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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION FOR BEHAVIORAL HEALTH

105 PLEASANT STREET, CONCORD, NH 03301
603-271-5000 1-800-852-3345 Ext. 5000
Fax: 603-271-5058 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

Lori A. Weaver
Commissioner

Katja S. Fox
Director

March 27, 2024

The Honorable Ken Weyler, Chairman
Fiscal Committee of the General Court and

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, NH 03301

REQUESTED ACTION

1. Pursuant to RSA 14:30-a, VI, authorize the Department of Health and Human Services, Division for Behavioral Health to **retroactively** amend Fiscal Item FIS 23-138, approved by the Fiscal Committee on April 21, 2023, and item #8, approved by the Governor and Executive Council on May 3, 2023, as amended by Fiscal Item FIS 23-268, approved by the Fiscal Committee on September 14, 2023, and item #31, approved by the Governor and Executive Council on September 20, 2023, by extending the end date from March 30, 2024, to March 30, 2025, effective retroactive to March 30, 2024, upon Fiscal Committee and Governor and Council approvals.

2. Contingent upon approval of Requested Action #1, and pursuant to RSA 124:15, authorize the Department of Health and Human Services, Division for Behavioral Health, to **retroactively** extend one (1) temporary full-time position, 11-9150 SOC-CMTY SVC MGRS-4 (SOC 11 Wage Schedule, Pay Band 5 – Position #9T2927), responsible for overseeing the implementation of the Certified Community Behavioral Health Clinic Planning Year project activities, internal and external coordination, developing materials, and conducting meetings. Effective retroactive to April 1, 2024, upon Fiscal Committee and Governor and Council approvals through March 30, 2025. Funding source: 100% Federal Funds.

05-95-92-922010-19090000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, SAMHSA GRANT

Class	Description	Current Adjusted Authorized	Requested Action	Revised Adjusted Authorized
000-500146-16	Federal Funds	$2,930,799	$0	$2,930,799
	General Funds	$0	$0	$0
Total Revenue		**$2,930,799**	**$0**	**$2,930,799**
018 - 500106	Overtime	$13,837	$0	$13,837

020 - 500200	Current Expenses	$78,380	$0	$78,380
037 - 500173	Technology-Hardware	$5,400	$0	$5,400
038 - 500175	Technology-Software	$200	$0	$200
039 - 500188	Telecommunications	$7,200	$0	$7,200
041 - 500801	Audit Fund Set Aside	$3,024	$0	$3,024
042 - 500620	Additional Fringe Benefits	$21,385	$0	$21,385
059 - 500117	Temp Full Time	$190,157	$0	$190,157
060 - 500601	Benefits	$107,396	$0	$107,396
066 - 500546	Employee Training	$5,000	$0	$5,000
070 - 500704	In-State Travel Reimburse	$1,755	$0	$1,755
074 - 500589	Grants For Pub Asst And Rel	$505,893	$0	$505,893
080 - 500710	Out Of State Travel Reimb	$3,000	$0	$3,000
102 - 500731	Contracts For Program Servi	$1,988,172	$0	$1,988,172
Total Expenses		**$2,930,799**	**$0**	**$2,930,799**

EXPLANATION

This request is **retroactive** because of the timing of submitting the item relative to the receipt of the grant extension approval and the coordination of associated functional grant efforts.

New Hampshire DHHS was awarded a $1,000,000 planning grant by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) to expand access to high quality, evidence-based and trauma-informed behavioral health services. DHHS will continue using the funding to plan for a new, more integrated approach to community-based services in New Hampshire—called the Certified Community Behavioral Health Clinic (CCBHC) model—that has been associated with numerous positive outcomes in other states, including reduced emergency department visits and hospital readmissions. The funding will continue to support the efforts of the State's community mental health centers to expand infrastructure and capacity. New Hampshire is one of only 15 states to receive the grant from SAMHSA.

The purpose of the CCBHC model is to transform community behavioral health systems to ensure easy access to comprehensive, coordinated behavioral health services. CCBHCs must meet high quality standards and core criteria that fall into six key program areas:

1. **Staffing** – Staffing driven by local needs assessment, licensing, and training to support service delivery.
2. **Availability and Accessibility of Services** – Standards for timely and meaningful access to services, outreach and engagement, 24/7 access to crisis services, treatment planning, and acceptance of all patients regardless of ability to pay or place of residence.
3. **Care Coordination** – Care coordination agreements across services and providers (e.g., Federally Qualified Health Centers, inpatient, and acute care), defining accountable treatment team, health information technology, and care transitions.
4. **Scope of Services** – Nine required services, as well as person-centered, family-centered, and recovery-oriented care.
5. **Quality and Other Reporting** – Required quality measures, a plan for quality improvement, and tracking of other program requirements.

6. **Organizational Authority and Governance** – Consumer representation in governance, appropriate state accreditation.

Through these activities, New Hampshire is preparing to implement the new behavioral health service system and is eligible to apply to participate in a national demonstration project.

The following information is provided in accordance with the comptroller's instructional memorandum dated September 21, 1981.

1) List of personnel involved: One (1) full-time temporary position titled 11-9150 SOC-CMTY SVC-MGRS-4 (SOC 11 Wage Schedule, Pay Band 5 – Position #9T2927).

2) Nature, Need, and Duration: This position is responsible for overseeing the implementation of the project activities, internal and external coordination, developing materials, and conducting meetings. The proposed grant funding for this position ends on March 30, 2025.

3) Relationship to existing agency programs: This position is working in coordination with: The ten (10) Community Mental Health Centers to oversee and support implementation of the required grant activities; The University of NH's Institute for Health Policy and Practice to collect, analyze, and report data and program evaluation activities as required by the grant; The Department's Medicaid team and actuarial, Milliman, and Myers & Stauffer to conduct fiscal analysis; NAMI NH to facilitate a stakeholder engagement process; and Brandeis University to develop quality and data metrics related to CCBHC designation.

4) Has a similar program been requested of the legislature and denied? No.

5) Why wasn't funding included in the agency's budget request? The Legislature did not include these funds in the state budget.

6) Can portions of the grant funds be utilized? Grant funds are being utilized for these positions.

7) Estimate the funds required to continue this position: Funds for this position are estimated at $100,285 for the duration of the grant through March 30, 2025.

Area served: Statewide.

Source of Funds: 100% Federal Funds

In the event that Federal Funds become no longer available, general funds will not be requested to support the program expenditures.

Respectfully submitted,

Nathan White For:

Lori A. Weaver
Commissioner

Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services

Notice of Award
FAIN# H79SM087622
Federal Award Date
02/21/2024

Recipient Information

1. Recipient Name
NEW HAMPSHIRE DEPARTMENT OF
HEALTH & HUMAN SERVICES
129 PLEASANT ST
CONCORD, NH 03301

2. Congressional District of Recipient
02

3. Payment System Identifier (ID)
1026000618B3

4. Employer Identification Number (EIN)
026000618

5. Data Universal Numbering System (DUNS)
011040545

6. Recipient's Unique Entity Identifier
LA2HR1U97VC6

7. Project Director or Principal Investigator
Evelyn Allen

Evelyn.F.Allen@dhhs.nh.gov
603-271-8944

8. Authorized Official
Julianne Carbin
julianne.carbin@dhhs.nh.gov
160-327-1837

Federal Agency Information

9. Awarding Agency Contact Information
Bryan Rivera
Grants Specialist
bryan.riveralopez@samhsa.hhs.gov
240-276-1921

10. Program Official Contact Information
Leila Disola
Program Official
LEILA.DISOLA@SAMHSA.HHS.GOV
240-276-

Federal Award Information

11. Award Number
6H79SM087622-01M003 (No-Cost Extension)

12. Unique Federal Award Identification Number (FAIN)
H79SM087622

13. Statutory Authority
223 Medicare Act PL113-93, amended BSCA Sec 11001 PL117-159

14. Federal Award Project Title
New Hampshire Certified Community Behavioral Health Clinic Planning Year

15. Assistance Listing Number
93.829

16. Assistance Listing Program Title
Section 223 Demonstration Programs to Improve Community Mental Health Services.

17. Award Action Type
Amendment

18. Is the Award R&D?
No

Summary Federal Award Financial Information

19. Budget Period Start Date 03/31/2023 - End Date 03/30/2025	
20. Total Amount of Federal Funds Obligated by this Action	$0
20a. Direct Cost Amount	$0
20b. Indirect Cost Amount	$0
21. Authorized Carryover	$0
22. Offset	$0
23. Total Amount of Federal Funds Obligated this budget period	$1,000,000
24. Total Approved Cost Sharing or Matching, where applicable	$0
25. Total Federal and Non-Federal Approved this Budget Period	$1,000,000
26. Project Period Start Date 03/31/2023 - End Date 03/30/2025	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	$1,000,000

