

RFP: Supportive Crisis Stabilization Centers

OVERVIEW

On June 30th, the New York State Office of Mental Health (OMH) and Office of Addiction Services and Supports (OASAS) released a Request for Proposals (RFP) for the development of 12 new Supportive Crisis Stabilization Centers within the 10 Empire State Development (ESD) economic development regions, which are also used for the Regional Economic Development Council (REDC) grants. There will be three awards in New York City and one award in each of the other nine economic development regions.

Crisis Stabilization Centers are a new licensure category which were authorized last year in New York's Fiscal Year 2021-22 Enacted Budget. There are two types of Crisis Stabilization Centers, Supportive and Intensive, both of which will be jointly licensed by OMH and OASAS under Article 36 of the Mental Hygiene Law.

Earlier this year, OMH and OASAS issued an RFP for the development of 12 new Intensive Crisis Stabilization Centers (ICSCs). This new RFP is specific to the development of Supportive Crisis Stabilization Centers (SCSCs), which provide support and assistance to individuals with mental health and/or substance use crisis symptoms but do not pose a likelihood of serious harm. SCSCs will bill Medicaid for the provision of services and will be eligible through this RFP for start-up funding, capital funding, and limited state-aid funding.

The full RFP is available [here](#). Applications are due on October 5th. Crisis Stabilization Center program guidance is available [here](#).

FUNDING

Awarded applicants will receive \$1.25 million in start-up funds that may be spent in the first two years of the contract. Each center will also receive ongoing net deficit support of \$900,000 (downstate providers) and \$768,000 (upstate providers) per center annually.

SCSCs will bill Medicaid for services provided to the target population. OMH has published draft Medicaid rates for Crisis Stabilization, which include a per-hour rate (\$515.69 downstate; \$439.88 upstate) and per-diem rate (\$1,031.38 downstate; \$879.76 upstate). These rates are pending final state and federal approval.

The annual expected Medicaid revenue per center is:

- SCSC Upstate: \$1,688,867
- SCSC Downstate: \$1,979,930 (includes NYC, Dutchess, Nassau, Orange, Suffolk, Westchester, Rockland, and Putnam Counties)

Awarded applicants will also be eligible to request up to \$1 million in capital funding, to be spent within 12 months of contract execution. Capital costs may include construction, design, administration, and other expenses (permits, site testing, insurance, etc.).

Contracts will last for five years beginning on February 1, 2023. It is expected that SCSCs will have executed contracts by February 2023 and be operational by May 2023.

ELIGIBLE APPLICANTS

Eligible applicants are not-for-profit 501(c)(3) agencies or public benefit corporations with experience providing mental health and substance use services to individuals with serious mental illness and/or substance use disorders. Applicants must be currently licensed, certified, or otherwise authorized by OMH, OASAS, or the New York State Department of Health (DOH).

SCSCs may be operated by or affiliated with hospitals and/or hospital-affiliated programs. SCSCs may be co-located with existing facilities and service providers in accordance with OMH/OASAS regulations and federal requirements.

TARGET POPULATION

SCSCs are designed to serve all New Yorkers (including children, adolescents, adults, and families) experiencing a mental health and/or substance use crisis in their service area regardless of age, ability to pay, or location of residence. Any individual who presents to an SCSC must be provided services. For individuals who require a higher level of care, SCSC staff will work with the individual and assist with accessing the next level of care.

Individuals may present to an SCSC as a walk-in or voluntary transport by law enforcement, EMS, and/or collaterals.

PROGRAM SERVICES

SCSCs are similar to a “living room model,” offering voluntary, walk-in services to individuals with an emphasis on peer support that is resilience and recovery oriented. Recipients may receive services in an SCSC for up to 24 hours. The following services must be provided at the SCSC:

- Triage, screening, and assessment;
- Therapeutic interventions;
- Peer support;
- Ongoing observation;
- Care collaboration with a recipient’s identified collaterals; and
- Discharge, aftercare planning and follow-up (a call between 24 and 48 hours post-discharge, checking on referrals, etc.).

SCSCs are not required to provide the following services onsite, but are expected to have linkages and/or contracts in place to ensure that recipients can access services while at the SCSC:

- Medication management;
- Medication for Addiction Treatment (MAT);
- Medication administration and monitoring; and
- Mild to moderate detoxification services.

SCSC providers will hire or contract with staff that have the qualifications to meet the needs of the service area and in a timeline that ensures coverage of 24/7 operations. Providers are required to have minimum staff the include:

- At least one registered nurse on-site 24 hours per day, 7 days per week;
- A psychiatrist or psychiatric nurse practitioner;
- A Credentialed Alcoholism and Substance Abuse Counselor (CASAC); and
- A certified or credentialed peer specialist.

APPLICATION

Proposals will be scored based on the following criteria:

- Equity (10 points)
- Population (10 points)
- Description of Program (17 points)
- Implementation (27 points)
- Agency Performance (8 points)
- Reporting and Quality Improvement (8 points)
- Financial (20 points)

Proposals must receive a minimum score of 70 to be considered for funding. In the case of a tie, the proposal with the highest score on the “Implementation” section will be considered for funding.

Timeline

Proposals must be submitted by October 5th. Awards are expected to be announced on November 2nd.

There will be an optional Bidder’s Conference on August 2nd at 1pm to provide additional details and explain the RFP process. The virtual conference may be accessed [here](#).

Questions may be submitted to Carol Swiderski at Carol.Swiderski@omh.ny.gov by August 16th. Questions will be posted on the OMH and OASAS websites on September 13th.