Post Award Vendor Conference

U.S. Probation Office

U.S. Pretrial Services Office

October 9, 2025

Welcome!

- **Nicholas Macker**, Supervisory U.S. Probation Officer
- **Tracy Zacchigna**, Supervisory U.S. Probation Officer
- **Taylor Sevier**, Supervisory U.S. Probation Officer
- **Carrie Holberg**, Supervisory U.S. Probation Officer
- **Robert Zamarelli**, Senior U.S. Probation Officer/Contracting Officer
- **Patrick May**, Supervisory U.S. Pretrial Services Officer
- **Brian Kolbus**, Supervisory U.S. Pretrial Services Office
- **Ernesto De La Rosa,** U.S. Pretrial Services Office Laboratory Technician
- **NDIL U.S. Pretrial and Probation Offices Treatment Services Team**

Agenda

- Review of Blanket Purchase Agreement (BPA) & Statement of Work (SOW)
- Clinical Services
- Evidence Based Practices / Role of Officer
- Local Needs
- Monitoring Reports
- SPCS for Billing Purposes
- Invoicing
- File Preparation & Maintenance
- Ordering of Supplies
- U/A Collection

Pursuant to Title 18 U.S.C. Section 3672 – Duties of Director of Administrative Office of the U.S. Courts

"He shall contract with any appropriate public or private agency or person for the detection of and care in the community of an offender who is an alcohol-dependent person, an addict, or a drug-dependent person… This authority shall include the authority to provide… medical, educational, social, psychological and vocation services; corrective and preventative guidance and training; and other rehabilitative services designed to protect the public and benefit the alcohol-dependent person, addict, or drug dependent person … by controlling his dependence and his susceptibility to addiction… He may negotiate and award such contracts without regard to section 3709 of the revised Statutes of United States."

BPA/NCPO and Statement of Work

("Section C" of BPA, Will be on Website)

- BPA vs. NCPO
- U.S. Probation and Pretrial Services Offices are required to ensure that all vendors adhere to the specifications of the Statement of Work, Section C of the Blanket Purchase Agreement
- We must maintain control of services requested/provided (in consultation with the provider)
- Ongoing vendor monitoring, which includes group observation (monitoring reports will be discussed later)
- Please **READ** the Statement of Work, you will find the answers to the vast majority of questions are within that document

The Initial Referral Process

- Prob 45 with signatures (referral agent signature must be there to render service(s) and be paid for services)
- ROIs (SU Prob 11B, MH Prob 11I)
- Treatment Referral Worksheet (in most cases)
- PCRA Interpretation Report (in most cases)
- Any changes in treatment services received will require an Amended Prob 45, and cessation of services requires a Termination Prob 45
- An updated PCRA interpretation report will be sent when any changes in risk level or dynamic risk factors occur

Attachment J.2

Prob. Form 45

Today's Date:

Client Identifying Information

Client:	PACTS#:
Address:	Pretrial/Post Conviction:
Officer:	Client Phone:
Officer Phone:	DOB:

Photo Not Available

Provider Information

Provider:
Provider Location:
Attn:
Location Address:

Phone:
Fax:

Procurement No:
Effective Date:
Termination Date:

Authorized Services

Your agency is authorized to provide the following services beginning on the plan effective date indicated above. Any services provided outside of those listed below and/or outside the Effective and Termination Dates of the Plan will not be authorized for payment.

Services Ordered

Project Code	Description Of Services	Phase	Frequency (Units)	Interval	Copay Amount (per unit)
2010	Individual Substance Abuse Counseling		1.0	Weekly	$0.00
2020	Group Substance Counseling		2.0	Monthly	$0.00

Instructions to Provider Regarding Client Needs and Goals of Treatment

Officer: Referral Agent: Client:

Substance Use Services

- **1010-Urine Collection and Reporting-** The vendor shall perform the procedures related to the collection, testing, and reporting of urine specimens.
- **2011-Substance Use Intake Assessment Report-** Comprehensive biopsychosocial intake assessment and report conducted by a state-certified addictions counselor or licensed clinician. The assessor shall identify the USPO/USPSO client's substance abuse severity, strengths, weaknesses, and readiness for treatment. The assessment shall be conducted within 15 business days of receiving the referral, and the typed report is to be sent to the USPO/USPSO within 10 business days of the completion of the client's diagnostic interview.
- **2010 Individual Substance Use Counseling-** Clinical interaction between USPO/USPSO clients and a trained and certified counselor. The interactions are deliberate and based on various clinical modalities, which have demonstrated evidence to change behavior.
- **2020 Substance Use Group Counseling-** 2 to 12 USPO/USPSO clients led by a trained and certified counselor as defined in SOW. Treatment shall include the use of cognitive and behavioral techniques to change defendant/offender thought patterns while teaching pro-social skill building.
- **2030 Family Counseling:** USPO/USPSO client and one or more family members. The vendor may meet with family members without the offender present with USPO/USPSO approval**.**
- **2001 Short Term Residential:** Facilities provide a highly structured environment that incorporates counseling, drug testing, and other approaches that involve cooperative living for people receiving treatment. Must have 6 hours of structured programs per day (3 of those must be clinical group).

Mental Health Services

- **5011-Mental Health Assessment**-Performed by a masters or doctoral level practitioner who is licensed or certified and meets the standards of practice established by his/her state regulatory board. The assessment shall be conducted within 15 business days of receiving the referral, and the typed report is to be sent to the USPO/USPSO within 10 business days of the completion of the client's diagnostic interview.

- **5030-Psychiatric Evaluation-** To establish a psychiatric diagnosis, to determine the need for psychotropic medications and/or to develop an initial treatment plan with particular consideration of any immediate interventions that may be needed to ensure the USPO/USPSO client's safety and that of the community.

- **6016– Co-Occurring Disorders Assessment-** To establish the chronological substance abuse and mental health history to determine the recommendations for further treatment, including the level/frequency and types of services, and possibly further evaluation.

