

BACKGROUND

With funding from the Texas Health and Human Services Commission, Be Well Texas (BWTX) at UT Health San Antonio serves as an administrative entity and the backbone of a statewide network that delivers and manages public health initiatives. Our mission is to provide equitable access to compassionate, evidence-based treatment and services for substance use disorders (SUDs) regardless of the ability to pay for care.

Be Well Texas uses a collaborative approach to meet the increased need for crisis intervention services, mental health and substance use disorder treatment, and other related recovery supports. BWTX will ensure coordination among local partner organizations and key stakeholders to support stigma and harm reduction, treatment and recovery support services across the state.

FUNDING OPPORTUNITY

This project is funded through the Texas Health and Human Services Commission through state and federal funding from the Substance Abuse and Mental Health Services Administration grant award number HHS000963100001/HHS000843300001.

The purpose of this telehealth improvement project is to address the needs of individuals with substance use disorder (SUD) and/or non-serious mental illness (SMI) impacted by COVID-19 and to support significant and impactful investments to develop and expand the state's critical emergency response system of substance use continuum of care.

There are three funding opportunities available:

- 1) Telehealth services for SUD and Non-Severe Mental Illness
- 2) Recovery Support Services (RSS)
- 3) Funding for Local Mental Health Authorities (LMHAs) and Local Behavioral Health Authorities (LBHAs)

ARTICLE 1. PURPOSE

The purpose of this project is to increase access to substance use disorder (SUD) and non-severe mental illness mental health (SMI-MH) screening, treatment, and peer recovery support services through developing a comprehensive public health emergency response with an emphasis on evidence-based behavioral health treatment.

This project aligns with the Center for Disease Control and Prevention (CDC) best practices for a public health emergency response to support the provision of non-intrusive and culturally sensitive behavioral health services to those impacted by the COVID-19 pandemic, including incident survivors, family members of the deceased, and impacted workforce including first responders and those in the healthcare profession.

ARTICLE 2. TARGET POPULATION AND SERVICE AREA

1. Impacted workforce including first responders and those in the healthcare profession with behavioral health conditions requiring non-Serious Mental Illness (SMI) mental health care because of COVID-19;
2. All other Texas residents impacted by COVID-19 including incident survivors and family members of the deceased with non-SMI behavioral health conditions;
3. Texas residents impacted by COVID-19 including survivors, family members of the deceased experiencing co-occurring substance use and non-SMI psychiatric disorders;
4. Texas residents impacted by COVID-19, including survivors and family members of the deceased, experiencing co-occurring substance use and non-SMI psychiatric disorders who are also experiencing homelessness or housing instability;

To be eligible for treatment services under this agreement, an individual must be found to meet the criteria for one or more selected disorders found in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) excluding diagnoses inclusive of serious mental illness.

This project will serve all regions and counties in the Texas' HHS Public Health Regions. A complete list of Texas HHS Public Health Regions is located at the following [link](#).

ARTICLE 3. GOAL

The goal of this project is to expand implementation of a comprehensive public health emergency response with emphasis on evidence-based SUD and non-SMI treatment and peer recovery support services for Texans impacted by the COVID-19 pandemic. This project is feasible because it is integrated into existing state programs and is aligned with the state behavioral health strategic plan.

ARTICLE 4. PERIOD OF PERFORMANCE

This project is funded through March 15th, 2023. Funding will be awarded twice. The first distribution will occur in Fiscal Year 2022 and the second will occur in Fiscal Year 2023. Funds are for the purpose specifically defined in this Statement of Work (SOW) and must not be used for any other purpose. Funds must not be used to supplant local, state, or federal funds.

Be Well Texas will determine funding amount per provider based on the merit and scope of application and other best value considerations. Funding decisions are at the sole discretion of Be Well Texas.

ARTICLE 5. PROGRAM REQUIREMENTS

5.1 Program and Service Requirements

To meet the objectives of the funding, respondents must apply for services as follows:

Increase telehealth services for SUD and Non-Severe Mental Health Illness

- Subcontract with qualified providers to increase access to mental health and substance use disorder (SUD) and behavioral health services including screening, assessment, referral, evidence-based treatment, crisis counseling, linkage to recovery support, and follow-up.

