

Erie County Department of Mental Health 2026 Contracts

October 2025

Introductions

Contract Coordinator Team

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Agenda

- ❖ Why are we doing this?
- ❖ Changes for 2026
- ❖ Brief overview of the contract process
- ❖ Common problems and how to avoid them
- ❖ Where to get more information and who to contact if you have questions?
- ❖ Questions

Why are we doing this?

- ❖ To make the process more efficient for you and for us
- ❖ To reduce the number of times we have to go back and forth on things (which wastes time for you and us)
- ❖ To improve the quality and clarity of our contract documents
- ❖ To get you paid more quickly – we can't pay you for any 2026 invoices until your contract is fully executed
- ❖ To address any questions you may have
- ❖ To improve communication and share expectations

What's New in 2026

- ❖ These webinars 😊
- ❖ Limited English Proficiency – 2026 Language Access Law Certification
- ❖ Mental Hygiene Law 9.45 Designees
- ❖ Temporary Payment Withholds
- ❖ Greater attention on the quality of Scopes of Service

Overview of the Contract Process

Listed below in actual order:

1. Contract Call Letter/Kick-off Email
2. Email from your assigned Contract Coordinator
3. Email with funding documents (PFSD / FAS Email from Fiscal)
4. ECDMH Contract Process Steps
 - START Letter
 - FINISH Letter
5. Invoicing

***Attachment A:** 2026 ECDMH Contract Overview, Important Information, and Contract Agency Reference Documents, which was included with the Contract Call Letter/Kick-off email provides additional information.*

Email from your Contract Coordinator

- ❖ Forms you need to complete and return for this part of the process
- ❖ Instructions regarding your Scopes of Service
 - How to download them and update
 - What should be included in your Scopes of Service
- ❖ Utilize the 2026 CC Contract Documents Submission Checklist to ensure all necessary documents are completed for contract submission.
- ❖ Due Dates – all forms and Scopes of Service are due by **November 14, 2025**

Scopes of Services

What we are looking for:

- ❖ What service is to be delivered?
- ❖ How: Provide details about how the service is delivered
- ❖ Where: In what types of locations is this service delivered? (In person/remotely, at the agency or in specific community locations, etc.)
- ❖ Why: What is the purpose of the service being delivered?
- ❖ In Notes Section provide the FTEs by type of staff you're paying for with dollars in your ECDMH contract

SoS Guidance Document

Appendix A: Scope of Service
Contract Year: 2026
Agency Name:
Program Name:
Program Type:
Program Code (with PC Suffix):

*This information will be pre-filled
with your program information*

ClearPoint Outcome Report:

Site Address: Please review and update as needed. Include all site addresses.

Days and Hours of Operation: Please indicate days and hours of operation for each of the locations listed above.

Operating Capacity: This is the number of individuals that can be served at a given time by this particular service through the funding provided by ECDMH for this service. Please review and update as needed.

Annualized Number to be served in 2025: This is your expected number to serve through the end of 2025. You should have your actual numbers through the end of Q3. To get this number add your number served through the end of Q3 + number expected to be served in Q4. Please review and update as needed. The draft document you receive will have the number from the prior year SoS.

Projected Number to be served for 2026: Please review and update as needed. The draft document you receive will have the number from the prior year SoS.

Service Description:

Description of the specific service(s) that will be delivered. You should include the purpose/intent of the service and deliverables. This section should include sufficient details and thoroughly describe the service to be delivered. Do not include information about the agency, history, and other programs offered unless there is a direct connection to the program you are describing.

In this section you should include:

What: What service is to be delivered

How: Provide details about how the service is delivered

Where: In what types of locations is this service delivered? (ex. Face to face vs. remotely, at the agency, in specific community locations, etc.)

Why: What is the purpose of the service being delivered?

Instead of using very general terms like "assist," "support," etc., the contract agency should explain how they do these things. For example, "Assist clients in obtaining jobs by reviewing job postings with them, providing feedback on their resume

Target Population:

Description of the population that will be receiving this service.

