



Questions and Answers: Adult ACT- 14 New Teams

- 1. I wanted to clarify the eligibility piece. We are a 501 (c) (3) incorporation that has multiple programs that work with individuals with SMI who are attending other programs that are licensed by OMH. The programs we oversee are programs that aren't directly licensed by OMH but often collaborated with them. Does the agency applying have to be licensed by OMH or do the clients we serve have to be involved in an OMH program?**

Answer: Eligible applicants are not-for-profit agencies with 501(c) (3) incorporation that have experience providing mental health services to persons with serious mental illness through programs that are licensed or funded by OMH. The agency would need to have a OMH licensed program.

- 2. Is the Monroe Plan considered an eligible entity for submitting a proposal? The Monroe Plan holds the Specialty Mental Health CMA status as part of our Health Homes Plus program and were selected by OASAS to manage the authorizations for Adolescent Residential Treatments.**

Answer: Eligible applicants are not-for-profit agencies with 501(c) (3) incorporation that have experience providing mental health services to persons with serious mental illness through programs that are licensed or funded by OMH. The agency would need to have a OMH licensed program.

- 3. Where can I find the bid documents for this opportunity?**

Answer: Pursuant to the New York State Division of Budget Bulletin H-1032, dated June 7, 2013, New York State has instituted key reform initiatives to the grant contract process which require not-for-profits to register in the [Grants Gateway](#) and complete the Vendor Prequalification process in order for proposals to be evaluated and any resulting contracts executed.

- 4. Specific to the Genesee, Livingston and Northern Steuben Counties, how were the geographical locations determined?**

Answer: These geographical areas were determined to warrant the most need and were determined to be lacking in ACT services.

- 5. Does the LGU or DCS have input or sign off of such proposals in the County?**

Answer: The agency would not need input or sign off as part of the RFP process but would need to work with the county if awarded an ACT team.

- 6. Is a not-for-profit agency that currently operates a transitional case management program that is not licensed but provides mental health services to persons with serious mental illness eligible to apply?**

Answer: Eligible applicants are not-for-profit agencies with 501(c) (3) incorporation that have experience providing mental health services to persons with serious mental illness through programs that are licensed or funded by OMH. The agency would need to have a OMH licensed program.

- 7. For each of the regions for the on-call component, is it a requirement that we pay for every hour someone is on call, or is an on-call stipend sufficient?**

Answer: The agency must determine how to manage the requirement of 24/7 coverage within the Adult ACT Team and within the ACT budget.

- 8. Is a separate location required for each team? If teams are in contiguous areas, could the provider have one centralized location for two or more teams?**

Answer: For teams that receive one award for the multiple counties in a region, they may determine the office location(s) that best meets the ACT teams approach to serving the counties. There is no requirement for the location of the team.

- 9. Is there an EHR requirement? And if so, is there a specific EHR required to use, or can the provider propose the EHR?**

Answer: There is no specific EHR requirement.

- 10. Is there an indirect cost cap?**

Answer: Historically 15% is the cap for Administrative Expenses.

- 11. Would it be possible to submit an application to run an ACT team focused on serving the needs of special populations, such as older adults aged 50+ who are living physical co-morbidities?**

Answer: As per the RFP, ACT teams will serve adults who are diagnosed with a Serious Mental Illness (SMI). These individuals may also be high users of emergency and/or crisis services, have co-occurring substance use disorders, are isolated from community supports (including family), are in danger of losing their housing/becoming homeless, are homeless, and/or have histories of involvement with the criminal justice system. These teams do not focus on special populations.

12. How was the annual Medicaid assumption calculated/determined? Based on our calculations with the monthly rates provide per the fee schedule, we're getting there would be significantly more funding available. Should we use the annual cap provided in the RFP or the case rate when calculating our budget?

Answer: Medicaid rates have been updated since the RFP was released. Please use current rates when responding to the RFP.

https://omh.ny.gov/omhweb/medicaid_reimbursement/

13. The release also says "Northern" Steuben. Do we have further clarification on what that boundary is?

Answer: Historically, there has been a significant need for ACT services in communities in the northern end of the county. Elmira's Southern Tier ACT covers only the southern part of Steuben County. So, "northern" Steuben is that area not covered by Elmira's Southern Tier ACT team.

14. The proposed budget in the RFP is \$90,000 less than what we are spending on other ACT teams (non- shelter teams), why is there this difference? We believe costs are only increasing. There don't appear to be any differences in the staffing pattern from other ACT teams. Salary demands are increasing and the acute needs of clients that are requiring ACT level of care necessitates highly trained staff with more qualifications.