- **6000-Case Management Services (Mental Health)-** A method of coordinating the care of **severely mentally ill** people in the community. Case management services serve as a way of linking clients to essential services, including, but not limited to, securing financial benefits, health, and mental health care. Only to be used in conjunction with mental health counseling.

- **6010-Mental Health Counseling (Individual)** - Clinical interaction between a USPO/USPSO client and a psychiatrist, psychologist, or masters or doctoral level practitioner who is licensed or certified by his/her state's regulatory board. The interactions shall be deliberate and based on clinical modalities, which have demonstrated evidence to stabilize mental health symptoms.

Mental Health Cont'd.

- **6030 Mental Health Counseling (Family):** Defendant/offender and one or more family members. The vendor may meet with family members without the defendant/offender present with USPO/USPSO written approval.
- **6015-Co-Occurring Disorders Individual Counseling-** To one USPO/USPSO client.
- **6026-Coocurring Disorders Group Counseling-** 2 to 10 USPO/USPSO clients.
- **6028-Mental Health Cognitive-Behavioral Group:** 2 to 10 USPO/USPSO clients.
- **6051 Medication Monitoring:** Prescribe and evaluate the efficacy of psychotropic medications (incorporating feedback from the treatment provider and/or the USPO/USPSO).
- **6001 Short Term Residential for Co-Occurring Disorders:** Inpatient treatment program for individuals who are suffering from both chemical abuse/dependence and a mental health disorder
- **6036 Co-Occurring Disorders Family Counseling:** USPO/USPSO client and one or more family members. The vendor may meet with family members without the offender present with USPO/USPSO approval.

Sex Offense Specific Services

- **5012 Sex Offense Specific Evaluation and Report:** Commonly known as a "psychosexual evaluation," is a comprehensive evaluation of an alleged or convicted sex offender, meant to provide a written clinical evaluation of a USPO/USPSO client's risk for reoffending and current amenability for treatment; to guide and direct specific recommendations for the conditions of treatment and supervision; to provide information that will help to identify the optimal setting, intensity of intervention, and level of supervision; and to assess the potential dangerousness of the USPO/USPSO clients. The assessment shall be conducted within 30 business days of receiving the referral, and the typed report is to be sent to the USPO/USPSO within 10 business days of the completion of the client's diagnostic interview.
- **5022-Clinical Polygraph Exam and Report-** Diagnostic instrument and procedure which includes a report designed to assist in the treatment and supervision of USPO/USPSO client by detecting deception or verifying the truth of their statements. The examiner shall use the Model Sexual History Disclosure Polygraph Questionnaire, August 26, 2023, developed and endorsed by the American Polygraph Association (included in Section J attachments).
- **5023- Maintenance Examination-**Employed to periodically investigate the USPO/USPSO client's honesty with community supervision and compliance with supervision.
- **5025-VRT Measure of Sexual Interest**- An objective method for evaluating sexual interest which is designed to determine sex offender treatment needs and risk levels.
- **6012-Individual SO Treatment**-Treatment is provided by a licensed/certified psychiatrist, psychologist, or masters or doctoral level practitioners who meets the standards of practice established by his/her state's regulatory board and adheres to the established ethics, standards of practices of state sex offender management board. Practitioners employ treatment methods that are based on a recognition of the long-term, comprehensive, offense-specific treatment for sex offenders.
- **6090 Group Sex Offense-Specific Treatment Readiness** 2 to 12 USPO/USPSO clients. Treatment Readiness Group shall include offenders with little or no understanding of the cycle of sexual offenses. The attendance of one family member per offender shall be included in the unit price in Section B**.**

Sex Offense Services Cont'd.

- **6022-Group SO treatment**- 2 to 10 USPO/USPSO clients. Treatment is provided by a licensed/certified psychiatrist, psychologist, or masters or doctoral level practitioners who meets the standards of practice established by his/her state's regulatory board and adheres to the established ethics, standards of practices of state sex offender management board. Practitioners employ treatment methods that are based on a recognition of the long-term, comprehensive, offense-specific treatment for sex offenders.
- **6032-Family SO treatment**- For a USPO/USPSO client and one or more family members. Treatment is provided by a licensed/certified psychiatrist, psychologist, or masters or doctoral level practitioners who meets the standards of practice established by his/her state's regulatory board and adheres to the established ethics, standards of practices of state sex offender management board. Practitioners employ treatment methods that are based on a recognition of the long-term, comprehensive, offense-specific treatment for sex offenders.

- **6091 Sex Offender and Chaperone Training and Support**- A psycho-educational/specialized training for one or more significant others, or family members of a defendant/offender charged with or convicted of a sex offense. Goal is to provide a means of certifying individuals designated by the USPO/USPSO to act as a chaperone for the defendant/offender and safeguard for the community.

- **7013 Individualized Specialized Treatment (Sex Offender-Pretrial Only).**
- **7023-Group Specialized Treatment (Sex Offender-Pretrial Only)**- 2 to 10 defendants.

Other Services

- **1201 Administrative Fee For Defendant/Offender Transportation Expenses**:
  A reasonable monthly fee to administer transportation expense funds, not exceed 5% of the monthly funds distributed under 1202.
- **1202 Defendant/Offender Transportation Expenses**:
  For defendant/offender transportation to and from treatment facilities.
- **1501 Defendant/Offender Reimbursement and Co-Payment:**
  Collect any co-payment authorized on the Program Plan (Probation Form 45) and deduct any collected co-payment from the next invoice to be submitted to the judiciary.

Additional details regarding each project code can be found in Section C of the Statement of Work (SOW), available under the treatment services tab of our website.