Special Population:

If needed, you should also complete the Special Populations section, but much of the information that has been provided in these sections likely are more appropriate for the Program Service Description and the Target Population sections.

Notes:

In this section please include the total FTEs of personnel by type (ex. Clinical staff, peers, drivers, etc. that are funded by the ECDMH contract.)
An FTE, or Full Time Equivalent is a unit that measures an employee's work in terms of a full-time position, regardless of whether they are part-time or full-time. It is calculated by dividing the total hours an employee works by the number of hours that constitutes a full-time job at a company. For example, two employees who each work 20 hours a week would equal one FTE, as their combined hours (40) match a standard full-time schedule. An employee that works 20 hours a week is 0.5 FTE.

Submitted By:

Title:

*This section must be completed by the
agency prior to submitting the SoS*

Email:

TO BE COMPLETED BY ECDMH ONLY

ECDMH Approved By:

Date:

Funding Documents

- ❖ Your funding documents – PFSD and FAS – will be emailed to you in early December. Review these carefully.
- ❖ Your funding amounts should be very similar to what you received in 2025 unless you were previously notified of changes.
- ❖ You will use these to complete your Google Cost Report Budget tab due by **March 15th, 2026**.

Insurance

- ❖ If your Insurance has expired and we do not have your **Insurance renewals approved by our County Attorney yet**, then we cannot pay any invoices. **No exceptions.**
- ❖ Approved by our County Attorney means: We are in full receipt of all your renewals that expired, and these have been passed onto our County Attorney for thorough review and returned to us with a **County stamp of approval stating your renewals met County requirements, and have been documented by ECDMH as “Active.”**
- ❖ Please have your agency insurance contact(s) calendar all expiration dates. **It is the agency’s responsibility to submit renewals timely.**
- ❖ If you are unsure of what dates to calendar, please send an email to Melissa.Stark@erie.gov and she will provide a listing of your required insurance with expiration dates.
- ❖ Your agency Insurance contact(s) **must review Certificates prior to submitting them and submission should come from your agency**, not your Insurance carrier.
- ❖ Certificates should be sent via email only to Melissa and each Certificate attached in individual PDFs (not compiled into 1 large PDF where she has to determine and extract each Certificate).
- ❖ If you have new contacts handling Insurance, we can share our PowerPoint and Insurance Training video as a guide to assist. Please send an email to Melissa to request this.

START Letter Email

- ❖ The Start Letter email will contain your Initial Contract and all other required documents that will need to be reviewed, completed where indicated on the fillable PDFs, and signed in inked signatures.
- ❖ Detailed instructions for each Contract Document will be found in the body of the email and on your Contract Submission Checklist.
- ❖ Do not make any changes to our PDF documents. If you see an area that requires revision, you must communicate this by “responding to all” on the Start Letter email.
- ❖ Any revisions requested to your Contract will need to be reviewed by our County Attorney. If deemed acceptable, a Revised Start Letter will be distributed with the approved Revisions made.
- ❖ If your Contract Signatory changes at any time, we need to be informed ASAP as their name and title are listed on our Contract Signature Page and our files need to be updated to reflect this change.
- ❖ Initial Contract documents must be returned in the order instructed by both the email & the Contract Submission Checklist.
- ❖ It is imperative that your contract submission is printed single-sided, paper clipped and placed in a flat envelope to Melissa Stark’s attention via US Mail or Hand Delivery.
- ❖ It is recommended that a scan be sent in advance for Melissa to review and confirm that your contract has been completed in full **prior to placing in the mail.**

