HHS Responses to Questions



Solicitation Title: SMART Innovation Grant Program

Solicitation Number: HHS0013881

#	Reference	Question	Response
1.		I run the intervention mental health clinic as a part of UT Dell Med. We are a non traditional clinic housed at ACC and live under UT Health Austin (clinical practice of DMS). We are trying to figure out what category you would put us under. Technically UT is a nonprofit but it usually is considered governmental instead. Can you please advise?	Refer to Section 1.1, Executive Summary, of the Request for Applications ("RFA") which states that Eligible Applicants must be one of the following types of entities: A. A hospital licensed under Chapter 241 of the Texas Health and Safety Code; B. A mental hospital licensed under Chapter 577 of the Texas Health and Safety Code; C. A hospital district; D. A local mental health authority; E. A child-care facility, as defined under Texas Human Resources Code § 42.002(3); F. A county or municipality; or G. A nonprofit organization that is exempt from federal income taxation under Section 501(a) of the Internal Revenue Code of 1986, by being listed as an exempt entity under Section 501(c)(3) of that code. HHSC cannot advise Applicant on its type of entity. Note, an Applicant who applies as a nonprofit must be exempt from federal income taxation under Section 501(a) of the Internal Revenue Code of 1986, by being listed as an exempt entity under Section 501(c)(3) of that code. A nonprofit Applicant is required to provide evidence of its nonprofit status (See Form B, Entity Information Conflicts and Contract Litigation).
2.		If we apply as the lead applicant, are we able to collaborate with school districts for our project and can we use funds to provide services on school campuses?	Refer to Section 1.1, Executive Summary, of this RFA. There are no restrictions on types of Community partners that Applicants may collaborate with or where services may be provided, except that those services must be provided within the Community identified in Application.



#	Reference	Question	Response
3.	Pg. 18 next to Innovation is defined as "Grantee will demonstrate that the service being provided is new to the Community	At we have been piloting a new program within an elementary school that is precisely aligned with the scope of this grant. This program has been in beta phase for one year and we're seeking funding to fully implement within elementary schools in the community. As the RFA specifies "new to the Community" we are asking if our piloted program would qualify. It is a new program that is currently without funding and will not be able to fully develop without funding.	The reference introduced in prospective Applicant's question refers to "Innovation" reporting requirements for a Grantee upon execution of a Grant Agreement according to Section 2.8, Performance Measures and Monitoring, of this RFA. For the purposes of this RFA, System Agency will interpret the term "new" as commonly understood and as used under any general definition included in the Merriam-Webster online dictionary, located at the following URL: https://www.merriam-webster.com/ . If prospective Applicant perceives its proposed Project to be "new," it may use Form C, Program Response Form, and Form D, Community Assessment on Needs, to demonstrate the Project's innovative nature, activities, timeline for implementation, plans for long-term sustainability, funding, and service area for the Project and its activities. Applicant will identify its proposed "Community," as defined in Section 1.2, Definitions and Acronyms, of this RFA in its Application.
4.	Section 2.8 The table in Paragraph 5 Page 18 (in the table at the bottom) Text of passage: Innovation: Grantee will demonstrate that the service being provided is new to the Community and that it improves a current practice, advances understanding of a problem, addresses a problem more efficiently, introduces a new way of achieving positive Outcomes, or improves technical capability.	Does "new" mean the program has to be new to our whole area (e.g. never done/not done recently) in our community, or can it mean "an older/established program moving into a new community" (e.g., we expanded into a new community or moved programming from one part of town to another)?	For the purposes of this RFA, System Agency will interpret the term "new" as commonly understood and as used under any general definition included in the Merriam-Webster online dictionary, located at the following URL: https://www.merriam-webster.com/ . The Applicant will identify its proposed "Community," as defined in Section 1.2, Definitions and Acronyms, of this RFA in its Application. As stated in Section 2.8, Performance Measures and Monitoring, of this RFA Grantee will be required to demonstrate, in addition to whether the service is "new to the Community," that the older/established program moving into a new Community improves a current practice, advances understanding of a problem, addresses a problem more efficiently, introduces a new way of achieving positive Outcomes, or improves technical capability. Applicants may use Form C, Program Response Form, and Form D, Community Assessment of Needs, to demonstrate the innovative nature, activities, and service area for its proposed Project.



#	Reference	Question	Response
5		In the presentation last week, I heard it mentioned that beneficiaries would be of school age under 14 and their caregivers. We have a program that supports children ages 0 – 3 and their caregivers. Would it qualify for consideration? I also heard that the beneficiaries can be outside of this population if the target population is at high risk of developing severe MH conditions. I wonder how you would define that risk among infants and toddlers?	In accordance with Section 2.3, Eligible Population, of this RFA the System Agency seeks primarily Applications that propose activities benefiting the priority populations. The System Agency will make final funding decisions to ensure some opportunity to develop, implement, and learn from innovative strategies with promising Outcomes primarily benefiting Children and their Caregivers outside of the prioritized populations, if the Applicant demonstrates the following: 1. a high risk that members of the population identified by Applicant will experience a crisis or develop a mental health condition; and 2. that its Project design supports appropriate prevention practices for members of the population identified by Applicant and that there is need for Applicant to implement such prevention practices. High risk for a crisis or development of a mental health condition is not defined in this RFA, statute, or Texas Administrative Code. Form C, Program Response Form, and Form D, Community Assessment of Needs, may be used by Applicants to demonstrate why a proposed population and Community may be at a high risk for a crisis or development of a mental health condition.