Note several "Local Needs" will be posted, detailing service specifications in some areas beyond those found in the SOW

Vendor Staff Requirements SUBSTANCE ABUSE

- Undergo training on proper urinalysis collection and administration procedures.
- Assessments and Counseling is expected to be face to face (telemedicine can/may be considered in limited circumstances, only with the approval of the probation office) and conducted by a state certified addictions counselor or clinician who meets the standards of practice established by his/her state's regulatory board.
- Counselors will have at least one of the following:
- Advanced degree (masters or doctoral level) in behavioral science, preferably psychology or social work
- A BA/BS and at least 2 years of drug treatment training and/or experience
- Counselors shall be certified and/or have credentials to engage in substance abuse treatment interventions per state regulatory board/accrediting agency
- Paraprofessionals can be used only under direct supervision of and in conjunction with, a staff member described above, and after approval is given from Contracting Officer. Interns may be considered paraprofessionals.
- **Emergency services (after-hour staff phone numbers/local hotlines and/or procedures when counselors are unavailable)**

Vendor Staff Requirements
Mental Health & Co-occurring

- **Counseling** - Must be a licensed/certified psychiatrist, psychologist, masters or doctorate-level practitioner who meets standards of their state regulatory board

- **Psychiatric Evaluations/Testing**: a licensed medical doctor/physician, a psychiatrist, or other qualified practitioner who meets the standards of practice established by their state's regulatory board

- **Medication Monitoring**: A licensed psychiatrist, medical doctor/physician, or other qualified practitioner with current prescriptive authority who meets the standards of practice established by their state's regulatory board.

- **Case Management Services**: Bachelors in behavioral health, HS Diploma or GED with 5 years experience in BH setting, work under direct supervision of a licensed/certified psychiatrist/psychologist, or masters or doctorate-level practitioner who meets standards established by state regulatory board

- **Emergency services (after hour staff phone numbers/local hotlines and/or procedures when counselors are unavailable)**

Vendor Staff Requirements
Sex Offense Specific

- **Evaluations/Treatment/Chaperone Training and Support Services**: are conducted by a licensed/certified psychiatrist, psychologist, or masters or doctorate-level practitioner who meets state regulatory and sex offender management boards and adhere to the Code of Ethics and Practice Standards and Guidelines published by ATSA
- **VRT (Abel)**: conducted by trained examiner and adhere to ATSA standards
- **Polygraph Examinations**:
  - Education: examiners must be graduates of poly school accredited by American Poly Assoc; minimum baccalaureate or higher from a regionally accredited university or college, or have at least 5 years experience as a full time commissioned federal, state or municipal LEO; min. 40 hours of post- conviction sex offender testing (PCSOT) specialized instruction. Examiners who passed a final exam approved by the APA are preferred
  - Certification: Examiners shall be members of a professional organization that provides regular training on research and management of SO
  - Experience: Min. of 2 years of poly experience in criminal cases. Specialized training or experience with sex offenders
  - Ethics and Standards: Adhere to ethics and standards of APA
- **Licensure**: Licensed by state's regulatory board

Residential Treatment Staff Requirements

- Adequately trained and physically able staff and 24/7 coverage
- Use volunteers only at direction of USPO
- Keep written position descriptions that accurately describe current duties for all staff performing services under this agreement
- One staff member each shift trained in CPR and first aid
- Code Compliance
- Sleeping and Bathroom Facilities
- Emergency Plans
- Safety Precautions

Facility Requirements

- Adequate access for clients with physical disabilities

- Comply with all applicable state, federal and local laws and regulations when performing services under this contract

Vendor Staff Restrictions Post-Award

- Persons under criminal court supervision cannot perform services or have access to USPO/USPSO clients files
- If person charged or under investigation for a criminal offense, cannot perform services or have access to USPO/USPSO client files
- Persons convicted of a sexual offense cannot perform services or have access to USPO/USPSO client files
- Persons with restrictions on their license, certifications or practice, cannot perform services or have access to USPO/USPSO client files

- Vendors and employees shall:
  - Avoid compromising relationships with USPO/USPSO clients and staff
  - Not employ, contract with, or pay any USPO/USPSO or USPO/USPSO firm or business to do any work for vendor or its employees
  - Report any improprieties to USPO or USPSO
  - Report within 48 hours to USPO/USPSO, any investigations, pending charges, arrests, and/or restriction on licenses or certifications, whether imposed or voluntary, on any staff member
  - Notify USPO or USPSO in writing of any staff changes and provide documentation of any required licensing, certification, experience and education requirements and changes thereof. The Vendor shall submit an Offeror's Staff Qualifications form (Section L – Attachment C) for each new staff member added under this agreement

Testimony and 3rd Party Disclosure

- If a third party contacts the vendor for records, please contact the contracting officer
- If a vendor receives a subpoenaed related to a probation or pretrial services client, please contact the contracting officer
- Vendors shall *not* create, prepare, offer, or provide any opinions or reports, whether written or verbal that are not required by this SOW and the treatment program unless such action is approved in writing by the Chief U.S. Probation Officer or Chief U.S. Pretrial Services Officer

