

# Enhanced Buprenorphine Outreach to Homeless Populations Grant

## RFP Questions

### Eligibility Questions

1. What about shelters? Do they qualify to apply?
  - a. If shelters have outreach teams and conduct outreach to street-based clients, then yes. To be eligible, applicants must currently conduct outreach to people experiencing homelessness (PEH), including those who are street-based and likely to use drugs.
2. Are agencies who already operate city funded street outreach programs most likely to receive this award?
  - a. No, organizations that receive city funding will not be prioritized. The application is open for any non-profit currently conducting outreach to PEH.

### Programmatic Questions

1. Will contracted agencies have direct access to treatment facilities within the requested time period and readily available?
  - a. Contracted agencies will have access to virtual treatment providers that offer short-term/bridge prescriptions of buprenorphine. These treatment providers will refer the patient to the most appropriate in-person follow up treatment.
2. The platform seems to be for the outreach team. For the patient visit is it a regular call or video call?
  - a. This will depend on patient preference and telemedicine modality availability.
3. Since the initial intake call might not happen immediately or when the outreach team is not around what are some the expected barriers patient could encounter during that first visit?
  - a. We plan to address barriers as they come up. You may describe barriers you expect to encounter, along with proposed solutions and supports in the Program Services section of the Narrative Proposal in your application: "Describe any available or planned supports that would facilitate clients' initial engagement with same-day treatment. (300 words)."
4. Where are the clinics where patients will go for follow up treatment? How are these selected?
  - a. The telemedicine provider will work with participants to identify the best option and location for follow-up treatment. The virtual clinic and DOHMH have relationships with providers throughout the New York City area, and continue to grow our referral list.

5. Are contracted agencies required to track treatment plans/actions after referral? If so, how will contracted agencies track progress?
  - a. No.
6. What are the language access services? I am particularly thinking of our population in the South Bronx and Washington Heights
  - a. Interpreter services will be available as needed. Please describe the projected need in your application.
7. Are there selected pharmacies distributing buprenorphine? What happens when patients are uninsured or have lapses in coverage?
  - a. All pharmacies distribute buprenorphine. The program model includes payment assistance for patients that are un- or under-insured.
8. We currently operate a low-threshold Bupe program with three (3) contracted x-waivered medical providers. Can we use our own medical providers?
  - a. These funds are intended to support outreach teams that do not have access to medical providers. If you can make a case as to why this funding would be an appropriate resource for your existing outreach teams, we are happy to review your application.
9. Is it a requirement to do buprenorphine prescriptions via telehealth? If we use a street outreach model with a MAT provider, can we utilize this model?
  - a. These funds are to support outreach teams that do not currently have access to MAT providers.
10. It seems that you're seeking "formal" outreach teams who operate 24/7 programs in NYC? Formal meaning large organization with broad reach in the city.
  - a. These awards are not limited to organizations/agencies that have a large reach. The goal is to build capacity within organizations/agencies that do not currently have (or have very limited) capacity to address opioid use disorder and connection to care through their outreach efforts.
11. It would be great for this program to continue after the urgent addressing of the need.
  - a. We agree. The program model connects PEH with a telemedicine provider for an urgent bridge prescription and to ensure a referral to a follow-up organization/agency that is most appropriate to the patients' unique situations.
12. Will contracted agencies receive on-going assistance with planning up to and including implementation of the pilot?
  - a. Yes, DOHMH will provide contracted agencies with initial training, implementation support and ongoing technical assistance.

13. Are you looking for programs with focus on neighborhoods with higher prevalence of homelessness or overdose?

- a. Overdose mortality data indicates that the highest prevalence of overdose mortality of PEH is in locations that have the largest population of PEH.

14. Will the science and engagement utilizing a harm reduction be a training provided?

- a. Yes.

15. Many of the orgs applying are already doing this work which is also a requirement so can you please describe the training that's required?

- a. We are seeking to fund organizations already engaged in outreach to PEH, but who do not necessarily have a substantial capacity in addressing substance use disorder.