Answer: The ACT budget model is based on the rates and staffing plan for ACT teams.

15. Since there is a character limit on Grants Gateway, are we able to submit attachments with our response to the questions so that we may exceed the allotted 4,000 characters? During our debriefing for Youth ACT, we learned that we could have submitted responses as attachments completely so we could exceed the character limit, so we wanted to see if this were the same for this proposal.

Answer: Most questions will be limited to the 4000-character limit; however, some questions may allow for downloads and will indicate so in Grants Gateway.

16. There is no letter of intent listed in the Key Events/Timeline section. Is a letter of intent required? If so, when is it due?

Answer: No letter of intent is required.

17. We are considering applying for ACT Teams in two regions. Are two separate proposals required entirely? We recognize that the questions will be tailored by region so we want to verify if two separate submissions should be submitted (one for each region). Page 6 states that each bid must include the county(ies)/borough(s) that we intend to serve, which reads as though there is one submission but within the one submission, we are then specifying which regions we intend to serve.

Answer: One proposal can be submitted for multiple ACT locations, please follow instructions in the RFP to do so.

18. Can you confirm that we must have a 501(c)(3) vs our 501(c)(6) in order to apply for this grant.

Answer: Eligible applicants are not-for-profit agencies with 501(c) (3) incorporation that have experience providing mental health services to persons with serious mental illness through programs that are licensed or funded by OMH. The agency would need to have a OMH licensed program.

19. Does the provider need a dedicated ACT suite?

Answer: Yes, ACT teams need office space that meets the needs of the program.

20. Can the provider collocate ACT with other OMH programs?

Answer: Yes, as long as the team has their own office space within the location of other OMH programs.

21. Can the provider collocate ACT with non-OMH programs?

Answer: Yes, as long as the team has their own office space within the location of other OMH programs.

22. Can start up funds be used to build out office space?

Answer: No, start-up funds cannot be used for capital improvement costs.

23. Can start up funds be used to purchase a vehicle for the ACT team?

Answer: Yes.

24. When will the ACT program begin evaluating their program model fidelity?

Answer: Teams should develop teams based on the fidelity of the model and continuously evaluate program fidelity.

25. When will NYS OMH release their fidelity tool?

Answer: No time has been determined yet. For now, teams may utilize the Tool for Measurement of ACT (TMACT).

26. Re question 5.5d - What specific monitoring report(s) do you want attached to the application?

Answer: Monitoring reports from any oversight bodies.

27. Re question 5.5d - monitoring report(s), please define 'recent'.

Answer: The most recent monitoring reports available.

28. If an agency is submitting a proposal for multiple teams, should the agency submit a separate budget for each team?

Answer: Yes, and the Budget template used should be the correct one to depending on the size and location of the team.

29. In questions 6.1a and 6.1a1, does each question require one response (up to 4000 characters) or two responses (up to 4000 characters each)?

6.1a a. Entity's Commitment to Equity and the Reduction of Disparities in Access, Quality and Treatment Outcomes for Marginalized Populations

1. Provide the agency's mission statement, including a mission statement for ACT with information about the intent to serve individuals from marginalized/underserved populations.

2. Identify the management level person responsible for coordinating/leading efforts to reduce disparities in access, quality, and treatment outcomes for marginalized populations. This includes activities related to diversity, inclusion, equity, cultural/linguistic competence. Information provided should include the individual's title, organizational positioning, education, relevant experience.

6.1a1 This is a continuation of question 6.1a:

3. Provide the diversity, inclusion, equity, cultural/linguistic competence plan as outlined in the National CLAS Standards for this program. Note - plan format should use the SMART framework (Specific, Measurable, Achievable, Realistic, and Timely). Plan should include information in the following domains: workforce diversity (data informed recruitment), workforce inclusion, reducing disparities in access, quality, and treatment outcomes in patient population, soliciting input from diverse community stakeholders and organizations).

4. Describe the process for which the diversity, inclusion, equity, cultural/linguistic competence plan was created using stakeholder input from service users and individuals from marginalized/underserved populations. Additionally, describe how the plan will be regularly reviewed and updated.

Answer: One response with 4000-character limit.

30. What's the difference between 48 and 68 slot teams?

Answer: A 48-person team has a capacity to serve 48 individuals and would typically be used in a county where the local need can be met with a 48-person team. By contrast, a 68-person team is used in a county where there is capacity to serve 68 individuals, and where there's capacity to serve more than 68 individuals, there can be multiple 68-person teams.

The staffing model is 10:1 client to staff, so it is different for a 48 vs a 68-person team. The funding model and rates are also different according to the size/location of the team.