Evidence Based Practices

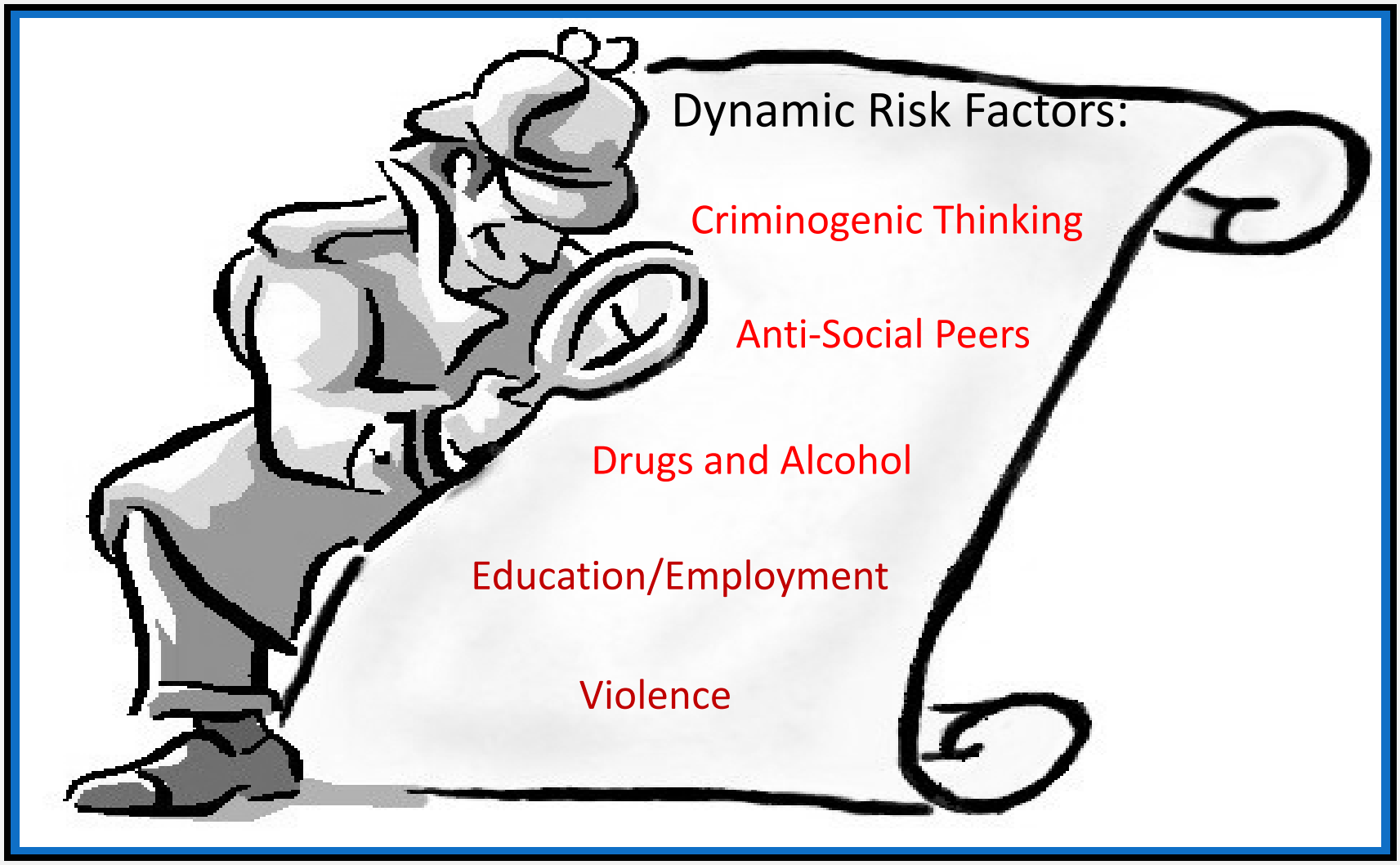
- Interventions that research has demonstrated reduce offender risk and subsequent recidivism (commission of additional criminal acts) and therefore make a positive long-term contribution to public safety

- Outcomes are also defined through practical realities (e.g., enhanced victim safety, improved clinical outcomes, reduction in recidivism, etc.)

Target Interventions

- ***Risk Principle* (*who* to target)**
  - Prioritize supervision and treatment services for higher risk offenders
- ***Needs Principle* (*what* to target)**
  - Interventions should target criminogenic needs ***(dynamic risk factors)***
- ***Responsivity Principle* (*how* to target effectively)**
  - Interventions are most effective when they are based on research-supported models (general responsivity) **AND**
  - are tailored to the unique characteristics of individual offenders (specific responsivity)
- ***Dosage* (*how much*)**
  - Hours of service delivered (by corrections professionals and treatment/interventions) should range from 100-300 hours for moderate to high risk offenders.
  - It has also been suggested that officers should aim to structure 40-70% of high risk offenders' time for 3-9 months.
  - Quality of programming matters!!!!
- ***Treatment Principle***
  - Integrate treatment into full sentence/sanction requirements

Dynamic Risk Factors



Eric Shepardson & Lina Bello, Bureau of Governmental Research 2001, www.bgr.umd.edu.

Post Conviction Risk Assessment Tool (PCRA)

Static Risk Factor (does not change):

- Criminal History

Dynamic Risk Factors (also referred to as **Criminogenic Needs**):

- Cognitions (including elevated criminal thinking styles)
- Social Networks
- Education/Employment
- Drug/Alcohol Problem
- Violence

