#  <br> Apartment Treatment Housing for Adults with SMI Questions and Answers 

Q1. The RFP lists the OMH Hudson River region as a region eligible to apply. We are interested in submitting an application for a project located in Columbia County which is typically considered part of the Hudson River region, however, on page 17 of the RFP, the only two counties listed as part of the region are Washington and Warren. Can you confirm whether Columbia County is part of the Hudson River region and is, therefore, eligible to apply?

A: See answer for Q10.
Q2. What is the current Medicaid and SSI rate to be used based on the level of care and for the area we are targeting?

A: See answer for Q10.
Q3. Will there be a per bed max amount and what is the amount?

A: See answer for Q10.

Q4. Will OMH fund the difference between Total expenses and SSI contributions + Medicaid?
A: Funding for a 'Net Deficit' present the gross-income-net (GIN) fiscal model is provided by OMH.

Q5. Does the per bed max apply to total of SSI Contributions + Medicaid or SSI Contributions + Medicaid + OMH Net deficit funding?

A: The gross-income-net (GIN) fiscal mode calculates anticipated gross costs for Apartment Treatment programs. A combination of Medicaid, SSI, and State-aid will be available to cover $100 \%$ of costs included in the GIN fiscal model.

Q6. Can security deposits for Treatment apartments and Office be claimed from operating budget if PDG funds are not sufficient either fully or partially?

A: Yes
Q7. For apartment sites, if we own an apartment building can we use our apartments for the Apartment Treatment Housing? If so, how many can we use from our apartments?

A: Agencies may used owned properties to site apartment treatment units. Apartment treatment is expected to be an integrated model, and as such, no more than $50 \%$ of a building's units should be designated for individuals with serious mental illness.

Q8. As for staffing for the Apartment Treatment Housing, what tenant contact requirements are there? i.e. every day, including holidays and weekends or 5 days a week?

A: Frequency of client contact will be specific to an individual's needs and service plan, with a general expectation that contact needs will be more frequent upon admission to the program and will taper over time. Apartment Treatment programs must ensure that staff are available to maintain adequate contact to ensure the health and safety of residents and to provide services outlined in individual written service plans. Staff must also be available to assist in emergencies on at least an on-call basis.

Q9: There is mention in the RFP that ". . . Program Development funds are available as part of this contract to assist with developing a new apartment treatment program" does this funding include furniture, kitchen supplies, bedding, towels, etc. or are these expenses that will need to be factored into budget for this RFP?

A: The items mentioned above are all allowable costs for the Program Development Grant.

Q10. Can you clarify the funding section? Specifically about the combination of SSI and Medicaid funding. Will the agency be responsible for billing Medicaid in this program?

A: Apartment Treatment providers are responsible for billing Medicaid. The average Medicaid rate for Apartment Treatment units in NYC is $\$ 4,299$ per month. The average Medicaid rate for upstate/Long Island units is $\$ 3,875$ per month. The 2024 SSI client contribution downstate is \$1,170 and \$1,140 upstate.