28. Authorized Treatment of Program Income
Additional Costs

29. Grants Management Officer - Signature
Bryan Rivera

30. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

CCBHC Planning Grants
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Center for Mental Health Services

Issue Date: 02/21/2024

Award Number: 6H79SM087622-01M003
FAIN: H79SM087622
Program Director: Evelyn Allen

Project Title: New Hampshire Certified Community Behavioral Health Clinic Planning Year

Organization Name: NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES

Authorized Official: Julianne Carbin

Authorized Official e-mail address: julianne.carbin@dhhs.nh.gov

Budget Period: 03/31/2023 – 03/30/2025
Project Period: 03/31/2023 – 03/30/2025

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of $0 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES in support of the above referenced project. This award is pursuant to the authority of 223 Medicare Act PL113-93, amended BSCA Sec 11001 PL117-159 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

This award addresses the following Amendment requests:

- No-Cost Extension (6H79SM087622-01L004)

Award recipients may access the SAMHSA website at www.samhsa.gov (click on "Grants" then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,
Bryan Rivera
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 6H79SM087622-01M003

Award Calculation (U.S. Dollars)	
Personnel(non-research)	$61,893
Fringe Benefits	$38,392
Travel	$4,755
Supplies	$9,140
Contractual	$850,891
Other	$1,000
Direct Cost	$966,071
Indirect Cost	$33,929
Approved Budget	$1,000,000
Federal Share	$1,000,000
Cumulative Prior Awards for this Budget Period	$1,000,000
AMOUNT OF THIS ACTION (FEDERAL SHARE)	$0

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	$1,000,000

Note: Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

Fiscal Information:

CFDA Number:	93.829
EIN:	102600618B3
Document Number:	23SM87622A
Fiscal Year:	2023

IC	CAN	Amount
SM	C96CMS3	$0

IC	CAN	2023
SM	C96CMS3	$0

SM Administrative Data:
PCC: BSCA-CD / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 6H79SM087622-01M003

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 6H79SM087622-01M003

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

a. The grant program legislation and program regulation cited in this Notice of Award.
b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
c. 45 CFR Part 75 as applicable.
d. The HHS Grants Policy Statement.
e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

Treatment of Program Income:
Use of program income – Additive: Recipients will add program income to funds committed to the project to further eligible project objectives. Sub-recipients that are for-profit commercial organizations under the same award must use the deductive alternative and reduce their subaward by the amount of program income earned.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than $10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

SECTION IV – SM SPECIAL TERMS AND CONDITIONS – 6H79SM087622-01M003

REMARKS

No Cost Extension Post Award Amendment

This award approves a 12 month NO COST EXTENSION extending the budget and project period end dates from 03/30/2024 to 03/30/2025, based on documentation received on 01/30/2024

If the final resolution of the audit covering the above stated budget period(s) determines that the unobligated balance of funds is incorrect, SAMHSA will not make additional funds available to cover any shortfall.

STANDARD TERMS AND CONDITIONS

Closeout Requirements - Discretionary Grants

Recipients must complete all actions required for closeout to include:

- Liquidate all obligations incurred under the award. All payment requests must be submitted before the end of the **(120) days post-award reconciliation/liquidation period**.
- Reconcile financial expenditures to the reported total disbursements and charges in PMS.
- Return any funds due to PMS as a result of refunds, corrections, or audits. Refer the following link for additional guidance https://pms.psc.gov/grant-recipients/returning-funds-interest.html

Recipients must close the award in accordance with 2 CFR 200.344 Closeout and the terms and conditions listed in the grant notice of award. Recipients must liquidate all obligations incurred under an award not later than one hundred twenty (120) days after the end of awards obligation and project period. **After one hundred twenty (120) days, PMS account is automatically - locked. SAMHSA does not approve payment requests after one hundred twenty (120) days post-award reconciliation/liquidation period.** Therefore, recipients are expected to complete all expenditure requests within the approved project period and the aforementioned 120-day post-award reconciliation/liquidation period. **Recipients late withdrawal requests occurring after the aforementioned periods will be denied. Final reports are due to SAMHSA no later than 120 days after the end of the project period.** Final reports include:

- Submit via PMS the Final Federal Financial Report (Final FFR, SF-425) (PDF | 1.2 MB).
- Submit in eRA Commons the Final Progress Report (FPR) or other reports required by the terms and conditions of the award.
- Submit in eRA Commons a Tangible Personal Property Report (TPPR SF-428, SF428B & if needed additional forms from SF428 series) to account for any property acquired with federal funds or indicate on the form that you have no property to report.

Failure to complete the closeout actions in 120 days after the project period end may result in a unilateral closeout of the grant by SAMHSA. This may affect future funding of federal programs and result in the reimbursement of funding to SAMHSA. **If the recipient does not submit all reports satisfactorily in accordance with 2 CFR 200.344 SAMHSA will report the recipients material failure to comply with the terms and conditions of the award with the OMB-designated integrity and performance system (currently FAPIIS). Federal awarding agencies may also pursue other enforcement actions per 2 CFR 200.339.** Refer to the following SAMHSA for Closeout Standard Terms and Conditions https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions. Additional information on closeout is available at https://www.samhsa.gov/grants/grants-management/grant-closeout.

Staff Contacts:

Leila Disola, Program Official
Phone: 240-276- **Email:** LEILA.DISOLA@SAMHSA.HHS.GOV

Bryan Rivera, Grants Specialist
Phone: 240-276-1921 **Email:** bryan.riveralopez@samhsa.hhs.gov

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STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION FOR BEHAVIORAL HEALTH

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Lori A. Weaver
Interim Commissioner

Katja S. Fox
Director

April 3, 2023

The Honorable Ken Weyler, Chairman
Fiscal Committee of the General Court and

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, NH 03301

REQUESTED ACTION

Pursuant to the provisions of RSA 14:30-a, VI authorize the Department of Health and Human Services, Division for Behavioral Health to accept and expend funds from the Substance Abuse and Mental Health Services Administration (SAMHSA), entitled New Hampshire Certified Community Behavioral Health Clinic Planning Year grant, in the amount of $873,500, and create new expenditure class codes, effective upon Fiscal Committee and Governor and Executive Council approvals through June 30, 2023, and further authorize the allocation of these funds in the account below. Funding source: 100% Federal Funds.

05-95-92-922010-19090000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, SAMHSA GRANT

Class	Description	SFY23 Current Adjusted Authorized	Requested Action	Revised SFY23 Adjusted Authorized
000 - 400146 - 16	Federal Funds	$2,622,358	$873,500	$3,495,858
	General Funds	$0	$0	$0
	Total Revenue	**$2,622,358**	**$873,500**	**$3,495,858**
018 - 500106	Overtime	$13,837	$0	$13,837
020 - 500200	Current Expenses	$75,740	$2,640	$78,380
037 - 500173	Technology-Hardware	$1,500	$3,900	$5,400
038- 500175	Technology-Software	$0	$200	$200
039 - 500188	Telecommunications	$4,800	$2,400	$7,200
041 - 500801	Audit Fund Set Aside	$2,858	$1,000	$3,858
042 - 500260	Additional Fringe Benefits	$16,037	$411	$16,448
059 - 500117	Temp Full Time	$128,264	$4,761	$133,025

060 - 500601	Benefits	$74,352	$2,542	$76,894
066 - 500546	Employee Training	$5,000	$0	$5,000
070 - 500704	In-State Travel Reimburse	$0	$1,755	$1,755
074 - 500589	Grants For Pub Asst And Rel	$0	$505,893	$505,893
080 - 500710	Out Of State Travel Reimb	$0	$3,000	$3,000
102 - 500731	Contracts For Program Servi	$2,299,970	$344,998	$2,644,968
	Total Expenses	**$2,622,358**	**$873,500**	**$3,495,858**

EXPLANATION

New Hampshire DHHS was awarded a $1,000,000 planning grant by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) to expand access to high quality, evidence-based and trauma-informed behavioral health services. The full amount of the grant is not being accepted as appropriations with this item because a portion of the grant is allocated toward indirect expenses that are spread across the Department, and the grant revenue will be recognized in the accounting unit where the expenses are incurred based on the Department's cost allocation plan methodology. Additionally, another portion of the grant is not being accepted as appropriations with this item due to the timing of utilization, because the position expenses associated with a full-time temporary position, which will function as project director, will be over the full time span of the grant term. DHHS will use the funding to plan for a new, more integrated approach to community-based services in New Hampshire—called the Certified Community Behavioral Health Clinic (CCBHC) model—that has been associated with numerous positive outcomes in other states, including reduced emergency department visits and hospital readmissions. The funding will support the efforts of the State's community mental health centers to expand infrastructure and capacity. New Hampshire is one of only 15 states to receive the grant from SAMHSA.

