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**Appendix A. Select Behavioral Health Collaborative Matching Grant Programs Matrix** .................................................................................................................. 1

**Appendix B. Definitions** .................................................................................................... 1
The 85th Legislature authorized the creation or funding of three significant behavioral health collaborative matching grant programs for the 2018-19 biennium to support community programs or collaboratives providing mental health and/or behavioral health needs to specific Texas populations.

- **House Bill (H.B.) 13, 85th Legislature, Regular Session, 2017**, created the Community Mental Health Grant Program to support community mental health programs providing services and treatment for individuals experiencing mental illness.
- **Senate Bill (S.B.) 292, 85th Legislature, Regular Session, 2017**, created the Mental Health Grant Program for Justice-Involved Individuals to reduce recidivism rates, arrests, and incarceration among individuals with mental illness, and also reduce the wait time for forensic commitments.
- **S.B. 1, 85th Legislature, Regular Session, 2017 (Article II, Health and Human Services Commission [HHSC], Rider 128)**, appropriated $20 million in general revenue to continue the Texas Veterans + Family Alliance Grant Program to improve the quality of life of Texas Veterans and their families by supporting local communities across the state to expand the availability of, increase access to, and enhance the delivery of mental health treatment and services.

Each matching grant program will award funding to eligible applicants through either a Needs and Capacity Assessment (NCA), Request for Applications (RFA), or a combination of both methods specific to the legislative requirements. Organizations responding to grant solicitations with match requirements must demonstrate how state requested dollars and matching funds will be used to support grant project activities. To accomplish this, organizations applying for grant funding will complete a budget in the format prescribed by the solicitation.

Generally, matching funds may be:

- Cash provided through unrestricted funding provided by the grant applicant, members of county-based and/or community collaboratives, local philanthropic, city, or county funds;
- In-kind contributions of goods or services committed specifically for the grant project;
- Donated resources; and
- Volunteer time to accomplish activities specifically for the grant project.

Matching requirements vary by program. As such, it is important for applicants to refer to the specific matching requirements of the solicitation to which they are responding.

This primer provides an overview of these funding opportunities for stakeholders. Appendix A offers a side-by-side comparison of each matching grant program, and Appendix B contains key definitions of entities and organizations for eligibility purposes of applicants.
1. Community Mental Health Grant Program

Background

In an effort to promote recovery-based treatment, the Texas Legislature authorized the development of a community mental health grant program through H.B. 13. This grant program for mental health services seeks to establish a matching grant program to support community mental health programs providing services and treatment for individuals experiencing mental illness.

Populations to be served include individuals with mental illness and unmet behavioral health needs. Governmental entities and non-profit organizations are eligible to apply for funding.

Grant Program Overview

The community mental health grant program is designed to foster community collaboration, reduce duplication of mental health services, and strengthen continuity of care for individuals receiving services through a diverse local provider network. The purpose of the grant program is to:

- Support community programs providing mental health care services and treatment to individuals with a mental illness; and
- Coordinate mental health care services for individuals with a mental illness with other transition support services.

Fifty percent of the total to be awarded will be reserved for community mental health programs located in counties with a population not greater than 250,000.

Implementation Approach

Funds associated with the community mental health grant program will be awarded using two methods: an NCA and an RFA.
**Needs and Capacity Assessment**

Through a competitive NCA distributed to local mental health authorities (LMHAs) and local behavioral health authorities (LBHAs), HHSC will award 50 percent of the funds appropriated for the grant program. One-half of the funds awarded using this method will be set aside for counties with populations under 250,000.

**Request for Application**

Through a broader competitive RFA procurement soliciting proposals from non-profit organizations and other governmental entities, HHSC will award the other 50 percent of funds appropriated for the grant program. One-half of these funds awarded for non-profit and other governmental entities will be set aside for counties with populations under 250,000.

**Additional Procurement**

Per the legislation, if funds remain after grants are awarded through the NCA and RFA, HHSC will initiate another competitive procurement. This process will be without restriction by population size.

