

## HBCI Statewide (Traditional) RFP Questions and Answers

1. Are the dollar amounts for Operating Funding as noted in the RFP section 5.5 annual funding amounts or the total funding amount for the 5 year grant period?

ANSWER – The amounts outlined in the RFP are awarded on an annual basis.

2. Will a county government owned/operated agency (that is not a 501c3 incorporated agency) be considered as an eligible agency?

ANSWER – The RFP states: "Eligible applicants are not-for-profit agencies with 501(c) (3) incorporation that have experience providing mental health services to persons with serious emotional disturbance, and are in good standing with OMH."

3. May an applicant propose to serve two contiguous counties that cross OMH regions (for example, one county is in the Hudson River Region and one county is in the Central NY Region)?

ANSWER – An applicant may propose to serve any contiguous counties in the list of eligible counties.

- 4. With regard to Section 1.1 Purpose of Request for the Proposal "Proposals will be ranked, and up to twenty-seven (27) awards made to the applicants with the highest score in the targeted OMH counties to assume the operation of a HBCI Team. Awards will be prioritized as follows: priority will be given to those applicants, in rank order, proposing to serve more than one county. Subsequently, OMH will offer, in ranked order, awards to those applicants proposing to serve one county. "
  - Is it possible for more than one team to be awarded per county?
  - Is there a maximum number of teams that may be awarded per county?

ANSWER – In order to maximize the availability of HBCI across New York State, one award will be made per county.

5. Can one 2.5 FTE HBCI team be provisioned to serve two adjacent rural counties? Or, is there an expectation that each rural county must have its own 2.5 FTE team?

ANSWER – Applicants will be considered based on their proposal to adequately serve the population and geography of the proposed catchment area. There is no set minimum number of staff to cover any county or counties.

6. For a county with a large population and geography, is there a maximum number of teams or FTE permitted by county?

ANSWER – See question 4. Additionally, please see HBCI Program Guidance for the maximum number of FTE per team.

7. Does OMH have any modeling/analysis for the optimal FTE and/or number of teams based on population or square miles of an HBCI catchment area?

ANSWER – Teams are awarded in ratios of 1 FTE Supervisor to 4 Interventionist or .5 FTE Supervisor to 2 Interventionist for rural counties. At this time only 1 team will be awarded per county. There is no set minimum number of staff to cover any county or counties.

8. In counties that are large in population and geographical area, does the applying agency need to serve the entire county or can they elect with the LGU to serve a piece with the highest need?

ANSWER – Agencies are expected to serve the entire county, as there will only be one awardee per county.

9. On page 5 of the RFP it states "Applicants may propose to serve more than one county with one HBCI program." We would like to propose a program serving two, neighboring counties; however, these two counties are located within two different OMH regions. Could an organization propose one program to serve two neighboring counties – even if those counties exist in separate OMH regions (i.e. Cayuga and Tompkins counties)?

ANSWER – See question 3.

10. On page 7 of the Program Guidance it states "LMHP's are expected to be licensed by the New York State Education Department and operate within the practitioner's scope of practice as defined in NYS law." Due to the shortage of LMHPs across NYS and within similar applicant pools, could the Program Supervisor be provisionally licensed upon hire?

ANSWER – A provisionally hired Program Supervisor is acceptable if the individual is eligible for LMHP licensure within New York State (and, as such, receiving appropriate supervision in accordance with NYSED guidance), LMHP licensure is received within 3 months of their start date, and there is an LMHP well-versed in HBCI protocols to provide weekly clinical supervision to the HBCI Interventionists in the interim.