The purpose of the CCBHC model is to transform community behavioral health systems to ensure easy access to comprehensive, coordinated behavioral health services. CCBHCs must meet high quality standards and core criteria that fall into six key program areas:

1. **Staffing** – Staffing driven by local needs assessment, licensing, and training to support service delivery
2. **Availability and Accessibility of Services** – Standards for timely and meaningful access to services, outreach and engagement, 24/7 access to crisis services, treatment planning, and acceptance of all patients regardless of ability to pay or place of residence
3. **Care Coordination** – Care coordination agreements across services and providers (e.g., Federally Qualified Health Centers, inpatient and acute care), defining accountable treatment team, health information technology, and care transitions
4. **Scope of Services** – Nine required services, as well as person-centered, family-centered, and recovery-oriented care
5. **Quality and Other Reporting** – Required quality measures, a plan for quality improvement, and tracking of other program requirements
6. **Organizational Authority and Governance** – Consumer representation in governance, appropriate state accreditation

By the end of the planning year, three of NH's community mental health centers will have completed their community needs assessment, expanded services according to local need, completed their cost estimate, and provided data and quality reports. DHHS will support all other NH community mental health centers in developing the knowledge and capacity necessary to begin implementing the model through similar supports geared to their introductory needs: learning communities, consultation, and technical assistance.

This planning grant opportunity will enable NH DHHS to:

- Obtain stakeholder input into the NH CCBHC model
- Develop an infrastructure to support community mental health centers to expand to the CCBHC model
- Develop new Medicaid payment systems
- Improve models and infrastructure for data and metrics tracking, and quality oversight
- Be eligible to apply for a federal 4-year multi-million-dollar implementation grant

Through these activities, New Hampshire will be prepared to implement the new behavioral health service system and be eligible to participate in a national demonstration project.

The funds are to be budgeted as follows:

Funds in class 020, Current Expenses, for general office supplies and postage.

Funds in class 037, Technology-Hardware, for a computer for the staff person associated with this grant.

Funds in class 038, Technology-Software, for desktop software for the grant staff person.

Funds in class 039, Telecommunications, for phone expenses for the grant staff person.

Funds in class 041, Audit Fund Set Aside, for financial and compliance audits.

Funds in class 042, Additional Fringe Benefits, for post-retirement used to reimburse the general fund for payments for retiree health insurance for the grant staff person.

Funds in class 059, Temp Full Time, for one (1) full-time temporary position titled Administrator II (LG 29), position #9T2927, to function as project director for the New Hampshire Certified Community Behavioral Health Clinic Planning Year grant.

Funds in class 060, Benefits, for the benefits for the grant staff person.

Funds in class 070, In-State Travel Reimbursement, for in-state travel by the grant staff person.

Funds in class 074, Grants for Pub Asst and Rel, for grants to providers for the work associated with the CCBHC Planning Grants Program.

Funds in class 080, Out Of State Travel Reimbursement, for out of state travel associated with the CCBHC Planning Grants Program.

Funds in class 102, Contracts for Program Services, for contracts with vendors for the work associated with the CCBHC Planning Grants Program.

Area served: Statewide.

Source of Funds: 100% Federal Funds

In the event that Federal Funds become no longer available, general funds will not be requested to support the program expenditures.

Respectfully submitted,

Lori A. Weaver
Interim Commissioner

Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services

Notice of Award
FAIN# H79SM087622
Federal Award Date
03/15/2023

Recipient Information

1. Recipient Name
NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES
129 PLEASANT ST
CONCORD, 03301

2. Congressional District of Recipient
02

3. Payment System Identifier (ID)
1026000618B3

4. Employer Identification Number (EIN)
026000618

5. Data Universal Numbering System (DUNS)
011040545

6. Recipient's Unique Entity Identifier
LA2HR1U97VC6

7. Project Director or Principal Investigator
Kerri Swenson
jullanne.carbin@dhhs.nh.gov
160-327-1837

8. Authorized Official
Jullanne Carbin
jullanne.carbin@dhhs.nh.gov
160-327-1837

Federal Agency Information

9. Awarding Agency Contact Information
Bryan Rivera
Center for Mental Health Services
bryan.riveralopez@samhsa.hhs.gov
240-276-1921

10. Program Official Contact Information
Leila Disola
Center for Mental Health Services
LEILA.DISOLA@SAMHSA.HHS.GOV
240-276-

Federal Award Information

11. Award Number
1H79SM087622-01

12. Unique Federal Award Identification Number (FAIN)
H79SM087622

13. Statutory Authority
223 Medicare Act PL113-93, amended BSCA Sec 11001 PL117-159

14. Federal Award Project Title
New Hampshire Certified Community Behavioral Health Clinic Planning Year

15. Assistance Listing Number
93.829

16. Assistance Listing Program Title
Section 223 Demonstration Programs to Improve Community Mental Health Services.

17. Award Action Type
New Competing

18. Is the Award R&D?
No

Summary Federal Award Financial Information

19. Budget Period Start Date 03/31/2023 - End Date 03/30/2024	
20. Total Amount of Federal Funds Obligated by this Action	$1,000,000
20a. Direct Cost Amount	$966,071
20b. Indirect Cost Amount	$33,929
21. Authorized Carryover	
22. Offset	
23. Total Amount of Federal Funds Obligated this budget period	$1,000,000
24. Total Approved Cost Sharing or Matching, where applicable	$0
25. Total Federal and Non-Federal Approved this Budget Period	$1,000,000
26. Project Period Start Date 03/31/2023 - End Date 03/30/2024	
27. Total Amount of the Federal Award Including Approved Cost Sharing or Matching this Project Period	$1,000,000

28. Authorized Treatment of Program Income
Additional Costs

29. Grants Management Officer - Signature
Eileen Bermudez

30. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Notice of Award

CCBHC Planning Grants
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Center for Mental Health Services

Issue Date: 03/15/2023

Award Number: 1H79SM087622-01
FAIN: H79SM087622
Program Director: Kerri Swenson

Project Title: New Hampshire Certified Community Behavioral Health Clinic Planning Year

Organization Name: NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES

Authorized Official: Julianne Carbin

Authorized Official e-mail address: julianne.carbin@dhhs.nh.gov

Budget Period: 03/31/2023 – 03/30/2024
Project Period: 03/31/2023 – 03/30/2024

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of $1,000,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES in support of the above referenced project. This award is pursuant to the authority of 223 Medicare Act PL113-93, amended BSCA Sec 11001 PL117-159 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at www.samhsa.gov (click on "Grants" then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,
Eileen Bermudez
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 1H79SM087622-01

Award Calculation (U.S. Dollars)	
Personnel(non-research)	$61,893
Fringe Benefits	$38,392
Travel	$4,755
Supplies	$6,740
Contractual	$850,891
Other	$3,400
Direct Cost	$966,071
Indirect Cost	$33,929
Approved Budget	$1,000,000
Federal Share	$1,000,000
Cumulative Prior Awards for this Budget Period	$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	$1,000,000

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	$1,000,000

Note: Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

Fiscal Information:

CFDA Number:	93.829
EIN:	102600618B3
Document Number:	23SM87622A
Fiscal Year:	2023

IC	CAN	Amount
SM	C96CMS3	$1,000,000

IC	CAN	2023
SM	C96CMS3	$1,000,000

SM Administrative Data:
PCC: BSCA-CD / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79SM087622-01

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 1H79SM087622-01

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

a. The grant program legislation and program regulation cited in this Notice of Award.
b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
c. 45 CFR Part 75 as applicable.
d. The HHS Grants Policy Statement.
e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

Treatment of Program Income:
Use of program income – Additive: Recipients will add program income to funds committed to the project to further eligible project objectives. Sub-recipients that are for-profit commercial organizations under the same award must use the deductive alternative and reduce their subaward by the amount of program income earned.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than $10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

SECTION IV – SM SPECIAL TERMS AND CONDITIONS – 1H79SM087622-01

REMARKS

BSCA New Cooperative Agreement

This Notice of Award (NoA) is issued to inform your organization that the application submitted through the Cooperative Agreements for Certified Community Behavioral Health Clinic Planning Grants Notice of Funding Opportunity (NOFO) # SM-23-015 has been selected for funding. This award reflects funding for **a 12-month** period, from **3/31/2023 - 3/30/2024** in the amount of **$1,000,000.**

This award reflects **conditional approval** of the budget submitted **12/19/2022** as part of the application by your organization. **See Special Conditions of Award.**

The CCBHC Planning Grants Program, as authorized by Section 223 of the Protecting Access to Medicare Act (Public Law 113-93, 42 U.S.C. 1396a note)

as amended in the Bipartisan Safer Communities Act, Section 11001 (Public Law 117-159).), includes funds to support states to develop and implement certification systems for CCBHCs, establish Prospective Payment Systems (PPS) for Medicaid reimbursable services, and prepare an application to participate in a four-year CCBHC Demonstration program.
This cooperative agreement Notice of Award sets out the terms and conditions governing a collaborative effort between the NH ST DEPARTMENT OF HEALTH & HUMAN SERVICES and THE CENTER FOR MENTAL HEALTH SERVICES (CMHS), Substance Abuse and Mental Health Services Administration (SAMHSA). While the responsibility for conducting these activities lies primarily with NH ST DEPARTMENT OF HEALTH & HUMAN SERVICES, CMHS and SAMHSA, through its designated representatives, shall provide continuing technical assistance, consultation, and coordination in the conduct of the project during the period of this agreement.

