

Background

The Texas Health and Human Services Commission (HHSC) seeks to implement the Community Mental Health Grant Program, as directed by House Bill (H.B.) 13, 85th Legislature, Regular Session, 2017. The purpose of the grant program is to provide matching grants to support community mental health programs providing services and treatment to individuals experiencing mental illness.

Grant awards are to be used for:

- Supporting community programs that provide mental health care services and treatment to individuals with mental illness; and
- Coordinating mental health care services for individuals with mental illness with other transition support services.

HHSC is implementing this grant program through two procurements: a competitive Needs and Capacity Assessment (NCA) distributed to LMHAs and LBHAs, and a competitive Request for Applications (RFA) to be distributed more broadly to solicit applications from both non-profit organizations and governmental entities. If an applicant is not awarded a grant or does not receive the full amount of requested funding through the initial solicitation process, the application will be reviewed and considered for full implementation with any remaining funds after grants are awarded through the initial solicitation process.

HHSC anticipates making 50 percent (\$5 million) of funds appropriated for the grant program available through the NCA funding opportunity and the remaining 50 percent of funds available through the RFA. By conducting two procurements and utilizing the NCA solicitation, HHSC is able to leverage existing relationships with LMHAs and LBHAs to award a portion of grants more quickly and begin service delivery in an expedited manner.

Per legislative requirements, one-half of the total funds awarded are to be set aside for awards to counties with populations under 250,000. This requirement will be applicable for both NCA and RFA solicitations.



FAQs

The following FAQs were developed from questions asked by potential applicants during an informational applicant webinar held for the NCA solicitation on October 12, 2017.

Match Requirements

1. If you propose to serve multiple counties in your area as part of your proposed project, how will your match be determined?

Match requirements will be based on the proposed project and counties identified by the applicant as being within the service area of the proposed project. Of those counties, match expectation will be based on the county with the largest population. Match requirements are as follows:

- Equal to 50 percent of the grant amount if grant program is located in a county with a population of less than 250,000;
- Equal to 100 percent of the grant amount if grant program is located in a county with a population of at least 250,000; or
- Equal to the percentage of the grant amount for the county with largest population, if the grant program is located in multiple counties.
- 2. If the area is less than 250,000 in population and the request is for \$150,000, match would be \$50,000 and the allocation from the state would be \$100,000. Is that correct?

Yes. If the total cost/budget to operate the Community Mental Health Grant Program is \$150,000, the HHSC contribution will be calculated at \$100,000, and the contractor contribution will be calculated at 50,000.

3. Would the use of a physical location (building lease/cost) be considered an in-kind match?



Yes, as long as the space is used to support operation of the proposed Community Mental Health Grant Program, and the funds used to pay for the space (i.e., rent or purchase) are not state or federal funds.

4. What are the general HHSC conditions/requirements for match?

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 program.

For this program, matching funds may be:

- Cash Match: Expenditure of non-state and non-federal funding on costs allowable under the Community Mental Health Grant Program.
 Cash match cannot be funding sitting in an account. It must be expended in order to be counted as cash match.
- In-Kind Match: Use of the dollar value or cash-equivalent of goods, commodities, or services contributed by a non-state and nonfederal third party for the purpose of supporting the Community Mental Health Grant Program contract. The goods, commodities, or services contributed must be used in order to be counted as in-kind match. Examples include, but are not limited to:
 - Patient Assistance Program (PAP) medication;
 - the cash equivalent of donated space; or
 - volunteer time.



5. Can excess in-kind match from inpatient bed day contracting be used for this project? For example, can the excess difference between a discounted bed-day rate and the full bed-day rate used in another NCA be used as in-kind match for this NCA?

The difference between a discounted bed-day rate and the full bed-day rate can be used as in-kind match as long as the client is enrolled in the Community Mental Health Grant Program, and the discounted rate for inpatient services is paid for using Community Mental Health Grant Program funding. If the client is enrolled in another program, and/or if the discounted rate for inpatient services is paid for using non-Community Mental Health Grant Program funding, then the difference between the full and discounted rate cannot be used as in-kind match for the Community Mental Health Grant Program.

6. Can private insurance or other earned revenue for a program be used as match?

Third-party revenue that is not considered program income (e.g., Medicaid revenue from Targeted Case Management and/or Rehabilitative services) can be used as match. Third-party revenue that is considered program income under another contract cannot be used as match. Program income is revenue earned/income generated as a direct result of activities from the Community Mental Health Grant Program contract or any other contract. Program income must be accounted for in a unique revenue account associated with the contract under which it is earned, and spent on contract activities prior to billing the contract holder (i.e., reported as a deduction from gross contract expenditures).

