

## SOR 2.0 Innovation Grant and SOR 2.0 Community Partner Grant FAQ

### Question Posted by 2/22/21

1. I had a quick question about the Community Organization for Integrated Behavioral Health Systems of Care RFA and the Innovation for Behavioral health systems of care RFA – we currently receive SOR money from OhioMHAS for our MOMS (Maternal Opiate Medical Support) program – would we still be eligible for both the Community Organization and the Innovation grants?
  - Yes. Please submit your application.
2. Are for profit corporations are edible for these dollars?
  - Yes.
3. Can funds be used to purchase memberships for eligible individuals, for (apps), or for recovery support programs already developed that we would like to move to a mobile format?
  - Please define the type of app.
4. If we have expanded into Lorain county to provide recovery housing, are we able to submit two separate applications, (1) for Cuyahoga County and (1) for Lorain county **OR** should submit ONE application for up to \$150k for recovery housing in BOTH counties??
  - The \$150,000 is per organization.
5. Please describe or define how OhioMHAS would like applicants to provide evidence of community partnerships as listed on page 4 - Goals of the RFA #7. For example, if our agency collaborates with a treatment center by referring our residents to them for IOP after intake from a detox center. What evidence would suffice to demonstrate a community level partnership??
  - Please state that in your application giving the name of the organization and the type of partnership. You may submit Memorandum of Understanding, Letters of Support or a Timeline or Workplan.
6. Is the State Opioid Response 2.0 Use of Innovation for Integrated Behavioral Health System of Care geared more towards community-based agencies that focus on long term recovery?
  - The application process is open to any organization that would like to apply that meets the requirements of the RFA.
7. Are Non-for-profit hospital a targeted applicant for the State Opioid Response 2.0 Use of Innovation for Integrated Behavioral Health System of Care. When I read the announcement, it seems to appeal more towards post hospitalization.

- The application is open to non-profit and for-profit organizations.
8. Our organization is already part of OMHAS SOR 1. How does this impact us when applying to State Opioid Response 2.0 Use of Innovation for Integrated Behavioral Health System of Care Request for Applications? Is there any documentation that outlines supplanting of funds and or duplication of work?
    - The Innovation grant and the Community Provider grant should be applications for new proposals. These funds can not be used to supplant work that is already funded.
  9. I see that in the application guidelines for the abstract of this RFA it requests that applicants indicate # to be served in the first and second funding periods. What are the dates of these funding periods?
    - The grant is for the first year of SOR 2.0 which is from 10/01/2020 through 9/29/21. OhioMHAS anticipates a second year of SOR 2.0 funding from 10/01/21 through 9/29/22.
  10. How would OhioMHAS like for applicants to demonstrate partnerships, through: Memorandum of Understanding, Letters of Support that spell out access to services for Trauma Informed Card, or spelled out in the Timeline/Workplan for Implementing the services and supports? The Funding Period reads October 1, 2020 - September 29, 2021. However, the implementation date reads March 15, 2021...so is this a 6-month award or 12-month award.
    - This is a 12-month award from 10,1 2020 through 9/29/21. The forms of verification that you have mentioned are acceptable.
  11. Regarding SOR 2.0 Use of Community Organizations for Integrated Behavioral Health System of Care: What is the project period (how many years)?
    - OhioMHAS current seeks one-year proposals which would cover the 10/01/20 through 9/29/21 timeframe.
  12. Is this solicitation open to both for-profit and non-profit community behavioral health agencies like other SOR 2.0 grants?
    - Yes
  13. I am contacting you regarding MHA-FY21-SOR2.0-UseCommunity-30 and MHA-FY21-SOR2.0-UseInnovation-40. Both RFAs state that funds are limited to a particular amount per year. How many years can an applicant receive funding for each grant?
    - The current applications will be for the timeframe of 10/01/20 through 9/29/21.