**Timeline**

<table>
<thead>
<tr>
<th><strong>Milestone</strong></th>
<th><strong>Targeted Completion Date</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>NCA and RFA posted</td>
<td>1st Quarter, FY 2018</td>
</tr>
<tr>
<td>Final selection and approval</td>
<td>2nd Quarter, FY 2018</td>
</tr>
<tr>
<td>Contract negotiations</td>
<td>2nd Quarter, FY 2018</td>
</tr>
<tr>
<td>Contract execution</td>
<td>3rd Quarter, FY 2018</td>
</tr>
<tr>
<td>Grant period start date</td>
<td>3rd Quarter, FY 2018</td>
</tr>
<tr>
<td><strong>Milestone</strong></td>
<td><strong>Targeted Completion Date</strong></td>
</tr>
<tr>
<td>---------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Community collaboratives present to the Statewide Behavioral Health Coordinating Council (SBHCC)(^a)</td>
<td>Bi-annually as determined by the SBHCC</td>
</tr>
</tbody>
</table>

\(^a\) In accordance with the 2018-19 General Appropriations Act, S.B. 1, 85th Legislature, Regular Session, 2017 (Article IX, Section 10.04[b])

### Funding

- **Fiscal year 2018**: $10 million in general revenue
  - $5 million to LMHA and LBHAs through an NCA
  - $5 million to governmental entities and non-profit organization through an RFA
- **Fiscal year 2019**, $20 million in general revenue
  - $10 million to LMHA and LBHAs through an NCA
  - $10 million to governmental entities and non-profit organization through an RFA

### Matching Requirements

Awards to community collaboratives are contingent on matching funds, which may include cash or in-kind contributions from any person, but may not include money from state or federal funds. Depending on the population of the county where the community mental health program is located, the matching requirement is equal to 50 or 100 percent of the award amount. The match must equal:

- 50 percent of the grant amount if the community mental health program is located in a county with a population of less than 250,000;
- 100 percent of the grant amount if the community mental health program is located in a county with a population of at least 250,000; and
- The percentage of the grant amount required for the largest county included in the community mental health program, if the community mental health program is located in more than one county.
Addressing Gaps across the System

The program will require applicants to address one or more gaps identified by the Statewide Behavioral Health Strategic Plan to ensure coordination of contract-funded services to eliminate duplication of efforts.

The program will attempt to address the following strategies:

- **1.1:** Increase statewide service coordination for special populations
- **1.2:** Reduce duplication of effort and maximize resources through program and service coordination among state agencies
- **2.1:** Expand the use of best, promising, and evidence-based behavioral health practices across service agencies
- **2.2:** Develop clinical research and innovation in behavioral health by fiscal year 2021
- **2.3:** Ensure prompt access to coordinated, quality behavioral health services, including substance use services
- **2.4:** Strengthen the behavioral health workforce by fiscal year 2021.
- **2.5:** Address current behavioral health service gaps and needs across program and service agencies
- **2.6:** Address the most urgent challenges and needs related to both state-funded and state-operated inpatient psychiatric facilities across Texas by 2021
- **3.1:** Expand the use of best, promising, and evidence-based practices for prevention and early intervention by fiscal year 2019
2. Mental Health Grant Program for Justice-Involved Individuals

Background

The Mental Health Grant Program for Justice-Involved Individuals is a new grant program authorized by S.B. 292 to reduce recidivism rates, arrests, and incarceration among individuals with mental illness, and also reduce the wait time for forensic commitments.

Grant Program Overview

The grants will support community programs providing behavioral health care services for individuals with a mental illness and unmet behavioral health needs encountering the criminal justice system; and facilitating the local cross-agency coordination of behavioral health, physical health, and jail diversion services for individuals with mental illness involved in the criminal justice system.

A community collaborative, which includes a county, a LMHA operating in the county, and each hospital district located in the county, if any, may petition HHSC for a grant. A community collaborative may include other local entities designated by the collaborative members. The petition must include a plan identifying the target population, describing how the grant money will be used, and delineating outcome measures to evaluate the success of the plan.

Acceptable uses for the grant money include:

- The continuation of a mental health jail diversion program;
- The establishment or expansion of a mental health jail diversion program;
- The establishment of alternatives to competency restoration in a state hospital, including outpatient competency restoration, inpatient competency restoration in a setting other than a state hospital, or jail-based competency restoration;
- The provision of assertive community treatment or forensic assertive community treatment with an outreach component;
● The provision of intensive mental health services and substance use treatment not readily available in the county;
● The provision of continuity of care services for an individual being released from a state hospital;
● The establishment of interdisciplinary rapid response teams to reduce law enforcement’s involvement with mental health emergencies; and
● The provision of local community hospital, crisis, respite, or residential beds.