7. Can Mental Health Deputies paid for by the county be used as in-kind match for a project?

Yes, mental health deputies paid for by the county can be used as match as long as the mental health deputies are targeted to support



the Community Mental Health Grant Program. If only a portion of the mental health deputies' time is targeted to support the Community Mental Health Grant Program, then only the portion of time/expense allocated to the Community Mental Health Grant Program can be used as match.

8. For Senate Bill 292 and House Bill 13 we are proposing different programs that will interact with one another. It is okay to utilize match dollars for HB 13 towards SB 292, so long as they are for different expenses? For example, we want to in-kind the development of a program by using the annual lease towards SB 292 and the hiring of providers for a Community Mental Health Program project. One agency is funding those two items, but they are for the same project.

Operating two programs that interact is certainly acceptable. Please remember, though, that match is an expenditure of funding (i.e., cash) or use of a resource (i.e., in-kind) contributed to support the operation of a specific program. To the extent possible, match should be identified to a specific program and claimed only for the program that benefits from the match. If more than one program benefits, match should be allocated to the benefiting programs based upon an acceptable allocation methodology, the same as other allowable costs. The same match contribution cannot be used by different programs at the same time. For example, if I donate \$100 in total to support the operation of the Community Mental Health Program project and SB 292 programs, you can split the \$100 and use \$50 toward Community Mental Health Program project and \$50 toward SB 292, but you cannot use \$100 as match for both programs.

9. Can local government funding be used for match? Since language says no state or federal funds may be used.

Yes, local government funds (e.g., city, county, or other LMHA sponsoring entity funding) may be used as match as long is the



contribution is targeted to support the Community Mental Health Grant Program.

10. If a multi-year foundation grant exists, can additional foundation funds to expand peer services to address behavioral health needs be used as match?

Yes, as long as the expenditure of other grant funds aligns with scope of work or other programmatic requirements of the Community Mental Health Grant Program.

11. There may be an LMHA that proposes a project in one small county within their local service area. Is HHSC going to require the LMHA to comply with local match requirements for the largest county in their service area even if the project will not operate in the largest county?

No, match requirement is associated with the population of the county where the Community Mental Health Grant Program is proposed.

12. Will school district funding be allowed to be used for a match?

Yes, school district funding may be used as match to extent that it is contributed to support the operation of the Community Mental Health Grant Program project, and neither state nor federal funding is the source of the contribution. The burden of proof that the funding source is neither federal nor state lies with the applicant.

13. Can projected student time in a project, including any professor time with students from a collaborating State University system be used as "Match"?

Yes, volunteer time supporting the Community Mental Health Grant Program project can be claimed as in-kind match. A time sheet should be used to adequately document the volunteer's time contributed to grant-related activities, and the valuation of the contributed time should be consistent with the level of service provided. For example, if you're using a Ph.D. candidate level student volunteer to distribute



brochures at a community event, then the valuation of that student's time should be consistent with the actual work distributing brochures (i.e., the rate of pay should be equivalent to the level work performed).

14. Can a mobile EMS response clinic with cost identified serving 44% of individuals with mental health needs, and 8 % requiring immediate crisis response support be used as County Match?

If the mobile clinic benefits multiple programs, including the Community Mental Health Grant Program, it is acceptable to use a portion as match as long as neither state nor federal funding is the source of the contribution. To the extent possible, match should be identified to a specific program and claimed only for the program that benefits from the match. If more than one program benefits, match should be allocated to the benefiting programs based upon an acceptable allocation methodology. Generally, match is to be treated the same as other allowable costs.

15. Can the donation of land lots be applied to match with the request for grant funds to be used for construction?

Yes, land donated for use on the Community Mental Health Grant Program project can be claimed as in-kind match. The value claimed as in-kind match should be based on an independent assessment of the fair market value of the land donated. A third-party appraisal or published prices are acceptable forms of documentation.

16. Can reserve funds developed over the years (from earned revenue) be used as match?

Yes, unrestricted non-federal and non-state sourced reserve funds can be used to fund expenses and then claimed as match for the Community Mental Health Grant Program.



Budget

1. There is a "Budget" listed in items A-I, and a "Budget- Form P" listed as required documentation. How are these two items different?

Sections A-I in Attachment II are part of the application, and Budget Form P, Attachment V, will be attached to the proposal in response to Section I.

2. Should the budget be formulated for a five month period, given the timing of the grant award (2nd quarter) and the start of the projects (3rd quarter)?

Plan for the initial contract period to begin upon contract execution and end August 31, 2019. Prepare and submit unique budgets for each fiscal year. The fiscal year 2018 budget should cover April 2018 through August 31, 2018. The fiscal year 2019 budget should cover September 1, 2018 through August 31, 2019.

