

**Request for Applications (RFA) Announcement:
Community Mental Health Services (CMHS)
Community Mental Health Services Block Grant (CMHS BG)**

The State of Nevada, through the Department of Health and Human Services (DHHS), Division of Public and Behavioral Health (DPBH), Bureau of Behavioral Health Wellness and Prevention (BBHWP) is pleased to announce the availability of funding through the Community Mental Health Services Block Grant (CMHS BG) to fund critical mental health services in Nevada for adults with Serious Mental Illness (SMI) and children with Serious Emotional Disturbance (SED).

The award period will run from October 1, 2025, through September 30, 2027. This will be divided into two budget periods:

- Budget Period #1-October 1, 2025-September 30, 2026
- Budget Period #2-October 1, 2026-September 30, 2027

This application will be used to fund both budget periods. Please use the budget template to create two budgets, one for Budget Period #1 and one for Budget Period #2.

Background:

The [Community Mental Health Services Block Grant \(CMHS BG\)](#) is provided through the Substance Abuse and Mental Health Services Administration (SAMHSA). CMHS BG provides funding for community mental health services. It is available to all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and 6 Pacific jurisdictions.

CMHS BG funding has a core objective to support grantees in carrying out comprehensive community-based mental health services. The CMHS BG is authorized by [sections 1911-1920 of Title XIX, Part B, Subpart I and III of the Public Health Services \(PHS\) Act](#). CMHS BG funds are flexible and can be used for both new and innovative programs or be used to maintain current programs, if goals align with priority areas and strategies, as identified within this announcement.

Utilizing the next CMHS BG award, the State of Nevada DHHS DPBH BBHWP is seeking applications from community stakeholders to support the state's efforts to provide mental health services to Nevadans, including uninsured populations, services not covered through insurance, innovative programs, maintenance of programs, and services that fill service gaps.

Applications must align with two or more priority areas, as identified in the BBHWP Strategic Plan, to be considered for funding. Please see these priority areas in the Funding Priorities section below.

Funding Priorities:

While CMHS BG funds are flexible for both new and innovative programs or to maintain current programs, per requirements by SAMHSA, they must be used for the targeted populations below.

Targeted Populations:

Adults with Serious Mental Illness (SMI)

This includes adults 18 years of age and older, who currently or at any time in the past year have had a diagnosable mental, behavioral, or emotional disorder that meets the defining criteria specified in the American Psychiatric Association (APA) Diagnostic and Statistical Manual 5 (DSM 5) that has resulted in serious functional impairment. Serious functional impairment is defined as difficulties that substantially interfere with or limit one or more major life activities, such as basic living (eating, dressing), instrumental living (taking prescribed medications or getting around the community, participating in family school or workplace). Other impacts on life may include maintaining housing, employment, education, relationships, or safety. Conditions that are excluded from the diagnosis of SMI are substance abuse or addictive disorders, irreversible dementia, as well as intellectual disabilities, unless they co-occur with another SMI that meets current diagnostic criteria.

Children with Serious Emotional Disturbance (SED)

This includes children and youth up to but not including age 18 who have had a diagnosable mental, behavioral, or emotional disorder (as defined by the DSM 5) in the past year that resulted in functional impairment that substantially interfered with or limited the child's or youth's role or functioning in family, school, or community activities. Conditions that are excluded from the diagnosis of SED are substance abuse or addictive disorders, irreversible dementias, as well as intellectual disabilities and other related conditions, unless they co-occur with another SED that meets current diagnostic criteria and that results in functional impairment.

Priority Areas:

Programs must be implemented and delivered using evidence-based and best practices, with the use of outcome measurements and assessments to determine program success. Applicants may submit applications to implement a range of activities.

Applicants must address **two or more** of the BBHWP Strategic Plan priority areas in their application:

- **Primary Care Integration:** Medical and mental health services delivered together in Federally Qualified Health Centers (FQHC), by primary care practitioners, or in emergency departments for crisis intervention, including for overdose and suicide prevention.
- **Expand Early Intervention and Support:** Strengthen community-based mental health programs, increase school-based services, and enhance peer support to address anxiety, depression, and trauma before they escalate.