Funding for this award is also pursuant to the authority of the Bipartisan Safer Communities Act (BSCA; P.L. 117-159).
All Post-Award Amendments must be submitted in eRA Commons for prior approval.
Please refer to the SAMHSA website for specific SAMHSA guidance on how to submit a post-award amendment in eRA Commons:
https://www.samhsa.gov/grants/grants-management/post-award-changes
Prior approval is required for but is not limited to: a change in key personnel and level of effort, a budget revision, a change in scope, a formal carryover request, and a no cost extension. Reference the full prior approval term on the SAMHSA website under Standard Terms and Conditions at:
https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions
Technical questions regarding the submission of a post-award amendment in eRA Commons should be directed to the eRA Service Desk:
http://grants.nih.gov/support/
All responses to award terms and conditions and post award amendment requests must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions or how to submit a post award amendment request please refer to https://www.samhsa.gov/grants/grants-training-materials under heading Grant Management Reference Materials for Grantees.

SPECIAL TERMS

CCBHC - Required Key Personnel

CCBHC - Required Key Personnel
By **April 30, 2023,** submit in eRA, a Key Personnel - Post Award Amendment, for a Project Director candidate.

The application for this grant did not list a Project Director. Per the NOFO, the grantee must receive approval for key positions to be filled. Please submit a Post Award Amendment for Key

Personnel identifying the Project Director. Ensure that the individual is registered within eRA as the Project Director and the level of effort is at a **minimum of 50 percent** as stipulated within the NOFO SM-23-015. Submit a cover letter, the Resume, Position Description, and level of effort associated with the Project Director identified in the application. Refer to the following website for additional guidance:https://www.samhsa.gov/grants/grants-management/post-award-amendments#change-inkey-personnel.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons.

Disparity Impact Statement (DIS)
By 05/30/2023, submit via eRA Commons a completed SAMHSA DIS Worksheet.

Please refer to the Special Conditions of Awards for Behavioral Health Disparity Impact Statement (DIS) website for the most up-to-date DIS worksheet and resources.

SAMHSA's Behavioral Health Disparity Impact Statement (DIS) is a data-driven, quality improvement approach to advance equity for all, and to identify racial, ethnic, sexual and gender minority, and rural populations at highest risk for experiencing behavioral health disparities as part of their grant projects. The purpose of the DIS is for recipients to identify and address health disparities and to develop and implement an action plan with a disparity reduction quality improvement process to close the identified gap(s). The aim is to achieve targeted behavioral health equity for disparate populations and improve systems.

Recipients are expected to use the DIS Worksheet that can be found at https://www.samhsa.gov/grants/grants-management/disparity-impact-statement. This website also contains DIS resources for recipients to use when developing, monitoring, and reporting on DIS.

The main components of the DIS are:

- Identify and describe the scope of the problem (i.e., behavioral health disparity) related to the grant program and the population(s) of focus that experience disparate access, use, and outcomes. Identify data sources that will be used to inform the DIS (this should be in alignment with the information provided in your application). Complete a table that includes this information at the individual/client, organizational or systemic level as it relates to the grant data collection requirements: NOMS, IPP, or both in relation to access, use, and outcomes.
- Identify Social Determinants of Health (SDOH) domain(s) that your organization will work to address and improve for the identified population(s) of focus using the Notice of Funding Opportunity (NOFO). Visit Healthy People 2030 for more information on the five (5) domains. Using the Behavioral Health Implementation Guide, identify CLAS standards that your organization plans to meet, expand, or improve through this grant opportunity. Review the Behavioral Health Implementation Guide for full explanations of the overarching themes and 15

CLAS Standards with behavioral health related samples, strategies, and examples.

- Develop and implement a disparity reducing quality improvement action plan to address the behavioral health disparity(ies) experienced by underserved population differences based on the GPRA data on access, use and outcomes of activities. The plan should include the activities (using SMART goals and objectives) that will be implemented to address disparities, the intended impact, timeline, client/peer/partner involvement, measurement, evaluation, and sustainability. Ensure documentation of the processes, progress, and outcomes on how the identified behavioral health disparity(ies) have improved. SMART goals and objectives are as follows:
  - Specific (simple sensible, significant);
  - Measurable (meaningful, motivating);
  - Achievable (agreed, attainable);
  - Relevant (reasonable, realistic and resourced, results-based);
  - Time bound (time-based, time limited, time/cost limited, timely, time-sensitive).

Recipients are expected to provide at a minimum, an annual update on the disparity impact statement (e.g. what worked, what did not work, what modifications were made) as part of the programmatic progress reports per the NOFO.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to https://www.samhsa.gov/grants/grants-training-materials under heading **How to Respond to Terms and Conditions.**

SPARS

CCBHC Planning grant recipients are required to collect and report certain data so that SAMHSA can meet its obligation under the Government Performance and Results Act (GPRA) Modernization Act of 2010. These data are gathered using SAMHSA's Performance and Accountability Reporting System (SPARS). CCBHC Planning grant recipients are required to: (1) complete Annual Goals training and enter annual goals data into SPARS by June 30, 2023; and (2) begin collecting and reporting data into SPARS in the 4th quarter (July - September 2023). SPARS training and technical assistance will be provided post award.

CCBHC Funding Limitations Term

The following funding restrictions apply for this program:

- No more than 20 percent of the total award for the budget period may be used for data collection, performance measurement, and performance assessment.

Risk Assessment

The Office of Financial Advisory Services (OFAS), SAMHSA may perform an administrative review of your organization's financial management systems, policies, procedures and records. If the review discloses material weaknesses or other financial management concerns, grant funding may be restricted in accordance with 45 CFR 75/2 CFR 200, as applicable. The

restriction will affect your organization's ability to withdraw funds from the Payment Management System account, until the concerns are addressed.

SPECIAL CONDITIONS

Expired SAM Registration

Your organization's SAM registration has recently lapsed. **By April 30, 2023**, your organization must reactivate your SAM registration and notify SAMHSA with evidence that it has been reestablished. No funds may be drawn from the award account in the Payment Management System until this condition has been met. Failure to meet this condition may result in additional specific award conditions and progressive actions under 45 CFR §75.207, Specific award conditions. Recipients of federal awards are required to maintain an active SAM registration with current information at all times during which it has an active Federal award or an application or plan under consideration by a Federal awarding agency (45 CFR §75.203 (c), Appendix I, D.3.iii). **All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons.** For more information on how to respond to tracked terms and conditions please refer to **https://www.samhsa.gov/grants/grants-training-materials** under heading **How to Respond to Terms and Conditions.**

CCBHC - Additional Documentation Required

Recipients are required to provide a detailed breakdown and justification to demonstrate whether the costs requested are reasonable, allowable, and necessary for the achievement of the goals and objectives of this grant. Recipients must include the items' descriptions, quantities, and unit costs for every line item requested under each budget category to show how any lump sum estimates were calculated.
By **April 30, 2023**, please submit a revised budget via eRA Commons terms tracker breaking down each item of cost and providing additional justification in the narrative section:

1) Personnel: Please identify the Project Director's position inside the line item as well as in the narrative justification. The line item currently indicates "Grant/Project Manager –Administrator II" which is not a Key Position per the NOFO.

2) Fringe Benefits – 62.03%: Please provide documentation such as an organizational policy or a rate agreement /internal document to support the fringe benefits rate request.

3) Travel- Additional justification needed: In the budget narrative, please include the position titles of the staff members that will be traveling. Please further describe the purpose for the proposed travel and explain how these trips for personnel align with the program goals and objectives. Please also identify what "Misc Expenseses" are.

4) Supplies:

- **Additional justification needed:** Please identify the roles of the staff that will benefit from the supplies requested under each narrative section. Please ensure that the items requested is directly proportional to the number of personnel working on the project. If a staff member isn't working on the project 100%, please justify SAMHSA's fair share of the cost.
- **General Office Supplies ($2,400):** Recipients may charge supplies costs as direct costs of the grant if the supplies are needed for specific project activities; otherwise, "general

office supplies" should be covered by the indirect cost rate, if indirect costs are requested. As described in 45 CFR § 75.403, costs must be consistently charged as either indirect or direct costs but may not be double charged or inconsistently charged as both. Update the detailed budget narrative as appropriate.

