

The Office of Alcoholism and Substance Abuse Services (OASAS) announces the availability of funding to assist providers in the conversion to Part 820 Residential Services.

The following OASAS-certified programs are eligible to request funding for conversion costs: Part 819 including Intensive Residential and Community Residences, Part 818 Inpatient Residential, Part 817 Residential Rehabilitation Services for Youth, Part 816 including Medically Supervised Inpatient Withdrawal, Medically Supervised Outpatient Withdrawal and Medically Monitored Withdrawal.

This funding is available for programs which will operate Element 1: Stabilization and/or Element 2: Rehabilitation under Part 820. Programs that will operate **only** Element 3: Reintegration are not eligible to request the conversion funding.

OASAS will fund, through the Department of Health, a one-time payment of up to \$205,000, per program conversion. This payment is predicated on three months funding to hire the following:

Physician recruiting and 3-month salary	\$40,000
RN staff 3.5 and relief (15%)	\$70,000
Clinical staff (LCSW, LMFT, NP, additional CASACs)	\$80,000
Peer/Milieu Staff	<u>\$15,000</u>
Total	<u>\$205,000</u>

Programs that do not currently have the clinical, medical or peer staff required under the new regulations may request this one-time payment to support the costs of the additional staff. Funding available through the managed care implementation will then support the on-going costs of the medical, clinical and peer staff.

If a program already has some or all of the necessary staff, the funding can be used for any allowable program purpose as outlined in the Consolidated Fiscal Reporting Manual.

This funding will be made available after the OASAS Practice Innovation and Care Management (PICM) Bureau has approved a site-specific Part 820 Conversion Plan. OASAS' Division of Fiscal Administration will process a payment request to the Department of Health (DOH) Division of Health Care Financing (HCF). HCF will obtain approval from the Division of the Budget and upon approval, process a payment via the Medicaid Management Information System (MMIS).

In order for MMIS to process payment, the provider must have a MMIS number. While current Residential programs do not receive Medicaid, if the provider operates any OASAS program that receives Medicaid the MMIS number of the Medicaid-eligible program can be used for the payment. The provider must then adjust their General Ledger to reflect the payment being made for the new Part 820 program. If a provider receives no Medicaid funding in any program, the payment request will be processed after the new Part 820 program receives its MMIS number.

Any questions should be directed to the PICM mailbox at PICM@oasas.ny.gov .