

Erie County Department of Mental Health
RFP #2022 – 037VF FPSS Questions | July 26, 2022

1. Can you please elaborate on the \$28,000 match? Can free rent be an example of a match? How would the match be accounted for each year (will it be on the CFR)?

A: Please see NYS Consolidated Fiscal Reporting and Claiming Manual Appendices N: <https://www.oms.nysed.gov/rsu/documents/FinalCal2021APPENDICES.pdf>

Local Assistance (NYS OMH funding code 001A) requires a cash match. An In-Kind match is not permissible. The funding for the RFP includes various State Aid funding sources and the Local Assistance allocation is the second to last funding source to be utilized (within the funding available) for expenses. ECDMH will provide the awarded agency a quarterly cost report which guides expense reporting.

The Local Assistance funding requires a 50% contribution from the agency; in this case funding includes \$28,000 from OMH and \$28,000 agency match totaling \$56,000.

The mandatory match is only required if the funding is utilized and only up to the amount expensed. For example, if the agency expenses \$30,000 of Local Assistance, \$15,000 would be allocated to NYS OMH and \$15,000 would be the agency mandatory match.

Yes, the expenses will be reported on the CFR.

2. Is there a current recipient of this funding or is this new funding?

A: Approximately 35% is allocated to a current provider and 65% is unallocated.

3. Regarding Attachment 2: Copy of the Board Resolution' (RFP, p. 5), our organization's bylaws do not require board resolutions for the submission of proposals. This would be far outside the scope of standard procedure. Should we submit a sheet that states N/A and why?

A: Although you reference that it is not part of your agency's standard practice, a Board Resolution demonstrates their awareness and support of the agency's proposal, therefore, the document is required with the RFP submission.

3a. Is the voluntary match (RFP, p. 3) voluntary or mandatory?

A: The funding available through the RFP includes NYS OMH Local Assistance which although stated as voluntary the match is mandatory per NYS.

3b. If voluntary and an applicant opts not to include it, would an applicant apply for \$328,864 (annual amount of 356,864 less the voluntary match amount of 28,000)?

A: In order to meet the Family Support needs in Erie County, ECDMH has allocated \$356,864 which is inclusive of the required match of approximately \$28,000 by the awarded agency. If an agency applies for funding less the mandatory match the amount would be 356,864 less 56,000 which is 300,864. The Local Assistance funding requires 50% contribution from the agency; in this case funding includes \$28,000 from OMH and \$28,000 agency match totaling \$56,000

Applicants who do not apply for the full amount of funding would have to demonstrate within their application how they would meet the goals of the RFP without the full amount of funding that is available and without compromising service delivery or outcomes.

3c. If mandatory, but an applicant does not apply for the full annual amount, should the voluntary match be prorated to the same % of the whole, or would the voluntary match stay at \$28,000 regardless of the total amount applied for?

A: The Local Assistance funding requires 50% contribution from the agency; in this case funding includes \$28,000 from OMH and \$28,000 agency match total \$56,000. Please see example in question 1A.

Applicants who do not apply for the full amount of funding would have to demonstrate within their application how they would meet the goals of the RFP without the full amount of funding that is available and without compromising service delivery or outcomes.

4. Please confirm that the \$356,864 should NOT include staff who are delivering CFTSS services (RFP, p. 3).

A: If an applicant chooses to fund an FTE position that serves Medicaid (CFTSS FPSS) and Non-Medicaid (OMH funding) families it is permissible to use a percentage of the \$356,864 toward a portion of the position that is serving Non-Medicaid families on their caseload mix i.e., 60,000 annual salary: 30,000 supported thru the RFP (Non-Medicaid families) and 30,000 paid for through Medicaid billing for families who receive Medicaid. The awarded agency will need to maintain clear records delineating costs for the position by funding source.

5. In the RFP, it states that we need to have experience providing Family Peer Support Services. We do not have a formal Family Peer Support program. However, through our Prevention programming, including in Erie County, we regularly provide the six categories of service provision for our families. We also conduct programming within the guiding principles. Would we be able to apply? We can certainly cite experience with the services and

would propose a program with your requirements. And If awarded, staff would become fully trained and certified in the model.

A: Page 1 states the following qualifying applicant criteria: Qualified Proposers must be experienced with providing Family Peer Support Services (FPSS) as defined by NYS Office of Mental Health to families in the target population and/or be a designated Child and Family Treatment and Support Services (CFTSS) FPSS provider as defined by NYS Office of Mental Health and NYS Department of Health.

An applicant has to have received NYS OMH funding in the past to provide Family Peer Support Services or have a current CFTSS FPSS designation through NYS OMH and DOH.

If an applicant does not meet one of the two defined criteria they do not qualify to apply.

6. If we are eligible and are able to prepare a proposal: What is the anticipated caseload size for each Family Peer Advocate? We understand the average length of stay in the program is 1 year.

A: On page 19, 6a the following is requested: From the budget form provided, describe in detail how the staffing and costs presented on the budget worksheet will support the delivery of services to the target population, the number of projected families to be served, and the achievement of the related outcomes described in your proposal.

There is not a prescribed caseload size but a projection is requested based on the budget submitted. NYS OMH suggests a caseload of 20-25 families per/full time equivalent. The caseload size may increase if families prefer Tele Mental Health Services.