FINISH Letter Email

- ❖ This email will include your final, **fully executed** Initial Contract attached for your records.
- ❖ Fully Executed - Means that your Initial Contract (with all Appendices attached) has been reviewed in our online system by the assigned County reviewers and was found to be executed by the agency in proper order. The County Executive's office must then approve the contract by signing in ink signature and a Contract Number has been assigned and applied to your Initial Contract. This is a 3-layer process and requires time allotted for all these steps to be completed. (The estimated time you need to allow for your Contract to be fully executed can be anywhere from 2 days up to several weeks.)
- ❖ The Email will be addressed to your listed Contract Signatory. If they are not listed to receive contract-related documents, they will need to be forwarded this email internally for their records.
- ❖ Your **agency's Insurance Certificates that have been stamped-approved by Legal** will be found in **Appendix C** – this means that they have met all County requirements. Please reference your Appendix C Certificates when you're requesting and reviewing your Insurance renewals.

Invoicing

- ❖ You can submit your Agency invoice for 25% of your annual contract amount (rounded to the nearest whole dollar) via e-mail to the fiscal team listed below for your first quarterly advance payment prior to your contract being fully executed.

Gabrielle.Miller-Bishop@erie.gov; Accountant

Alicia.Delecki@erie.gov; Assistant Director of Fiscal Administration

David.Spadone@erie.gov; Director of Fiscal Administration

- ❖ We will hold this invoice until the contract is fully executed and can proceed with reviewing & processing the invoice into our Accounting System once written notification is received internally.
- ❖ Once the Agency invoice is processed, you will receive an e-mail notification & the invoice will be submitted to the Comptrollers Office for their determination of the pay date. It will usually take 2 – 3 weeks for payment & we encourage Agencies to be set up with ACH.

Invoicing continued

- ❖ Q2 Advance invoice can be submitted any time after March 15th & Q3 Advance invoice after June 15th for 25% of your current contract amount; amendments to your contract can adjust your invoice amount.
- ❖ Q4 Advance invoice requires the Agency Google Doc Q4 YTD Forecast tab to be completed and approved prior to processing it. The amount of the advance will be calculated based on the forecasted reimbursable expenses less payments made to date for the current contract year.
- ❖ Any time the Agency insurance policies are not “Active”, the invoice will be held until this has been resolved.

Common Problems and How to Avoid Them

Contract Coordinator Issues

- ❖ Read the emails and instructions thoroughly and carefully.
- ❖ Follow the instructions as these will guide you through the submission process.
- ❖ Include your signed Checklist with your submission
- ❖ Use track changes on the Scopes of Service
- ❖ Submit one e-mail to your contract coordinator with each document attached individually.
- ❖ Late ClearPoint Reports – calendar your due dates.
- ❖ Communicate with your contract coordinator if you have questions/concerns

Insurance Issues

- ❖ Read the ECDMH Insurance Renewal Request emails and instructions thoroughly and carefully.
- ❖ Forward any emails that Melissa sends regarding your COI onto your insurance carrier.

To provide clarity, in these emails, we may use the following:

Bold text for Document names (Liability, Waiver, WCB, etc.).

Red font where something needs to be removed / revised.

- ❖ Review your renewals that are sent from your carrier / agent.
Check that **your agency name is correct in the Insured's Box;**
Confirm **your agency's address listed is the address used for your ECDMH Contract;**
and
Certificate Holder must be: County of Erie on all County Certificates— *no mention of ECDMH, no Room #, no implication to c/o Legal or Dept. of Law.*

Insurance Issues Continued:

- ❖ Refer to your prior year's COI and see that the X's / Y's inside the Insurance Table are the same on your renewal.
- ❖ November – February is the busiest time for renewals, contracts and amendments, and County staff vacations / holiday time off. If you have COI expiring during this time, **do not wait for us to send a Notice in advance of the Expiration(s). Delays in receiving your renewals will cause delays in your agency being paid.**
- ❖ Please do not anticipate follow ups for revisions that have been requested during this time and return revised COI in a timely manner.
- ❖ Once your COI appear to be in order and meeting all County requirements, time needs to be allowed for our County Attorney to thoroughly review and approve your COI. This could be a day – several weeks pending their busy schedule.