3. Should a 12 month budget for fiscal year 2019 also be submitted with the application submitted in October 2017?

Prepare and submit unique budgets for each fiscal year. The fiscal year 2018 budget should cover April 2018 through August 31, 2018. The fiscal year 2019 budget should cover September 1, 2018 through August 31, 2019.

Funding

1. Can funds be used for construction?

Under similar programs, HHSC has allowed use of funds on real property construction (i.e., new construction, and/or repair/renovation of existing structures). Proposals can include costs related to construction and will be evaluated on a case-by-case basis.



2. How will the 50 percent of the total awards dedicated to counties smaller than 250,000 be calculated? Specifically how will 50 percent be taken from each of the two categories, LMHA and Nonprofits/Governmental Entities?

There is a total of \$10 million for fiscal year 18 to be awarded. Fifty percent of the total grant funding to be awarded will be reserved for programs located in counties with a population not greater than 250,000. For each solicitation, both the NCA and the RFA, this requirement will apply.

3. Can an LMHA apply for funding through the NCA and then through the RFA for different projects?

If at the end of the NCA and RFA period there are funds available, HHSC will consider unfunded projects. HHSC may approach funded projects for possible expansion if match allows.

- 4. Can the same funding request be submitted under the NCA and the RFA?
 - No, LMHAs and LBHAs are asked to submit an application for this opportunity through the NCA process.
- 19. What is methodology for distributing the funds to LMHA? Will there be deference to urban or rural status of the LMHA?

No, allocations are based on proposals and funding requirements. Funds are limited and there is no indication of how many proposals may be submitted. Awards will be made based on the funding available and the degree to which applications meet criteria described in the NCA.

6. Will pre-award costs be allowed?

Pre-award costs may be approved by HHSC on a case-by-case basis. Pre-award costs must itemized and justified in the fiscal year 2018 budget.



7. Is there a presumption that a project advanced in fiscal year 2018 will be funded, again, in fiscal year 2019 if the match continues to be available?

Yes. Plan for the initial contract period to begin upon contract execution and end August 31, 2019.

8. When do you anticipate awarding funds?

Anticipated awards are expected in the 3rd quarter of fiscal year 2018.

9. Is there a range for the funding?

There is no range for funding for a single project or entity. However, funding may not exceed what is referenced in the legislation.

10. Is there an expectation that these funds would only be used for those for whom other payer sources are not available?

No. Program income may be earned as a direct result of activities from the Community Mental Health Grant Program contract. Program income resulting from the Community Mental Health Grant Program contract must be accounted for in a unique revenue account associated with the contract, and spent on contract activities prior to billing HHSC (i.e., reported as a deduction from gross contract expenditures).

Program Services

1. Is substance abuse outpatient treatment for released inmates with cooccurring mental illness an appropriate proposal?

Yes. Individuals with a co-occurring psychiatric and substance use disorder are considered an appropriate population of focus for a proposed project. Applicants should ensure proposed projects align to an identified service gap in the *Statewide Behavioral Health Strategic*



Plan: https://hhs.texas.gov/sites/default/files/050216-statewide-behavioral-health-strategic-plan.pdf.

2. In the NCA Proposal, Section D, F, do you list the number of mental health providers in all the counties proposed serving? Do you only list non-LMHA providers?

List the providers that are going to work specifically within the proposed program. For example, if a community is proposing a housing program, the project plan would propose the number of staff/full-time equivalent positions associated with the program.

3. Does this grant cover all ages that have a mental health diagnosis/mental health illness?

Yes, there is no age range established. Per legislation, proposed projects should provide services and treatment to individuals experiencing mental illness.

4. Do all proposals have to have an evidenced based practice (EBP)?

EBP inclusion is suggested to align with identified interventions, but it is not a requirement to establish an EBP in your proposal.

5. Is the choice on page 1 of the NCA of a "new", "continuation," or "expansion" a reference to the status of Community Mental Health Grant Program funding, or a reference to the status of the current program in operation with funding other than the proposed project?

It is a reference to a current program of your organization. For example, if you are proposing to enhance your existing mobile crisis outreach team (MCOT), the project would be an expansion. If you develop a specialized MCOT, the project would be new.

6. Are projects that include transportation services as a mechanism for closing gaps in urban areas eligible for funding?



Yes, a project is eligible if the proposal aligns to the *Statewide Behavioral Health Strategic Plan* for fiscal years 2017-21 and the project directs services to meet the need of persons with mental illness in the community.

