

**Questions related to Ohio DEA DATA 2000 Live Trainings – Request for Applicants
Number MHA-18-MEDDIR-DEA DATA 2000 WAIVER-19**

Q: General confusion was offered by several potential applicants about how the three grants (MHA-18-MEDDIR-DEA DATA 2000 WAIVER-19; MHA-18-MEDDIR-DATA2000SmallGroupTrn-20; MHA-18-MEDDIR-WorkforceDevelopment-21) related to one another and the discrepancy in the size of the awards. We will discuss answers to these queries below.

A: The purpose of the Workforce Development grant (MHA-18-MEDDIR-WorkforceDevelopment-21) is to partner with an organization to manage all 21st Century CURES workforce development efforts. This grant concerns itself with project management; the manager will lead grant activities like MHA-18-MEDDIR-DEA DATA 2000 WAIVER-19 and MHA-18-MEDDIR-DATA2000SmallGroupTrn-20, but there will be more RFAs coming out that the workforce development manager will lead. Please see the grant activities for more information on the duties of the workforce development manager.

Expansion of medication assisted treatment is considered of paramount importance to the 21st Century CURES grant. To assist with expansion efforts OhioMHAS has developed a series of workforce development strategies. The biggest strategy is to have 42 live training events (roughly 4-5 per month through RFA MHA-18-MEDDIR-DEA DATA 2000 WAIVER-19). These 42 live trainings are 1.5 days long and will serve 25-30 physicians per training event. For physicians that cannot make the training events, there should be online courses available for up to 2,000 physicians that satisfy the 8-hour requirements to obtain the DEA Data 2000 waiver. No funds may be used to develop these online courses; the awardee should already have them in place.

A secondary grant (MHA-18-MEDDIR-DATA2000SmallGroupTrn-20) will be offered to partner with a DEA DATA waived physician to conduct five trainings of 10-15 physicians per training event. Communities chosen for these trainings will be rural and less likely to have a large physician turnout.

Q: And are these all to be different institutions, the same institution, any combination thereof?

A: Assuming that the applicant has the dedicated workforce to manage all three grants, then one applicant could apply for all RFA opportunities. That said, the workforce development manager associated with grant (MHA-18-MEDDIR-WorkforceDevelopment-21) should be spending a significant amount of time at OhioMHAS to coordinate all activities with the project director, program leads, and other applicable staff.

Q: Also for #2 it says “42 in person trainings,” so about one training per week... but also “2000 on-line trainings...” Is this one training delivered to 2000 participants? Or literally 2000 different trainings?

A: The grant proposes that online trainings be offered to 2,000 physicians. These trainings will not have any “live” components and should be set up to meet the DEA DATA 2000

requirements for an 8-hour course to obtain the waiver. It is essentially the same training offered many times.

Q: Where should the federally approved overhead rate amount be submitted within the budget?

A: Applicants may adjust the excel budget form to add in the overhead rate.

Q. Both the live trainings and the on-line trainings are required to be 8 hours. Would it not be permissible for a physician to participate in a 4-hour on-line training, followed by a 4-hour live training? This is currently the model that has been utilized in the recent past and it satisfies the requirements to obtain the DATA2000 waiver.

A: No, a 4-hour live/4-hour online course is not permissible for this grant. While this model has been used in the past, we want to create an engaging 1.5-day learning session in a large physician group. We don't want some physicians to come into the course having taken four hours and some not to have taken the four hours. Furthermore, money has been budgeted to make up for the physician loss in time – and would have to be re-budgeted if OhioMHAS switched to a 4-hour live/4-hour online format.

Q. The funding period goes from July 1, 2017 – April 30, 2018. However, the deadline to apply is Aug. 4 and awards are expected to be announced Aug. 18. Will the funding period be adjusted since nearly two months will have passed before grantees are able to begin the trainings?

A. SAMHSA may make no cost extensions available on a case-by-case basis; however, grantees should not plan on obtaining a no cost extension as a matter of course. OhioMHAS will lower the training requirement to two trainings in September instead of four (to give a larger lead time), and we will work diligently with the applicant to secure locations and participants.

Q. What happens if each training does not have the min. 25 physicians?

A. The training will be cancelled and rescheduled. Applicants must still host all 42 trainings.

Q. Reimbursement payments will be made to physicians who attend entire 1.5-day training – should this not be 8-hour training?

A. No. The extra 0.5 days of the training will be hosted by OhioMHAS staff to discuss issues like low dose prescribing, motivational interviewing, SBIRT, etc.

Q. Is reimbursement to physicians solely for the live trainings or will physicians who participate in the on-line course (or combination of both live and on-line if permissible) also be reimbursed \$1,300 (so long as they submit their certification of completion for the DEA DATA 2000 waiver)?

A: Physicians will only be reimbursed for the live training events.