#	Reference	Question	Response
6		Our most recent completed audits are for 2019 and 2020, with 2021 and 2022 underway. I became the new official director in 2022 and expect the audits for 2021 to be completed in the next 2 months. Then, we will begin 2022. Can we still apply by submitting our most recent audits as indicated on the checklist? and our current financial documentation (990, balance sheet and Profit/Loss statements)?	Refer to Addendum No. 3 to this RFA. Applicant must satisfy the requirements listed in Subsection 6.1(1)(c)(i) revised by Addendum No. 3. In the fact set provided by prospective Applicant, the 2019 and 2020 audits would be Applicant's most recent two (2) years of audited financial statements. Therefore, under this RFA, those two audits, from 2019 and 2020, would be appropriate to submit.
7	6.1 Narrative Proposal Page 29 Form C, Program Response Form Required Attachments- Applicant's most recent two (2) years of audited financial statements or single audits	We have not had 2 consecutive financial audits or a single audit. We have been receiving grant funding through a pass-through grant from . We had our first financial review for 2022 and we are scheduled to have our first financial audit for 2023 in March or April of this year. Are we eligible to move forward with applying for funding?	Refer to Addendum No. 3 to this RFA. Applicant must satisfy the requirements listed in Subsection 6.1(1)(c)(i) revised by Addendum No. 3.



#	Reference	Question	Response
8	Pg 13. Section 2.6.1(2), 5.1.2 Scope of Grant Project; Program Requirements; Participant Related Requirements	The grant provides for 'start up' costs in §5.1.2. If we are clear it is to pay for the "initial establishment" only, can we use the funds to start a Medicaid service/clinic in an area where none exists and has much need? It is our intention to bill Medicaid per 5.3, but don't want to be in contradiction with 2.6.1(2). Similarly, we wouldn't want to exclude kids of need that may have commercial insurance; how do co-pays align with 2.6.1(2)?	Refer to Section 5.1.2, Startup Funding, of this RFA which states that "The start-up cost must assist in the initial establishment and operating costs of new innovative programs". Any activities billed to Medicaid, commercial insurance, or any other payor are not eligible for reimbursement using grant funds under this RFA. A Grantee must provide all grant-funded activities to Participants free of charge. For additional information on prohibitions applicable to grant funds, see Section 5.3, Grant Funding Prohibitions, of the RFA. "
9	Section 4.2 Grant Term, 1st paragraph, pg. 24 , Subject to availability of funds, the System Agency may, at its sole discretion, extend the Grant Term for any period(s) of time through Grant Agreement extensions or renewals with funded Project Periods, provided the Grant Term, including all extensions or renewals, does not exceed five (5) years.	If we initially request, for example, \$500,000 for year 1 and subsequently reapply for the same amount year 2, is it possible to increase our budget request in subsequent years?	An Applicant must use Form F, State and Matching Budget Proposal, to request funds for the fourteen (14) month budget period for this Application, identified as July 1, 2024, through August 31, 2025. Renewal funding amounts for State Fiscal Year 2026 is not within scope of this RFA. An Applicant can address its plans for long-term sustainability and funding of the proposed Project on Form C, Program Response Form. If the Applicant is selected for a potential award, and if implementation of an Applicant's long-term funding projections is not feasible based on the proposed award, Applicant may discuss with System Agency further during the negotiation period according to Section 10.2, Negotiation, of this RFA.



#	Reference	Question	Response
10		Is there a recording of Friday's webinar on the SB 26 Supporting Mental Health and Resiliency in Texans (SMART) Innovation Grant Program? If so, can you provide a link? Also, can you explain the language under the definition of a local government on page 22 of the RFA? Curiously, this definition does not include counties or cities. Can you provide some background or an explanation of this language? I know the language comes from an Article IX provision in the General Appropriations Act, but I don't know its history and purpose.	Recording of the Applicant Conference presentation held on January 12, 2024, is not available, however, please refer to Addendum No. 1 to this RFA, which includes the presentation slides from the Applicant Conference. The language in Section 2.12, Limitations on Grants to Units of Local Government, serves to identify limitations and reporting requirements for entities defined as a "unit of local government" under Section 2.12 of this RFA. The history and purpose of Article IX of the General Appropriations Act is outside the scope of this RFA. Additionally, System Agency cannot provide the prospective Applicant legal consultation and/or advice as to the history of the Act or an interpretation of its specific provisions. System Agency recommends that the prospective Applicant consults an attorney regarding any questions regarding the history or purpose of specific articles of the General Appropriations Act.
11		Where can I find the forms to begin the application process for the SMART/RFA grant?	The Solicitation packet for this RFA is located at the HHS Grant website, at the following URL: https://resources.hhs.texas.gov/rfa/hhs0013881