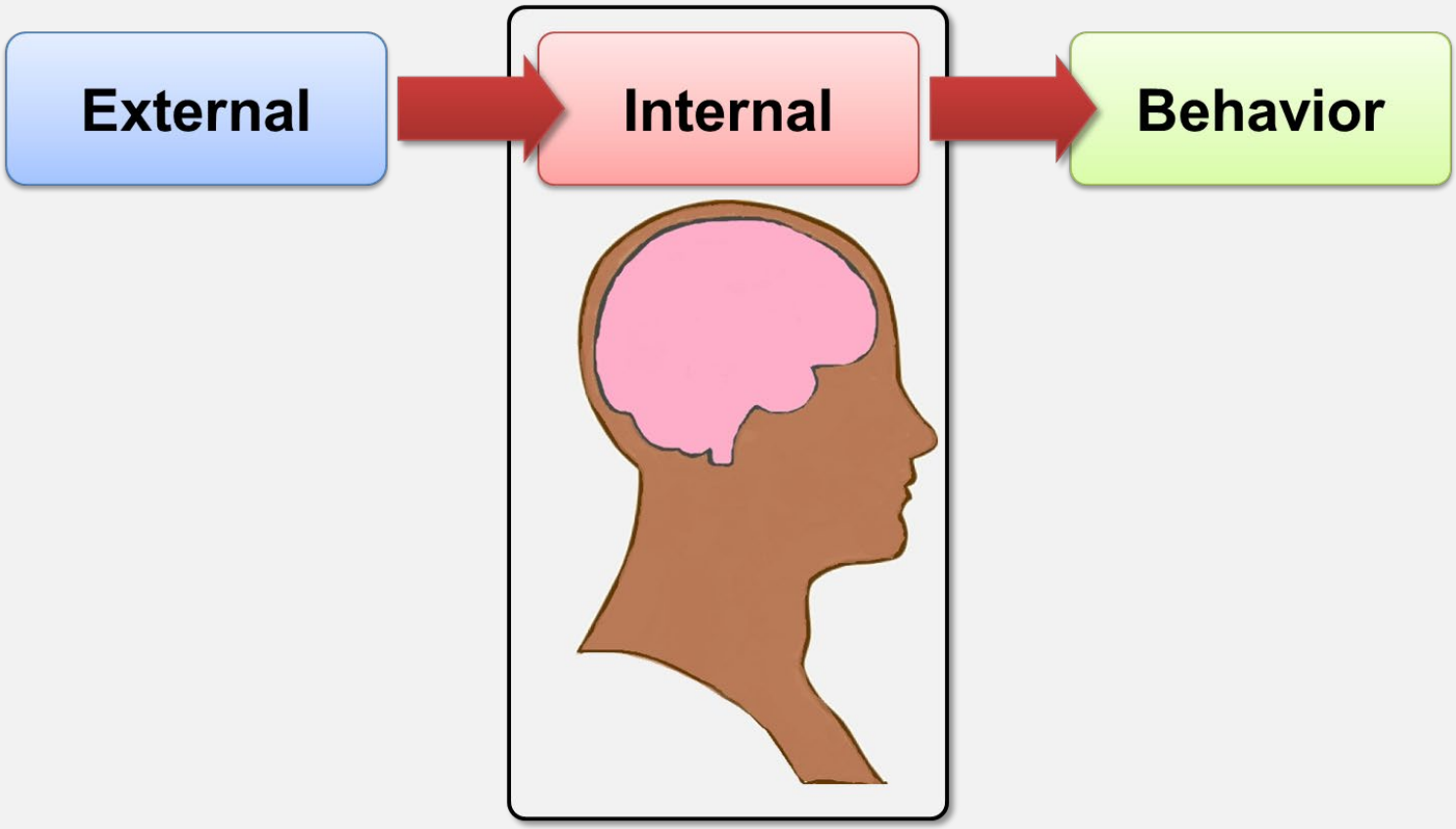
Dynamic Risk Factors

(Why should we target these?)

- Changing these factors changes the probability of recidivism
- Provide the basis for developing a supervision and treatment plan
- Effectively addressing factors can reduce risk (and thus revocation and re-arrest), improve offender outcomes and increase community safety

Cognitions are Key!!!

The Cognitive Model



"Thinking Controls Behavior"

PICTS (Offender Section)

Assessment of Criminal Thinking

- **General Criminal Thinking (GCT):** This scale is an overall measure of criminal thinking and is the single best predictor on the Offender Self-Assessment.

- **Proactive Criminal Thinking:** Identifies Individuals for whom crime is generally goal-directed and deliberate. Offenders who are proactive tend to expect positive things to come from their criminal behavior (e.g., money, status, power).

- **Reactive Criminal Thinking:** Identifies individuals for whom crime is generally more of a reaction to a situation than planned behavior. Behavior is impulsive.

- **Eight Elevated Criminal Thinking Styles….**

Offender Self Report Criminal Thinking Styles

Mollification	Justification by blaming others
Cutoff	Rapid elimination of deterrents to crime "screw it"
Entitlement	Grant themselves permission to violate laws
Power Orientation	Exert maximum control over the external environment at the expense of person or internal control
Sentimentality	Doing something nice for others in order to feel better about oneself
Super Optimism	The belief that one can avoid consequences
Cognitive Indolence	Short-cut thinking
Discontinuity	A lack of consistency in thought and action

General Responsivity

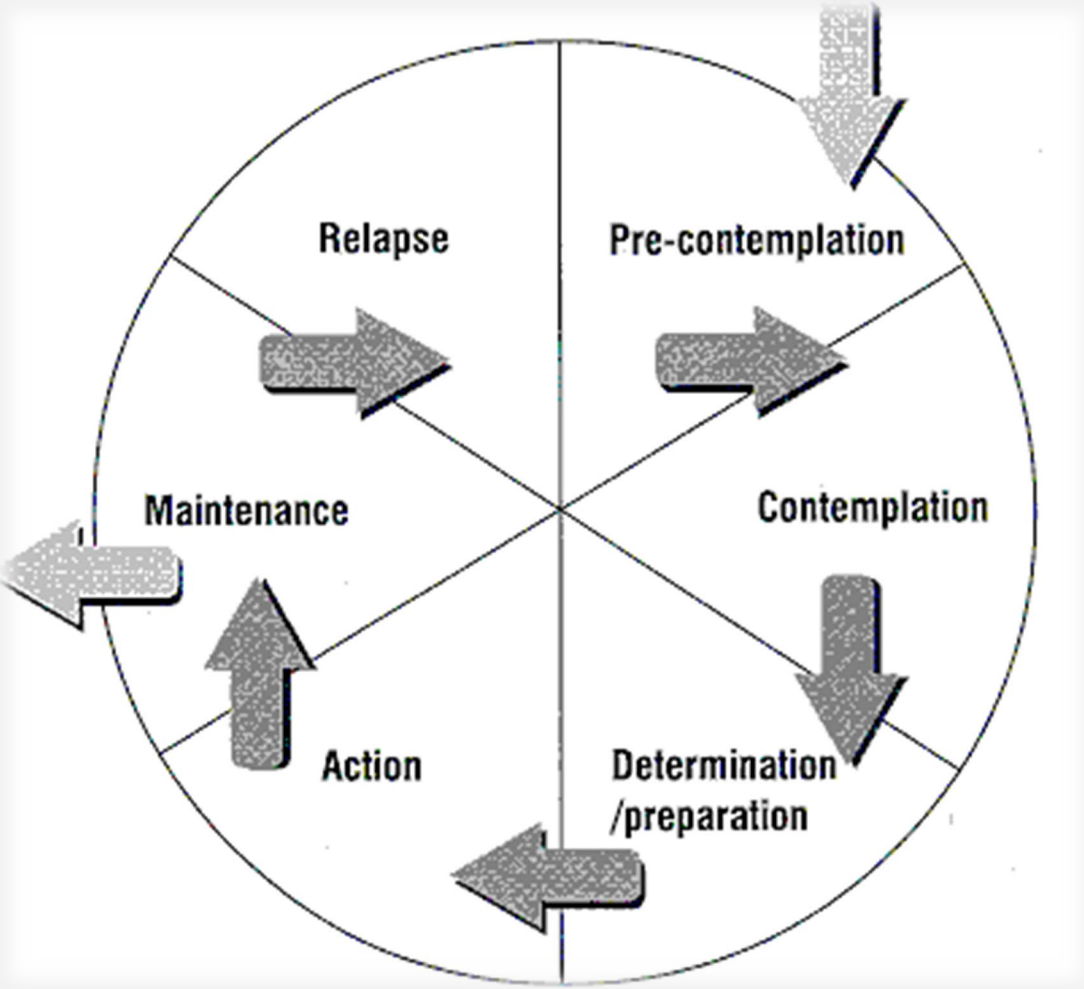
- CBT treatment modality utilized in individual and group counseling
- Importance of “Treatment Matching”
- Assessment of responsivity is important to maximize benefits of interventions/treatment
- Interventions need to be tailored to meet that specific offender’s risk and needs
- Offenders respond differently to treatment strategies

