



Office of Mental Health

Mental Health Outpatient Treatment and Rehabilitative Services (MHOTRS)/Clinic Enhancement Grants Access and Capacity Enhancement Questions & Answers

Q1. Where is the budget template?

A1. The budget template was inadvertently left out of the Grants Gateway. It is available on the OMH website (<https://omh.ny.gov/omhweb/rfp/2023/ceg/index.html>) and should be included with your proposal as an upload on question E10b.

Q2. With respect to GG, shall the narrative response to question E10a be uploaded to E10b? Note: E10a has no option to upload a document, but E10b does.

A2. As stated in the instructions for E10, due to spacing constraints, Question E10 is split into two questions/boxes E10a and E10b. All responses to E10 should be given in E10b.

Q3. May a non-profit foundation, raising funds on behalf of an OMH-licensed MHOTRS, be the applicant listed on the application or must it be submitted in the name of the OMH-licensed MHOTRS provider?

A3. Eligible applicants for funds are existing OMH-licensed MHOTRS providers identified as operating in good standing with OMH. Only existing licensed MHOTRS providers are eligible and qualified to apply for this opportunity.

Q4. Is this funding opportunity open to state-operated clinics, or are they precluded from applying?

A4. Eligible applicants for this funding opportunity include not-for-profit organizations and local governmental entities (counties).

Q5. We received our OC for MHOTRS on July 1st of this year (2023). LETC has operating a CFTSS program since March 16, 2022. The agency has run children's day treatment programs (integrated in a school setting) for over 60 years. Are we eligible to apply for this RFA in light of 1 year exp as licensed MHOTRS?

A5. Agencies chosen for funding must have at least one year of experience as an OMH-licensed MHOTRS program to be eligible to apply. If the agency has been operating a MHOTRS program for less than a year at the time of application, they are ineligible for this specific funding opportunity.

Q5. We are a for profit organization certified as an article 31 clinic are we eligible to apply to apply for this grant.

A5. For-profit organizations are ineligible for this funding opportunity.

Q6. I am writing to clarify that OMH Operated facilities with MHOTRS clinics would be eligible for this enhancement grant (and not only community not-for-profit agencies with an OMH operating certificate)?

A6. Eligible applicants for this funding opportunity include not-for-profit organizations and local governmental entities (counties).

Q7. When will the application portal be posted on Grants Gateway?

A7. The application is posted on the Grants Gateway and has been since the release of this RFA on 10/18/23. Please see Section 2E of the RFA for information on how to apply.

Q8. I see on page 8 there are counties that will be prioritized for these awards. If there are funds remaining will there be notification and other counties be given the opportunity to submit a proposal or are all applicants (regardless of county/priority) expected to submit by 12/20/23?

A8. All qualified applications received, which include implementation in the identified counties, will be awarded first in the order of score. Should funding remain, all qualified applications received which include implementation in other counties will be awarded in order of score. Therefore, all applications, whether in identified counties or not, must be submitted by the identified deadline to be considered for this opportunity.

Q9. The RFA suggests the use of peer specialists as leaders/facilitators for group services. Will you require OMH certification for peers?

A9. Peer Support Services provided and billed by MHOTRS programs must align with service requirements including staff certifications (see [NYS OMH MHOTRS Guidance](#) for more information.) This funding opportunity does not permit a change to service scope or staff qualification requirements.

Q10. Will the grant cover groups that meet using telehealth?

A10. Telehealth allowances in accordance with Part 596 and [OMH Telehealth Guidance](#) applies to services rendered via this funding opportunity.

Q11. We are concerned about sustainability of this work; is OMH considering ongoing grants for group intervention?

A11. OMH is exploring opportunities to further support the expansion of group modalities in MHOTRS programs.

Q12. Is administrative overhead (AOH) an eligible expense under the MHOTRS Access and Capacity Enhancement RFA?

A12. A&OH is allowable at up to 10%.

Q13. Can the funding for "#2 - Enhance Program Capacity to Provide Effective Group Intervention" - be used to hire new staff - more specifically a Peer Support staff?

A13. Funds may be used to offset costs associated with group implementation (including but not limited to, staff training, enrollment fees, materials, loss in productivity, travel expenses), hiring a consultant to develop and support group curricula, activities related to group work, and implementation. Use of funds for this opportunity does not include the start-up costs associated with hiring new staffing.

Q14. In the budget template, the percentages for fringe and A&OH are prepopulated at 30% and 10% respectively. Are we permitted to change those allocations?