- **Combat Stigma through Education:** Dissemination of standardized, robust community-wide mental health literacy initiatives to normalize conversations and promote timely help-seeking.
- **Enhance Workforce Capacity:** Investment in recruiting, training, and retaining mental health professionals in underserved rural and frontier areas with priority given to Certified Community Behavioral Health Clinics (CCBHC) in rural and frontier Nevada.
- **Address Geographical and Access Barriers:** Allocate resources strategically to reduce regional disparities and transportation challenges and expand telehealth opportunities.
- **Implement Comprehensive Holistic Care:** Promote integrated and holistic treatment models, including offering supportive transitional living arrangements.
- **Expand Youth-Focused Mental Health Services:** Prioritize consistent school-based mental health interventions and comprehensive community education programs targeting youth.
- **Remove Structural Barriers:** Expand transportation solutions and reduce gaps.
- **Address Homelessness:** Expand outreach services and programs for homeless individuals.

Priority Programs:

Programs for Adults with Serious Mental Illness (SMI)

BBHWP is seeking applications for services for adults with Serious Mental Illness (SMI). Programs should focus on community-based treatment options to improve symptoms, promote healthy development, preserve interpersonal relationships, continue engagement in education and/or employment, maintain or restore the highest levels of functioning across all domains, and are provided in the least restrictive setting.

Services and supports eligible for funding include:

- Programs that provide integrated medical and mental health supports to treat the whole person.
- Programs that address transportation gaps, ensuring mental health services are physically attainable.
- Programs that utilize peer support specialists.
- Programs to reduce the stigma of mental illness and increase help seeking behavior.
- Programs for homelessness outreach and programming.
- Programs for early intervention and supports for young adults.
- Programs that provide internships and training hours for new mental health practitioners and peer support specialists.
- Programs focused on increasing culturally competent mental health services within the Hispanic population.
- Programs targeted at providing mental health services to individuals living in rural and frontier counties.

- Programs targeted at expanding telehealth services to decrease regional disparities and transportation challenges.
- Programs that provide services for people in crisis.
- Programs that provide for mental health support lines, operated by certified Peer Support Specialists, to provide mental health supports to those who are suffering from mental health distress.
- Programs for step down supports for adults transitioning back into the community after discharge from inpatient or residential treatment.
- Programs for intensive in-home treatment.
- Programs for community-based wrap around care coordination.
- Programs for peer supports and/or in-home habilitation services for adults, to reduce imminent risk of inpatient treatment.
- Programs for innovative community-based programs and services that increase and expand mental health services.

(Resource*: <https://store.samhsa.gov/sites/default/files/sma16-4957.pdf>,
<https://www.samhsa.gov/find-help/disorders>)

*The resources listed above are supplemental materials meant to serve as a tool for applicants and are not exhaustive guides for what is and is not allowable.

Programs for Children with Serious Emotional Disturbance (SED)

BBHWP is seeking applications for services for children with Serious Emotional Disturbance (SED). Programs should focus on community-based treatment options to improve symptoms, promote healthy development, preserve child, youth, and family/caregiver relationships, continue engagement in education, maintain or restore the highest levels of functioning across all domains, and are provided in the least restrictive setting.

Services and supports eligible for funding include, but are not limited to:

- Programs that provide integrated medical and mental health supports to treat the whole child.
- Programs that address transportation gaps to ensure mental health services are physically attainable.
- Programs that provide mental health, crisis, and substance use prevention delivered in school settings.
- Programs that utilize peer support specialists.
- Programs to reduce the stigma of mental illness and increase help seeking behavior.
- Programs for early intervention and supports for young adults.
- Programs that provide internships and training hours for new mental health practitioners and peer support specialists.
- Programs focused on increasing culturally competent mental health services within the Hispanic population.
- Programs targeted at providing mental health services to individuals living in rural and frontier counties.