Specific Responsivity Factors

(Possible Barriers to Success)

- Low intelligence
- Physical handicap
- Reading/writing problems
- Mental health issues
- No desire for change
- Homeless
- Transportation
- Child care
- Language
- Ethnicity
- History of abuse/neglect
- Interpersonal anxiety

Stages of Change



Effective Interventions

- **Cognitive Behavioral Interventions/Therapy (CBI/T)**
  - Cognitions affect behavior and changes in thinking lead to changes in behavior (thinking impacts behavior)
  - Directed toward changing dysfunctional or distorted thoughts
  - Helps offender identify and manage/avoid high risk situations
  - Teaches offenders tangible skills, such as problem solving
  - Provides structured learning experiences

****Homework, role plays, and practice are essential features of CBT**

Vendor Expectations?

- The intervention and the treatment plan must address presenting clinical issues as well as the client's specific criminogenic needs (a.k.a., dynamic risk factors), such as Cognitions, Drugs/Alcohol, Social Networks, Education/Employment
- CBT is the required treatment modality
- As to UA collection, a distinction needs to be made between a failure to appear and a "stall"
- Vendors will be working collaboratively with the client's probation officer
- Vendor's goals/focus should align with officer's/client's

What can you expect from the probation officer?

- Client's risk assessment results
- Identification of client's protective factors/strengths
- Collateral contacts, including prosocial supports
- Three-way meetings (vendor, client, PO)
- Ongoing communication about issues/concerns and progress
- **Probation officers will be utilizing evidence-based interventions that will complement treatment (STARR skills, cognitive restructuring, Interactive Journaling)**
- Transition from Treatment/Discharge Planning

Local Needs Urine Collection

- **ONLY City CA 10 Project Code 1010**: The urine collection program will be offered no fewer than 3 days per week for a minimum of 6 hours per day. In order to accommodate the clients' work schedules, the vendor shall offer 3 collection hours available in the morning as well as 3 hours of collection available any time after 4pm and ending no later than 10pm. The dates of the urine collection are determined by the U.S. Probation Office through consultation with the vendor.
- All Other Clinics Project Code 1010: The urine collection program will be offered no fewer than 2 days per week for a minimum of 6 hours per day. In order to accommodate the clients' work schedules, the vendor shall offer 3 collection hours available in the morning as well as 3 hours of collection available any time after 4pm and ending no later than 10pm. The dates of the urine collection are determined by the U.S. Probation Office through consultation with the vendor.

Sex Offender and Other Local Needs…

- Project Codes 6012, 6022, 6032, 6090, 6091, 7013, 7023: Sex Offense Specific Individual and Group Counseling will be available a minimum of three days per week.
- All Project Codes: The course materials deemed necessary for sex offense specific individual and group treatment (e.g. worksheets, workbooks) shall be provided by the vendor and included in the price for these services.

Documentation of Services

- **Monthly Sign In Logs**

Used for each defendant/person under supervision to verify services are being offered/provided per Probation Form 45 requirements. The Monthly Sign In Log includes a place for defendant/person under supervision to sign for services based on project code, with a time in/out, vendor initials, co-payment received, and comments (to include a comment if the defendant/person under supervision failed to report, if no services were provided/received within the month, and if telehealth was provided including the means in which the session was provided (teleconference, video conference, internet). This document accompanies the monthly invoice.

Revised 5-2023

MONTHLY SIGN IN LOG

Complete one form per person per month. Include all scheduled contacts. In the event the person does not attend a scheduled service, indicate "no show" in the comment column. In the event the person does not attend any services within the month, include a comment noting why no services were provided/received. If telemedicine is provided, print the defendant's/person under supervision's name within the signature field, and the comment section shall reflect the means in which the session was provided (i.e. teleconference, video conference, internet).