Section 2 of S.B. 292 further specifies HHSC shall award a grant to a community collaborative established by Harris County. HHSC has $5 million per fiscal year of the biennium available to support this collaboration.¹ The Harris County collaborative must provide matching funds in an amount equal to the lesser of the grant allocation for the Harris County Mental Health Jail Diversion Program, or the collaborative’s available matching funds. The Harris County collaborative that supports the Mental Health Jail Diversion Program is not required to submit a petition to HHSC.

**Implementation Approach**

This grant opportunity will be made available through the NCA solicitation to governmental and quasi-governmental entities for the provision of behavioral health services. HHSC will issue the NCA via broadcast message to LMHAs and local behavioral health authorities. Additionally, stakeholders will be notified of the NCA posting, including the Statewide Behavioral Health Coordinating Council, the Behavioral Health Advisory Committee, the Texas Commission on Jail Standards, and other organizations representing county governments.

¹ Per S.B. 292, Harris County is not eligible to apply for funds under Section 1.
## Timeline

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Targeted Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCA posted</td>
<td>1st Quarter, FY 2018</td>
</tr>
<tr>
<td>Final selection and approval</td>
<td>1st Quarter, FY 2018</td>
</tr>
<tr>
<td>Contract negotiations</td>
<td>2nd Quarter, FY 2018</td>
</tr>
<tr>
<td>Contract execution</td>
<td>2nd Quarter, FY 2018</td>
</tr>
<tr>
<td>Grant period start date</td>
<td>2nd Quarter, FY 2018</td>
</tr>
<tr>
<td>Community collaboratives present to the SBHCC&lt;sup&gt;a&lt;/sup&gt;</td>
<td>Bi-annually as determined by the SBHCC</td>
</tr>
</tbody>
</table>

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<sup>a</sup> In accordance with the 2018-19 General Appropriations Act, S.B. 1, 85th Legislature, Regular Session, 2017 (Article IX, Section 10.04[b])


**Funding**

- Fiscal year 2018: $12.5 million in general revenue for collaboratives including a county with a population of 250,000 or more.
- Fiscal year 2019: $25 million in general revenue for all eligible counties.

**Matching Requirements**

Community collaboratives must match the amount of the request with non-state sourced funds. To raise the required non-state sourced funds, a collaborative may seek and receive gifts, grants, or donations from any person.

The following conditions exist regarding match:

- 50 percent of the requested grant amount if the community collaborative includes a county with a population of less than 250,000; or
- 100 percent of the requested grant amount if the collaborative includes a county with a population of 250,000 or more; and
- The percentage of the grant amount required for the largest county included in the collaborative, if the collaborative includes more than one county.

**Addressing Gaps across the System**

The program seeks to address **Gap 1**: Access to Appropriate Behavioral Health Services; **Gap 3**: Coordination across State Agencies; **Gap 5**: Continuity of Care for Individuals Exiting County and Local Jails; **Gap 6**: Access to Timeline Treatment Services; **Gap 7**: Implementation of Evidence-based Practices; and **Gap 14**: Services for Special Populations through the following strategies:

- **1.1.1**: Address the service needs of high risk individuals and families by promoting community collaborative approaches
- **1.1.2**: Increase diversion of people with behavioral health needs from the criminal and juvenile justice systems through the coordinated use of risk and mental health assessments
- **1.1.3**: Ensure service eligibility and integration into the community for those transitioning from governmental custody, foster care, and hospital settings
- **1.2.2**: Implement improved program and service coordination and integrated program and service strategies to reduce duplication of effort and maximize resources
• **2.1.1**: Identify and coordinate best, promising, and evidenced-based behavioral health practices

• **2.3.2**: Implement strategies to improve service access and continuity of care, including outpatient and inpatient, substance use treatment, and crisis services

• **2.5.2**: Develop and implement programs and services to address identified gaps to include integrated approaches for special populations

Additionally, *Gap 8: Use of Peer Services* and *Gap 10: Consumer Transportation and Access to Treatment* will be addressed through the following strategies:

• **2.3.1**: Identify strategies to improve and strengthen access to behavioral health programs and services to engage and serve individuals in remote areas, such as transportation needs

• **2.5.4**: Develop a comprehensive behavioral health approach to meet the complex needs of the highest users of high cost alternatives
3. Texas Veterans + Family Alliance Grant Program

Background

The Texas Veterans + Family Alliance Grant Program was created by S.B. 55, 84th Legislature, Regular Session, 2015, to improve the quality of life of Texas Veterans and their families by supporting local communities across the state to expand the availability of, increase access to, and enhance the delivery of mental health treatment and services. HHSC Rider 128 appropriated $20 million in general revenue to continue the grant program.

