

COMMUNITY MENTAL HEALTH SERVICES (CMHS) EARLY SERIOUS MENTAL ILLNESS (ESMI) PROGRAM APPLICATION

<i>I. Applicant Information</i>	
Organization Name:	
Employer Identification Number (EIN):	
State of Nevada Vendor ID # (if applicable):	
Unique Entity Identifier (UEI):	
Primary Contact:	
Project Title:	
Email Address:	
Phone Number:	
Mailing Address:	
Physical Address(es)*:	

*Note: If the applicant has more than one location, include all locations that would be providing services under this application, and any other BBHWP subawards. In your application, include information on what services will be provided at each location and, in your budget, what proposed funds will be used at each location.

<i>II. Funding Opportunity Overview</i>	
Funding Agency:	This grant opportunity is supported by the Community Mental Health Services (CMHS) Block Grant, which is administered by the U.S. Department of Health and Human Services / Substance Abuse and Mental Health Services Administration (SAMHSA) and awarded to the states. The CMHS Block Grant is administered locally by the Nevada Department of Health and Human Services (DHHS) / Division of Public and Behavioral Health (DPBH) / Bureau of Behavioral Health Wellness and Prevention (BBHWP).
Award and Budget Periods:	<p>Award Period: October 1, 2025 - September 30, 2027</p> <p>Budget Period #1: October 1, 2025 - September 30, 2026</p> <p>Budget Period #2: October 1, 2026 - September 30, 2027</p>
Budget Information:	<p>Type of Funding: The Department of Health and Human Services/Division of Public and Behavioral Health (DHHS/DPBH/BBHWP) announces the availability of funding to support the Nevada Early Serious Mental Illness (ESMI) Program. This opportunity will depend upon the availability of federal funds that are awarded to the State by the Substance Abuse and Mental Health Services Administration (SAMHSA) for the Budget Periods outlined above. All</p> <p>Amount of Funding: The SAMHSA CMHS Block Grant is non-discretionary and requires at least 10% of the total amount that is allocated to each state to be used to support mental health services for early serious mental illness (ESMI).</p> <p>Medicaid Reimbursement: Direct services that qualify for Medicaid reimbursement will not be funded through the CMHS Block Grant. Direct service providers must be eligible for Medicaid reimbursement.</p> <p>For any enrollment-related questions, please contact the Nevada Medicaid Provider Enrollment Unit at (877) 638-3472, available Monday through Friday from 8 a.m. to 5 p.m. Pacific Time.</p> <p>Timeline of Funding: The project period extends through September 30, 2027, and the initial budget should account for expenses from the start of the project through September 30, 2026. Budgets must be resubmitted annually for each subsequent year of the project: <u>Budget period #1:</u> October 1, 2025 – September 30, 2026, and <u>Budget period #2:</u> October 1, 2026 – September 30, 2027.</p>
Background:	TARGET POPULATIONS for this Request for Applications (RFA) for Early Serious Mental Illness

	<p>The CMHS Block Grant aims to ensure that all persons have equitable access to high-quality mental health services that promote recovery, health, and wellbeing. The mission of Division of Public and Behavioral Health (DPBH) is to improve the physical and behavioral health of all Nevadans.</p> <ol style="list-style-type: none"> <u>1. Early-stage Serious Mental Illness (ESMI)–With Psychosis</u>, including the following: <ol style="list-style-type: none"> 1-A: First Episode of Non-Affective Psychosis (first-episode Schizophrenia Spectrum Disorder and Other Psychotic Disorders); and 1-B: Early-stage Affective Psychosis (early-stage Bipolar I Disorder with Psychotic Features). <u>2. Early-stage Serious Mental Illnesses (ESMI)–Without Psychosis in Nevada’s adolescents and transition-age youth (ages 12-25)</u>, including the following: <ol style="list-style-type: none"> 2-A: Early-stage Depressive, Anxiety, and Substance Use Disorders; and 2-B: Early-stage Serious Mental Health Distress and Concerns (for example, Suicide-related behaviors) <p>Funds are available from Substance Abuse & Mental Health Services Administration (SAMHSA), Community Mental Health Services (CMHS) Block Grant, and its set-aside for ESMI, which is dedicated to mental health services for the target populations of individuals experiencing <u>Early Serious Mental Illness (ESMI)</u>.</p> <p style="text-align: center;">EARLY DETECTION PROGRAMS THAT WILL BE CONSIDERED</p> <ul style="list-style-type: none"> Programs within the following areas will be considered: <ul style="list-style-type: none"> Schools Pediatrician and other primary care provider offices Justice system and child welfare settings Intersection with Nevada’s 988 <p>COMPREHENSIVE TREATMENT AND RECOVERY PROGRAMS THAT WILL BE CONSIDERED, including:</p> <ul style="list-style-type: none"> Coordinated Specialty Care for Early Psychosis Collaborative Care Schools-based services
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III. Letter of Intent