#	Reference	Question	Response
12		I am reaching out to see if you can share the PowerPoint from the webinar on Friday? I also wanted to clarify that it states that this grant is for the priority population of school age children up to 14 years old. We work with 13-14 year olds but also work with 15-21 year olds. Would our entire population need to be 14 and younger to qualify?	Refer to Addendum No. 1 to this RFA, which includes the presentation slides from the Applicant Conference presentation held on January 12, 2024. In accordance with Section 2.3, Eligible Population, of this RFA services include "Children" (as defined in Section 1.2, Definitions and Acronyms), their Caregivers, and individuals working with Children or Caregivers of Children that demonstrate atypical social or emotional development or other challenging behaviors. Note, Section 1.2, Definitions and Acronyms, defines Children as "a person under eighteen (18) years of age." Participation in this SMART Innovation Grant Program would not prohibit a Grantee from serving Participants outside of this scope, however services provided to Participants eighteen (18) years of age and older would not be eligible for reimbursement.
13	Pg.1 Form C Program Response Form Re: Job Description	If we are applying with a proposed subrecipient, do we need to include job descriptions for any personnel at the subrecipient organization (e.g., their Executive Director), or does Key Personnel refer only to LifeWorks staff, as we will be the prime Grantee?	Section 1.2, Definitions and Acronyms, of this RFA defines "Key Personnel" as "a Grantee organization's Project contact, fiscal contact, or Executive Director, or any other key stakeholders in the proposed Project." Subcontractor job descriptions do not need to be included in Application.
14	Pg 1 Form C Program Response Form Re: Letters of Support	If we are applying with one of our community partners as a proposed subrecipient, may the proposed subrecipient provide one of the required letters of support?	The RFA does not specify any restrictions related to letters of support from a proposed subcontractor. Section 6.1, Narrative Proposal, of this RFA states that letters of support must be from "Community partners located within the Applicant's proposed service area."



#	Reference	Question	Response
15		I wanted to know if the match that the SMART grant requires can be from our nonprofit's own funds.	A nonprofit may utilize its own funds for Match requirements if, as stated on Form F, State and Matching Budget Proposal, the Match funds are local philanthropic, private, city funds, or county. State or federal funds may not be used as Match. See (1) Section 5.3, Grant Funding Prohibitions, (2) Section 5.4, Cost Sharing or Matching Requirements, and (3) Form F, State and Matching Budget Proposal, for more details.
16	Section 2.5 Eligible Activities pg. 12 of 55, Training, Outreach and awareness	While we welcome the additional resources for our community, we recognize that it has introduced more complexity in accessing and navigating the services available through the local systems of care. Therefore, can education and training be provided to the community and families through workshops and presentations at schools, etc., as an allowable activity?	There are no defined requirements for where services may be provided, except that they must be provided within the "Community," as defined in Section 1.2, Definitions and Acronyms, proposed by Applicant in its Application.
17	Section 5.4 Cost Sharing or Matching pg. 27 of 55 Matching Requirement Table	How would the required match contribution be allotted? For example, if we request \$499,999 for our budget, will HHSC only reimburse 90% of a full FTE?	An Applicant must use Form F, State and Matching Budget Proposal, to indicate expenses that would be reimbursed through System Agency and expenses that would be supported by Match. In the example provided, Applicant could choose to allocate ninety percent (90%) of its funding for one full-time equivalent (FTE) in Applicant's ongoing or startup budget and ten percent (10%) of its funding towards the Match requirement for those ongoing or startup expenses.
18	Section 5.4 Cost Sharing of Matching pg. 27-28 of 55 Donations	Regarding Donations, are donations only applicable if the conditions for inkind contributions are met?	Match funds must be cash contributions, which may be provided through donations from local philanthropic funds. Other forms of donations may be considered for any required Match over ten percent (10%), but only if the in-kind conditions identified at Section 5.4, Cost Sharing or Matching Requirements, are met. Form F, State and Matching Budget Proposal, provides further details on the types of funds to be used for cash contributions.



#	Reference	Question	Response
19		Staffing Requirements: Is the Grantee allowed to utilize subcontractors to perform direct services/activities (ie. Training, skills groups, and counseling)? Or, are all individuals working directly with program participants required to be employees of the Grantee?	Grantee may, with prior written approval of the System Agency, enter a contract with any individual or entity to perform part or all of the obligations under any Grant Agreement awarded as a result of this RFA. Refer to Section 2.8, Performance measures and Monitoring, of this RFA which states in its first paragraph that "The System Agency will look solely to Grantee for the performance of all Grantee obligations and requirements in a Grant Agreement resulting from this RFA. Grantee shall not be relieved of its obligations for any nonperformance by its subgrantees or subcontractors, if any."
20		Given that the nature of the grant is innovation, would HHS consider offering an extension for the submission of application deadline? The timeline from the solicitation notice to the deadline for application is prohibitive in allowing applicants to be truly innovative in developing and operationalizing a plan to offer services that are new, accessible, and sustainable.	Refer to Addendum No. 2 to this RFA. The Deadline for Submission of Applications has been extended to February 15, 2024 by Addendum No. 2.