Grant Program Overview

Grant awards are made to community collaboratives to fund implementation of new or improved systems coordinating and delivering mental health services; supportive services essential to the provision of mental health services; and development of and/or support for community collaboratives with the goal of self-sustainment by the end of the grant period.

Texas Veterans + Family Alliance grants support a wide range of clinical mental health and non-clinical supportive services for veterans and family members, including but not limited to:

- Evidence-based therapies and treatment;
- Individual, group, and family or couples peer support services;
- Individual and family counseling;
- Suicide prevention initiatives to help community members, veterans, and family members develop awareness and skills in recognizing, assisting, and referring to mental health services; and
- Navigation services such as case management and referrals.

The Texas Veterans + Family Alliance Grant Program seeks to empower local communities to identify and address the mental health needs of veterans and family members. Grant funds are intended to be a catalyst for communities to develop and support sustainable partnerships, collaborative relationships, and coordinated service delivery systems that continue to operate after the life of the
grant. As such, communities are required to match state grant awards on at least a dollar-for-dollar basis through cash or in-kind goods, services, and resources, demonstrating their commitment to addressing such mental health needs of veterans and family members as posttraumatic stress, depression, and other conditions.

**Implementation Approach**

Funds associated with the Texas Veterans + Family Alliance Grant Program will be awarded through a competitive RFA solicitation process. Funding is awarded to applicants based on the degree to which it is determined proposals meet the criteria outlined in the solicitation.

**Eligibility and Risk Screening**

All applications are screened for eligibility and risk to ensure each is submitted complete and on-time by an eligible nonprofit or governmental entity; each applicant does not have an exclusion record, is financially stable, has appropriate fiscal and internal controls, and has previous experience with contracts and/or grants; and each applicant has no material weaknesses or deficiencies as recorded in audit reports nor issues related to contract or litigation history.

**Evaluations of Applications**

Evaluation based on specific criteria: subject matter experts with backgrounds in behavioral health, veterans’ services, and community collaboratives serve on scoring teams to review applications against specific criteria outlined in the solicitation document.

**Final Selections**

Final selection based on state priorities: a committee, comprised of leadership in behavioral health, veterans’ services, and community collaboratives, review evaluation scores, risk evaluations, geographic distribution of funding and services as proposed; and additional criteria as determined relevant to establishing award recommendations for the HHSC Executive Commissioner’s final approval.
**Additional Procurement**

Per the legislation, funds remaining after grants are awarded can be used for the same purpose in fiscal year 2019 with written notification to the Legislative Budget Board (LBB).

**Timeline**

**Table 3. Implementation Timeline for the Texas Veterans + Family Alliance Grant Program**

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Targeted Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>RFA posted</td>
<td>1st Quarter, FY 2018</td>
</tr>
<tr>
<td>Final selection and approval</td>
<td>2nd Quarter, FY 2018</td>
</tr>
<tr>
<td>Contract negotiations</td>
<td>3rd Quarter, FY 2018</td>
</tr>
<tr>
<td>Contract execution</td>
<td>3rd Quarter, FY 2018</td>
</tr>
<tr>
<td>Grant period start date</td>
<td>3rd Quarter, FY 2018</td>
</tr>
<tr>
<td>Community collaboratives present to the</td>
<td>Bi-annually as determined by</td>
</tr>
<tr>
<td>SBHCC&lt;sup&gt;a&lt;/sup&gt;</td>
<td>SBHCC</td>
</tr>
</tbody>
</table>

<sup>a</sup> In accordance with the 2018-19 General Appropriations Act, S.B. 1, 85th Legislature, Regular Session, 2017 (Article IX, Section 10.04[b])

**Funding**

- Fiscal year 2018: $20 million in general revenue to eligible nonprofit organizations and governmental entities applying on behalf of a community collaborative through an RFA process.
- Funds remaining after grants are awarded can be used for the same purpose in fiscal year 2019 with written notification to the LBB.
Matching Requirements

Funding awarded to community collaboratives must be matched on a dollar-for-dollar basis with private and local funding and resources. State and federal funds and resources may not be used as match.