I. Entities interested in applying for funding are asked to submit a short Letter of Intent (LOI) to the Early Serious Mental Illness/First Episode of Psychosis Team before submitting the full application. The LOI should include the following:

- Name of Organization
- Contact Information
- Identify which funding priorities (target populations and programs) your project addresses
- Project Period Dates
- Estimated Funding Request

Submission Deadline for LOI: **By 11:59 PM PST on Tuesday, May 27, 2025**

LOI Submission Method: The Letter of Interest (LOI) should be submitted through the following link via Smartsheet:
<https://app.smartsheet.com/b/form/e9f37292c5b344909e4db315ffe57668>
 The LOI will help the Early Serious Mental Illness application reviewers anticipate application volume.

IV. Project Overview

Project Summary: Provide a summary of your project, including the main objectives, target population, how it aligns with the BBHWP Strategic Plan Priority Areas and key activities (200-300 words).

Alignment with BBHWP Priority Areas ESMI applications must be linked to two or more of the following Priority Areas:

Check all that apply:

- ☐ Schools-based Mental Health Services
- ☐ Primary and Mental/Behavioral Health Care Integration
- ☐ Peer Support Services
- ☐ Workforce Pipelines

☐ Stigma Reduction Strategies

☐ Homelessness

☐ Transportation Gaps

Project Timeline:

Please use the Award and Budget Periods outlined above to provide your project's timeline. Provide a detailed timeline of your project, including key milestones and deliverables (300-500 words).

V. Statement of Need

**Data Driven
Justification:**

Include specific data and evidence that demonstrate the need for your project, focusing on health disparities and the demographic characteristics of the population(s) of focus (500-700 words).

Target Population:

Specify the primary and any secondary populations that your project will serve, including any of the following priority populations listed under "Funding Priorities" in the ESMI RFA Announcement (200-300 words).

VI. Project Goals and Objectives

**Project Goals and
Objectives:**

List the specific goals and objectives of the project using the SMART framework (Specific, Measurable, Achievable, Realistic, Time-bound) (300-500 words).

VII. Proposed Activities

Proposed Activities:	Applicants may propose a range of activities related to mental health services. Please see “Funding Priorities” in the CMHS RFA Announcement for more information (500-700 words).
Evidence-Based Practices (EBPs)	<p>Describe the evidence-based practices and best practices that will be used in your project. If applicable, explain any modifications to EBPs and justify the need for such modifications. Explain the use of any assessments and outcome measures that will be used to determine project effectiveness. (500-700 words).</p> <p><u>Resources:</u></p> <ol style="list-style-type: none"> 1. https://www.navigateconsultants.org/ <p>NAVIGATE is a comprehensive program designed to provide early and effective treatment to individuals who have experienced a first episode of psychosis. It was developed with support from NIMH and has been implemented at over 60 sites throughout the U.S. as well as in China, Canada, and Israel. NAVIGATE teams have served urban, suburban, and rural populations, and have provided treatment to people from diverse ethnic and cultural backgrounds. NAVIGATE is one of the options for implementing Coordinated Specialty Care (CSC) for early psychosis, as described on SAMHSA’s website.</p> <ol style="list-style-type: none"> 2. SAMHSA Evidence-Based Practices Resource Center <p>This resource center provides comprehensive guides on EBPs specifically focused on addressing mental health conditions.</p> <p>Applicants are encouraged to consult these guides to ensure their proposed activities align with the latest research and best practices in the field.</p>