Contract Process Issues (in response to the START Letter)

- ❖ Read the emails and instructions thoroughly and carefully and forward this email to anyone that may be assembling your Contract package for return –the Instructions are detailed in both the body of the email and the Contract Submission Cover Page
- ❖ Send me a scan of your Contract submission in advance of its return – I can quickly review and be sure the Contract is completed in full before you seal the envelope.
- ❖ **The County does not allow e-signatures on any document that you receive from Melissa / in a START Letter email – these documents must be signed in inked signatures and the originals returned in order to process.**

Notary Pages

- ❖ These are fillable PDFs except for the Date, Signature and Notary stamp.
- ❖ Must be stamped legibly by the Notary with their Commission # and Exp. Date
 - If the Notary is handwriting this information, their full name printed, County of Commission, NYS, Commission # with Expiration Date - must all be written out in the Notary stamp area & legible*
- ❖ County must be entered in the Caption under State of New York (this will be the County of the Notary's Commission) and must be filled in by the Notary
- ❖ He / She must be circled to identify the Contract Signatory
- ❖ The Name & Title of the Contract Signatory must be typed exactly as it appears on the Signature Page (this name should match the Signatory's NYS license – no nicknames, must be Legal Name)

County of Erie Equal Pay Certificate

- ❖ Must be signed by the Corporate Officer of the agency in front of a notary public.
- ❖ This is a fillable PDF for the Notary where indicated on the form – they need to fill in the caption (State and County of Notary Commission).
- ❖ The Notary should always complete **Section B only** below the Verification (if using the fillable form, you will not be allowed to complete Section A).
- ❖ Date & Signature must be written in ink by Notary.
- ❖ Must be stamped with Commission Exp. (or handwritten with all necessary info. listed).
- ❖ The stamp and / or handwriting must be legible.

Business Associate Agreement (BAA)

- ❖ Agency address and to whom attention any Notice should go to must be completed on the Page # indicated – this can be typed in (fillable PDF)
- ❖ Original Signature & Date by Authorized Agency Representative on Signature Page

Fiscal Issues

- ❖ Please read the emails and instructions thoroughly and carefully.
- ❖ Calendar your Agency required report due dates.
- ❖ Have at least 1 or 2 employees set up with their work email for Google Doc reporting; notify us of your Agency fiscal staff changes.
- ❖ Email invoices to the Fiscal Team.
- ❖ Whole dollar amounts must be used for OMH, OASAS and OPWDD invoices.
- ❖ Have all insurance policies active to avoid a hold on any invoice.
- ❖ Do not duplicate invoice #'s.
- ❖ Comptrollers Office determines the pay date of all invoices once processed.
- ❖ Send in paperwork to the Comptrollers Office for ACH payments (contact Dave Spadone).
- ❖ Communicate with the Fiscal Team if you have any questions/concerns.

Common Problems and How to Avoid Them – Key Takeaways

- ❖ Read the emails and instructions thoroughly and carefully.
- ❖ Follow the instructions.
- ❖ Calendar your due dates.
- ❖ Contact your Contract Coordinators, Contracts Specialist, or the Fiscal Team if you have any questions or need assistance.

Where to get more information

❖ ECDMH Website, Information for Contract Agencies

<https://www3.erie.gov/mentalhealth/information-contract-agencies>

❖ ECDMH Staff – Contract Coordinator, Contracts Specialist, Fiscal Team

Who to Contact

Contract Coordinator Team

Amy Rockwood: Amy.Rockwood@erie.gov

Tara Karoleski: Tara.Karoleski@erie.gov

Cathleen Larson: Cathleen.Larson@erie.gov

Stacey Sinclair: Stacey.Sinclair@erie.gov

Contracts Specialist and Insurance

Melissa Stark: Melissa.Stark@erie.gov

Fiscal Team

David Spadone: David.Spadone@erie.gov

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Questions

