



Office of Mental Health

Individual Placement and Support (IPS) Initiative for CORE Psychosocial Rehabilitation Designated Providers Questions & Answers

Q1. Our organization helps people with substance use disorder attain and maintain meaningful employment. Would people with SUD fall under the category of severe mental illness under the grant's parameters?

A1. Eligible applicants must meet the following qualifications:

- Current designation to provide CORE Psychosocial Rehabilitation,
- The agency must be assigned to OMH as host agency for their CORE Services *or* the applicant must request that their host agency change to OMH as part of the application for this contract, and
- The agency must serve at least 50 unique individuals in CORE PSR, as measured through claims paid from 06/01/2022 through 05/31/2023.

CORE Psychosocial rehabilitation (PSR) is an integrated service for eligible adults with serious mental illness and addiction disorders. Awardees may use this funding to support employment services for any individual receiving CORE PSR.

Q2. If we are hiring a full time IPS provider, yet only 50% of their time is required to be spent in the community engaging in tasks such as systematic job development, job coaching, and rapid job placement. Can they provide billable IPS services in the remaining 50% of their time?

A2. No, any billable services must be provided by the CORE PSR staff. The remaining 50% of their time could be spent on non-billable employment-related services and activities provided from the provider's office or the staff person's home (if telecommuting is allowed by the agency). For example, researching job leads online, attending virtual job fairs, providing non-billable telehealth support, conducting virtual outreach and education, etc. This time could also be used to support collaboration and consult with team members, to engage in trainings and technical assistance through the Center for Practice Innovation, completing documentation, and entering data in NYESS.

Q3. Do ALL CORE PSR providers need to take the CPI training or is it only CORE providers who are delivering the PSR with Employment Focus service?

A3. CPI trainings described in the RFA must be completed by all CORE PSR staff for the awarded provider.

Q4. Can the employment specialist also do Medicaid-billable services (direct service provision to clients) outside of his/her Non-Medicaid-billable responsibilities?

A4. No, any billable services must be provided by the CORE PSR staff.

Q5. How does the employment specialist's time need to be documented and reported? Does this hourly/daily/weekly/or monthly breakdown need to be included in the annual self-attestation tool?

A5. Documentation to describe all interventions provided by the IPS Employment Specialist shall be maintained and are subject to audit by the State and/or Local Government Unit (LGU). Awardees will also be responsible for reporting expenses via the Consolidated Fiscal Report. OMH will provide additional details regarding documentation at a later date.

Q6. The RFP states that 'the IPS Employment Specialist must spend at least 50% of their time in the community engaging in tasks such as systematic job development, job coaching, and rapid job placement'. It also states that 'This funding is used to cover non-Medicaid reimbursable employment-related services'. The question is whether the remaining 50% of IPS Employment Specialist time is allowed to be spent on billable services?

A6. No, any billable services must be provided by the CORE PSR staff. The remaining 50% of their time could be spent on non-billable employment-related services and activities provided from the provider's office or the staff person's home (if telecommuting is allowed by the agency). For example, researching job leads online, attending virtual job fairs, providing non-billable telehealth support, conducting virtual outreach and education, etc. This time could also be used to support collaboration and consult with team members, to engage in trainings and technical assistance through the Center for Practice Innovation, completing documentation, and entering data in NYESS.

Q7. Is there a timeframe of serving 70 individuals? with applying for the additional IPS? Is that a current capacity or can that be a projection?

A7. The time frame is based on actual claims volume from 06/01/2022 to 05/31/2023.

Q8. Is 50 individuals an absolute number, if we are short a few can we still apply.

A8. A minimum of 50 individuals must be serviced between 6/01/2022 to 5/31/2023.

Q9. Would we be allowed to hire a full time individual to provide IPS using only 50% of grant funding, and pay for the rest of the individual's time using agency funds, or is it a requirement that grant funds cover the entire cost of the IPS staff person.

A9. The funding is intended to cover one full time equivalent (FTE), which may be split among more than one staff person. If an organization chooses to cover 0.5 FTE with the grant funding and 0.5 FTE with agency funds, OMH would expect that the remaining IPS Initiative funding is used for other eligible expenses. The full FTE, whether funded under this initiative or other funding, would need to be dedicated to fulltime to the IPS Initiative.

Q10. What does it mean first come first served?

A10. There is a set amount of funding dedicated to the initiative. Awards will be made to applicants who meet all eligibility criteria on a first come, first serve basis, based on when they are received by OMH.

Q11. How many providers are there in total?

A11. According to Mental Health Program Directory (MHPD) there are 106 OMH-hosted CORE PSR providers.

Q12. What is the going rate/ salary for an employment specialist?

A12. This initiative has been funded based on an assumed salary of \$55,000. Downstate providers will receive a small differential allowing them to pay more.

Q13. We have people in article 31, who no longer receive therapy. They are not eligible for vocational support. We provide it, but do not bill, as they are not eligible. Since we currently bill for no service, are they able to be part of our count to get to 50 people served?

A13. No, only individuals with at least one paid CORE PSR claim during the time frame are counted towards providers eligibility to receive this award. If these individuals are eligible to receive CORE PSR, we would recommend that a referral be made to a local provider. If they are ineligible for CORE PSR, there are a number of other employment services that could be explored including Assisted Competitive Employment (ACE), Personalized Recovery Oriented Services (PROS), and services through ACCES-VR.

Q14. If we qualify for the additional 77K amount, does that mean we have to hire an additional employment specialist, or can the money be used to enhance the employment work in other ways?

A14. At this time, OMH anticipates that providers funded at an enhanced level due to volume would be expected to hire a second IPS employment specialist. When awards are made, specific deliverables will be negotiated in your contract. We would encourage you to discuss any innovative ideas related to use of these funds that would support full implementation of IPS for all individuals receiving CORE PSR as part of the contracting process.