#	Reference	Question	Response
21		Do we have to match 10% of the grant financially or can it be in kind? Can salaries and materials be paid by the grant? We would like to hire a therapist and artist to help us approach mental health in a holistic way. Is this possible?	Matching funds must be cash contributions. However, in accordance with Section 5.4, Cost Sharing or Matching Requirements, of this RFA Applicants that meet the following conditions may substitute in-kind contributions for any required Match over ten percent (10%): 1. Projects providing a majority of its grant-funded activities in a Community that includes a county with a population of less than 250,000; 2. Entities with less than fifty (50) employees; or 3. Historically Underutilized Businesses (HUBs). Grantees meeting these conditions are still required to use cash contributions for the first ten percent (10%) of matching fund. Applicants must use Form F, State and Matching Budget Proposal, to propose qualifying expenses, including for personnel, equipment, and supplies.
22	Section 2.5: Eligible Activities, pg 12-13, Eligible Activites	Will mental health counseling be an acceptable activity? Specifically Parent-Child Interaction Therapy (PCIT), Child-Parent Relationship Therapy (CPRT), and individual and couples counseling for parents.	Section 2.5, Eligible Activities, of the RFA describes the type of activities that may be proposed by Applicant. The forms of mental health counseling identified in prospective Applicant's question may be eligible for reimbursement through Medicaid, therefore, those services would not be eligible for reimbursement under the SMART Innovation Grant Program, as grant funds or matching funds may not be used for Medicaid services as stated in Section 5.3(2), Grant Funding Prohibitions, which states "Any use of grant funds or matching money to reimburse an expense or pay a cost that another source, including the Medicaid program, is obligated to reimburse or pay by law or under a Grant Agreement".
23	Section 5.1.2: Startup Funding, pg 25, Start up Funding	Can therapeutic items like play therapy materials, office furniture, technical equipment, etc., be covered under startup funding?	Start-up costs may include the items in prospective Applicant's question, if the funds assist in the initial establishment and operating costs of new SMART Innovative Programs and will not require continued funding in subsequent award years.



#	Reference	Question	Response
24	Section 5.4: Cost Sharing or Matching Requirements, pg 27 Cost Sharing or Matching Requirements	Does "donated services" include voluntary labor?	Voluntary labor may be considered donated services for a Grantee who is otherwise eligible to use in-kind contributions to meet matching requirements.
25	Section 5.4: Cost Sharing or Matching Requirements, pg 27 Cost Sharing or Matching Requirements	Is the "Donations" sections applicable to any entity or only those who meet the 3 listed criteria for substitution of in-kind contributions?	Match funds must be cash contributions, which may be provided through donations from local philanthropic funds. Other forms of donations may be considered for any required Match over ten percent (10%), but only if the in-kind conditions identified at Section 5.4, Cost Sharing or Matching Requirements, are met. Form F, State and Matching Budget Proposal, provides further details on the types of funds to be used for cash contributions.
26	Section 5.3: Grand Funding Prohibitions pg. 26 Grant Funding Prohibitions	Does this section (specifically the first numerical bullet point) mean that we are cannot bill Medicaid?	Grant recipients under this RFA may be Medicaid providers who bill Medicaid. However, grant funds or matching funds may not be used for Medicaid services.
27	Exhibit B Section 11.8 pg 23 Subcontractors	Can we get more clarity around the process of adding a subcontractor with guidelines, requirements, and any other important details to consider?	The RFA does not prohibit the Applicant from using subcontractors to perform direct services/activities. All requirements apply with equal force to Applicant and its subcontractors. An Applicant may detail its proposed use of subcontractors on Form C, Program Response Form, and Form F, State and Matching Budget Proposal. System Agency cannot provide the prospective Applicant legal consultation and/or advice as to specific provisions of HHS's Uniform Terms and Conditions. System Agency recommends that the prospective Applicant consults an attorney with questions regarding Section 11.8, Subcontractors, of HHS's Uniform Terms and Conditions – Grant v. 3.3.



