Governor

ANN MARIE T. SULLIVAN, M.D.

Commissioner

Section 1: Lead Agency Information/BH IPA Information

ARLENE GONZÁLEZ-SÁNCHEZ, MS, LMSW

Commissioner

HOWARD A. ZUCKER, M.D., J.D.

Commissioner

New York State Adult Behavioral Health Infrastructure Program Extension Funding Application

Form B: Lead Entities (Agency and BH IPA) Information

Refer to the Guidance Extending the Adult BH HCBS Infrastructure Program to Support BH HCBS and the Transition to Community Oriented Recovery and Empowerment Services for additional information.

Lead Entities (Agencies and BH IPAs) applying for Infrastructure funds in partnership with at least one other Agency, and who will be responsible for managing an Infrastructure contract on behalf of partner Agencies, must complete this form.

Lead Agencies and BH IPAs must also submit Form A (Agency Information and Funding Request) for their application to be considered complete.

| a. Agency Name | | | |
|---|--------------|----------------|--|
| | | | |
| h Application Contact | | | |
| b. Application Contact | Phone Number | I Foreit | |
| Name | Phone Number | Email | |
| | | | |
| | | | |
| Section 2: Total Funding Request | | | |
| | | | |
| Please detail the grand total of the lead entity and all partner agency application funding request amounts for | | | |
| each category. This information must match the information in column B on the Multiple Agency Application | | | |
| tab of the Application Budget Template, included in the application materials. | | | |
| | | | |
| Refer to the Guidance Extending the Adult BH HCBS Infrastructure Program to Support BH HCBS and the | | | |
| Transition to Community Oriented Recovery and Empowerment Services for details. | | | |
| Funding Catego | ry | Request Amount | |
| Staffing | \$ | | |
| Workforce Development | \$ | \$ | |
| Technology and Systems Infrastruct | ure \$ | \$ | |
| Telehealth Capability | \$ | | |
| Additional Technology Infrastructure | \$ | | |
| Service Infrastructure | \$ | | |
| Strategic Planning | \$ | | |
| Other | \$ | | |
| Administration and Overhead | Ι φ | | |
| Administration and Overnead | \$ | | |
| Total | \$ | | |

KATHY HOCHULGovernor

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| Section 3: Infrastructure Contract Management | | |
|---|--|--|
| a. | As the lead entity, what will your role be in administering these funds and managing the Infrastructure contract on behalf of partner agencies? | |
| | | |
| | | |
| b. | As a lead entity, describe how you will achieve the program goals of supporting partner agencies transitioning to CORE Services and/or ensuring sustainability of BH HCBS programs. | |
| | | |
| | | |
| C. | As the lead entity coordinating on behalf of partner agencies, what is your plan and role in developing a referral network for CORE Services? | |
| | | |
| | | |
| d. | How will the Lead Agency or BH IPA ensure the processes and systems are in place for referrals to CORE Services and access to a Licensed Practitioner of the Healing Arts (LPHA) are sustainable after the end of the Infrastructure contract? | |
| | | |
| | | |