



On March 20, 2026, the Richland County Mental Health and Recovery Services Board (The Board) is officially opening the State Fiscal Year 2027 Request for Funding (SFY27RFF) period. Agencies that have not held a contract with The Board in the past may submit a request for funding if they meet **ALL** of the following criteria:

- Is certified by the Ohio Department of Behavioral Health.
- Holds a National Accreditation from one of the following: CARF, COA, TJC (JACHO)
- Is registered with both the Federal Government and the State of Ohio as a Non-Profit entity
- Has a local (within Richland County) Controlling Board of Authority.*
- Treatment agencies must have appropriately licensed staff to treat both mental health and substance use disorders.
- Operates a Richland County Office and offers on-site clinical hours 5 days per week and has operated this office for a minimum of 18 consecutive months.
- Is certified to provide Medicaid funded services and has done so for a minimum of three years with no fiscal citation, disciplinary action, or suspension.
- Has the capability of producing an OMES compatible 837P Fee for Service Professional Claims file for contractual reimbursement.
- Is able to provide three years of consecutive unqualified audits with the most recent year completed within the past 24 months.
- Is able to show or demonstrate that they are providing trauma informed services (i.e. certificate of successful completion from a registered Evidence-Based Program or Completion of the Richland County TIRROCC Program.*

**An agency that does not meet these item may still be considered if they are providing a needed service that is not available through other agencies that meet all qualifications.*

Purchasing of services for SFY2027, are based on service trends. The following is the list of General Services that the Board will purchase system wide. Rates will mirror current Medicaid rates. We will be grouping services as presented below for establishing the general service allocations giving flexibility to move funds around within the general service groups. However, you will need to report on the MHA UCR 2022 the actual units of each separate service you intend to provide.

Medicaid Service Types:

Assessment and Evaluation:

- Psychiatric Diagnostic Evaluation: **375 Units** (*this includes 90791 and H0001 SUD w/o Medical Assessment*)

Counseling and Therapy

- Psychotherapy Individual: **1,700 Units** (*this includes 90832,34 & 37, H0004 MH/AOD Psychotherapy Individuals, +99354 Prolonged service.*)
- Psychotherapy Group: **20 Units** (*this includes 90853 Psychotherapy group*)
- Group Counseling SUD: **9,500 Units** (*this includes SUD H0005*) (*Special note, if billing IOP for Board funding, you will bill in units of H0005, i.e. 3 hours of IOP would be billed as 12 units of H0005)
- Family Psychotherapy: **5 Units** (*this includes 90846, 90847 Family Psychotherapy without or with patient and 90849 Multi-family group psychotherapy*)

Coordination and Support

- SUD Case Management: **750 Units** (*H0006 SUD Case Management*)
- Community Psychiatric Supportive Treatment: **2,750 Units** (*H0036 CPST Individual and Group*)
- Therapeutic Behavioral Services: **8,250 Units** (*H2019 TBS Individual and Group*)
- Peer Recovery Support: **250 Units** (*H0038*)

Medical and Related

- SUD Collection: **250 Units** (*this includes H0048 SUD Collection and Handling*)
- Evaluation and Management: **400 Units** (*this includes but not limited to 99202-205, 99211-215 & SUD Nursing T1002 & T1003*)
- MH Nursing Individual and Group: **400 Units** (*H2017, H2019, H2019HQ*)

Unless otherwise indicated, the units presented are what the Board would like to purchase in total from the system.

For example, if we are purchasing 20,000 units of Group Counseling SUD, if agency A proposes to provide 10,000 units, agency B proposes 1,500 units and agency C proposes 1,200 units, all will be funded at the proposed level. However, if Agency A proposes to provide 10,000, agency B proposes to provide 5,000 and agency C proposes to provide 7,500, The board may reduce some or all to 10000/5000/5000 or choose to just fund agency A and C at their proposed levels.

So please only propose to provide the number of units that can realistically be provided to the indigent population by your organization. We will also compare your proposal to current service trends and adjust accordingly. All services will be provided using the Board Sponsored and Subsidized Services and Co-pay Guidelines.

All agencies will need to provide evidence that they have an active method of soliciting consumer and family input on services that are face-to-face. Distribution of a client satisfaction survey will not meet this requirement.

If you have any fiscal questions, please contact Carey Vogt (cvogt@rcmhb.org) or if you have any programmatic questions please contact Scott Basilone (sbasilone@rcmhb.org).

If you have any difficulties accessing content from the website, please contact rcmhb@rcmhb.org.

All complete proposals are due to the Richland County Mental Health and Recovery Services Board by 4:00pm, April 24, 2026. NO APPLICATION WILL BE ACCEPTED AFTER THAT TIME.