



Regional Telepsychiatry Services RFP

Information Session

May 27th, 2026

Program Overview

Care Compass is seeking proposals from agencies that serve as a regional telepsychiatry resource for its existing service area. Up to \$2 million is available for 18 months of service delivery for this opportunity.



This includes a multi-level service delivery strategy ranging from provider-to-provider consultation to direct service delivery. For patients with behavioral health and/or substance use needs and their providers, this program aims to:



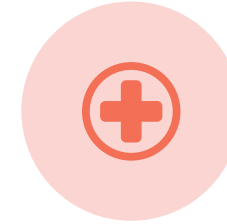
PROVIDE RAPID
ACCESS TO
PSYCHIATRIC
CONSULTATION
FOR PROVIDERS



SUPPORT
APPROPRIATE
MEDICATION
MANAGEMENT IN
PRIMARY CARE
SETTINGS



OFFER DIRECT
PATIENT
EVALUATION WHEN
CLINICALLY
APPROPRIATE



FACILITATE
TIMELY ACCESS
TO ONGOING
OUTPATIENT
PSYCHIATRIC
CARE FOR HIGH
NEED PATIENTS

Telepsychiatry Pilot Service Model

Level 1 Telephonic Consultation

- Provider-to-provider support available Monday through Friday during regular business hours.
- Includes a centralized answering service to schedule a consultation with a psychiatry provider to assist with medication management and/or treatment options within the primary care physician's scope of practice.
- The psychiatry provider may be listed in the primary care's system of record to facilitate enhanced billing rates.

Level 2 Virtual Visits

- Where provider-to-provider consult is insufficient, telepsychiatry visits are scheduled and coordinated through an answering service with patients in the primary care setting.
- This would include a patient-facing virtual consultation with the primary care provider present for the visit.
- This may include psychiatry recommendations documented in the primary care patient's chart.

Level 3 "Fast Track" Referrals

- For patients who cannot be optimally managed in the primary care setting alone, referrals are made to establish the patient with a local outpatient psychiatry clinic.
- Note: This option may be limited to 8-20 patients per week across the region. A process will be developed to determine how to best utilize this capacity and prioritize patients with the greatest need in collaboration with the awardee for this program.

Eligibility Criteria

Organizations eligible for funding include those who:

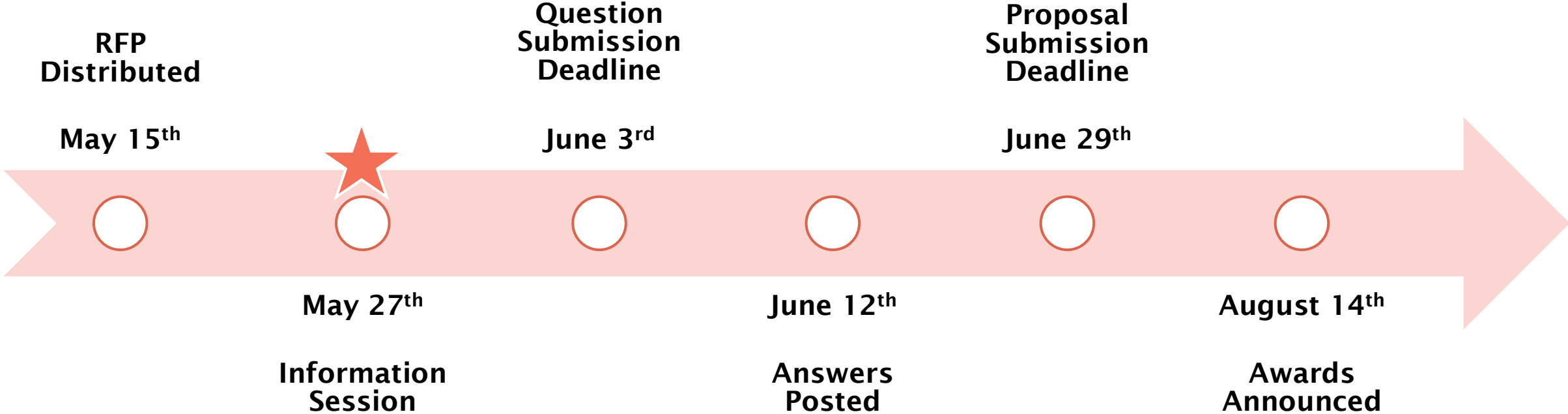
- Have existing telepsychiatry capacity or demonstrate capability to initiate services this year
- Employ licensed psychiatrists (MD/DO) or Psychiatric-Mental Health Nurse Practitioners (PMHNP) with available caseloads
- Be licensed and credentialed to provide telepsychiatry services in New York State. Demonstrate regional service coverage capacity across multiple counties in New York State
- Have an electronic health record with the ability to create and transfer data in a standardized file format such as 837 billing
- Currently serving Medicaid populations and individuals with complex behavioral health and substance use needs

Failure to meet any of the eligibility criteria above will disqualify proposals from consideration.