Vendor: **Agreement #:**

Defendant/Person Under Supervision: **PACTS #:** ☐ Pretrial ☐ Post-Conviction

Service Month/Year: **Required co-payment (if applicable):**

Date	Defendant/Person under Supervision signature	Project Code	Time In	Time Out	Vendor Initials	Co-pay Received	Comments (i.e., no show, delivery method of telemedicine, no services)

Urinalysis Testing Log

Complete one form per person per month - to be used for project codes 1010 and 1011

Defendant/Person Under Supervision Name:

PACTS #:

Vendor Name & BPA #:

Month/Year:

Date Collected	Defendant/Person Under Supervision Signature	Collector initials	Bar Code # (for 1010)	Special test (for 1010)	Meds taken	Test Result (for 1011 only)	Co-pay collected

Additional Documentation of Services

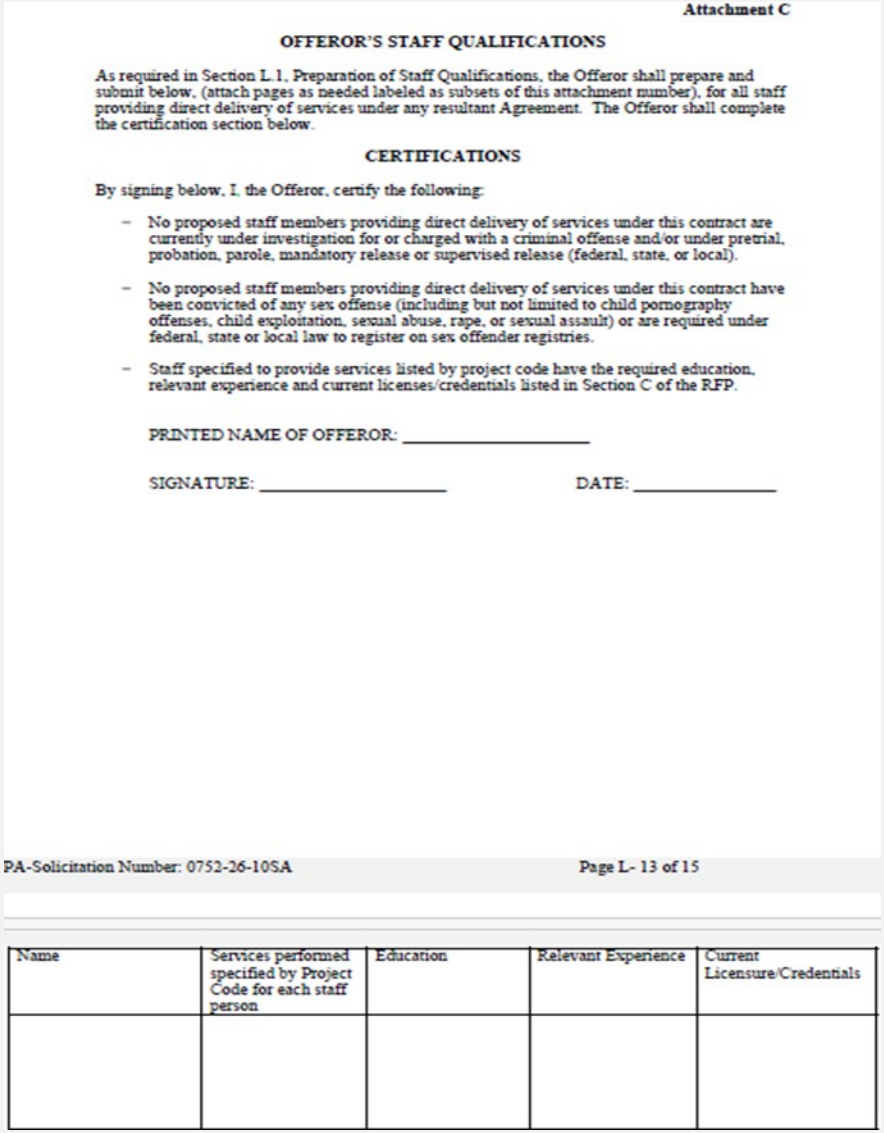
- **Regular treatment staffings between the clinician and officer where there is an exchange of information and the communication is documented in both the agency and probation files**
- **Documented 24 hour or less notification of any "no shows," "stalls,"etc**
- **Quarterly (90-day) Treatment Plans and Discharge Summaries are to be sent to the probation officer**

Monitoring Requirements

- One in-person audit, which includes a group observation, annually
- Review of file storage and maintenance
- File review, including focus on quality of service and CBT interventions
- Review of chain of custody and specimen storage for urinalysis collection
- Are all contracted services being provided?

Working with Our Clients and the L13 Form

The completion of the L13 form and certifying that the employee(s) meet the education and employment requirements must be provided before an employee begins working with one of our clients.



Attachment C

OFFEROR'S STAFF QUALIFICATIONS

As required in Section L.1, Preparation of Staff Qualifications, the Offeror shall prepare and submit below, (attach pages as needed labeled as subsets of this attachment number), for all staff providing direct delivery of services under any resultant Agreement. The Offeror shall complete the certification section below.

CERTIFICATIONS

By signing below, I, the Offeror, certify the following:

- No proposed staff members providing direct delivery of services under this contract are currently under investigation for or charged with a criminal offense and/or under pretrial, probation, parole, mandatory release or supervised release (federal, state, or local).
- No proposed staff members providing direct delivery of services under this contract have been convicted of any sex offense (including but not limited to child pornography offenses, child exploitation, sexual abuse, rape, or sexual assault) or are required under federal, state or local law to register on sex offender registries.
- Staff specified to provide services listed by project code have the required education, relevant experience and current licenses/credentials listed in Section C of the RFP.

PRINTED NAME OF OFFEROR: _____

SIGNATURE: _____ DATE: _____

PA-Solicitation Number: 0752-26-10SA Page L- 13 of 15

Name	Services performed specified by Project Code for each staff person	Education	Relevant Experience	Current Licensure/Credentials

Service Provider Communication System (SPCS)

- The ERS Vendor Component and SPCS provides a secure communication protocol to vendors for billing purposes. ERS will only be available until 12/31/25.
- Beginning 1/1/26, communications with probation and pretrial officers should be conducted via the officer's U.S. Courts email address, shown below. Whether direct email communication is sufficient for HIPAA compliance is a determination that only the vendor can make.
- Probation: USPOContracts_ilnp@ilnp.uscourts.gov
- Pretrial: ILNPTdb_Invoice@ilnpt.uscourts.gov

