaluation of applications based on the outlined criteria above, a secondary evaluation panel of two (2) members independent from the initial evaluation team will review the Grant Application Forms and scores to make final funding determinations. This panel will consider the needs identified below by HCA.

- **Key Points of the Final Evaluation**
  - **Geographical Needs Assessment**

The panel will assess the needs of specific regions prioritizing areas with higher identified needs for behavioral health crisis services.

○ **Flexibility in Awarding Grants**

The panel may choose to award grants to applicant organizations with lower scores if they serve regions with significant needs. This approach aims to enhance the overall impact of funding by addressing disparities in services availability. If multiple applicant organizations are seeking to provide services in the same region, HCA will prioritize funding based on factors such as demonstrated community need, applicant organization's capacity to deliver services, and existing partnerships.

○ **Substantially Equivalent Scores**

Substantially equivalent scores are scores separated by two points or less. If multiple Grant Application Forms receive a substantially equivalent score, HCA may leave the matter as scored, or award the grant to the application which is deemed by HCA, in its sole discretion, to be in HCA's best interest relative to the overall purpose and objective of this grant.

If applicable, HCA's best interest will be determined by HCA staff, who have sole discretion over this determination. The basis for such determination will be communicated in writing to all applicant organizations with substantially equivalent scores.

○ **Final Award Decisions**

Decisions made by the secondary evaluation panel are final, ensuring a comprehensive and need-based approach to grant distribution.

○ **Award Decision Follow-Up**

Any organization which has submitted a completed Grant Application Form and has been notified that it was not selected for a grant award may request a meeting to discuss their application. Requests must be submitted as follows:

- Via email sent to [hcaprocurments@hca.wa.gov](mailto:hcaprocurments@hca.wa.gov);
- With the subject line: *2024HCA1 - Follow-Up Request*;
- Received by HCA no later than 5:00 p.m. (Pacific);
- No more than ten (10) business days following HCA's email notification to the applicant organization.

HCA will schedule the meeting. Discussion at the award decision follow-up meeting will be limited to the following:

- Evaluation and scoring of the applicant organization's Grant Application Form;
- Critique of the application based on the evaluation; and
- Review of the applicant organization's final score in comparison with other final scores without identifying the other applicant organizations.



Comparisons between Grant Application Forms, or evaluations of the other Grant Application Forms will not be allowed. The meeting will be conducted via virtual meeting platform (e.g., Zoom or Teams) or on the telephone and will be scheduled for a maximum of thirty (30) minutes.

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