#	Reference	Question	Response
28	Section 2.8 Performance Measures and Monitoring pg 17 Data Requirements	Is there any specific client required state forms for this grant program?	Each Grantee awarded a Grant Agreement as a result of this RFA must meet all reporting requirements set forth in Section 2.7, Required Reports, of the RFA. Additionally, Grantee will receive instructions on the format requirements, including any specific State forms, for all applicable reports. A Grantee must develop all forms administered to Participants. Section 2.6, Program Requirements, of this RFA describes requirements for Participant intake and evaluation.
29	Section 2.6.7 Page number 15 Self-Monitoring Requirements Data for self-Monitoring Reporting	Can we get more clarity around the data requirements- is there a state database that requires data entry or is it just in the required self-monitoring reports where data is reported?	Refer to Section 2.6.7, Self-Monitoring Requirements, of this RFA, which states that "Grantee shall be responsible for monitoring the effectiveness of the Project and the quality of all services provided". Grantee must develop and implement its own self-monitoring requirements. Additionally, there will be data entry requirements for the reports, in accordance with Section 2.7, Required Reports, of this RFA. If selected for a grant award, a Grantee will receive further instructions regarding any applicable database or format requirements for data reporting.
30	Section 2.5 Pages 12-13 Eligible Activities	Would you consider follow up and aftercare an eligible activity for this RFA?	Project designs should support appropriate prevention practices for members of the population identified by Applicant that are at high risk of experiencing a crisis or developing a mental health condition. As stated at Section 2.5, Eligible Activities, of this RFA funds awarded under this SMART Innovation Grant Program must be used for activities and costs associated with implementing innovative strategies to provide the following: 1. Resiliency, coping, and social skills; 2. An increase in healthy social and familial relationships; and 3. Support for building parenting skills and behaviors. More details are needed regarding prospective Applicant's proposed Project to confirm if the services identified in prospective Applicant's question are eligible activities.



#	Reference	Question	Response
31	6.1 Narrative Proposal Page 29 Form C, Program Response Form Required Attachments- Letters of support for Applicant from a minimum of two (2) Community Partners located within Applicant's proposed service area	Who shall our community partners address when providing letters of support (i.e. should they be addressed to you as the point of contact, to HHSC, or to whom it may concern)	The Applicant's letters of support should be addressed to the Sole Point of Contact identified in Section 7.2, Sole Point of Contact, of this RFA.

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Section or paragraph number from this Solicitation; **5.3 Grant Funding Prohibition**, #1 and #2.

Page number of this
Solicitation; 26
Language, topic, section
heading in question; and
Article V. Grant Funding
and Reimbursement
Information

, administers its program to the organization's foster care, kinship care, and treatment family foster care programs, as well as to its two residential treatment facilities, and referrals from community resources and partnerships, where the children served are ages 3-17 and in the temporary or permanent conservatorship of the Department of Family and Protective Services (DFPS). Consistent with the SMART RFA 2.1 Purpose and 2.2 Program Background, communitybased, people-centered, and familydriven, assessment, treatment plan, and behavioral health interventions are strategic in reducing the need for more intensive treatment services, and facilitating healing, recovery, and permanency for the children and families in care. As a nongovernmental non-profit, receives zero funding from the state and essentially operates its behavioral health services programs on rates negotiated with the Managed Care Organizations responsible for healthcare services for children in foster care. The gap between what can be billed for and s' operational costs to deliver highquality mental health services averages between 20% - 35%, which must be covered by fundraising or other revenue streams. Will this RFA pay for the Eligible Activities as outlined under 2.5 on page 12 that can be shown to fall within this 20% - 35% that is not paid

If prospective Applicant's question suggests the use of grant funds to supplement rates for Medicaid services, or replace funds budgeted for the same purpose through non-grant sources, then, no, funds under this RFA may not be expended in such a manner. Refer to Section 5.3, Grant Funding Prohibitions, of this RFA for more details.

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#	Reference	Question	Response
		by another source (Managed Care/Medicaid or non-Medicaid federal funding sources)?	

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Section or paragraph number from this Solicitation; **5.1.2. Startup Funding**Page number of this Solicitation; **25**Language, topic, section heading in question; and **Article V. Grant Funding and Reimbursement Information**

In the fall of 2023 began Treatment Family Foster Care (TFFC) program services in San Antonio and Houston for children with high-acuity behavioral health needs in the Texas foster care system. The TFFC program ensures that some of the most at-risk children with intensive emotional or behavioral needs who are experiencing foster care are placed in the least restrictive setting that is equipped with highly trained parents who are supported by highly trained staff. The overall goal of the TFFC program is to ensure that children with high-acuity behavioral health needs in the Texas foster care system achieve permanency through a model of care that eliminates unnecessary psychiatric hospitalizations and placements in restrictive residential settings. Administered through a comprehensive trauma-focused Treatment Family Foster Care model, 's assessment, treatment plan, and behavioral health interventions are strategically at the core of reducing the need for more intensive treatment services, and facilitating healing, recovery, and permanency for the children in care. With the critical need throughout the state of Texas and ' offices in Austin, Abilene, Dallas, Houston, Clear Lake, Kerrville, Mountain Home, and San Antonio, the organization intends to expand TFFC programming throughout the state; however, start-up costs are significant.

