

Questions and Answers for Specialization of Children's Community Residence for Transition Age Youth with or at Risk of Child Welfare Involvement

Q1. If awarded, would this necessitate changes in our current licensure, or would a waiver be required to alter the admission criteria?

Answer – Until such a time that the Part 594 regulation pertaining to the operation of Children's Community Residences is updated to reflect an expanded age range, programs serving transition age youth will need to apply for a Waiver to admit those over 18 years of age and serve youth beyond the 19th birthday. Programs would not be expected to apply for a 501(c) Waiver for each individual youth; rather, when granted, the Waiver would cover any admissions to the program in the expanded age range.

Q2. If there is an insufficient number of referrals that meet the specialized population admission criteria, would we be expected to operate the residence at a lower census, or would we admit additional youth who do not meet the specialization population criteria, thereby mixing populations? For example, if our residence was Option B, would the expectation be that we are providing services to both transition age youth with MH/DD and youth who only meet traditional Children's CR admission criteria simultaneously within in the same residence to fill all available beds?

Answer - If funded under Option A, the eligibility criteria must include the transition age population, with or at risk of child welfare involvement.

If funded under Option B, it is expected that part of the eligibility criteria will include a cooccurring diagnosis of Autism and/or and Intellectual Disability. All CCR programs are expected to have continuous communication with the networks serving their target population to advise them on the referral process, share information about the program, and inform them of any openings. This practice assists with soliciting referrals of eligible youth and building strong referral networks. Additionally, OMH is committed to supporting programs in obtaining appropriate referrals and providing information to potential referral sources about the availability and operation of these specialized CCR programs.

Q3. In the Transitional Age Youth Residence will youth ages 18+ be eligible for public assistance while awaiting SSI determination and if SSI is denied?

Answer - There are no changes to the reimbursement and rate model for specialized CCRs at this time. As with currently operating CCRs, SSI will continue to cover cost of room and board. Other public assistance programs would not be expected to cover the cost of room and board in the event SSI cannot be secured. If a program is unable to meet collection assumptions for SSI due to barriers or denials despite all due diligence to assist a youth in applying and obtaining SSI, and this results in a deficit for the program, the program may request contingency funding via the process outlined in the *Community Residence Spending Plan Guidelines.*

Q4. If the youth are in the care and custody of the Department of Social Services will the expectation be that the Department of Social Services will provide financial assistance (room and board) prior to SSI determination and eligibility?

Answer – There are no changes to the reimbursement model for specialized CCRs at this time. As with currently operating CCRs, SSI will continue to be utilized to cover cost of room and board. A youth's custody status does not change this. If a program is unable to meet collection assumptions for SSI due to barriers or denials, despite all due diligence to assist a youth in applying and obtaining SSI, which results in a deficit for the program, the program may request contingency funding via the process outlined in the *Community Residence Spending Plan Guidelines.*

Q5. The RFP identifies that there could be a variety of referral sources; will the referrals continue to come through C-SPOA and A-SPOA?

Answer – Yes, referrals will continue to come through C-SPOA. The referral process for CCRs will not change as part of specialization. Referrals sources must send the C-SPOA Application Part 1 Part 2 to the youth's local C-SPOA to begin the process.

Q6. The current CCR Medicaid Rate is 19,679.81, would the Transitional Age Youth Community Residence continue to utilize the CCR Medicaid rate?

Answer – The Medicaid rates will remain the same. This opportunity includes the addition of funding for specialization of staffing, services, and training as well as service dollars.

Q7. Under an award, will the specialized CCR still be able to serve youth younger than 16, or would we only be permitted to admit transition-age-youth ages 16-21?

Answer - Those awarded would change their current admission criteria to serve transition age youth ages 16-21.

Q8. If funded under Option B, will the specialized CCR still be allowed to admit eligible youth without a co-occurring disorder of autism or IDD?

Answer – If funded under Option B, it is expected that part of the eligibility criteria will include a co-occurring diagnosis of Autism and/or and Intellectual Disability.

