



2020 West El Camino Avenue, Suite 800
Sacramento, CA 95833
hcai.ca.gov



**Community-Based Organization
Behavioral Health Workforce Grant Program
Grant Guide ADDENDUM 2
for Fiscal Year 2022-23**

This addendum shall be part of the Grant Guide documents. All conditions not affected by this addendum shall remain unchanged.

UPDATE (in bold and strikethrough text)

Update Section C. Central Program Application on page 4 to read:

1. ~~Graduate and~~ **Undergraduate** college and university scholarships

Update Section 2. Eligible Participants on page 5 to read:

- a. Awards can only be granted to individuals currently employed by the grantee **and provide direct behavioral health services**. This applies to recruitment bonuses, scholarships, stipends, loan repayments, and retention bonuses.

Update Section I Post Award and Provisions on page 8 to read:

1. HCAI expects the Grantee will begin performance of grant agreement activities on or about ~~February 28~~ **April 2023**. Grantee shall not begin any work until the grant agreement has been signed and executed.

Update Section L. Key Dates on page 10 to read:

L. Key Dates

The key dates for the program year are as follows:

Event	Date	Time
Application Available	September 30, 2022	3:00 p.m.
Technical Assistance Webinar	October 6, 2022	11:00 a.m.
Deadline to Submit Application	November 30, 2022	3:00 p.m.
HCAI Posts Notice of Awards	January 17, 2023 February 2023	3:00 p.m. N/A
Grant Agreement Start Date	March 17, 2023 April 2023	N/A

Update Attachment A. Evaluation Criteria for SUD CBO behavioral health Workforce Grant Program on page 11, and Evaluation Criteria for Non-SUD CBO BH Workforce Grant Program to read:

Evaluation Criteria for SUD CBO behavioral health Workforce Grant Program

	ELEMENT	SCORING METHODOLOGY	MAX
1.	<p>Languages spoken proficiently by staff practicing in a program setting. Arabic, Armenian, Cambodian, Cantonese, Farsi, Hmong, Korean, Mandarin, Other Chinese, Russian, Spanish, Tagalog Vietnamese</p> <p>Percentage of staff that speak these Medi-Cal threshold languages. Arabic, Armenian, Cambodian, Cantonese, Farsi, Hmong, Korean, Mandarin, Other Chinese, Russian, Spanish, Tagalog Vietnamese</p>	<p>30 points—non-English language is at least 35% of these Medi-Cal Threshold languages 15 points—non-English language is 10%-34% of these Medi-Cal Threshold languages 0 points—non-English language is less than 10% of these Medi-Cal Threshold languages</p> <p>30 points—35% or more of staff speak a Medi-Cal threshold language 15 points—10%-34% of staff speak a Medi-Cal threshold language 0 points—less than 10% of staff speak a Medi-Cal threshold language</p>	30
2.	SUD Prevalence	<p>30 points—3.45 and above prevalence score 10 points—2.73 to 3.44 prevalence score 5 points—2.39 to 2.72 prevalence score 1 point—2.06 to 2.38 prevalence score 0 points—prevalence score of 2.05 and below</p>	30
3.	Payer Mix	<p>20 points—combination of Medi-Cal, Medi-Cal/Medicare, and Uninsured Payers 75% to 100% 10 points—combination of Medi-Cal, Medi-Cal/Medicare, and Uninsured Payers 50% to 74% 0 points—combination of Medi-Cal, Medi-Cal/Medicare, and Uninsured Payers 0% to 49%</p>	20
4.	Grantee service location(s) in underserved communities based on Mental Health HPSA scores	<p>10 points—Average Mental Health HPSA score greater than 14 5 points— Average Mental Health HPSA score between 5 and 14 0 points— Average Mental Health HPSA score equal to or below 5</p>	10
5.	Proportion of children and adolescents served by the CBOs	<p>10 points—children and youth make up 25% or more of total patient population 5 points—children and youth make up 10% to 24% of total patient population 0 points—children and youth make up less than 10%</p>	10
6.	Applicant program site(s) presence in a Rural or Frontier	<p>10 points—Yes 0 points—No</p>	10
7.	Strategies to recruit and support employees from underrepresented communities	<p>0 points: The applicant does not identify any strategies 2 points: The applicant identifies 1 strategy 5 points: The applicant identifies 2 strategies 7 points: The applicant identifies 3 strategies 10 points: The applicant identifies 4 strategies</p>	10