5) Contractual:

- **Technical Assistance Contract with University of New Hampshire (UNH) ($100,000)- Lump Sum:** Please provide a breakdown of each cost included in this consultancy. Please use the check function in the SAMHSA budget template to add any applicable budget categories under this contract and provide a justification under each cost to help SAMHSA assess the reasonableness of your request.
- **Stipends to eight (8) CMHCs ($306,800):** Please clarify the funding mechanism being used (subaward/subcontract). Additionally, please provide a breakdown calculation of each cost/ service you'd like to support the CMHCs with. Please revise your justification to include how you've determined to pay for the selected costs/services and explain what gap will be filled by the funds provided that's not already being met by other sources of funding available to CMHCs.

- **Stakeholder Engagement Coordinator Contract with NAMI ($75,526):** Please clarify the funding mechanism being used (subaward/subcontract). Please complete the narrative section to justify the requested costs.

- **Contract for Outcomes and Planning Director with Brandeis University ($84,998):** Please clarify the funding mechanism being used (subaward/subcontract). Please provide a breakdown of each cost included in this contract. Please use the check function in the SAMHSA budget template to add any applicable budget categories under this contract and provide a justification under each cost to help SAMHSA assess the reasonableness of your request.

- **Actuarial work for PPS planning and development contract with Milliman ($100,000):** Please provide a breakdown of the costs included in this contract. For instance, indicate if there's an hourly rate being paid to the actuarial provider, if payment is being made towards deliverables or towards specific items of costs. This breakdown of your PPS contract will help SAMHSA assess the reasonableness of your request.
- **Contract to review of cost assessments for accuracy and compliance with Meyers and Stauffer ($60,000):** Please provide a breakdown of each cost included in this contract. Please use the check function in the SAMHSA budget template to add any applicable budget categories under this contract and provide a justification under each cost to help SAMHSA assess the reasonableness of your request.

6) Other-Telecommunications (phone, cell phone, conference calls) ($2,400): Please reallocate to "supplies" budget category and identify the project staff that will benefit from these items.

7) Cost Allocation Plan not provided: Please provide a copy of your Cost Allocation Plan to justify the $33,929 indirect costs request.

8) Funding Limitations/Restrictions: Please complete the Funding Limitations section of the budget considering *"No more than 20% of the total award for the budget period may be used for*

data collection, performance measurement, and performance assessment activities required". Please include each applicable item of cost under the appropriate budget category so when added, the total of such costs remains under 20%. The section currently reflects $1,000,000 and 100%.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to https://www.samhsa.gov/grants/grants-training-materials under heading **How to Respond to Terms and Conditions.**

STANDARD TERMS AND CONDITIONS

BSCA Standard Terms for Awards

Your organization must comply with the Standard Terms and Conditions for the Fiscal Year in which your grant was awarded. The Fiscal Year for your award is identified on Page 3 of your Notice of Award. SAMHSA's Terms and Conditions Webpage is located at: https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions.

Reasonable Costs for consideration

Recipients must exercise proper stewardship over Federal funds and ensure that costs charged to awards are allowable, allocable, reasonable, necessary, and consistently applied regardless of the source of funds according to "Reasonable Costs" consideration per 2 CFR § 200.404 and the "Factors affecting allowability of costs" per 2 CFR § 200.403. A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

Consistent Treatment of Costs

Recipients must treat costs consistently across all federal and non-federal grants, projects and cost centers. Recipients may not direct-charge federal grants for costs typically considered indirect in nature, unless done consistently. If part of the indirect cost rate, then it may not also be charged as a direct cost. *Examples of indirect costs include (administrative salaries, rent, accounting fees, utilities, office supplies, etc.).* If typical indirect cost categories are included in the budget as direct costs, it is SAMHSA's understanding that your organization has developed a cost accounting system adequate to justify the direct charges and to avoid an unfair allocation of these costs to the federal government. Also, note that all awards are subject to later review in accordance with the requirements of 45 CFR 75.364, 45 CFR 75.371, 45 CFR 75.386 and 45 CFR Part 75, Subpart F, *Audit Requirements.*

Compliance with Award Terms and Conditions

FAILURE TO COMPLY WITH THE ABOVE STATED TERMS AND CONDITIONS MAY RESULT IN ACTIONS IN ACCORDANCE WITH 45 CFR 75.371, REMEDIES FOR NON-COMPLIANCE AND 45 CFR 75.372 TERMINATION. THIS MAY INCLUDE WITHHOLDING PAYMENT, DISALLOWANCE OF COSTS, SUSPENSION AND DEBARMENT, TERMINATION OF THIS AWARD, OR DENIAL OF FUTURE FUNDING.

All previous terms and conditions remain in effect until specifically approved and removed by the Grants Management Officer.

BSCA Quarterly Programmatic Progress Report

Submit **Quarterly Reports** via eRA Commons only and submitted as a .pdf to the View Terms

Tracking Details page in the eRA Commons System.

- The first quarterly progress report on project performance will be due no later than **July 15, 2023.**
- The second quarterly progress report on project performance will be due no later than **October 15, 2023.**
- The third quarterly progress report on project performance will be due no later than **January 15, 2024.**
- The fourth quarterly progress report on project performance will be due no later than **April 15, 2024.**

The **Quarterly Progress Report** must, at a minimum, include the following information:

- Data and progress for performance measures as reflected in your application regarding goals and evaluation activities.
- A summary of key program accomplishments to-date.
- Description of the changes, if any, that were made to the project that differ from the application for this incremental period.
- Description of any difficulties and/or problems encountered in achieving planned goals and objectives including barriers to accomplishing program objectives, and actions to overcome barriers or difficulties.

Note: Recipients must also comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the FOA or by the Grant Program Official (GPO). This information is needed in order to comply with PL 102-62, which requires that Substance Abuse and Mental Health Services Administration (SAMHSA) report evaluation data to ensure the effectiveness and efficiency of its programs.

The response to this term must be submitted as .pdf documents in eRA Commons. Please contact your Government Program Official (GPO) for program specific submission information.

For more information on how to respond to tracked terms and conditions please refer to **https://www.samhsa.gov/grants/grants-training-materials** under heading **How to Respond to Terms and Conditions.**

Additional information on reporting requirements is available at https://www.samhsa.gov/grants/grants-management/reporting-requirements.

Annual Federal Financial Report (FFR or SF-425)

All financial reporting for recipients of Health and Human Services (HHS) grants and cooperative agreements has been consolidated through a single point of entry, which has been identified as the Payment Management System (PMS). The Federal Financial Report (FFR or SF-425) initiative ensures all financial data is reported consistently through one source; shares reconciled financial data to the HHS grants management systems; assists with the timely financial monitoring and grant closeout; and reduces expired award payments.

The FFR is required on an annual basis no later than 90 days after the end of each Budget Period. The FFR should reflect cumulative amounts. Additional guidance to complete the FFR can be found at http://www.samhsa.gov/grants/grants-management/reporting-requirements.

SAMHSA reserves the right to request more frequent submissions of FFRs. If so, the additional submission dates will be shown below.

Your organization is required to submit an FFR for this grant funding as follows:

- **By June 29th, 2023** submit the Federal Financial Report (FFR)/(SF-425).

- The grant recipient staff member(s) responsible for FFR preparation, certification and submission of the FFR must either submit a request for New User Access or Update User Access to the FFR Module as applicable. Refer to the PMS User Access website https://pms.psc.gov/grant-recipients/user-access.html for information on how to submit a New User Access, Update User Access or Deactivate User Access. You can also view PMS' Video on how to request new user access @ https://youtu.be/kdoqaXfiuI0 and PDF resource with instructions on Requesting Access @ https://pms.psc.gov/forms/New-User-Request_Grantee.pdf
- Instructions on **how to submit a FFR via PMS** are available at https://pmsapp.psc.gov/pms/app/help/ffr/ffr-grantee-instructions.html (The user must be logged in to PMS to access the link). Updates to the FFR instructions effective 4/1/2022 are also available @ https://pms.psc.gov/grant-recipients/ffr-updates.html
- While recipients must submit the FFR in PMS, the FFR can also be accessed by connecting seamlessly from the eRA Commons to PMS by clicking the "Manage FFR" link on the "Search for Federal Financial Report (FFR)" page in eRA Commons, which will redirect to PMS. SAMHSA will not accept FFRs submitted by email or uploaded as an attachment into eRA. To access the "Manage FFR" link in eRA Commons, the individual must be registered in eRA Commons and assigned the Financial Status Reporter (FSR) role for their organization. The individual assigned the FSR role is responsible for reporting the statement of grant expenditures for their organization. Refer to the Managing User Accounts: Add or Remove Roles, Unaffiliate Account document for instructions on how to assign a the FSR role.