Expand Recovery Support Services (RSS)

- Subcontract with organizations to deliver substance use RSS to help facilitate entry of individuals into the recovery process, prevent relapse, and promote sustained recovery. Organizations may develop an expanded array of services within the treatment modality, to offer long-term engagement, recovery support services at pre- and post-treatment to engage and assist individuals with initiation and sustaining recovery from substance use.

Contract with Local Mental Health Authorities and Local Behavioral Health Authorities

- Expand contracts with LMHAs and LBHAs to deliver mental health and substance use disorder services in communities across Texas. This funding would ensure we build a statewide system of coordinated services that leverages all investments.

Subcontractors are not required to implement the specific activities listed above in this section but are required to provide activities that are within the scope of services.

5.2 Categorical Budget Requirements

Allowable Expenses

Personnel	Salaries may include the personnel working on the project. Overtime is not included due to being unallowable without prior approval.
Fringe Benefits	Fringe benefits may include medical and dental insurance, retirement benefits, social security, worker's compensation, life insurance, vacation benefits, and other miscellaneous benefits.
Travel	Travel costs incurred include transportation, meals, lodging, and incidentals conducted in carrying out the contract.
Supplies	Includes consumable materials or supplies that will be used during the period of the contract and have a direct benefit to the project. Items less than \$5,000 and with a useful life of less than one year.
Equipment	Equipment is any item with a life expectancy of more than one year and has an acquisition cost of \$5,000 or more. Prior approval needed is before being purchased.
Contractual	If the subcontractor intends to delegate part of the activities identified in the scope of work to a third party, the cost of providing these activities or professional services is recorded in this category. If contracting the scope of project, please request prior approval.
Indirect Costs	Indirect costs can be calculated using an approved indirect rate from the state or federal government or you may use the de minimus rate of 10%. Indirect costs are real costs that cannot be separately identified or measured but are shared costs with other activities.
Total Contractual Value	Funds obligated to subrecipient; Total of all categories above.

ARTICLE 6. REPORTING REQUIREMENTS

6.1 Monthly Reporting

Subcontractors are required to collect, track, and submit a monthly activity report focusing on services provided and individuals served.

Be Well Texas will facilitate teleconferences with subcontractors as needed to review the monthly report deliverables and discuss all issues and concerns with implementation of the work plans. Subcontractors' essential staff are contractually required to attend regularly scheduled meetings with Be Well Texas.

6.2 Quality Management

To meet the quality management responsibilities providers shall:

1. Participate in continuous quality improvement (CQI) activities as defined and scheduled by Be Well Texas, including but not limited to:
 - a. Data verification
 - b. Performance reviews
 - c. Submission of organizational review results and supporting documentation for Be Well Texas' review
2. Providers found to be underperforming or noncompliant must submit a plan of improvement or corrective action and supporting documentation, as requested by Be Well Texas
3. Participate in and actively pursue CQI activities that support performance and outcome improvement
4. Respond to consultation recommendations by Be Well Texas which may include, but are not limited to, the following:
 - a. Staff training
 - b. Self-monitoring activities guided by Be Well Texas including use of quality management tools to self-identify compliance issues

ARTICLE 7. DATA USE**7.1 Data Reporting**

Providers must submit deliverables in an approved digital format.

7.2 Data Use Agreement

Providers must agree to be bound by the terms of the Data Use Agreement signed during the contract process.

ARTICLE 8. EVALUATION AND SELECTION

A three-step selection process will be used:

1. Eligibility screening
2. Evaluation and scoring based upon selection criteria
3. Final Selection by Be Well Texas in alignment with organizational and project priorities

After screening for eligibility, application completeness, and scoring of the elements listed above, a selection committee will review all eligible applicants to determine award funding that will accomplish project priorities most effectively. Be Well Texas will make all final funding decisions based on eligibility, geographic distribution, Texas Health and Human Services' priorities, reasonableness, availability of funding, and cost-effectiveness.