- Programs targeted at expanding telehealth services to decrease regional disparities and transportation challenges.
- Programs that provide services for children in crisis.
- Programs that provide for mental health support lines, operated by certified Peer Support Specialists, to provide mental health supports to those who are suffering from mental health distress.
- Programs for screening, assessments, referrals, and direct services in school-based or community-based settings for children, youth, and families experiencing behavioral health or crisis events.
- Programs for outpatient behavioral health services across the continuum including outpatient, intensive outpatient, and partial hospitalization programs (PHP) services.
- Programs for outpatient day treatment services.
- Programs for step down supports for youth transitioning back home after discharge from inpatient or residential treatment.
- Programs for intensive in-home treatment.
- Programs for community-based wrap around care coordination.
- Programs for in-home habilitation services for children and youth, to reduce imminent risk for out of home placement.
- Programs for innovative community-based programs and services that increase and expand mental health services.

(Resource*: <https://www.samhsa.gov/find-help/disorders>)

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Peer Recovery Support Services

BBHWP is seeking applications for programs that utilize Peer Recovery Support Services. Peer Recovery Support Services are offered by specially trained and certified Peer Support Specialists who have lived experience and have sustained recovery from a mental health and/or substance use condition. Currently, Peer Recovery Support Specialists are certified through the Nevada Certification Board.

BBHWP is prioritizing programs that utilize peer services that address anxiety, depression, and trauma, before they escalate, for the following populations:

- Veterans, including addressing health equity
- Lesbian, gay, and bisexual (LGB) individuals
- Seniors aged 65 years and older
- Individuals re-entering the community after incarceration

Peer recovery supports include emotional supports, demonstrating empathy, caring, or concern to bolster self-esteem and confidence; informational supports, sharing knowledge and information, and providing life or vocational skills training; concrete assistance to help individuals accomplish

tasks; and facilitate contacts with others to promote social and recreational engagement, create community cohesion, and promote a sense of belonging.

Services provided by peer recovery supports generally include, but are not limited to, the following:

- Peer mentoring or coaching
- Peer-led or facilitated recovery support groups
- Recovery resource connections
- Parenting classes
- Job readiness training
- Wellness seminars
- Childcare
- Transportation
- Building communities through increased social connections
- Help with connections to health care, employment, housing, education, social services, and individualized resources
- Alcohol-and-drug-free social opportunities

(Resource*: <https://library.samhsa.gov/product/what-are-peer-recovery-support-services/sma09-4454>)

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Workforce Pipelines

BBHWP is seeking applications to develop workforce pipelines, especially in Certified Community Behavioral Health Clinics (CCBHC). A workforce large and accommodating enough to meet the needs of Nevadans in urban, suburban and rural areas is critical as the state grows and mental health needs rise. Funded programs will work to increase qualified and culturally competent professionals, for example, through trainings, internships, certifications, and strategies to keep more practitioners in Nevada.

The BBHWP is seeking workforce development projects for the following professionals:

- Psychiatrists
- Psychologists
- Social Workers
- Advanced Practice Psychiatric Nurses
- Marriage and Family Therapists
- Certified Prevention Specialists
- Addiction Counselors
- Mental Health/Professional Counselors
- Psychiatric Rehabilitation Specialists
- Psychiatric Aides and Technicians

- Paraprofessionals in psychiatric rehabilitation and addiction recovery fields (e.g., case managers, homeless outreach specialists, or parent aides)
- Peer Support Specialists
- Recovery Coaches

(Resource*: <https://www.samhsa.gov/workforce>)

*The resources listed above are supplemental materials meant to serve as a tool for applicants and are not exhaustive guides for what is and is not allowable.

Additional Requirements

For any program area, if the applicant is providing telehealth services, telehealth providers must be located within the United States and, if licensed, currently licensed to practice in Nevada.

Additionally, all program applicants will be required to submit time and effort reporting with their request for reimbursements.

Unallowable Expenses and Activities:

When applying for Nevada CMHS BG funding, it is important to ensure that the proposed budget and activities align with SAMHSA's guidelines for allowable expenses. The following is a list of unallowable expenses and activities that cannot be funded under this grant program:

- 1. Advertising and Public Relations:** Advertising and public relations costs are generally unallowable except under the instances allowed by federal regulations such as program outreach and other specific purposes necessary to meet the requirements of the federal award.
- 2. Automobile Costs for Personal Use:** The portion of automobile costs furnished by the entity that relates to personal use by employees (including transportation to and from work) is unallowable as either fringe benefit or indirect (F&A) costs.
- 3. Contingency Funds:** Contingency funds or funds set aside for events whose occurrence cannot be foretold with certainty as to time, intensity, or assurance of their happening are unallowable under non-construction grants.
- 4. Entertainment:** Costs of entertainment, including amusement, diversion, and social activities and any associated costs are unallowable, except where specific costs that might otherwise be considered entertainment have a programmatic purpose and are authorized either in the approved budget for the Federal award or with SAMHSA's prior written approval.
- 5. Goods and Services for Personal Use by the non-Federal entity's employees:** Costs for these items are unallowable.