If you have questions about how to set up a PMS account for your organization, please contact the PMS Help Desk at PMSSupport@psc.hhs.gov or 1-877-614-5533.
Note: Recipients will use PMS to report all financial expenditures, as well as to drawdown funds; SAMHSA recipients will continue to use the eRA Commons for all other grant-related matters including submitting progress reports, requesting post-award amendments, and accessing grant documents such as the Notice of Award.

Closeout Requirements - Discretionary Grants

Recipients must complete all actions required for closeout to include:

- Liquidate all obligations incurred under the award. All payment requests must be submitted before the end of the **(120) days post-award reconciliation/liquidation period.**
- Reconcile financial expenditures to the reported total disbursements and charges in PMS.
- Return any funds due to PMS as a result of refunds, corrections, or audits. Refer the following link for additional guidance https://pms.psc.gov/grant-recipients/returning-funds-

interest.html

Recipients must close the award in accordance with 2 CFR 200.344 Closeout and the terms and conditions listed in the grant notice of award. Recipients must liquidate all obligations incurred under an award not later than one hundred twenty (120) days after the end of awards obligation and project period. **After one hundred twenty (120) days, PMS account is automatically - locked. SAMHSA does not approve payment requests after one hundred twenty (120) days post-award reconciliation/liquidation period.** Therefore, recipients are expected to complete all expenditure requests within the approved project period and the aforementioned 120-day post-award reconciliation/liquidation period. **Recipients late withdrawal requests occurring after the aforementioned periods will be denied. Final reports are due to SAMHSA no later than 120 days after the end of the project period.** Final reports include:

- Submit via PMS the Final Federal Financial Report (Final FFR, SF-425) (PDF | 1.2 MB).
- Submit in eRA Commons the Final Progress Report (FPR) or other reports required by the terms and conditions of the award.
- Submit in eRA Commons a Tangible Personal Property Report (TPPR SF-428, SF428B & if needed additional forms from SF428 series) to account for any property acquired with federal funds or indicate on the form that you have no property to report.

Failure to complete the closeout actions in 120 days after the project period end may result in a unilateral closeout of the grant by SAMHSA. This may affect future funding of federal programs and result in the reimbursement of funding to SAMHSA. **If the recipient does not submit all reports satisfactorily in accordance with 2 CFR 200.344 SAMHSA will report the recipients material failure to comply with the terms and conditions of the award with the OMB-designated integrity and performance system (currently FAPIIS). Federal awarding agencies may also pursue other enforcement actions per 2 CFR 200.339.** Refer to the following SAMHSA for Closeout Standard Terms and Conditions https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions. Additional information on closeout is available at https://www.samhsa.gov/grants/grants-management/grant-closeout.

Staff Contacts:

Lella Disola, Program Official
Phone: 240-276- **Email:** LEILA.DISOLA@SAMHSA.HHS.GOV

Bryan Rivera, Grants Specialist
Phone: 240-276-1921 **Email:** bryan.riveralopez@samhsa.hhs.gov

Division for Behavioral Health
SAMHSA Grants

Fiscal Situation: Account 05-92-92-920010-19090000

Agency Income:	
Grant Award H79FG000210	$2,000,000.00
Grant Award H79FG000652	$2,859,647.00
Grant Award H79SM087622	$1,000,000.00
Total Funds Available	**$5,859,647.00**
SFY 21 Expenses	($816,581.33)
SFY 22 Expenses	($1,409,911.66)
Prior Fiscal Year Expenses	**($2,226,492.99)**
SFY 2023 Adjusted Authorized Appropriations	($2,622,358.01)
Allocated Indirect Costs	($38,329.00)
Total Appropriations	**($2,660,687.01)**
Net Grant Funds Remaining	$972,467.00
This Request	**$873,500.00**

ARC

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FIS 23 268

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION FOR BEHAVIORAL HEALTH

105 PLEASANT STREET, CONCORD, NH 03301
603-271-5000 1-800-852-3345 Ext. 5000
Fax: 603-271-5058 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

Lori A. Weaver
Commissioner

Katja S. Fox
Director

August 22, 2023

The Honorable Ken Weyler, Chairman
Fiscal Committee of the General Court and

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, NH 03301

REQUESTED ACTION

1. Pursuant to RSA 14:30-a, VI, authorize the Department of Health and Human Services, Division for Behavioral Health to **retroactively** amend Fiscal Item FIS 23-138, approved by the Fiscal Committee on April 21, 2023, and item #8, approved by the Governor and Executive Council on May 3, 2023, by extending the end date from June 30, 2023, to March 30, 2024, to accept and expend Substance Abuse and Mental Health Services Administration (SAMHSA) funds for the New Hampshire Certified Community Behavioral Health Clinic Planning Year in the amount of $873,500, effective upon Fiscal Committee and Governor and Council approvals. 100% Federal Funds.

2. Contingent upon approval of Requested Actions #1 and #3, and pursuant to RSA 124:15, authorize the Department of Health and Human Services, Division for Behavioral Health, to **retroactively** extend one (1) temporary full-time position, an Administrator II (LG 29 – Position #9T2927), responsible for overseeing the implementation of the Certified Community Behavioral Health Clinic Planning Year project activities, internal and external coordination, developing materials, and conducting meetings. Effective retroactive to July 1, 2023, upon Fiscal Committee and Governor and Council approvals through March 30, 2024. Funding source: 100% Federal Funds.

3. Authorize the Department of Health and Human Services, Division for Behavioral Health to accept and expend funds from the Substance Abuse and Mental Health Services Administration (SAMHSA), entitled New Hampshire Certified Community Behavioral Health Clinic Planning Year grant, in the amount of $92,571, through March 30, 2024, and further authorize the allocation of these funds in the account below. Effective upon Governor and Council approval. Funding source: 100% Federal Funds.

05-95-92-922010-19090000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, SAMHSA GRANT

Class	Description	SFY24 Current Adjusted Authorized	Requested Action	Revised SFY24 Adjusted Authorized
000 – 400146 - 16	Federal Funds	$2,838,228	$92,571	$2,930,799
	General Funds	$0	$0	$0
	Total Revenue	**$2,838,228**	**$92,571**	**$2,930,799**
018 - 500106	Overtime	$13,837	$0	$13,837
020 - 500200	Current Expenses	$78,380	$0	$78,380
037 - 500173	Technology-Hardware	$5,400	$0	$5,400
038 - 500175	Technology-Software	$200	$0	$200
039 - 500188	Telecommunications	$7,200	$0	$7,200
041 - 500801	Audit Fund Set Aside	$3,024	$0	$3,024
042 - 500260	Additional Fringe Benefits	$16,448	$4,937	$21,385
059 - 500117	Temp Full Time	$133,025	$57,132	$190,157
060 - 500601	Benefits	$76,894	$30,502	$107,396
066 - 500546	Employee Training	$5,000	$0	$5,000
070 - 500704	In-State Travel Reimburse	$1,755	$0	$1,755
074 - 500589	Grants For Pub Asst And Rel	$505,893	$0	$505,893
080 - 500710	Out Of State Travel Reimb	$3,000	$0	$3,000
102 - 500731	Contracts For Program Servi	$1,988,172	$0	$1,988,172
	Total Expenses	**$2,838,228**	**$92,571**	**$2,930,799**

EXPLANATION

Request #1 is **retroactive** because it is extending the end date from the prior biennium into the current biennium, and it is the policy of the Fiscal Committee to act only on items within the current biennium. Request #2 is **retroactive** because the position was not included in the Department's FY 24/25 budget request, but funds are available through this grant. The Department is submitting this item to the first possible meeting following the finalization of the accounting unit balances after year end close.

New Hampshire DHHS was awarded a $1,000,000 planning grant by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) to expand access to high quality, evidence-based and trauma-informed behavioral health services. The full amount of the grant is not being accepted as appropriations with this item because a portion of the grant is allocated toward indirect expenses that are spread across the Department, and the grant revenue will be recognized in the accounting unit where the expenses are incurred based on the Department's cost

allocation plan methodology. DHHS will use the funding to plan for a new, more integrated approach to community-based services in New Hampshire—called the Certified Community Behavioral Health Clinic (CCBHC) model—that has been associated with numerous positive outcomes in other states, including reduced emergency department visits and hospital readmissions. The funding will support the efforts of the State's community mental health centers to expand infrastructure and capacity. New Hampshire is one of only 15 states to receive the grant from SAMHSA.