14. Project implementation is noted to be March 15, 2021 – should funding be awarded would the total amount awarded need to be used before the end of the funding period (9.29.2021)?
  - Yes, all funding should be spent by 9.29.2021. Awardees will have 45 days beyond the end of the grant to submit disbursement requests.
15. Would the funding if awarded on March 15<sup>th</sup>, 2021 be retroactive to any date? If so what dates?
  - No, funding would not be retroactive because these are all new projects.
16. Is this a 1- or 2-year funding period?
  - Although OhioMHAS anticipates receiving an additional year of funding for Sor 2.0. The current funding period will end on 9/29/21. All purchases must be made by that date.
17. Are the certification documents included in the 10-page count?
  - These documents are in addition to the 10-page count.
18. When is or was the webinar for MHA-FY21-SOR 2.0-Use Innovation-40?
  - The bidders conference was held on 2/08/21 at 9 a.m. via TEAMS virtual platform.
19. In response to MHA-FY21-SOR2.0-UseInnovation-40 if the 10-page limit inclusive or exclusive of the Face page, budget and budget narrative?
  - The 10-page limit includes everything except the line item budget.
20. Does the letter of support or memorandum of understanding count in the 10-page limit?
  - No.
21. Please clarify the funding period for this proposal.
  - The funding period will be from March until the 29<sup>th</sup> of September 2021.
22. Are we able to do evaluation on this project?
  - If the project is a direct service project, there will be a GPRA data collection process. If the project is a training project, a non-GPRA collection data collection process will be used. Both can be done electronically.
23. One thing we are doing in this project is planning to integrate two existing software tools to make one that will provide a continuity of care throughout the entire continuum of care for substance use disorder. Am I correct in the reading, that costs incurred to make this integration a reality would not be covered by these funds? We would have to get these from another source? I see “software enhancements “ are not covered by funding.

The grant states that "software upgrades" are an unallowable expense. In part, our proposal is to use funds from this grant to introduce two evidence-based tools to our clients, software applications for which we would need to purchase licenses. These would

be new to our clients, not an upgrade to currently used applications. Is this an allowable expense under the grant?

- Under the Innovation grant you would have to submit your application so that the scoring team can evaluate the proposed project.

24. Where do we obtain the Face Sheet? Create our own?

- The Face Sheet can be found on the right side of the page on the SOR Website or under the RFP.

25. Our residential addiction recovery programs, which have assisted over 3000 individuals since our founding in 1999, have third-party verified, data-supported outcomes that illuminate the fact that our recovery programs are highly effective in helping men overcome addiction while addressing the key social determinants of health. We are, however, a non-MAT program. We do not permit the use of suboxone, vivitrol, or methadone. Given this, are we eligible for funding from this grant opportunity?

- The SOR 2.0 grant requires MAT for opioid use disorder.

26. Are Awareness messages that list our agency as the sponsor at the end of the message an allowable expense?

27. Do the funds need to be spent by September?

- Yes, the fund must be spent by 9.29.21.

28. For mileage expenses, are awardees permitted to charge mileage for round trip transportation when related to client transportation – i.e. can staff charge mileage round trip starting at the office to pick up a client released from detox, transport them to treatment and then travel back to the office or is the mileage only reimbursable when the client is present for the transportation for (MHA-FY21-SOR2.0-UseCommunity-30)?

- Mileage can be charged to transport clients and must be at the federally allowable rate.

29. I do not see a FAQ or information regarding a webinar on the funding opportunities webpage. I am interested in learning more about this grant. Can you please direct me to these resources?

- Please go to the OhioMHAS Funding Opportunity page to view the FAQ. <https://mha.ohio.gov/Schools-and-Communities/Funding-Opportunities>

30. Regarding the required GPRA surveys, our program has operated anonymously. Are GPRAs required for each person in each service delivery strategy?

- GPRA is required for individuals receiving services. Some one touch services are not able to collect GPRA but do complete another form of evaluation.

31. How much is allowed for indirect costs?

- Unless the organization holds a higher federally approved indirect rate, the rate is no more than 10%.