Applicants may use the guidelines under "Instructions" tab on Form F, State and Matching Budget Proposal, as a guide for how to categorize funds. Proposed start-up costs may include the items identified in prospective Applicant's question, if the funds assist in the initial establishment and operating costs of the new innovative Project and will not require continued funding in subsequent award years. Proposed ongoing costs are necessary for continued operating costs, maintenance of the innovative Project, and may be needed for continued funding in subsequent award years.



#	Reference	Question	Response
		Starting up a program entails the hiring and training of key personnel in the administration of the program and an initial outreach and awareness marketing campaign that is geared toward the recruiting and then training of qualified treatment foster care families and homes. Research has shown, and experience has confirmed, that the recruiting and retention of qualified treatment foster parents can be challenging and the supply of TFFC homes is consistently low, so an immediate impactful outreach and awareness marketing strategy is crucial to the success of a TFFC program. Would the funding related to the expansion of this program to be administered from to be administered from other offices be considered startup funding and come from the \$12,000,000 or would it be considered an expansion of existing program locations and come from the other funding stream?	



#	Reference	Question	Response
34	Section or paragraph number from this Solicitation; 2.2 Program Background, paragraph three and 2.3 Eligible Population, #2. Page number of this Solicitation; 11 and 12 respectively. Language, topic, section heading in question; and Article II. Scope of Grant Project	As 'target population across the state consists of children and families in the Texas foster care system and all of 's programming is an intervention aligned with 2.1 Purpose, 2.2 Program Background, 2.3 Eligible Population (where most can be demonstrated as high-risk), addressing 2.4 Eligible Service areas, and administering 2.5 Eligible Activities meeting the required outcomes, but by the sheer nature of the risk factors and needs associated with this target population cannot be considered an early prevention program, will this proposal have equal consideration and be weighted equally or differently than with a prevention program? Is it intended that the focus of this RFA be on preventing children from entering the system vs an intervention for those already in the system?	The factors that will be taken into consideration when awarding grants under this RFA are detailed at (1) Section 9.4, Evaluation Criteria, (2) Exhibit F, Evaluation Tool, and (3) Section 10.1, Final Selection. Under Texas Government Code, Section 531.09915(f)(2), HHSC is required to prioritize entities that work with Children and family members of Children with a high risk of experiencing a crisis or developing a mental health condition to reduce the number of Children at risk of placement in foster care. In accordance with the aforementioned statutory language, HHSC will prioritize Applicants with initiatives that would prevent Children from entering the Texas foster care system.
35		Do you need audited financial statements from the past year to apply for a grant? We have current formal financial documents from past years and this year but those are not audited yet. We are aware that Grantee shall submit quarterly FSRs to the System Agency if we are being selected for it, however, we just don't have Audited ones from past years.	Refer to Addendum No. 3 to this RFA. Applicant must satisfy the requirements listed under Subsection 6.1(1)(c)(i) revised by Addendum No. 3.



#	Reference	Question	Response
36	Startup Funding	I have a question of startup funding the webinar that I just watched stated that for startup funding of <\$500,000 you had to have at least 10% with that 10% are you stating that you would like to see that in my bank account? And also will I have to show how I received it to the show it was received in donations, contributions, or gifted to my organization	Refer to Section 5.4, Cost Sharing or Matching Requirements, of this RFA for additional information on matching fund requirements. Matching funds may be provided through local philanthropic, private, city funds, or county funds specifically designated for the proposed Project. See the instructions and prompts under the "Matching Funds" tab on Form F, State and Matching Budget Proposal, that will allow Applicant to document how it will meet Match requirements under this RFA.
37		What is the target population that can be served with this grant?	Refer to Section 1.2, Definitions and Acronyms, of this RFA which defines Target Population as "the population to be served by the Applicant in its Project design." Additionally, Section 2.3, Eligible Populations, of this RFA states that "The eligible population to be served under this RFA consists of Children, their Caregivers, and individuals working with Children or Caregivers of Children that demonstrate atypical social or emotional development or other challenging behaviors." The terms "Child(ren)" and "Caregiver" are also defined in Section 1.2, Definitions and Acronyms, of this RFA. Additional information about the populations to be served under this RFA can be found at Section 2.3, Eligible Population of this RFA.



