

ANDREW M. CUOMO Governor ANN MARIE T. SULLIVAN, M.D. Commissioner MOIRA TASHJIAN, MPA Acting Executive Deputy Commissioner

Date: April 29, 2021

To: OMH Licensed Clinic Treatment Providers

From: Robert Myers Senior Deputy Commissioner

Re: Eligibility for SAMHSA FY 2021 Community Mental Health Centers (CMHC) Funding Opportunity Announcement (FOA)

OMH has received queries from provider agencies about the SAMHSA FY 2021 Community Mental Health Centers (CMHC) Funding Opportunity Announcement (FOA) SM-21-014. Since New York does not license or designate CMHCs, as such provider type is defined in federal regulations, we have been advised by SAMHSA that provider agencies may establish grant funding eligibility by providing a letter from OMH, the state mental health authority, certifying that the provider meets the criteria specific in section 1913(c) of the Public Health Services Act.

These criteria are:

(1) With respect to mental health services, the centers provide services as follows:

(A) Services principally to individuals residing in a defined geographic area (hereafter in this subsection referred to as a "service area").

(B) Outpatient services, including specialized outpatient services for children, the elderly, individuals with a serious mental illness, and residents of the service areas of the centers who have been discharged from inpatient treatment at a mental health facility.

(C) 24-hour-a-day emergency care services.

(D) Day treatment or other partial hospitalization services, or psychosocial rehabilitation services.

(E) Screening for patients being considered for admission to State mental health facilities to determine the appropriateness of such admission.

(2) The mental health services of the centers are provided, within the limits of the capacities of the centers, to any individual residing or employed in the service area of the center regardless of ability to pay for such services.

(3) The mental health services of the centers are available and accessible promptly, as appropriate and in a manner which preserves human dignity and assures continuity and highquality care.

Additionally, in order to meet the requirements of the FOA, provider agencies must have at least two years of experience providing CMHC services.

To be able to provide letters of support, OMH will confirm eligibility per below.

Criteria 1-A, 1-C and 3, OMH will review its records to confirm whether the provider agency possesses a current license in good standing to operate one or more Part 599 Clinic Treatment Programs.

For Criterion 1-B, OMH will review its records to confirm whether provider agencies operate licensed Clinic Treatment Programs serving children and/or adolescents and adults.

For Criterion 1-D: Provider agencies must attest that they provide one of the required service types.

For day treatment or other partial hospitalization services, providers must attest that within their agency they operate OMH licensed continuing day treatment programs, day treatment programs serving children or adolescents, partial hospitalization programs or OMH approved waivers to provide intensive outpatient services in a clinic treatment program.

For psychosocial rehabilitation services, provider agencies must attest that within their agency they actively provide psychosocial rehabilitation services. This may include PROS, Adult BH HCBS, CFTSS, Children's HCBS, CCBHCs actively providing rehabilitation services, or stateaid supported rehabilitation services or psychosocial rehabilitation services provided as part of a licensed residential program. If an agency believes they meet this sub-criterion by providing psychosocial rehabilitation services not listed above, they must state how they meet the criterion.

Criterion 1-E is not an expectation for community providers in New York, and OMH's letter will state this.

Provider agencies must attest that they meet criterion 2.

Provider agencies must attest that they have provided all services included in the criteria for at least 2 years.

Please submit a letter to your Field Office requesting a letter certifying that the 1913 (C) criteria for CMHCs are met including relevant information to support your request. OMH will review and provide letters accordingly. We will also provide feedback if provider agencies are not found to meet these criteria and provide opportunity for review and resubmission.

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