

Q&A

Request for Proposals #081: Brooklyn Opioid Treatment Court Treatment Services

1. Our programs currently provide Cognitive Behavioral Therapy (CBT) treatment but are not formally trained as facilitators of Moral Reconciliation Therapy (MRT). Could an applicant include the training costs as part of the budget for the proposed project?
A. Yes, an applicant can include the training costs as part of the budget for the proposed project.
2. Is there any consideration for an alternative app to support clients in need of opioid use disorder treatment? Or are we required to provide the COR-12 app? One potential alternative would be re-SET O by Pear Therapeutics:
<https://peartherapeutics.com/products/reset-reset-o/>
A. The COR-12 app is preferred as it may be more suited to foster communication between the participant and their peers, counselors, and CRPAs over a longer period of time than the reSET app. It would also appear that the COR-12 app provides a greater range of tools and resources for the participant to utilize rather than being focused more heavily on CBT and contingency management.
3. Does BTC have a sense of how many clients will be served in this project on an annual basis?
A. The annual number of clients to be served is 40.
4. Does the BTC have specific requirements on the FTE status and minimum number of hours dedicated to the Project? Our programs that provide medication assisted treatment have prescribers as consultants.
*A. Certified Recovery Peer Advocate (CRPA) (100% FTE)
COIN Case Manager (100% FTE)
Addictions Medicine Physician (AMP) (will dedicate 144 hours annually to the project)*
5. Are all referrals from the court expected to be in a treatment program in order to receive MAT, Toxicology's, and other treatment services.
A. Participants would be referred by their BOTC case manager to an appropriate program for treatment, MAT services, and toxicology testing. Our selected treatment partner on the project will establish a contact in the admissions department to streamline admissions for BOTC clients.
6. Is this a satellite clinical treatment program at the Courts or can we provide treatment services at our respective site? Are all aspects of the program completed on-site at the courts? If the client were to enroll in our treatment program are they able to do so in addition to the comprehensive opioid program.
A. Assessment and case management services will take place at the Court, as will select clinical services such as the MRT Opioid group. Treatment services will primarily be provided off-site and program is responsible for providing all treatment services including MAT-related clinical practices and opioid specific interventions. The Addiction Medicine

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Physician will be responsible for conducting on-site and remote participant assessments at BOTC.

7. What is included within the Comprehensive Opioid Program?

A. The Brooklyn Opioid Treatment Court seeks to create a Comprehensive Opioid Intervention Network to provide early identification of offenders with an opioid use disorder through telehealth screenings with an Addiction Medicine Physician and prompt intervention utilizing opioid specific Evidence Based Practices and optional pharmacotherapeutic services for those determined to be clinically appropriate. Please see Section V of the RFP, Project Services, for a detailed description of the services that the project aims to provide.

8. Due to the Pandemic and current state regulatory guidelines for social distancing will CRPA responsibilities be modified?

A. CRPA responsibilities will conform to state regulatory guidelines. As guidance is available from OASAS and the NYS Office of Court Administration, adjustments will be made accordingly. Applicants should indicate current practices and policies regarding CPRA services delivered at their programs, including whether telehealth services are delivered by CRPAs.

9. For medical staff: Is it required that there be a Psychiatrist, MD on staff, or is a Psychiatric Nurse Practitioner with a license to prescribe acceptable? Will medical treatment services be covered or billed through Medicaid?

A. Board Certification in Addiction Psychiatry from the American Board of Medicine is preferred. The AMP will hold a subspecialty Board Certification in Addiction Psychiatry from the American Board of Medical Specialties, an Addiction Certification from the American Society of Addiction Medicine, or a Certification by the American Board of Addiction Medicine (ABAM). In addition, the AMP will have a buprenorphine-certification or will need to obtain a federal DATA 7 2000 waiver (buprenorphine-certified) within four months of employment.

If the Psychiatric Nurse Practitioner holds the preferred certification and is licensed to prescribe, that is acceptable. The provider would bill for any medical treatment services outside of the comprehensive medical/MAT assessment and monitoring of participants throughout their participation.

10. The RFP instructions state "on-site reconnection therapy" Will there be an area provided on-site at the courts for this?

A. Until such time that staff and clients can return to the courthouse for in-person appearances and clinical/case management services, the proposer should be prepared to facilitate MRT Opioid sessions at their treatment facilities. Ideally, MRT sessions will be offered both on-site at the courthouse and at the program site when conditions permit.