Preference will be given to proposals that:

- Are submitted by health systems in the Southern Tier of NY currently providing telepsychiatry services
- Include adolescents and/or pediatric patients

Timeline



***All deadlines are defined as 5:00 PM EST of the date listed.**

Proposal Submission Requirements

Eligibility & Preferences

Any proposal that fails to meet any of the eligibility requirements and/or omits any part of the proposal criteria will be disqualified.

Care Compass Network reserves the right to use preferences (Slide 6 or Section A of the RFP) to make inform award determinations outside of point allocations.

The Narrative Proposal

1) Organizational Information – 10 points

- a) Organization name
- b) Contact information (primary, secondary, name, email address, phone number & physical address)
- c) Authorized signatory and signature
- d) Organization overview including mission and vision
- e) Description of provision of services that impact people with BH and/or substance use disorders.
- f) Medicaid volume

Note:

The Organization Information section may be used to determine whether the submitting organization meets eligibility criteria and/or preferences. Be sure to call out any details that would assist in this determination.

Proposal Submission Requirements

The Narrative Proposal

2) Proposal Scope – 50 points

- a) Approach to delivering services across all three levels of the psychiatry model.
- b) Description of services (3 Levels)
- c) Description of data collection, reporting and information exchange capabilities including a commitment to exchange Personal Health Information (PHI).
- d) Description of staffing model.
- e) Description of ability to scale services based on demand, adapt to evolving program needs and participate in quality improvement efforts.
- f) Provide a detailed implementation timeline including key milestones for contract execution, staffing, service launch and achievement of full operational capacity.

Note:

The Proposal Scope Evaluation criteria give submitting organizations an idea of what reviewers are looking for in the details of the proposal narrative. Be sure your proposal clearly addresses all areas of the Proposal Scope Evaluation criteria.

Proposal Scope Evaluation Criteria

The narrative proposal scope section (50 points) will be evaluated based on the criteria outlined below. Submissions should be sure the following are included in the details of their proposal scope narrative.

Administrative and Operational Requirements

Respondents must demonstrate the ability to support the operational infrastructure required to deliver services including:

- Centralized scheduling and intake processes
- Adequate staffing to meet projected demand
- HIPAA compliant telehealth technology platforms
- Coordination with primary care providers
- Processes for handling urgent or high-risk cases

Data Collection and Reporting Requirements

Respondents must demonstrate the ability to:

- Collect, report, and securely exchange data required. Data exchange must comply with applicable federal, state, and local laws including HIPAA.
- Demonstrate willingness & capacity to participate in data sharing with Care Compass including PHI as required.
- Willingness to provide the names of Providers & any notes from the consultation & export of the full psychiatric evaluations.

Staffing Requirements

Respondents must include Licensed psychiatrists and/or Psychiatric Mental Health Nurse Practitioners

Description of staffing model, including:

- FTE allocation
- Coverage model across levels of service
- Service availability hours

Implementation Timeline Requirements

Respondents must include a proposed timeline for:

- Staffing and onboarding
- Service launch
- Full operational capacity

Proposal Submission Requirements

3) Budget & Budget Narrative – 40 points

- a) Timeline of ramp up to service delivery
- b) Cost per or Hourly rates for each service (Rate should not exceed 300% of the current Medicaid rate):
 - i. Level 1 consult
 - ii. Level 2 visit
 - iii. Level 3 referral coordination
 - iv. Staffing model assumptions
 - v. Administrative costs

Note:

This is a separate submission requirement from the Budget & Staffing Template. Up to 40 points will be awarded based on the content of BOTH the budget narrative and the budget template.

Proposal Submission Requirements

Budget and Staffing Template

This proposal element **must** be submitted using the provided Microsoft Excel template provided.

Funding Opportunity

The maximum award amount is \$2,000,000 within an 18-month period of active service provision and a 3 to 6 month start up period.

- Budget submissions should not exceed this amount.
- Monthly reports will be required to use secure data exchange for monitoring program activities and related outcomes.
- Reports and applicable supporting documents will be used to validate services delivered for payment.