Addressing Gaps across the System

The program seeks to address Gap 4: Veteran and Military Service Member Supports and the following strategies in the Statewide Behavioral Health Strategic Plan:

- **1.1.1**: Address the service needs of high risk individuals and families by promoting community collaboration approaches
- **1.2.1**: Identify and address duplication of effort across state agencies (and community-level organizations)
- **1.2.2**: Implement improved program and service coordination and integrated program and services strategies to reduce duplication of effort and maximize resources
- **2.1.1**: Identify and coordinate (the provision of) best, promising, and evidence-based behavioral health practices
- **2.3.1**: Identify strategies to improve and strengthen access to behavioral health program and services to engage and serve individuals in remote areas
- **2.3.2**: Implement strategies to improve service access and continuity of care
- **2.5.2**: Develop and implement programs and services to address identified gaps for diverse and special populations
- **5.1.1**: Identify existing common measures or similar metrics to evaluate the effectiveness of programs and services across targeted agencies (and community-level organizations)
## List of Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY</td>
<td>Fiscal year</td>
</tr>
<tr>
<td>H.B.</td>
<td>House Bill</td>
</tr>
<tr>
<td>HHSC</td>
<td>Health and Human Services Commission</td>
</tr>
<tr>
<td>LBB</td>
<td>Legislative Budget Board</td>
</tr>
<tr>
<td>LBHA</td>
<td>Local behavioral health authority</td>
</tr>
<tr>
<td>LMHA</td>
<td>Local mental health authority</td>
</tr>
<tr>
<td>NCA</td>
<td>Needs and Capacity Assessment</td>
</tr>
<tr>
<td>RFA</td>
<td>Request for Applications</td>
</tr>
<tr>
<td>S.B.</td>
<td>Senate Bill</td>
</tr>
<tr>
<td>SBHCC</td>
<td>Statewide Behavioral Health Coordinating Council</td>
</tr>
</tbody>
</table>
### Appendix A. Select Behavioral Health Collaborative Matching Grant Programs Matrix

<table>
<thead>
<tr>
<th>Authorizing legislation</th>
<th>H.B. 13-85R: Community Mental Health Grant Program</th>
<th>S.B. 292-85R: Mental Health Grant Program for Justice-Involved Individuals</th>
<th>S.B. 55-84R: Texas Veterans + Family Alliance Grant Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount of funding appropriated for fiscal years 2018-19</td>
<td>HHSC Rider 207 provides $10 million in fiscal year 2018 and $20 million in fiscal year 2019.</td>
<td>HHSC Rider 206 provides $12.5 million in fiscal year 2018 and $25 million in fiscal year 2019.</td>
<td>HHSC Rider 128 provides $20 million in fiscal year 2018. If funding remains in fiscal year 2019, it can be used for the same purpose with written notification to the LBB.</td>
</tr>
<tr>
<td>Purpose of grant program</td>
<td>• Support community programs providing mental health care services and treatment for individuals with a mental illness, and • Coordinate mental health care services for individuals with a mental illness with other transition support services</td>
<td>• Reduce recidivism by, the frequency of arrests of, and incarceration of persons with mental illness, and • Reduce the total waiting time for forensic commitment of persons with mental illness to a state hospital</td>
<td>• To improve the quality of life of Texas veterans and their family members by supporting local communities across the state to: • Expand the availability of, • Increase access to, and • Enhance the delivery of mental health treatment and services</td>
</tr>
<tr>
<td>H.B. 13-85R: Community Mental Health Grant Program</td>
<td>S.B. 292-85R: Mental Health Grant Program for Justice-Involved Individuals</td>
<td>S.B. 55-84R: Texas Veterans + Family Alliance Grant Program</td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>-------------------------------------------------</td>
<td>-------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Population(s) to be served</strong></td>
<td>Texans with a mental illness and unmet behavioral health needs encountering the criminal justice system</td>
<td>Veterans and their family members with unmet mental health needs</td>
<td></td>
</tr>
<tr>
<td><strong>Eligible applicants</strong></td>
<td>Non-profit organizations or governmental entities. Legislation requires HHSC to reserve 50 percent of appropriated funds for counties with populations not greater than 250,000.</td>
<td>County-based community collaboratives consisting of at least a county, a local mental health authority (LMHA) operating in the county, and each hospital district, if any, in the county. Restricts eligibility in fiscal year 2018 to counties with populations of 250,000 or more. Community collaboratives as represented by a lead applicant that is a non-profit organization or governmental entity.</td>
<td></td>
</tr>
<tr>
<td><strong>Matching requirements (if applicable)</strong></td>
<td>● 50 percent of the grant amount for counties with populations less than 250,000; or ● 100 percent of the grant amount for counties with populations of at least 250,000. Match may be cash or in-kind; no state or federal funding may count as match.</td>
<td>● 50 percent of the grant amount for counties with populations less than 250,000; or ● 100 percent of the grant amount for counties with populations of at least 250,000. Match may be cash or in-kind; no state funding may count as match. 100 percent of the grant amount. Match may be cash or in-kind; no state or federal funding or resources may count as match.</td>
<td></td>
</tr>
<tr>
<td><strong>Grant activities to be funded</strong></td>
<td>Must be used for the sole purpose of supporting</td>
<td>Funding may be used for services such as mental health ● Evidence-based therapies and</td>
<td></td>
</tr>
<tr>
<td>H.B. 13-85R: Community Mental Health Grant Program</td>
<td>S.B. 292-85R: Mental Health Grant Program for Justice-Involved Individuals</td>
<td>S.B. 55-84R: Texas Veterans + Family Alliance Grant Program</td>
<td></td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>-----------------------------------------------------------------</td>
<td>--------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Community programs that provide mental health care services and treatment for individuals with a mental illness and that coordinate mental health care services for individuals with a mental illness with other transition support services.</td>
<td>Jail diversion, outpatient competency restoration, assertive community treatment, interdisciplinary rapid response teams, and local community hospital, crisis, respite, or residential beds.</td>
<td>Treatments</td>
<td></td>
</tr>
</tbody>
</table>