All CCR programs are expected to have continuous communication with the networks serving their target population to advise them on the referral process, share information about the program, and inform them of any openings. This practice assists with soliciting referrals of eligible youth and building strong referral networks. Additionally, OMH is committed to supporting programs in obtaining appropriate referrals and providing information to potential referral sources about the availability and operation of these specialized CCR programs.

Q9. There seems to be some confusion around whether RFP is funding to support an 'enhanced' package for youth that qualify that are at a CCR (requiring the CCR to designate specific beds for these youth) or is it an expansion of current CCR programs resulting in additional beds being added to the CCR? Could you please clarify?

Answer – There is no bed expansion being funded by this RFP. This funding supports currently operating programs to specialize to better serve and meet the needs of transition age youth with or at risk of child welfare involvement, or under Option B, transition age youth with or at risk of child welfare involvement with co-occurring mental health and Autism/Intellectual Disability. The entire program would be designated to be able to serve these populations, not any specific number of beds within the program. It is anticipated that provider admission criteria will need to be updated to reflect the new population specialization.

If option A is being pursued, the target population for these specialized CCRs are transition age youth ages 16-21 who are on an independent living trajectory and meet the eligibility criteria outlined in Section 1.2 of the RFP. The target population may have or be at risk of child welfare involvement.

If option B is being pursued, the target population are transition age youth ages 16-21 who are on an independent living trajectory and meet eligibility criteria for CCR, as outlined in Section 1.2 of the RFP, *in addition* to having a co-occurring diagnosis of Autism or Intellectual Disability.

Q10. While SFS directs us to download the Appendix B Budget Template from the Attachments section, I did not see Appendix B listed in the Attachments section. Please advise if it will be posted soon or if we may obtain Appendix B another way.

Answer - This is filled out as part of the Proposal Template located in the attachments section of SFS.

Q11. For question 6.1e.i. Agency, "What percentage of youth served by the Agency since January 1st of 2024, if any, were at risk of child welfare involvement?" Our agency serves youth across many kinds of programs including Youth ACT, Preventive, etc. For 6.1e.i., do you want to know the percentage of youth we serve as risk of child welfare involvement in the specific Children's Community Residence we are applying to specialize, or do you want to know that percentage for our entire large agency?

Answer – The requested percentage of youth served at risk of child welfare involvement should be provided for the youth served at the CCR since January 1st, 2024.

Q12. I am requesting clarity around 6.6.2. I am interpreting the opening line, "Describe how your agency manages its operating budget" as applying to the entire agency, not just the Children's CR program we are applying to specialize. The three numbered questions following would then also apply to the entire agency, i.e. "1. detailed expense components that make up [the agency's] the total operating expenses; 2. the calculation or logic that supports the budgeted value of each [agency budget] category;" etc. Is this your intended meaning, and we should then also include an additional proposed-project-specific Budget Narrative underneath questions 1-3 in 6.6.2? Or are questions 1-3 in 6.6.2 meant to apply to the proposed specialized Children's CR program and count as the budget narrative? If the latter, should the proposed budget narrative reflect only the additional funds included in this specialization RFP or should the budget narrative included)?

Answer – : The budget and budget narrative should speak to the proposed Children's CR enhancement. Applicants should not submit a budget or budget narrative to speak to existing funding. If necessary, applicants may include information about existing program(s) in the budget narrative if it helps to support the overall budget request.

Q13. We currently operate an OMH CCR for boys ages 13-18. This grant applies to children ages 16-21. If awarded this grant, would we only be able to house residents between 16 and 21 years of age? In other words, would we need to discharge our current residents under the age of 16? If so, what would be the timeframe to complete this process?

Answer – Those awarded would change their current admission criteria to serve transition age youth ages 16-21. However, OMH does not expect the program to precipitously discharge any currently admitted youth under that age range that are still requiring the service. There will need to be a transition period and plan as part of this process.

Q14. In Section 1.2, page 5, the RFP states that an applicant may not be denied admission to the specialized CCR based on a protected class including sex. Does this mean that, if awarded this grant, we would be required to accept both males and females into our boys' community residence?

Answer – Those currently serving a single gender orientation can continue to do so.