32. What restrictions are in place for who can apply for the funding? Can other county government agencies apply (i.e. health departments) that are not 501c3?
- No, other government agencies can not apply for this funding. We have inter agency agreements with other government agencies.
33. The program we are working on involves us and two other organizations. We (relink.org) are the organizers and leader of the application process. If funding was to be awarded, would the funds come to relink.org to be disbursed to other orgs or do funds go to each org? If I'm reading correctly, we would fill out a budget narrative for all three organizations. Is that correct? Funds for each portion of the project would go to each org. separately?
- You would need to complete a budget narrative for each organization and consider these to be personal service contracts. You as the applicant would be responsible for paying the disbursements for the other agencies.
34. Our organization, Lower Lights Ministries, runs a residential treatment program for women with SUD in Columbus, OH with 20 recovery beds (certified Level I, II, and III). We do not accept insurance including Medicaid and all services are completely free. Does that make us ineligible to apply? I'm assuming this is a reimbursement grant? We haven't yet needed to have participants complete GPRA - is there somewhere that I could find a brief overview of the process?
- This is a reimbursement grant. Please refer to the following link for information regarding GPRA:  
<https://obamawhitehouse.archives.gov/omb/mgmt-gpra/index-gpra> OR  
SOR Resource Page <http://www.sardiprogram.com/sor>
35. Does the budget for the Integrated Community Behavioral Health grant need to be based on a year and/or 7 months?
- You will actually have seven months to implement the project and spend the funding.
36. Based on the Purpose of the RFA, it appears applicants are not required to be non-profit organizations. However, in the Application Guidelines, it suggests an applicant must attach a copy of their 501(3)c status. Can you clarify? Does an applicant have to be a 501(3)c organization?
- Applicants are not required to be non-profit organizations.
37. My foundation was awarded \$25K in OMHAS funding in 2020 via the Community Education & Outreach Initiative grant. In 2020, OMHAS allowed us to submit our financial documents and an independent financial review from a CPA in lieu of the standard audited financial statements. This was done in recognition of the small size of our organization, our financial constraints (i.e. \$10K price of a full audit is cost prohibitive) and our track record of fiscal soundness and responsibility. I would like to see if this grant requires audited financial statements. If so, may we apply for another

exception, and provide an independent review as we did in 2020? If necessary, I'm prepared to draft a request letter to Director Criss (or the appropriate individual within the department) to make such a request for this exception. I believe my organization's outreach approach will support the goals of OMHAS and the SOR grants exceptionally well. So, I hope this is once again possible

- The organization may request an exception however it will be viewed by the Ohio legal department as well as the OhioMHAS administration for approval. It will not be automatically granted and may be denied based on findings.

38. State Opioid Response 2.0 Use of Innovation for Integrated Behavioral Health System of Care states that meals and snacks are unallowable. Many of the patients that enter into our organization suffering from SUD have food insecurities. We feel by providing food to SUD patients this will benefit the patient and increase the likelihood that patients will continue with treatment and follow up interviews if this basic need is provided.

- Food is not an allowable expense. Snacks up to \$3 per person are permitted during trainings.

39. Does OMHAS anticipate additional years of funding for Innovation for Integrated Behavioral Health System of Care grant.

- OhioMHAS has received the first year of SOR 2.0 and will apply for the continuance of this grant for a second year. The current RFPs are for funding under the first year which ends on 9/29/21.

40. Funding opportunity, Innovation for Integrated Behavioral Health System of Care particularly outlines organizations to expand the utilization of technology to manage co-occurring SUD and mental health conditions. We see a lot of alcoholism within our organization both co-occurring with SUD, Mental health conditions and without. Is alcoholism inclusive of this funding opportunity?

- Alcohol misuse by itself is not supported by this grant. However, if the individual has an opioid or stimulant use disorder plus alcohol misuse then the opioid or stimulant treatment may also address the alcohol use disorder.

41. In the description of the RFA, it says the funding can be used to expand technology by the use of web applications, medical devices, and technology. However, under Appendix B, it says the grant funds can't be used to pay for software enhancements. Most web applications are software, so can you please clarify?