Invoicing

- Invoices AND associated documents must be submitted by the 10th of the month (late submissions will delay reimbursement)
- Please include copies of any evaluations/assessments completed that month
- Must provide updated treatment plans every 90-days (with billing)
- Must provide ALL the services referenced on the Treatment Services Contract Program Plan (Prob 45)---or explanation as to why they weren't provided (for services to be rendered all Prob 45s must have the referral agent's signature. Prob45s cannot be back dated).
- Do NOT provide services that are not ordered on Treatment Services Contract Program Plan (Prob 45)—you will not be reimbursed
- Dates and project codes on billing invoice must match those of the Treatment Services Contract Program Plan

File Maintenance

Located in the SOW, Section C : "Deliverables"

- Must have secure filing system
- Separate U.S. Probation from U.S. Pretrial Services
- Electronic files must be available for review, upon request of officer
- Keep all files for 3 years post payment (i.e., subsequent to the conclusion of services)

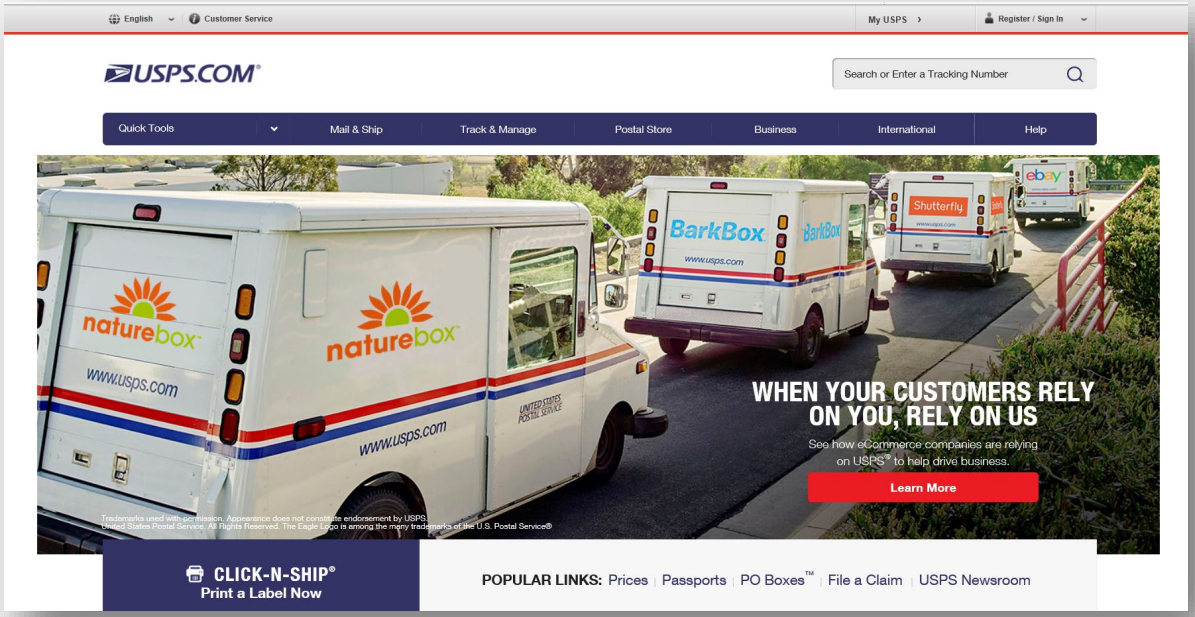
File Maintenance (cont.)

Hard Copy and Electronic Files Must Contain:

- Clinician's progress notes
- All Treatment Services Contract Program Plan (Prob 45)
- Monthly Treatment Log (MTLs) must be:
  - Typed and/or legible handwriting
  - thorough and accurate
  - submitted with billing
- U/A Testing Log
- Evaluations/Assessments
- 90-day Treatment Plan
- Discharge Summaries

Ordering Supplies

- Order shipping supplies through USPS



Priority Mail Tyvek Envelope
11-5/8" x 15-1/8"

Priority Mail Padded Flat Rate Envelope
9-1/2" x 12-1/2"

Priority Mail Regional Rate Box - A1
10" x 7" x 4-3/4"

Priority Mail Regional Rate Box - B1
12" x 10-1/4" x 5"

USPS shipping bags & shipping boxes can be ordered through the United Sates Postal Service website under "Free Shipping Supplies."

Our office will no longer supply USPS shipping bag & boxes.

Ordering Supplies

- **Ordering supplies from the U.S. Probation Office**

- **Probation** Chain of Custody Forms
- **Pretrial** Chain of Custody Forms
- Specimen Bags
- Flip Top Containers
- Merchandise Return Labels
- ***Gloves are NOT provided by the probation office***

SPECIMEN COLLECTION SUPPLY ORDER FORM

Date: _____

Clinic: _____

Account Number: _____

Please review inventory monthly and maintain a 90 day supply on all collection/shipment supplies. Please also specify blank or preprinted COC forms.

EMAIL ALL SUPPLY REQUESTS TO:
INTAKE_BOP@ilnp.uscourts.gov

Collection Supplies	Current Inventory Count	Quantity Requested
Probation COC Forms		Preprinted _____ /Blank_____
Pretrial COC Forms		Preprinted _____ /Blank_____
Specimen Bags		
Flip Top Containers		
Merchandise Return Labels		

NUMBER OF SPECIMEN COLLECTIONS PER MONTH: _____

Important Final Notes:

- Each agency needs to provide a list to us each year of any and all scheduled days for closure, for instance holidays, institute days, etc.
- If you are not receiving emails with the list of who is coming in for a urine screen, please check your trash and/or junk mail folder first.
- For any last minute/emergency closures (weather related, building maintenance related, etc.) or any trouble shooting with Comply please email INTAKE_BOP@ILNP.USCOURTS.GOV (same email used for supply ordering)

Contact Us

U.S. Pretrial Services
219 S. Dearborn Street
Room 15100
Chicago IL, 60604

Phone: (312) 435-5793
Fax: (312) 435- 5545

U.S. Probation
230 S. Dearborn Street
Suite 3400
Chicago, IL 60604

Phone: (312) 435-5700
Fax: (312) 408-5061

Questions


Thank
You!