- Individual, groups, and family/couples peer support services
- Individual and family counseling
- Suicide prevention initiatives
- Supportive services such as child care, emergency financial assistance, transportation, and housing assistance
- Navigation services such as case management and referral services
- Needs assessments of veterans and their families for communities which have mental health as a focus
- Administrative support for oversight and operational activities of the Community Collaborative as related to the grant project
- Support for community leadership teams that have a focus on the mental health needs of veterans and their...
<table>
<thead>
<tr>
<th>H.B. 13-85R: Community Mental Health Grant Program</th>
<th>S.B. 292-85R: Mental Health Grant Program for Justice-Involved Individuals</th>
<th>S.B. 55-84R: Texas Veterans + Family Alliance Grant Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Other community collaborative planning or convening activities resulting in identifying gaps in mental health services for veterans and their families and a plan to address those gaps collaboratively</td>
<td></td>
<td></td>
</tr>
<tr>
<td>● Other costs related to developing and supporting sustainable partnerships, collaborative relationships, and coordinated service delivery systems that continue to operate after the life of the grant.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Implementation**

HHSC will implement the legislation using three competitive procurements.

- The first competitive procurement will be issued via a Needs and Capacity Assessment (NCA) sent to LMHAs and local behavioral health authorities (LBHAs).
  - 50 percent of HHSC will issue a competitive NCA to organizations including LMHAs, LBHAs, and county governments.
- The agency anticipates posting the NCA and selecting awardees in the first quarter of fiscal year 2018.
- The grant period start date

HHSC will issue a competitive RFA. Application parts include Administrative Information, Narrative Proposal (statement of work), Expenditure and Match Proposal (budget), and any Applicable Exhibits.