VIII. Organizational Capacity

Organization Description:	Provide an overview of your organization, including its history, mission, and experience in addressing mental and behavioral health issues (250-400 words).
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Staffing and Partnerships:	Describe the key staff who will be involved in the project, their qualifications, and their roles. Include information on any partnerships and how these relationships will enhance project outcomes (300-500 words).
Previous Experience:	Highlight previous projects similar in scope and complexity to the proposed project. Include any successes and lessons learned. Please see “Experience Requirement” under “Eligibility” section of the ESMI RFA Announcement for more information. (300-500 words)

<i>IX. Budget and Budget Justification</i>	
Budget Summary:	Complete the DPBH Budget Template found on the ESMI RFA webpage here https://dpbh.nv.gov/Programs/BBHWP/Mental_Health_Programs/ESMI_RFA Outline the major categories of expenses (e.g., Personnel, Travel, Supplies, Equipment, Contractual, Other Direct Costs, Indirect Costs). The budget should align with the Award and Budget Periods outlined above. All direct services will require time and effort accounting documentation.
Funding Map:	Applicants are required to submit a Funding Acknowledgement Form as part of their application. This form will ask you to identify current grant funding. This will help avoid any overlaps in funding for like projects that could lead to supplanting**. This form can be found here: https://dpbh.nv.gov/Programs/BBHWP/Mental_Health_Programs/ESMI_RFA

	<p>This information will also help reviewers understand the full financial landscape of the project and ensure compliance with federal funding requirements.</p> <p>**Note: The use of MHBG grant funds to supplant existing state or local funds is strictly prohibited. Supplanting refers to the practice of using federal funds to replace state, local, or institutional funds that would otherwise have been spent on the same purpose. For example:</p> <p>Example 1: If your organization currently funds a counseling program with local or state funds and then shifts to using MHBG grant funds to cover those same program costs without maintaining the original funding, this would be considered supplanting. Instead, MHBG funds should be used to expand the program, such as increasing the number of counseling sessions, extending services to new populations, or adding new treatment modalities.</p> <p>Example 2 (Staff Time/Level of Effort): Suppose your organization has a staff member who is already dedicated to providing mental health treatment services, funded by state or local resources. If you then use MHBG funds to cover the salary of this staff member without increasing their level of effort, responsibilities, or the scope of services provided, this would be considered supplanting. To avoid supplanting, the MHBG funds should be used to hire additional staff or increase the current staff member's hours, allowing them to take on new tasks, serve more clients, or expand services in a meaningful way.</p> <p>The key principle is that MHBG grant funds should supplement existing programs or services, thereby expanding their scope, reach, or effectiveness, rather than replacing the funds that are already allocated for those purposes. Any shifts in funding must demonstrate that MHBG funds are being used to add value, not simply to free up state or local resources for other uses.</p>

<i>X. Data Collection and Performance Measurement</i>	
Data Collection Plan:	Describe the methods and tools that will be used to collect data on project activities and outcomes, including required MH-CLD Data. Include information on how data will be used to monitor progress and make adjustments as needed. Include how you will provide informed consent to clients. (250-400 words)

Performance Measurement:	Detail performance metrics that will be used to evaluate the success of the project. Explain how these metrics align with the project's goals and objectives (250-400 words).
Quality Improvement:	Outline the processes that will be in place to ensure continuous quality improvement throughout the project (200-350 words).

<i>XI. Sustainability Plan</i>	
Sustainability Strategy:	Describe your plan for sustaining the project's activities and impacts beyond the grant period. Include potential funding sources, community partnerships, current and future potential insurance coverage options, and capacity-building efforts (250-400 words).
Medicaid Funding:	Provide the Medicaid Provider Types (PT) your organization is enrolled in, for what programs, and what reimbursement rate your organization receives for services for each PT, or the last year's average rate. (250-400 words).

XII. Required Attachments

- Resumes of Key Personnel
- Organizational Chart
- Letters of Commitment from Partners
- MOUs/Agreements with Subawardees (if applicable)

XIII. Submission Information

Submission Deadline:	By 11:59 PM PST on Sunday, June 15, 2025
Submission Method:	<p>Applications must be submitted electronically via the following Smartsheet link here: (https://app.smartsheet.com/b/form/e269d7c7fabd4efc8cde5d1a2ebf7709).</p> <p>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 time, subject to the availability of funds and the priorities of the program.</p>
Questions/Webinar:	<p>For any questions regarding this application, please use the following link: https://app.smartsheet.com/b/form/e7a5099676d740138245abc880cd6990. Please submit questions by 11:59 PM PST on Monday, June 2, 2025.</p> <p>An informational webinar will be held on Thursday, May 15, 2025, at 2:00 PM to provide an overview of the ESMI RFA 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.</p> <p>Details on how to join the webinar:</p> <p>Microsoft Teams Need help?</p> <p>Join the meeting now</p> <p>Meeting ID: 263 788 502 688 9</p> <p>Passcode: cV9f5pA6</p>