- If the organization has an existing technology it can be expanded by the use of web applications, medical devices and other technology. Any technology used to treat SUD must be evidence based. The grant seeks innovative use of technology and not just an upgrade of an existing system.

42. Are we able to purchase a new software that is web-based or no software at all?

- This grant is looking for innovative use of technology to treat substance use disorder for individuals with opioid or stimulant use disorder.

43. Would funds be able to be spent after 9/29/2021?

- The current deadline for spending funds is 9/29/21.
44. The RFA mentions “grant awards will not exceed \$150,000 per award per year”—could you clarify if this is a one-year funding opportunity or if it is a multi-year funding opportunity? If it is multi-year could you clarify how many years this is available?
- This is a one-year funding opportunity.
45. Where can we find information on what is required for GPRA data collection and evaluation?
- SOR Resource Page <http://www.sardiprogram.com/sor>
46. The RFA says “...use of web applications, medical devices, and technology that assists with coordinating activities of state agencies and local county systems through an integrated approach to multisystem needs.” Does this mean a grant application must assist with coordinating activities of state agencies and local county systems or could a successful grant not involve state agencies or local county systems? Does local county boards mean ADAMH boards?
- A grant application is not required to involve state agencies as part of the treatment model. Yes, local county boards refers to the ADAMH boards.
47. If a project will offer a smartphone app to both individuals who are in treatment for SUD and to individuals not in treatment, such as individuals who are referred to treatment and will use the app to learn and access harm reduction resources as well as family members of individuals with SUD, does the GPRA assessment need to be completed for all individuals, or just those engaged in treatment? According to SAMHSA, GPRA is designed for individuals in treatment, and, usually, specifically inpatient treatment.
- GPRA is required for any individual receiving treatment services funded by the SOR 2.0 grant.
48. Are GPRAs required for community members as participants in primary prevention educational programs?
- GPRA is not required for Prevention training/educational programs. However, there is an alternate form of metrics used for these programs.
49. Where do I submit the application/proposal? I am not locating the Q&A information—specifically the responses to Q&A.
- Submit your application to the following mailbox:  
[SORTreatment@mha.ohio.gov](mailto:SORTreatment@mha.ohio.gov)
50. In the RFA, under application guidelines (Abstract) , it says we must state the number of individuals to be served in the first and second funding period – can you please specify what the first and second funding periods are?
- The SOR 2.0 grant is in the first year of award. OhioMHAS will apply for a second year of funding. However, OhioMHAS is currently seeking applications for the first year which will end 9/29/21.

51. I am interested in applying for this funding opportunity. Please provide me information on how to proceed. I have the Budget Expenditure Form and 2021 OhioMHAS Agreements and Assurances. I am not clear on how or where to submit a proposal.
- Please submit your completed proposal to the following mailbox [SORTreatment@mha.ohio.gov](mailto:SORTreatment@mha.ohio.gov) You may submit the various forms as part of the main document or as attachments.
52. In the RFA, under application guidelines (Abstract) , it says we must state the number of individuals to be served in the first and second funding period – can you please specify what the first and second funding periods are?
- This application is for the first year of SOR 2.0 which ends on 9/29/21. Please calculate the number to be served based on this information.
53. The Refuge’s residential addiction recovery programs are non-MAT. We do not even permit nicotine use. We do however permit the use of certain prescribed medications that are not intended to serve as a replacement to addictive drugs. These include prescribed medications for such non-drug-related medical conditions as diabetes and hypertension and certain ambulatory over-the-counter items like Ibuprofen, Aspirin, and Maalox to help with simple nausea and aches and pains. But we are a non-MAT residential recovery organization. Does this disqualify us from consideration for the State Opioid Response 2.0 Use of Community Organizations for Integrated Behavioral Health System of Care (MHA-FY21-SOR2.0-UseCommunity-30)?
- The SOR 2.0 grant specifies the use of MAT as an evidence based treatment.