BILLING MODEL

Billing Model

Service Type	Service Delivery Method	Estimated Number of Services For Program Duration	Cost per Unit Service	Total Cost	Description
Example: Level 1 (Provider-to-provider consultation)	Phone	8,280	\$75	\$ 621,000.00	Provide a brief description of the service & cost/service, including but not limited to CPT code, service duration, and any additional relevant details.
Example: Level 2 (Telepsychiatry Evaluation)	Video / In-person	3,078	\$250	\$ 769,500.00	Provide a brief description of the service & cost/service, including but not limited to CPT code, service duration, and any additional relevant details.
Example: Level 3 (Expedited Referral Coordination)	Video / In-person	960	\$35	\$ 33,600.00	Provide a brief description of the service & cost/service, including but not limited to CPT code, service duration, and any additional relevant details.
Total		12,318		\$ 1,424,100.00	

Start Up Cost / Ongoing Expense

Cost/Expense Title	Unit Cost	# of Units	One Time Cost	Cost per Month	# of Months	Total/Requested	Descriptions
Example: Administrative Cost				\$109.00	18	\$1,962.00	Example: Operational support expenses required to manage and maintain program activities such as billing administration, scheduling coordination
Example: Answering Service				\$300.00	18	\$5,400.00	Example: Covers general communication, call routing, scheduling and operational support services during standard business hours (Mon-Fri).
Example: EMR Build			\$ 320.00			\$320.00	Example: Covers cost of EMR setup, reporting setup, and/or implementation process required for program operations.
Example: Start Up costs							Example: One time expenses required to prepare, build or launch services before service delivery begins.
Total						\$7,682.00	

BUDGET TEMPLATE

Service Start Month: E.g. January 2027

Billing

Service Type	Cost Per Service Unit	Total Budget	Month 1		Month 2	
			# of Services	Cost	# of Services	Cost
Example: Level 1 (Provider-to-provider consultation)	\$75.00	\$ 34,500.00	460	\$ 34,500.00		\$ -
Example: Level 2 (Telepsychiatry Evaluation)	\$250.00	\$ 40,750.00	163	\$ 40,750.00		\$ -
Example: Level 3 (Expedited Referral Coordination)	\$35.00	\$ 2,625.00	75	\$ 2,625.00		\$ -
		\$ -				\$ -
		\$ -				\$ -
		\$ -				\$ -
Total		\$ 77,875.00	698	\$ 77,875.00	0	\$ -

Start Up Cost / Ongoing Expense

Cost/Expense Title	Cost/Expense Type	Pre-Launch Build Time	Total Budget		Cost		Cost
Example: Administrative Cost	Monthly Expense		\$ 109.00		\$ 109.00		
Example: Answering Service	Monthly Expense		\$ 300.00		\$ 300.00		
Example: EMR Build	One Time Cost	E.g. 2 Months	\$ 320.00		\$ 320.00		
Example: Start Up costs	One Time Cost	E.g. 3 Months	\$ -				
			\$ -				
			\$ -				
			\$ -				
Total			\$ 729.00	0	\$ 729.00		\$ -

Next Steps

- Upon receipt and review of proposals, we may contact respondents for additional information, clarification, or follow up discussions.
- All submitting organizations will be notified of their award status on August 14th.
- Following vendor award notification, the contracting phase will begin at once. Multiple pre-contracting meetings will be required to review and finalize scope, operational workflows, implementation expectations, and service requirements.
- Questions posed both during today's Information Session and during the open question period using the question form will be posted to the website for reference here:

[Healthcare Transformation Funding Opportunities | Care Compass Network - Binghamton, NY](#)

Proposal Submission and Questions

All proposals should be submitted to Care Compass Network via email no later than June 29th, 2026 at 5:00 PM EST to:

ResearchandDevelopment@carecompassnetwork.org

Closing Reminders:

- Narrative proposals may be submitted using Microsoft Word, PowerPoint or PDF formats. However, all responses should be clearly labelled with their corresponding section (e.g. 1c, 2a, etc.).
- All sections listed in the Proposal Submission Requirements should be completed thoroughly and accurately for consideration.
- All budgets must be submitted using the Budget template provided.

All questions related to the RFP should be submitted through the link below by June 3rd, 2026 at 5:00 PM EST.

[Regional Telepsychiatry Services RFP Questions](#)

Questions?



TIMELINE	
RFP Distributed	May 15, 2026
Informational Session	May 27, 2026
Question Submission Deadline	June 3, 2026
Answers Returned	June 12, 2026
Deadline for Proposal Submission	June 29, 2026
Awards Announced	August 14, 2026

All proposals should be submitted to Care Compass Network, in accordance with the schedule above, via email to:

ResearchandDevelopment@carecompassnetwork.org