	<p>Dial in by phone +1 775-321-6111, 235775375# United States, Reno Find a local number Phone conference ID: 235 775 375# For organizers: Meeting options Reset dial-in PIN Thank you for planning to attend this Teams meeting.</p>

<i>XIV. Scoring Rubric</i>	
Project Overview (10 points)	<ul style="list-style-type: none"> • Clarity and Conciseness (5 points): Is the project summary clear, concise, and well-articulated? Does it include the main objectives, target population, and key activities? • Alignment with ESMI Goals (5 points): Does the project align with the overall goals of the CMHS program, particularly in providing needed, quality mental health services to Nevadans?
Statement of Need (10 points)	<ul style="list-style-type: none"> • Data-Driven Justification (5 points): Does the statement of need effectively use data and evidence to demonstrate the urgency and significance of the problem? Is there a clear focus on health disparities and demographic characteristics of the population of focus? • Relevance to Priority Populations (5 points): Does the application focus on one or more of the priority populations outlined in the RFA (e.g., Veterans, LGB, Hispanic, rural communities, etc.)?
Project Goals and Objectives (15 points)	<ul style="list-style-type: none"> • SMART Criteria (15 points): Are the project goals and objectives Specific, Measurable, Achievable, Realistic, and Time-bound? Are they directly related to addressing the needs identified?
Proposed Activities (20 points)	<ul style="list-style-type: none"> • Comprehensiveness and Relevance (10 points): Are the proposed activities comprehensive and relevant to the needs identified? Do they effectively address mental health needs and services to be delivered? • Evidence-Based Practices (10 points): Does the project propose the use of evidence-based practices? Are any modifications to these practices well-justified?

Organizational Capacity (10 points)	<ul style="list-style-type: none"> • Experience and Expertise (5 points): Does the organization have a strong history and experience in addressing similar public and behavioral health issues, particularly delivering mental health services to Nevadans? Does the organization have at least two years of experience providing relevant services? • Staffing and Partnerships (5 points): Are key staff well-qualified? Does the application include meaningful partnerships that enhance the likelihood of project success?
Budget and Budget Justification (15 points)	<ul style="list-style-type: none"> • Budget Alignment (10 points): Is the budget reasonable and well-aligned with the proposed activities and objectives? Does it avoid supplanting existing funds? • Funding Map (5 points): Does the global funding map clearly illustrate the financial landscape of the project? Is there a clear demonstration that MHBG funds will supplement rather than replace existing resources?
Data Collection and Performance Measurement (10 points)	<ul style="list-style-type: none"> • Data Collection and Performance Measurement and Improvement (5 points): Does the project align with the CMHS BG data collection requirements, and will it measure performance? • Quality Improvement (5 points): Is there a plan to continuously improve the quality of programming?
Sustainability Plan (10 points)	<ul style="list-style-type: none"> • Sustainability Strategy (10 points): Does the applicant provide a realistic and well-thought-out plan for sustaining the project's activities and impacts beyond the grant period? Are potential funding sources and community partnerships identified?
Total: 100 points	
Scoring Notes:	<ul style="list-style-type: none"> • Bonus Points (5 points): Applications that demonstrate exceptional innovation, address multiple priority populations, have strong alignment with evidence-based practices, or propose unique partnerships can earn up to 5 bonus points. • Bonus Points (5 points): Applicants who are currently operating an established evidence-based coordinated specialty care (CSC) program for the Target Populations of ESMI can earn 5 bonus points. • Minimum Score Threshold: To be considered for funding, applications must score at least 70 out of 100 points.
<i>This rubric ensures that applications are evaluated based on their alignment with the program's goals, the quality of the proposed interventions, organizational capacity, and the likelihood of sustaining the project's impact over time.</i>	

The Bureau reserves the right to reject any application upon initial review, if the required minimum qualifications are not included in the application.