A14. The percentages that are pre-populated for fringe at 30% and A&OH at 10% are the maximum allowable percentages for those items. Applicants are allowed to reduce them if desired.

Q15. Where should the budget template be uploaded in Grants Gateway? Under pre-submission documents, or somewhere else?

A15. The budget template should be uploaded in response to question E10b of the program specific questions.

Q16. Can two different hospitals that are part of the same health system apply separately for this grant?

A16. If applicant(s) are licensed as separate agencies and meet all Eligibility Requirements set forth in the RFA, then yes, they can apply separately.

Q17. Could you kindly provide further information pertaining to the procedure and frequency of reporting, as outlined in section E.2 Reporting Requirements, which is as follows: "Awardees will be required to participate in reporting, including but not limited to an end-of-grant (December 31, 2024) survey to gather information and data specific to the funding option selected."

A17. Awardees will be contacted directly with more information regarding the nature and timeline associated with the end-of-grant reporting. OMH intends to conduct a one-time survey to understand the activities conducted under the grant and any associated outcomes to help inform future policy and planning. Reporting is expected to require minimal action on behalf of the awardee. Awardees are encouraged to track and document activities and outcomes throughout the grant period to support the reporting process.

Q18. Can you confirm if the Workplan Overview Form shown in the Grants Gateway application is required, or just the Program Specific Questions referenced in the RFA?

A18. The workplan was inadvertently left on in the Grants Gateway and the system will require at least one objective, task, and performance measure to submit the application. Please enter N/A in all fields.

Q19. Does the budget count towards the page limit for #10 of the application narrative subsections a-f?

A19. The page limit (three pages) applies to the narrative portion of the application. The budget may be in addition to the three-page limit.

Q20. We are a federally qualified health center network with multiple eligible site locations. Can you confirm if can submit one application for enhancement activities at multiple site locations, or if we must choose one site to apply for?

A20. This funding opportunity permits one application per eligible provider agency/organization. If an organization operates multiple MHOTRS programs, only one application may be submitted. However, the activities associated with this funding opportunity may apply to multiple MHOTRS sites in alignment with use of funds.

Q21. We have sites located within as well as outside of priority counties. If we can apply for multiple sites through one application, will we only get priority consideration if we apply just for the sites located in the priority counties, or can we include both the priority and not-priority sites and still get the priority consideration?

A21. Applications that include implementation in an identified county(ies), will be awarded first. Prioritization will not be impacted if the activities implemented in an identified county will also be implemented in additional MHOTRS sites.

Q22. If applying to enhance group services, the RFA states that funding can offset costs associated with loss in productivity. Does this mean we can request funding just for the cost of staff time that is spent, for example, in training instead of providing services, or actual projected lost revenue?

A22. This funding opportunity is intended to expand and enhance group services which includes supporting the training of staff. If funds are intended for training purposes, the applicant may consider costs associated with loss in productivity for any activities that meet the grant criteria.

Q23. Could the funds be allocated to subsidize more than one project within a specific funding option category?

A23. Eligible agencies may submit an application for one funding option only. However, the activities associated with this funding opportunity may apply to multiple MHOTRS sites in alignment with use of funds.

Q24. Please clarify whether there is expectation that the services implemented by the grant fund have to be continued after the grant period.

A24. While awardees are not required to continue to provide the activities outlined in the grant after the term of the award, a sustainability plan must be factored into the application.

Q25. Please elaborate on the specifics of the end-of-grant survey and data needed.

A25. Awardees will be contacted directly with more information regarding the nature and timeline associated with the end-of-grant reporting. OMH intends to conduct a one-time survey to understand the activities conducted under the grant and any associated outcomes to help inform future policy and planning. Reporting is expected to require minimal action on behalf of the awardee. Awardees are encouraged to track and document activities and outcomes throughout the grant period to support the reporting process.

Q26. Section “e” seems to require considerable detail but at the same time does not seem to address what these details should address. Could you please clarify more

specifically what categories should be addressed in section “e” of the proposal narrative?

A26. Depending on the funding option identified, the applicant should include information specific to the proposed activities in alignment with use of funds. This may include workflow and processes associated with care coordination and engagement, or training and curriculum development for group services. Applicants are encouraged to review the activities outlined in use of funds and detail plans to implement these activities in the narrative application.

Q27. Is there a specific or preferred method or projection model to use for forecasting census increase?

A27. For this funding opportunity there is no specified or preferred method to calculate changes in census. Agencies are able to use their internal data metrics to track program capacity and may utilize these same systems to calculate projections.