- 6. Incentive Compensation:** Generally unallowable; however, allowable for employees only if based on cost reduction, or efficient performance, suggestion awards, safety awards, etc., to the extent that the overall compensation is reasonable and paid or accrued based on an agreement between the organization and the employees before the services were rendered, or based on an established plan followed by the organization so consistently as to imply an agreement to make such payment.
- 7. Lobbying/Political Activities:** The costs of certain influencing activities (i.e., attempts to influence the enactment or modification of any pending legislation through communication with any member or employee of the state legislature, or with any government official or employee concerning a decision to sign or veto enrolled legislation) associated with obtaining grants, contracts, cooperative agreements, or loans is unallowable.
- 8. Major Alteration and Renovation (A&R):** Payment for the purchase or construction of any building or structure to house any part of the program is unallowable. Minor A&R of existing facilities, if necessary and appropriate for the project, may be authorized for up to 25 percent of the total approved budget (direct and indirect costs) for a budget period, or \$150,000, whichever is less. Minor A&R may not include a structural change (e.g., to the foundation, roof, floor, or exterior or loadbearing walls of a facility, or extension of an existing facility) to achieve the following: Increase the floor area; and/ or, change the function and purpose of the facility. SAMSHA must approve all minor A&R.
- 9. Meals:** Meals are generally unallowable unless they are a part of per diem or are specifically stated as an allowable expense in the NOFO.
- 10. Miscellaneous expenses:** “Miscellaneous” expenses are unallowable. Budget line items should reflect specific expenses only. See item 3– Contingency Funds.
- 11. Promotional Materials:** Funds must not be used to pay for promotional items and memorabilia including, but not limited to, gifts, souvenirs, clothing, and commemorative items such as pens, mugs/cups, folders/folios, lanyards, and conference bags.

Additional budgeting guidance can be found in [SAMHSA Budget Guidance](#).

In addition, funding may not be used to pay for any Medicaid-reimbursable services or for any staff salaries to deliver any Medicaid-reimbursable services. If services are to be delivered to uninsured individuals, a fee for service model based on Medicaid rates should be included in the proposed budget. Please see [Nevada Medicaid Fee Schedule](#).

Cost Sharing/Matching:

Cost sharing/matching is not a requirement for this funding.

Requirements for Mental Health Client Level Data (MH-CLD) Data Collection and Reporting:

As a condition of funding under CMHS BG, all entities providing direct services are required to submit Mental Health Client-Level Data (MH-CLD).

What is MH-CLD Data?

MH-CLD data provides information on mental health diagnoses and mental health treatment services, outcomes, and demographic and substance use characteristics of individuals in mental health treatment facilities that report to individual state administrative data systems.

The MH-CLD system works with states to collect data on the demographic, clinical, and outcome characteristics of individuals receiving mental health treatment services. MH-CLD helps SAMHSA and state-level agencies understand mental health needs and available services.

Data Collection and Reporting Requirements

The required MH-CLD data will be reported via Excel spreadsheet or web-based data submission platform. This information will be provided to subgrantees. Data must be collected on an ongoing basis and submitted monthly, in the same timeframe as request for reimbursement claims. Any changes to data collection and the method used for reporting will be communicated in advance.

Training and Technical Assistance:

Upon award and throughout the subgrant period, subgrantees will receive technical assistance and training, as needed, from a BBHWP staff, to effectively implement and monitor the program.

Eligibility:

CMHS BG funding is designed to support a wide range of entities committed to providing quality mental health services across the state. CMHS BG funding is available to various types of organizations that have demonstrated the capacity to deliver impactful services. This includes:

Nevada-Based Government Agencies: County health departments, city governments, state agencies, and other local government entities may apply for the CMHS BG grant to support the continuum of mental health services at the community level. These entities often work closely with healthcare providers, law enforcement, and community-based organizations to implement programs and services.