We will work in collaboration to assess current capacity and build upon the current knowledge of the organization. Overall, the training is expected to focus on understanding the opioid crisis and current epidemiological trends, substance use disorder, specifically opioid use disorder, different treatment options and care modalities, and access to these in New York City. The training will also provide specific information for participating in the program, including DOHMH data and evaluation tools outreach workers will use in the field.

16. Is personal transport (individual drop off/taxi with case manager/referral manager) recommended or required to treatment facilities referrals?

- a. No, transportation beyond providing a MetroCard is not required.

### **Deliverables Questions**

1. The RFP didn't indicate expectations for numbers of contacts expected for the 8-month contract. Can you address this?

- a. This will depend on selected organizations' current volume and outreach capacity on a daily, weekly, and monthly basis. The DOHMH team will work in collaboration with selected organizations to identify and meet outreach targets.

2. Will there be additional reporting required monthly/quarterly? And will said reporting be in conjunction with existing OOPP reports?

- a. Selected organizations will be expected to submit monthly narrative reports that provide updates on progress, including accomplishments, lessons learned, and barriers to program delivery. OOPP reports are separate from this program and reporting will not be in conjunction with existing OOPP reports.

## Contracts/Budget

1. Will the project support funding for salaries and benefits?
  - a. The funding is primarily intended for purchasing program supplies (i.e. tablets, client's phones, MetroCards, etc.). However, the project can potentially support hourly funding for existing staff, such as your current project coordinator/lead and/or your outreach teams for time in the required trainings. Please use the narrative description justification for each budget item to describe the necessity for any funds to be allocated to personnel expenses.

Contracts will be paid upon completion of deliverables and submission of required documentation. This will be outlined in the contracts once organizations are awarded. The funding is an add-on to outreach already being done by your organization.

2. How about a portion of the [budget for the] Project Lead?
  - a. Yes, the budget is available to use as your agency needs in order to support the work. You can submit for a portion of a Project Lead within the total limits of the award amount. Please use the narrative description justification for each budget item to describe the necessity for any funds to be allocated to personnel expenses.
3. Are we giving phones to contacts, or providing access to an agency phone?
  - a. We are giving phones to contacts if they do not already have one, not agency issued phones. The rationale is that the client can access telemedicine provider and follow-up clinic over the phone without an outreach worker present.
4. For the smart phones with 1-year data plan, will these be used with the client during the outreach in real time, or is the anticipated plan to give these phones out for the client to keep?
  - a. It is expected that clients will keep the phones for ongoing scheduling and communication purposes with follow-up providers.
5. Are costs of a data plan for the smart phones included?
  - a. Yes, costs of a data plan for the smartphones are included in the award.
6. Who is paying for the monthly charges for smartphones given to clients?
  - a. The awarded contract will support the monthly charges for client smartphones.
7. For individuals who possess federally issued phones, might we purchase additional packs of minutes? These phones tend to have a limit on the number of minutes provided monthly?

- a. Yes, this is an excellent way of leveraging existing resources. Please use the narrative description justification for each budget item to describe the necessity for any fund allocation.
8. As contract negotiation is sometimes not as expeditious process as we anticipate, will there be advances made for awarded agencies?
- a. At this time, we are not anticipating making advances on the award.

### **General Questions**

- 1. If organization is not selected can teams still participate in the trainings?
  - a. Yes.
- 2. What is the anticipated, annual funding if the program is extended beyond June 2022?
  - a. We anticipate around the current funded amount, however, there is not an exact number at this time.

In FY22 (under this award), there will be 3 organizations awarded. However, in FY23 (under another award), we anticipate an additional 5 organizations awarded, thus, totaling 8 organizations in FY23. Please look out for another RFP in the Spring of FY23.

- 3. Can applicants provide letters of support?
  - a. Since letters of support are not part of the application and we did not ask them from other applicants, we ask that you do not submit them. We want to keep the evaluation process as fair as possible.