7. What definition of "continuity of care" is used for grant purposes?

For this program, the definition of "continuity of care" includes activities designed to ensure uninterrupted services are provided to a person, especially during a transition between service types or providers (e.g., inpatient services or LMHA or LBHA services and county jail, nursing home, Texas Juvenile Justice Department or other settings) and that provide assistance to the person and the person's legally authorized representative (LAR) in identifying, accessing, and coordinating LMHA or LBHA services and other appropriate services and supports in the community that are needed by the person, including:

- assisting with admissions and discharges;
- facilitating access to appropriate services and supports in the community, including identifying and connecting the individual with community resources, and coordinating the provision of services;
- participating in the individual's treatment/recovery plan development and reviews;
- promoting implementation of the individual's treatment/recovery plan or person-centered care plan;
- coordinating between the individual and the individual's family, as appropriate, as well as with available community resources; and
- while the person is receiving inpatient services:
 - participating in staffing and reviews to the extent possible to monitor the person's treatment progress; and



 linking and coordinating community supports for transition of care with all identified stockholders.

Submission Process

1. What is the submission deadline for governmental entities/nonprofits?

The closing date for the proposed governmental entities/nonprofits solicitation type has not been established. A closing date for this procurement will be determined once assigned a solicitation type (RFA/RFP).

2. Can an LMHA submit more than one grant proposal?

Yes, more than one proposal can be submitted. Each proposal must represent a distinct project, with distinct gaps and identified needs. A separate submission packet is required for each proposal. Letters of support may be copied for each packet.

3. Just for clarification, the October 30, 2017 deadline is NOT for nonprofits?

On October 25, 2017 the Community Mental Health Grant Program NCA submission deadline was adjusted. The Community Mental Health Grant Program NCA submission date has been adjusted as follows:

- All LMHA/LBHAs will be given a two-week (14 calendar days)
 extension. The new submission date is November 13, 2017 at 5:00
 p.m. CST.
- LMHA/LBHAs in federally-declared hurricane impacted areas (Attachment III) will be granted one month (30 calendar days) extension. The new submission date for these providers is November 29, 2017 at 5:00 p.m. CST.

The second solicitation RFP/RFA for non-profits and government entities has not been posted and does not have a set deadline.

Letters of Support



1. When is the letter of support for the NCA due?

Letters of support from community stakeholders are due at the time the NCA packet is submitted. On October 25, 2017 the Community Mental Health Grant Program NCA submission deadline was adjusted (see question 34). You may send applications in ahead of time.

2. May an LMHA support more than one nonprofit RFP/RFA application from their area?

Yes, LMHAs' and LBHAs' can make determination as proposals are submitted for letters of support.

3. Will LMHA/LBHA only provide one letter of support for government entity or nonprofit?

The number of letters provided is up to your discretion. If an entity proposing a project in a service area that crosses two identified LMHA/LBHA service delivery areas, the entity must receive a letter from both Authorities. Letters of support demonstrate the Authority's acknowledgement of project alignment and support within the communities existing service delivery structure serving persons with mental illness.

4. If there are multiple applicants to the second solicitation from an LMHA/LBHAs' geographic area, does the Authority have to provide a letter of support to all applicants?

The goal of an LMHA/LBHA providing a letter of support is to support collaboration and reduce duplication in services. Requests for letters of support will require conversation as to what gap (s) are identified and the project(s) alignment with the existing service delivery structure in a local service area. Giving a letter of support is up to the discretion of the LMHA/LBHA.

5. Can multiple strategic priorities be met, bringing together with the collective strengths of multiple parties, in a single grant?



You can have multiple strategic priorities and align them to your project.

Other

1. Will the webinar be archived and available on the HHSC website after the meeting?

The PowerPoint presentation and Frequently Asked Questions (FAQ) will be sent out via programs' distribution lists (Webinar registration list and Texas Council for Community Centers).

2. The legislation does not seem to specify the 50/50 split between and other entities. Can you please clarify?

Correct, the bill does not implicitly explain a fifty/fifty split. HHSC is implementing this grant program through two procurements: a competitive NCA distributed to LMHAs and LBHAs, and a competitive RFA to be distributed more broadly to solicit applications from both non-profit organizations and governmental entities. By conducting two procurements and utilizing the NCA solicitation, HHSC is able to leverage existing relationships with LMHAs and LBHAs to award a portion of grants more quickly and begin service delivery in an expedited manner.

3. When the Needs Capacity narrative is completed, are the headings of the questions within the narrative to be included?

Applicants can click on the text boxes in the word document provided, so you can fill the answer in under the headings. Otherwise, use another document referencing the headings exactly where you are answering questions in the proposal.