#	Reference	Question	Response
38	Section or paragraph number from this Solicitation: Section 3.1 Page number of this Solicitation: Page 22 Language, topic, section heading in question: LEGAL AUTHORITY TO APPLY: "Each Applicant may submit multiple Grant Applications if applying for more than one innovative Project."	Our organization wishes to propose several project activities with similar objectives and proposed outcomes. This includes a 24/7 Youth Therapeutic Respite Program based in one county, as well as counselors embedded in school/community locations in another county. Do we need to submit two separate grant applications, or may we illustrate through one application how the Community Assessment of Need and proposal supports both activities?	Refer to Section 3.1, Legal Authority to Apply, of this RFA which states in its last paragraph that "Each Applicant may submit multiple grant Applications if applying for more than one innovative Project". Each Project may support multiple Project activities with similar objectives and proposed Outcomes for the proposed Project. An Applicant should decide based on the unique details of its proposed Project, and its proposed Community, whether it should submit multiple grant Applications. Note: The Project activities mentioned in Question #39 may be eligible for reimbursement through Medicaid. Grant funds or Match funds may not be used for Medicaid services.
39	Section or paragraph number from this Solicitation:11.8 Page number of this Solicitation: 23Language, topic, section heading in question: SUBCONTRACTORS	We are interested in partnering with another local community organization for this grant opportunity. Should both organizations apply together and fill out one application (choose a lead organization) OR should each organization fill out a separate application?	An Application in response to this RFA must be submitted by an Applicant. Refer to Section 1.2, Definitions and Acronyms, for Applicant's definition. Grantee may, with prior written approval of the System Agency, enter a contract with any individual or entity to perform part or all of the obligations under any Grant Agreement awarded as a result of this RFA. Refer to Section 2.8, Performance measures and Monitoring, of this RFA which states in its first paragraph that "The System Agency will look solely to Grantee for the performance of all Grantee obligations and requirements in a Grant Agreement resulting from this RFA. Grantee shall not be relieved of its obligations for any nonperformance by its subgrantees or subcontractors, if any." If multiple entities are proposing to provide services for a Project, there must be a lead entity. The lead entity will be the "Applicant." Other entities, not filling the role of lead entity, may act as Applicant's subcontractors in fulfilling the proposed services. All requirements apply with equal force to Applicant and its subcontractors. An Applicant may outline it proposed use of subcontractors in Form C, Program Response Form, and Form F, State and Matching Budget Proposal.

HHS Responses to Questions



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Form E, Section 3a, "Community Outcomes" Entire section (all paragraphs)

- A. Page 3 Text of passage:
 - a. Applicant must choose at least ONE (1) of the following Outcomes, or propose an alternative Outcome based on the unique characteristics of its Project. Applicant must identify its proposed methodology and performance targets, explain how the Project will impact the desired Outcome, and, if applicable, how it will impact any of the Community characteristics listed in Section 2.4, Eligible Services Areas, of this RFA, and the Applicant's CAN (see Form D, Community Assessment of Needs). Applicant may only present methodologies, performance

For these "community outcomes," does the grant expect them to be measured just for participants in the program, or is the expectation that we will be able to measure these for the larger community (e.g., including people who do not participate in the program)? If it is the larger community, can the applicant define the community (e.g., a certain few neighborhoods), or do you expect a more formal definition (e.g., city limits, census tract, metro statistical area, etc.)

If they are just measured for participants, is it acceptable to use participant self-reporting on these measures (e.g., using a pre/post survey design), or would we have to find some other method of measuring these outcomes?

Form E, Section 3(a), Community Outcomes, assesses progress directly or towards the positive Outcomes selected by the Applicant for the Community being served. An Applicant may propose a methodology for the Outcome in the proposed Community to be served in its Application based on the unique characteristics of its Project. "Community" is defined in Section 1.2, Definitions and Acronyms, of this RFA as "an area of the State, defined by ZIP code, city, county, or other geographic designation."

Applicant may only present methodologies that are evidence-based or otherwise demonstrate positive progress towards the Outcomes identified on Form E, Section 3(a), Community Outcomes. The content available for selection by Applicant are more likely to be measured using the larger Community. Given the innovative nature of this RFA, HHSC will consider Applications that use Participant self-reporting to achieve these Outcomes.

Applicants must explain how the Project will impact the chosen Outcome, and, if applicable, how it will impact any of the Community characteristics listed in Section 2.4, Eligible Services Areas, of this RFA, and the Applicant's CAN (refer to Form D, Community Assessment of Needs).



targets, and alternative Outcomes that are evidence-based or otherwise demonstrate positive progress towards the below Outcomes. b. Reduced involvement in the juvenile justice system. c. Reduced foster care placement and/or relinquishment (e.g. expanded participation in the Relinquishment Avoidance Program). d. Reduced emergency room use. e. Reduced admissions to state hospitals, inpatient mental health facilities, and residential behavloral health facilities. f. Reduced need for future intensive mental health services.				
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#	Reference	Question	Response
41	5.3 GRANT FUNDING PROHIBITIONS, section 3, page 26.	Are religious organizations automatically disqualified or does it qualify for an exemption? If a religious organization is not disqualified, what are the parameters to operate under this grant?	Refer to Section 1.1, Executive Summary, of this RFA which states that Eligible Applicants must be one of the following types of entities: A. A hospital licensed under Chapter 241 of the Texas Health and Safety Code; B. A mental hospital licensed under Chapter 577 of the Texas Health and Safety Code; C. A hospital district; D. A local mental health authority; E. A child-care facility, as defined under Texas Human Resources Code § 42.002(3); F. A county or municipality; or G. A nonprofit organization that is exempt from federal income taxation under Section 501(a) of the Internal Revenue Code of 1986, by being listed as an exempt entity under Section 501(c)(3) of that code. A religious organization may qualify as an eligible Applicant, if it is one of the above listed types of entities. For additional information on prohibitions applicable to eligible entities, see Section 5.3, Grant Funding Prohibitions, of this RFA.
42	6.1 NARRATIVE PROPOSAL, 1.c.i, page 29	Are family owned businesses disqualified if they do not have audited financial statements? If they do not have it, are back audits allowed?	Refer to Addendum No. 3 to this RFA. Applicant must satisfy the requirements listed under subsection 6.1(1)(c)(i) revised by Addendum No. 3.