Community-Based Organizations: Nonprofit organizations, community health centers, mental health providers, tribal entities, and other community-based organizations may apply for CMHS BG funding to expand access to services, provide education and outreach, and support individuals affected by all stages and severity of mental illness.

Healthcare Providers: Hospitals, clinics, and healthcare systems may apply for the CMHS BG grant to enhance mental health services, such as Assertive Community Treatment (ACT), crisis prevention, monitoring and management of mental health disorders, integrated care and case management and behavioral therapies. These entities play a crucial role in delivering healthcare services and addressing the needs of individuals with mental health disorder.

Coalitions and Partnerships: Collaborative efforts involving multiple stakeholders, including government agencies, healthcare providers, community organizations, and advocacy groups, may apply for the CMHS BG grant to implement comprehensive strategies to address mental illness. These partnerships leverage diverse expertise and resources to maximize impact.

Experience Requirement: SAMHSA requires that each mental health organization have at least 2 years of experience providing relevant services, as of July 1, 2024. This ensures the organizations have established a track record in delivering services before they can receive CMHS BG funding.

Informational Webinar:

An informational webinar will be held on **Thursday, May 8, 2025, at 2 PM** to provide an overview of the Mental Health Block Grant application requirements. This webinar will offer interested applicants an opportunity to learn more about the funding process, key application components, and eligibility criteria. Additionally, there will be a Q&A session to address any questions. We encourage all interested applicants to attend this webinar to ensure a thorough understanding of the application process.

Details on how to join the webinar:

Microsoft Teams [Need help?](#)

[Join the meeting now](#)

Meeting ID: 263 788 502 688 9

Passcode: cV9f5pA6

Dial in by phone

[+1 775-321-6111,,235775375#](#) United States, Reno

[Find a local number](#)

Phone conference ID: 235 775 375#

Information will also be posted on the DPBH webpage here:

https://dpbh.nv.gov/Programs/BHWP/Mental_Health_Programs/CMHS_RFA.

Letter of Intent Submission:

Letter of Intent

Entities interested in applying for funding are asked to submit a short Letter of Intent (LOI) to the Community Mental Health Services (CMHS) section **by 11:59 PM PST on Thursday, May 15, 2025**.

The LOI should include:

- Name of Organization
- Contact Information
- Which targeted population/priority area your project addresses
- Project Period Dates
- Estimated Funding Request

Letters of Intent must be submitted here:

<https://app.smartsheet.com/b/form/e9f37292c5b344909e4db315ffe57668>

Application Submission:

Application

The announcement, application, budget template, and Funding Acknowledgement Form will be available on the DPBH webpage here:

https://dpbh.nv.gov/Programs/BHWP/Mental_Health_Programs/CMHS_RFA

Applications must be submitted here:

<https://app.smartsheet.com/b/form/e269d7c7fabd4efc8cde5d1a2ebf7709>

Applications must be submitted **by 11:59 PM PST on Sunday, June 15, 2025.**

To apply, please submit the following:

- CMHS BG Application,
- Budget,
- Funding Acknowledgement Form,
- Other required attachments.

Late applications are not guaranteed funding during this budget period. However, they may be considered for inclusion in an application pool for potential funding opportunities at a later date, subject to the availability of funds and the priorities of the program.

The Bureau of Behavioral Health Wellness and Prevention reserves the right to reject any application upon initial review, if the required minimum qualifications are not included in the application.

This application is for Community Mental Health Block Grant (CMHS BG) funding only. If you are interested in applying for Projects for Assistance in Transition from Homelessness (PATH) or Early Serious Mental Illness (ESMI) funding, you will need to complete separate applications.

Questions

Please submit any questions you may have here

<https://app.smartsheet.com/b/form/e7a5099676d740138245abc880cd6990> **by 11:59 PM PST on Friday, May 23, 2025.**

Answers will be provided to each individual and posted to the DPBH webpage here

https://dpbh.nv.gov/Programs/BHWP/Mental_Health_Programs/CMHS_RFA under the Frequently Asked Questions (FAQ) section by Friday, May 30, 2025.