The purpose of the CCBHC model is to transform community behavioral health systems to ensure easy access to comprehensive, coordinated behavioral health services. CCBHCs must meet high quality standards and core criteria that fall into six key program areas:

1. **Staffing** – Staffing driven by local needs assessment, licensing, and training to support service delivery.
2. **Availability and Accessibility of Services** – Standards for timely and meaningful access to services, outreach and engagement, 24/7 access to crisis services, treatment planning, and acceptance of all patients regardless of ability to pay or place of residence.
3. **Care Coordination** – Care coordination agreements across services and providers (e.g., Federally Qualified Health Centers, inpatient and acute care), defining accountable treatment team, health information technology, and care transitions.
4. **Scope of Services** – Nine required services, as well as person-centered, family-centered, and recovery-oriented care.
5. **Quality and Other Reporting** – Required quality measures, a plan for quality improvement, and tracking of other program requirements.
6. **Organizational Authority and Governance** – Consumer representation in governance, appropriate state accreditation.

By the end of the planning year, three of NH's community mental health centers will have completed their community needs assessment, expanded services according to local need, completed their cost estimate, and provided data and quality reports. DHHS will support all other NH community mental health centers in developing the knowledge and capacity necessary to begin implementing the model through similar supports geared to their introductory needs: learning communities, consultation, and technical assistance.

This planning grant opportunity will enable NH DHHS to:

- Obtain stakeholder input into the NH CCBHC model.
- Develop an infrastructure to support community mental health centers to expand to the CCBHC model.
- Develop new Medicaid payment systems.
- Improve models and infrastructure for data and metrics tracking, and quality oversight.
- Be eligible to apply for a federal 4-year multi-million-dollar implementation grant.

Through these activities, New Hampshire will be prepared to implement the new behavioral health service system and be eligible to participate in a national demonstration project.

The funds are to be budgeted as follows:

Funds in class 042, Additional Fringe Benefits, for post-retirement used to reimburse the general fund for payments for retiree health insurance for the grant staff person.

Funds in class 059, Temp Full Time, for one (1) full-time temporary position titled Administrator II (LG 29), position #9T2927, to function as project director for the New Hampshire Certified Community Behavioral Health Clinic Planning Year grant.

Funds in class 060, Benefits, for the benefits for the grant staff person.

Funds are not being budgeted in class 041, Audit Fund Set Aside, because adequate appropriations are available in the accounting unit based on the grant award amount.

The following information is provided in accordance with the comptroller's instructional memorandum dated September 21, 1981.

1) List of personnel involved:

One (1) full-time temporary position titled Administrator II (LG 29 – Position #9T2927).

2) Nature, Need, and Duration:

This position is responsible for overseeing the implementation of the project activities, internal and external coordination, developing materials, and conducting meetings. The proposed grant funding for this position ends on March 30, 2024.

3) Relationship to existing agency programs:

This position will work in coordination with: The ten (10) Community Mental Health Centers to oversee and support implementation of the required grant activities; The University of NH's Institute for Health Policy and Practice to collect, analyze, and report data and program evaluation activities as required by the grant; The Department's Medicaid team and actuarial, Milliman, and Myers & Stoffer to conduct fiscal analysis; NAMI NH to facilitate a stakeholder engagement process; and Brandeis University to develop quality and data metrics related to CCBHC designation.

4) Has a similar program been requested of the legislature and denied?

No.

5) Why wasn't funding included in the agency's budget request?

The Legislature did not include these funds in the state budget. The Department is submitting this item to the first possible meeting following the finalization of the accounting unit balances after year end close.

6) Can portions of the grant funds be utilized?

Grant funds are being utilized for these positions.

7) Estimate the funds required to continue this position:

Funds for this position are estimated at $100,285.00 for the duration of the grant through March 30, 2024. Request #3 is to accept the remainder of the grant funds into the appropriations, as a portion of

the amount was already included in FIS 23-138, approved by the Fiscal Committee on April 21, 2023, and item #8, approved by the Governor and Executive Council on May 3, 2023.

Area served: Statewide.

Source of Funds: 100% Federal Funds

In the event that Federal Funds become no longer available, general funds will not be requested to support the program expenditures.

Respectfully Submitted,

Lori A. Weaver
Commissioner

Division for Behavioral Health
SAMHSA Grants

Fiscal Situation: Account 05-92-92-920010-19090000

Agency Income:	
Grant Award H79FG000210	$2,000,000.00
Grant Award H79FG000652	$2,859,647.00
Grant Award H79SM087622	$1,000,000.00
Total Funds Available	**$5,859,647.00**
SFY 21 Expenses	($816,581.33)
SFY 22 Expenses	($1,409,911.66)
SFY 23 Expenses	($657,630.10)
Prior Fiscal Year Expenses	**($2,884,123.09)**
SFY 2023 Adjusted Authorized Appropriations	($2,838,227.91)
Allocated Indirect Costs	($44,725.00)
Total Appropriations	**($2,882,952.91)**
Net Grant Funds Remaining	$92,571.00
This Request	**$92,571.00**

Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services

Notice of Award
FAIN# H79SM087622
Federal Award Date
03/15/2023

Recipient Information

1. Recipient Name
NEW HAMPSHIRE DEPARTMENT OF
HEALTH & HUMAN SERVICES
129 PLEASANT ST

CONCORD, 03301

2. Congressional District of Recipient
02

3. Payment System Identifier (ID)
1026000618B3

4. Employer Identification Number (EIN)
026000618

5. Data Universal Numbering System (DUNS)
011040545

6. Recipient's Unique Entity Identifier
LA2HR1U97VC6

7. Project Director or Principal Investigator
Kerri Swenson

julianne.carbin@dhhs.nh.gov
160-327-1837

8. Authorized Official
Julianne Carbin
julianne.carbin@dhhs.nh.gov
160-327-1837

Federal Agency Information

9. Awarding Agency Contact Information
Bryan Rivera

Center for Mental Health Services
bryan.riveralopez@samhsa.hhs.gov
240-276-1921

10. Program Official Contact Information
Leila Disola

Center for Mental Health Services
LEILA.DISOLA@SAMHSA.HHS.GOV
240-276-

Federal Award Information

11. Award Number
1H79SM087622-01

12. Unique Federal Award Identification Number (FAIN)
H79SM087622

13. Statutory Authority
223 Medicare Act PL113-93, amended BSCA Sec 11001 PL117-159.

14. Federal Award Project Title
New Hampshire Certified Community Behavioral Health Clinic Planning Year

15. Assistance Listing Number
93.829

16. Assistance Listing Program Title
Section 223 Demonstration Programs to Improve Community Mental Health Services.

17. Award Action Type
New Competing

18. Is the Award R&D?
No

Summary Federal Award Financial Information

19. Budget Period Start Date 03/31/2023 - End Date 03/30/2024	
20. Total Amount of Federal Funds Obligated by this Action	$1,000,000
20a. Direct Cost Amount	$966,071
20b. Indirect Cost Amount	$33,929
21. Authorized Carryover	
22. Offset	
23. Total Amount of Federal Funds Obligated this budget period	$1,000,000
24. Total Approved Cost Sharing or Matching, where applicable	$0
25. Total Federal and Non-Federal Approved this Budget Period	$1,000,000
26. Project Period Start Date 03/31/2023 - End Date 03/30/2024	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	$1,000,000

28. Authorized Treatment of Program Income
Additional Costs

29. Grants Management Officer - Signature
Eileen Bermudez

30. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Notice of Award

CCBHC Planning Grants
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Issue Date: 03/15/2023

Center for Mental Health Services

Award Number: 1H79SM087622-01
FAIN: H79SM087622
Program Director: Kerri Swenson

Project Title: New Hampshire Certified Community Behavioral Health Clinic Planning Year

Organization Name: NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES

Authorized Official: Julianne Carbin

Authorized Official e-mail address: julianne.carbin@dhhs.nh.gov

Budget Period: 03/31/2023 – 03/30/2024
Project Period: 03/31/2023 – 03/30/2024

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of $1,000,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES in support of the above referenced project. This award is pursuant to the authority of 223 Medicare Act PL113-93, amended BSCA Sec 11001 PL117-159 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at www.samhsa.gov (click on "Grants" then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,
Eileen Bermudez
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 1H79SM087622-01

Award Calculation (U.S. Dollars)	
Personnel(non-research)	$61,893
Fringe Benefits	$38,392
Travel	$4,755
Supplies	$6,740
Contractual	$850,891
Other	$3,400
Direct Cost	$966,071
Indirect Cost	$33,929
Approved Budget	$1,000,000
Federal Share	$1,000,000
Cumulative Prior Awards for this Budget Period	$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	$1,000,000

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	$1,000,000

Note: Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

Fiscal Information:

CFDA Number:	93.829
EIN:	102600061883
Document Number:	23SM87622A
Fiscal Year:	2023

IC	CAN	Amount
SM	C96CMS3	$1,000,000

IC	CAN	2023
SM	C96CMS3	$1,000,000

SM Administrative Data:
PCC: BSCA-CD / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79SM087622-01