8.	Workforce in areas of unmet need strategies	0 points: The applicant does not any strategies 1 points: The applicant identifies 1-2 strategies 3 points: The applicant identifies 3-4 strategies 5 points: The applicant identifies 5 or more strategies	5
9.	Strategies to implement culturally responsive care training into the program operations	0 points: The applicant does not any strategies 1 points: The applicant identifies 1-2 strategies 3 points: The applicant identifies 3-4 strategies 5 points: The applicant identifies 5 or more strategies	5
Maximum points:			130

Evaluation Criteria for Non-SUD CBO BH Workforce Grant Program

	ELEMENT	SCORING METHODOLOGY	MAX
1.	<p>Languages spoken proficiently by staff practicing in a program setting. Arabic, Armenian, Cambodian, Cantonese, Farsi, Hmong, Korean, Mandarin, Other Chinese, Russian, Spanish, Tagalog Vietnamese</p> <p>Percentage of staff that speak these Medi-Cal threshold languages. Arabic, Armenian, Cambodian, Cantonese, Farsi, Hmong, Korean, Mandarin, Other Chinese, Russian, Spanish, Tagalog Vietnamese</p>	<p>30 points—non-English language is at least 35% of these Medi-Cal Threshold languages 15 points—non-English language is 10%-34% of these Medi-Cal Threshold languages 0 points—non-English language is less than 10% of these Medi-Cal Threshold languages</p> <p>30 points—35% or more of staff speak a Medi-Cal threshold language 15 points—10%-34% of staff speak a Medi-Cal threshold language 0 points—less than 10% of staff speak a Medi-Cal threshold language</p>	30
2.	Payer Mix	<p>20 points—combination of Medi-Cal, Medi-Cal/Medicare, and Uninsured Payers 75% to 100% 10 points—combination of Medi-Cal, Medi-Cal/Medicare, and Uninsured Payers 50% to 74% 0 points—combination of Medi-Cal, Medi-Cal/Medicare, and Uninsured Payers 0% to 49%</p>	20
4.	Grantee service location(s) in underserved communities based on Mental Health HPSA severity scores	<p>10 points—Average Mental Health HPSA score greater than 14 5 points— Average Mental Health HPSA score between 5 and 14 0 points— Average Mental Health HPSA score equal to or below 5</p>	10
5.	Proportion of children and adolescents served by the CBOs	<p>10 points—children and youth make up 25% or more of total patient population 5 points—children and youth make up 10% to 24% of total patient population 0 points—children and youth make up less than 10%</p>	10

6.	Applicant program site(s) presence in a Rural or Frontier	10 points–Yes 0 points–No	10
7.	Strategies to recruit and support employees from underrepresented communities	0 points: The applicant does not identify any strategies 2 points: The applicant identifies 1 strategy 5 points: The applicant identifies 2 strategies 7 points: The applicant identifies 3 strategies 10 points: The applicant identifies 4 strategies	10
8.	Workforce in areas of unmet need strategies	0 points: The applicant does not any strategies 1 points: The applicant identifies 1-2 strategies 3 points: The applicant identifies 3-4 strategies 5 points: The applicant identifies 5 or more strategies	5
9.	Strategies to implement culturally responsive care training into the program operations	0 points: The applicant does not any strategies 1 points: The applicant identifies 1-2 strategies 3 points: The applicant identifies 3-4 strategies 5 points: The applicant identifies 5 or more strategies	5
Maximum points:			100

Update Attachment 1: Sample Grant Agreement Definitions on page 16 to read:

8. “Deputy Director” means the Deputy Director of the **Office of Health Workforce Development** ~~Division (OHWDD)~~ or his/her designee.
9. **“Direct Behavioral Health Services” means the provision of health care services provided directly to individuals being treated for or suspected of needing services for mental health and/or substance use disorder conditions.**
- ~~9-10.~~ “Family Member” means siblings, and their partners, kinship caregivers, friends, and others as defined by the family who is now or was in the past the primary caregiver for a child, youth, adolescent, or adult with a mental health challenge who accessed mental health services
- ~~10-11.~~ “Grantee” means the fiscally responsible entity in charge of administering the Agreement Funds and includes entities/organizations identified on the Agreement Scope of Work/Deliverables.
- ~~11-12.~~ “Inappropriately Served” means populations that are not being provided

appropriate culturally responsive and/or culturally appropriate services and are provided services often inconsistent with evidence-based and/or community-identified practices.