- HHSC expects to post the RFA and receive
<table>
<thead>
<tr>
<th>H.B. 13-85R: Community Mental Health Grant Program</th>
<th>S.B. 292-85R: Mental Health Grant Program for Justice-Involved Individuals</th>
<th>S.B. 55-84R: Texas Veterans + Family Alliance Grant Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appropriated funding will be awarded through the NCA with one-half of these set aside for counties with populations under 250,000.</td>
<td>Is expected in the second quarter of fiscal year 2018.</td>
<td></td>
</tr>
<tr>
<td>- The NCA allows HHSC to leverage existing relationships with LMHAs and LBHAs to award grants and begin service delivery more quickly than traditional solicitation types.</td>
<td>- If any funds remain, HHSC will prepare and issue a competitive RFA.</td>
<td></td>
</tr>
<tr>
<td>- The second competitive procurement will be a broader opportunity for nonprofits and governmental entities through a Request for Application (RFA).</td>
<td>- Collaboratives will be selected based on proposed alignment with SB 292 and the Statewide Behavioral Health Strategic Plan.</td>
<td></td>
</tr>
<tr>
<td>- HHSC will award the remaining 50 percent of appropriated funds through the RFA.</td>
<td>- If funding remains after grants are awarded in fiscal year 2018, HHSC will initiate a subsequent competitive procurement in third quarter of fiscal year 2018 to award remaining funds in 2019.</td>
<td></td>
</tr>
<tr>
<td>- One-half of these funds will be set aside for counties with populations under 250,000.</td>
<td>- If any funds remain, HHSC will prepare and issue a competitive RFA.</td>
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<td>- Collaboratives will be selected based on proposed alignment with SB 292 and the Statewide Behavioral Health Strategic Plan.</td>
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<td>- If funding remains after grants are awarded in fiscal year 2018, HHSC will initiate a subsequent competitive procurement in third quarter of fiscal year 2018 to award remaining funds in 2019.</td>
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- If any funds remain, HHSC will prepare and issue a competitive RFA.
- Collaboratives will be selected based on proposed alignment with SB 292 and the Statewide Behavioral Health Strategic Plan.
- If funding remains after grants are awarded in fiscal year 2018, HHSC will initiate a subsequent competitive procurement in third quarter of fiscal year 2018 to award remaining funds in 2019.
H.B. 13-85R: Community Mental Health Grant Program

- HHSC anticipates posting the RFA and the NCA at the same time in the first quarter of fiscal year 2018.
  - The final competitive procurement will award any remaining funds without restriction to county population.

S.B. 292-85R: Mental Health Grant Program for Justice-Involved Individuals

The program will require applicants to address one or more gaps to ensure coordination of contract-funded services to eliminate duplication of efforts.

The program will address the following strategies:

1. **Increase statewide service coordination for special populations**
2. **Reduce duplication of effort and maximize resources through program and service coordination among state agencies**
3. **Expand the use of**

Gap 1: Access to Appropriate Behavioral Health Services; Gap 3: Coordination across State Agencies; Gap 5: Continuity of Care for Individuals Exiting County and Local Jails; Gap 6: Access to Timeline Treatment Services; Gap 7: Implementation of Evidence-based Practices; and Gap 14: Services for Special Populations will be addressed through the following strategies:

1. **Address the service needs of high risk individuals and families by promoting community collaborative approaches.**

S.B. 55-84R: Texas Veterans + Family Alliance Grant Program

Gap 4: Veteran and Military Service Member Supports will be addressed through following strategies:

1. **Address the service needs of high risk individuals and families by promoting community collaboration approaches.**
2. **Identify and address duplication of effort across state agencies (and community-level organizations)**
3. **Implement improved program and**
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<th>H.B. 13-85R: Community Mental Health Grant Program</th>
<th>S.B. 292-85R: Mental Health Grant Program for Justice-Involved Individuals</th>
<th>S.B. 55-84R: Texas Veterans + Family Alliance Grant Program</th>
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<td>best, promising, and evidence-based behavioral health practices across service agencies</td>
<td>• <strong>1.1.2:</strong> Increase diversion of people with behavioral health needs from the criminal and juvenile justice systems through the coordinated use of risk and mental health assessments.</td>
<td>service coordination and integrated program and services strategies to reduce duplication of effort and maximize resources</td>
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<td>• <strong>2.2:</strong> Develop clinical research and innovation in behavioral health by fiscal year 2021</td>
<td>• <strong>1.1.3:</strong> Ensure service eligibility and integration into the community for those transitioning from governmental custody, foster care, and hospital settings.</td>
<td>• <strong>2.1.1:</strong> Identify and coordinate (the provision of) best, promising, and evidence-based behavioral health practices</td>
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<td>• <strong>2.3:</strong> Ensure prompt access to coordinated, quality behavioral health services, including substance use services</td>
<td>• <strong>1.2.2:</strong> Implement improved program and service coordination and integrated program and service strategies to reduce duplication of effort and maximize resources.</td>
<td>• <strong>2.3.1:</strong> Identify strategies to improve and strengthen access to behavioral health program and services to engage and serve individuals in remove areas</td>
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<td>• <strong>2.4:</strong> Strengthen the behavioral health workforce by fiscal year 2021</td>
<td>• <strong>2.3.2:</strong> Implement strategies to improve service access and continuity of care.</td>
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<td>• <strong>2.5:</strong> Address current behavioral health service gaps and needs across program and service agencies</td>
<td>• <strong>2.4:</strong> Strengthen the behavioral health workforce by fiscal year 2021.</td>
<td>• <strong>2.5.2:</strong> Develop and implement programs and services to address identified gaps for diverse and special populations</td>
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<td>• <strong>2.6:</strong> Address the most urgent challenges and needs related to both state-funded and state-operated inpatient psychiatric facilities across Texas by 2021.</td>
<td>• <strong>3.1:</strong> Expand the use of best, promising, and evidence-based behavioral health practices.</td>
<td>• <strong>5.1.1:</strong> Identify existing common measures or strategies</td>
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<td>• <strong>3.1:</strong> Expand the use of best, promising, and evidence-based behavioral health practices across service agencies</td>
<td>• <strong>2.5:</strong> Address the most urgent challenges and needs related to both state-funded and state-operated inpatient psychiatric facilities across Texas by 2021.</td>
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<td>evidence-based practices for prevention and early intervention by fiscal year 2019</td>
<td>● <strong>2.5.2:</strong> Develop and implement programs and services to address identified gaps to include integrated approaches for special populations</td>
<td>similar metrics to evaluate the effectiveness of programs and services across targeted agencies (and community-level organizations)</td>
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Gap 8: Use of Peer Services and Gap 10: Consumer Transportation and Access to Treatment will be addressed through the following strategies:

- **2.3.1:** Identify strategies to improve and strengthen access to behavioral health programs and services to engage and serve individuals in remote areas, such as transportation needs.
- **2.5.4:** Develop a comprehensive behavioral health approach to meet the complex needs of the highest users of high cost alternatives.
Appendix B. Definitions

**Governmental Entity** - Government Code, Chapter 2252 defines a governmental entity to mean the state; a municipality, county, public school district, or special-purpose district or authority; a district, county, or justice of the peace court; a board, commission, department, office, or other agency in the executive branch of state government, including an institution of higher education as defined by Section 61.003, Education Code; the legislature or a legislative agency; or the Supreme Court of Texas, the Texas Court of Criminal Appeals, a court of appeals, or the State Bar of Texas or another judicial agency having statewide jurisdiction.

**Local Government** - Government Code, Chapter 2256 defines local government to mean a municipality, a county, a school district, a district or authority created under Section 52(b)(1) or (2), Article III, or Section 59, Article XVI, Texas Constitution, a fresh water supply district, a hospital district, and any political subdivision, authority, public corporation, body politic, or instrumentality of the State of Texas, and any nonprofit corporation acting on behalf of any of those entities.

**Local Mental Health Authority** - Health and Safety Code, Section 533.035 allows the HHSC executive commissioner to delegate to a local authority the authority and responsibility related to planning, policy development, coordination, including coordination with criminal justice entities, resource allocation, and resource development for and oversight of mental health services in the most appropriate and available setting to meet individual needs in that service area. A single entity may be designed as both the local mental health authority and the local intellectual and developmental disability authority under Chapter 533A for a service area.

**Local Behavioral Health Authority** - Health and Safety Code, Section 553.0356 allows HHSC to designate a local behavioral health authority in a local service area to provide mental health and chemical dependency services in that area and delegate authority and responsibility for planning, policy development, coordination, resource allocation, and resource development for and oversight of mental health and chemical dependency services in that service area.

**Nonprofit Corporation** - The Texas Comptroller defines a nonprofit corporation as a corporation no part of the income of which is distributable to members, directors, or officers. It is created by filing a certificate of formation with the secretary of state and may be created for any lawful purpose, which purpose must be stated in its certificate of formation.
**For-profit Entity** - For contracting purposes, entities not meeting the classifications of governmental entity, local mental health authority, local behavioral health authority, or non-profit, are classified as for-profit entities. For profit entities are typified by the owners, shareholders, or members receiving a share of the entity’s income.