**RFS 24-77045**

**ATTESTATION FORM**

**ATTACHMENT I**

***Respondent Name:***

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| ***Adult and Child Mental Health Center, Inc*** |

1. **Mandatory Submissions and Requirements**: Disagreement with these items may result in the response being disqualified.

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| Attachment I: Attestation Form | * Have completed in its entirety and submitted |
| Section 2.2 Executive Summary | * Have completed, signed, and submitted |
| Section 2.3 Attachment C: Business Proposal | * Have completed and submitted |
| Section 2.4 Attachment D: Technical Proposal  *(Includes submission of completed Attachment E: Certification Criteria, Attachment F: Quality Metrics, and Attachment G: Evidence-Based Practices, Assessments, and Screeners)* | * Have completed and submitted |

1. **Confirm mutual understanding and submission.**

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| --- | --- |
| 1.12 and 2.1 Confidential Information:  The complete list of Confidential and Redacted files is specified in section 3.0 of this attachment. | ☐ Have read, and submitted  or   * Have read, and does not apply to response |
| 2.2.1 Ability and Desire to Supply the Required Products or Services | * Have read, and agree |
| 2.3.5 Contract Terms/Clauses | * Confirm Respondent’s Legal Representation has read and accepts Sample Contract language.   or  ☐ Confirm Respondent’s Legal Representation has read, and submitted alternative language per Attachment C. |

1. **Confidential / Redacted File: confirm submission if applicable**

More rows may be inserted if necessary

Responses must include the following required information:

* List all documents or sections of documents, for which statutory exemption to APRA;
* Specify which statutory exception of APRA applies for each document or section of the document;
* Provide a description explaining how the statutory exception to the APRA applies for each document or section of the document; and
* Provide a separate redacted or confidential, whichever is applicable, version of the document. File name should use the following format:
* (RFS 24-77045) \_ (insert Att letter) \_CONFIDENTIAL
* (RFS 24-77045) \_ (insert Att letter) \_REDACTED
* More rows may be inserted if necessary

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| --- | --- | --- | --- | --- | --- |
| **Filename** | **Document Section** | **Document**  **Page #** | **Statutory exception reference** | **Rationale for application of the statute** | **Submitted** |
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1. **Respondent additional attachments (OPTIONAL)**

More rows may be inserted if necessary

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| **Filename** | **RFS Attachment Reference** |
| A&C DEIB Plan | Attachment C - 2.3.2 |
| A&C Annual Report FY21-22 | Attachment D - 2.4.1.1 |
| Easterseals Crossroads LOS | Attachment D - 2.4.1.1 |
| Valle Vista Health Systems LOS | Attachment D - 2.4.1.1 |
| InteCare LOS | Attachment D - 2.4.1.1 |
| Horizon House LOS | Attachment D - 2.4.1.1 |
| Wheeler Mission LOS | Attachment D - 2.4.1.1 |
| Circle City Clubhouse LOS | Attachment D - 2.4.1.1 |
| Community Solutions LOS | Attachment D - 2.4.1.1 |
| Mental Health America of Indianapolis LOS | Attachment D - 2.4.1.1 |
| Johnson Memorial Hospital LOS | Attachment D - 2.4.1.1 |
| Downtown Indy, INC LOS | Attachment D - 2.4.1.1 |
| Upstream Prevention, INC LOS | Attachment D - 2.4.1.1 |
| JRAC LOS | Attachment D - 2.4.1.1 |
| IMPD LOS | Attachment D - 2.4.1.1 |
| CHIP LOS | Attachment D - 2.4.1.1 |
| Sandra Eskenazi Mental Health Center LOS | Attachment D - 2.4.1.1 |
| Stepping Stones LOS | Attachment D - 2.4.1.1 |