- ~~42.13.~~ “Parents” means biological and adoptive parents and their partners, who are now or have in the past been the primary caregiver for a child, youth, or adolescent with a mental health challenge who accessed mental health services.
- ~~43.14.~~ “Program” means the activity described in the Grantee’s Scope of Work that the Grantee will accomplish with the Agreement Funds.
- ~~44.15.~~ “Program Manager” means the individual employed by HCAI to manage the grant program.
- ~~45.16.~~ “Program Representative” means the individual representative of the Grantee for this Agreement.
- ~~46.17.~~ “State” means the State of California and includes all its Departments, Agencies, Committees and Commissions.
- ~~47.18.~~ “Underrepresented” means populations that are underrepresented in the mental health professions relative to their numbers in the total population.
- ~~48.19.~~ “Underserved” means “clients of any age who have been diagnosed with or at risk of a serious mental health condition and/or substance use disorder and are receiving some services but are not provided the necessary or appropriate opportunities to support their recovery, wellness and/or resilience. When appropriate, it includes clients whose family members are not receiving sufficient services to support the client's recovery, wellness and/or resilience. These clients include, but are not limited to, those who are so poorly served that they are at risk of homelessness, institutionalization, incarceration, out-of-home placement or other serious consequences; members of ethnic/racial, cultural, and linguistic populations that do not have access to mental health programs due to barriers such as poor identification of their mental health needs, poor engagement and outreach, limited language access, and lack of culturally competent services; and those in rural areas, Native American Rancherias and/or reservations who are not receiving sufficient services.”
- ~~49.20.~~ “Unserved” means “those individuals who have or at risk of a serious mental health condition and/or substance use disorder and are not receiving mental health services. Individuals who may have had only emergency or crisis-oriented contact with and/or services from the County may be considered unserved.”

Update Attachment 1: Sample Grant Agreement Budget Restrictions on page 18 to read:

The total number of employees who would benefit from this funding cannot exceed 25 or twenty-five percent, whichever is greater. Scholarships, **loan repayments**, and stipends may be awarded for up to \$25,000. Employees with five or more years of service can receive retention bonuses of up to fifteen percent of their annual salary with a maximum amount of \$10,000 per employee. Registered and certified alcohol and other drug

counselors may receive retention bonuses when employed one or more years. Signing bonuses may be awarded for up to \$2,000 per new employee. Recruitment costs cannot exceed more than \$1,250 for all positions that the grantee is attempting to fill each year.

Update Attachment 1: Sample Grant Agreement Section J. Program Representatives on page 28 to read:

The program representatives during the term of this Agreement will be:

State Agency: Department of Health Care Access and Information	Grantee: «Grantee_Name»
Section/Unit: Office of Healthcare Workforce Development Division /Behavioral Health Program	
Name: [Insert Program Manager Name] Program Manager	Program Representative Name: «CO_First_Name» «CO_Last_Name», «Grantee_Officer_Title»
Address: 2020 West El Camino Avenue, Suite 1222 Sacramento, CA 95833	Address: «Grantee_Street_Address», «Grantee_Ste» «Grantee_City», «State» «Zip»
Phone: [Enter Program Manager Phone Number]	Phone: «Grantee_Phone»
Email: [Enter Program Manager Email]	Email: «Grantee_Email_»

Direct all administrative inquiries to:

State Agency: Department of Health Care Access and Information	Grantee: «Grantee_Name»
Section/Unit: Office of Healthcare Workforce Development Division /Behavioral Health Program	
Name: [Insert Program Manager Name] Program Manager	Name: «CO_First_Name» «CO_Last_Name», «Grantee_Officer_Title»
Address: 2020 West El Camino Avenue, Suite 1222 Sacramento, CA 95833	Address: «Grantee_Street_Address», «Grantee_Ste» «Grantee_City», «State» «Zip»
Phone: [Enter Program Manager Phone Number]	Phone: «Grantee_Phone»
Email: [Enter Program Manager Email]	Email: «Grantee_Email_»