#	Reference	Question	Response
43	P. 14, Section 2.6.4, subparagraph 2 requires HHSC approval prior to communication and outreach strategies prior to distribution	Is there a timeline and a specific point of contact for HHSC review if approval is required?	Timeframe and specific points of contact for HHSC review will be communicated to Grantee after Effective Date of Grant Agreement.
44	P. 22, Section 3.3, paragraphs 2-4 regarding good standing	How does HHSC define "good standing" and does it exclude placement on heightened monitoring pursuant to the foster care lawsuit also known as M.D. v. Abbott? Additionally, Is the inquiry into good standing for the primary grantee or also for community organizations who may participate in association with the grantee?	Applicants in good standing must meet all requirements in Section 3.3, Grant Award Eligibility, of this RFA. An Applicant may check its standing status through the Texas Comptroller website at the following URL: https://comptroller.texas.gov/taxes/franchise/coas-instructions.php . Alternatively, an Applicant my check its status through the Secretary of State website at the following URL: https://www.sos.state.tx.us/corp/sosda/index.shtml . Heightened monitoring should not prevent an organization from being in good standing as long as HHSC or another regulatory/licensing agency has not revoked the organization's permitor ability to provide the child care operation. All requirements in this RFA apply with equal force to Applicant and its subgrantees or subcontractors, if any.



#	Reference	Question	Response
45	P. 25, Section 5.2 reads that "There is no guarantee of total reimbursements to be paid to any Grantee under any Grant Agreement, if any, resulting from this RFA."	Does HHSC intend this to mean that a negotiated agreement with payment amounts would not be honored or simply that there is discretion in determining whether a cost incurred is reimbursable?	Refer to Section 3.1, Excess Obligations Prohibited, of the Exhibit B, HHS Uniform Terms and Conditions – Grant, Version 3.3, Effective November 2023, which states that "This Grant Agreement is subject to termination or cancellation, without penalty to System Agency, either in whole or in part, subject to the availability and actual receipt by System Agency of state or federal funds." Section 3.1 further states that "System Agency is a state agency whose authority and appropriations are subject to actions of the Texas Legislature." Refer to Section 5.1.1, Project Period Funding, of the RFA which states that "Reimbursement will only be made for actual, allowable, and allocable expenses that occur within the Project Period." Each Grantee awarded a Grant Agreement as a result of this RFA must also meet all reporting requirements set forth in Section 2.7, Required Reports, of the RFA.



#	Reference	Question	Response
46	Pg. #: 22 Sec. / Paragraph #: Article 3, Sec. 3.2, Prg. 1 Topic: Eligibility of Collaborative Projects Between Organizations	Are partnerships between multiple organizations (e.g. nonprofit organizations, child care facilities, local mental health authorities, etc.) considered eligible under this RFP for a single unified proposal that meets all other criteria? Is there any preference given to collaborative proposals between multiple eligible organizations?	An Application in response to this RFA must be submitted by an Applicant. Refer to Section 1.2, Definitions and Acronyms, of this RFA for Applicant's definition. Grantee may, with prior written approval of the System Agency, enter a contract with any individual or entity to perform part or all of the obligations under any Grant Agreement awarded as a result of this RFA. Refer to Section 2.8, Performance measures and Monitoring, of the RFA which states in its first paragraph that 'The System Agency will look solely to Grantee for the performance of all Grantee obligations and requirements in a Grant Agreement resulting from this RFA. Grantee shall not be relieved of its obligations for any nonperformance by its subgrantees or subcontractors, if any. If multiple entities are proposing to provide services for a Project, there must be a lead entity. The lead entity will be the "Applicant." Other entities, not filling the role of lead entity, may act as Applicant's subcontractors in fulfilling the proposed services. All requirements apply with equal force to Applicant and its subcontractors. An Applicant may outline it proposed use of subcontractors on Form C, Program Response Form, and Form F, State and Matching Budget Proposal. Subcontractors may be considered Community partners. An Applicant may describe its Community partners are involved in the development of the proposed Project. Additionally, on Form C, Program Response Form, Applicant may identify how the proposed Project supports collaborative initiatives that lead to positive outcomes for Children and families. The RFA does not distinguish preferences on types of Community partners however
			collaborative proposals are given preference through the evaluation criterion, "Community Engagement and Assessment of Needs," as identified at Section 9.4, Evaluation Criteria, of this RFA.