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 1H79SM087622-01

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

a. The grant program legislation and program regulation cited in this Notice of Award.
b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
c. 45 CFR Part 75 as applicable.
d. The HHS Grants Policy Statement.
e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

Treatment of Program Income:
Use of program income – Additive: Recipients will add program income to funds committed to the project to further eligible project objectives. Sub-recipients that are for-profit commercial organizations under the same award must use the deductive alternative and reduce their subaward by the amount of program income earned.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than $10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

SECTION IV – SM SPECIAL TERMS AND CONDITIONS – 1H79SM087622-01

REMARKS

BSCA New Cooperative Agreement

This Notice of Award (NoA) is issued to inform your organization that the application submitted through the Cooperative Agreements for Certified Community Behavioral Health Clinic Planning Grants Notice of Funding Opportunity (NOFO) # SM-23-015 has been selected for funding. This award reflects funding for a **12-month** period, from **3/31/2023 - 3/30/2024** in the amount of **$1,000,000.**

This award reflects **conditional approval** of the budget submitted **12/19/2022** as part of the application by your organization. **See Special Conditions of Award.**

The CCBHC Planning Grants Program, as authorized by Section 223 of the Protecting Access to Medicare Act (Public Law 113-93, 42 U.S.C. 1396a note)

as amended in the Bipartisan Safer Communities Act, Section 11001 (Public Law 117-159).), includes funds to support states to develop and implement certification systems for CCBHCs, establish Prospective Payment Systems (PPS) for Medicaid reimbursable services, and prepare an application to participate in a four-year CCBHC Demonstration program.
This cooperative agreement Notice of Award sets out the terms and conditions governing a collaborative effort between the NH ST DEPARTMENT OF HEALTH & HUMAN SERVICES and THE CENTER FOR MENTAL HEALTH SERVICES (CMHS), Substance Abuse and Mental Health Services Administration (SAMHSA). While the responsibility for conducting these activities lies primarily with NH ST DEPARTMENT OF HEALTH & HUMAN SERVICES, CMHS and SAMHSA, through its designated representatives, shall provide continuing technical assistance, consultation, and coordination in the conduct of the project during the period of this agreement.

Funding for this award is also pursuant to the authority of the Bipartisan Safer Communities Act (BSCA; P.L. 117-159).
All Post-Award Amendments must be submitted in eRA Commons for prior approval.
Please refer to the SAMHSA website for specific SAMHSA guidance on how to submit a post-award amendment in eRA Commons:
https://www.samhsa.gov/grants/grants-management/post-award-changes
Prior approval is required for but is not limited to: a change in key personnel and level of effort, a budget revision, a change in scope, a formal carryover request, and a no cost extension. Reference the full prior approval term on the SAMHSA website under Standard Terms and Conditions at:
https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions
Technical questions regarding the submission of a post-award amendment in eRA Commons should be directed to the eRA Service Desk:
http://grants.nih.gov/support/
All responses to award terms and conditions and post award amendment requests must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions or how to submit a post award amendment request please refer to https://www.samhsa.gov/grants/grants-training-materials under heading Grant Management Reference Materials for Grantees.

SPECIAL TERMS

CCBHC - Required Key Personnel

CCBHC - Required Key Personnel
By **April 30, 2023,** submit in eRA, a Key Personnel - Post Award Amendment, for a Project Director candidate.

The application for this grant did not list a Project Director. Per the NOFO, the grantee must receive approval for key positions to be filled. Please submit a Post Award Amendment for Key

Personnel identifying the Project Director. Ensure that the individual is registered within eRA as the Project Director and the level of effort is at a **minimum of 50 percent** as stipulated within the NOFO SM-23-015. Submit a cover letter, the Resume, Position Description, and level of effort associated with the Project Director identified in the application. Refer to the following website for additional guidance:https://www.samhsa.gov/grants/grants-management/post-award-amendments#change-inkey-personnel.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons.

Disparity Impact Statement (DIS)
By 05/30/2023, submit via eRA Commons a completed SAMHSA DIS Worksheet.

Please refer to the Special Conditions of Awards for Behavioral Health Disparity Impact Statement (DIS) website for the most up-to-date DIS worksheet and resources.

SAMHSA's Behavioral Health Disparity Impact Statement (DIS) is a data-driven, quality improvement approach to advance equity for all, and to identify racial, ethnic, sexual and gender minority, and rural populations at highest risk for experiencing behavioral health disparities as part of their grant projects. The purpose of the DIS is for recipients to identify and address health disparities and to develop and implement an action plan with a disparity reduction quality improvement process to close the identified gap(s). The aim is to achieve targeted behavioral health equity for disparate populations and improve systems.

Recipients are expected to use the DIS Worksheet that can be found at https://www.samhsa.gov/grants/grants-management/disparity-impact-statement. This website also contains DIS resources for recipients to use when developing, monitoring, and reporting on DIS.

The main components of the DIS are:

- Identify and describe the scope of the problem (i.e., behavioral health disparity) related to the grant program and the population(s) of focus that experience disparate access, use, and outcomes. Identify data sources that will be used to inform the DIS (this should be in alignment with the information provided in your application). Complete a table that includes this information at the individual/client, organizational or systemic level as it relates to the grant data collection requirements: NOMS, IPP, or both in relation to access, use, and outcomes.
- Identify Social Determinants of Health (SDOH) domain(s) that your organization will work to address and improve for the identified population(s) of focus using the Notice of Funding Opportunity (NOFO). Visit Healthy People 2030 for more information on the five (5) domains. Using the Behavioral Health Implementation Guide, identify CLAS standards that your organization plans to meet, expand, or improve through this grant opportunity. Review the Behavioral Health Implementation Guide for full explanations of the overarching themes and 15

CLAS Standards with behavioral health related samples, strategies, and examples.

- Develop and implement a disparity reducing quality improvement action plan to address the behavioral health disparity(ies) experienced by underserved population differences based on the GPRA data on access, use and outcomes of activities. The plan should include the activities (using SMART goals and objectives) that will be implemented to address disparities, the intended impact, timeline, client/peer/partner involvement, measurement, evaluation, and sustainability. Ensure documentation of the processes, progress, and outcomes on how the identified behavioral health disparity(ies) have improved. SMART goals and objectives are as follows:
  - Specific (simple sensible, significant);
  - Measurable (meaningful, motivating);
  - Achievable (agreed, attainable);
  - Relevant (reasonable, realistic and resourced, results-based);
  - Time bound (time-based, time limited, time/cost limited, timely, time-sensitive).

Recipients are expected to provide at a minimum, an annual update on the disparity impact statement (e.g. what worked, what did not work, what modifications were made) as part of the programmatic progress reports per the NOFO.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to **https://www.samhsa.gov/grants/grants-training-materials** under heading **How to Respond to Terms and Conditions.**

SPARS

CCBHC Planning grant recipients are required to collect and report certain data so that SAMHSA can meet its obligation under the Government Performance and Results Act (GPRA) Modernization Act of 2010. These data are gathered using SAMHSA's Performance and Accountability Reporting System (SPARS). CCBHC Planning grant recipients are required to: (1) complete Annual Goals training and enter annual goals data into SPARS by June 30, 2023; and (2) begin collecting and reporting data into SPARS in the 4th quarter (July - September 2023). SPARS training and technical assistance will be provided post award.

CCBHC Funding Limitations Term

The following funding restrictions apply for this program:

- No more than 20 percent of the total award for the budget period may be used for data collection, performance measurement, and performance assessment.

Risk Assessment

The Office of Financial Advisory Services (OFAS), SAMHSA may perform an administrative review of your organization's financial management systems, policies, procedures and records. If the review discloses material weaknesses or other financial management concerns, grant funding may be restricted in accordance with 45 CFR 75/2 CFR 200, as applicable. The

restriction will affect your organization's ability to withdraw funds from the Payment Management System account, until the concerns are addressed.

SPECIAL CONDITIONS

Expired SAM Registration

Your organization's SAM registration has recently lapsed. **By April 30, 2023,** your organization must reactivate your SAM registration and notify SAMHSA with evidence that it has been reestablished. No funds may be drawn from the award account in the Payment Management System until this condition has been met. Failure to meet this condition may result in additional specific award conditions and progressive actions under 45 CFR §75.207, Specific award conditions. Recipients of federal awards are required to maintain an active SAM registration with current information at all times during which it has an active Federal award or an application or plan under consideration by a Federal awarding agency (45 CFR §75.203 (c), Appendix I, D.3.iii). **All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons.** For more information on how to respond to tracked terms and conditions please refer to **https://www.samhsa.gov/grants/grants-training-materials** under heading **How to Respond to Terms and Conditions.**

CCBHC - Additional Documentation Required

Recipients are required to provide a detailed breakdown and justification to demonstrate whether the costs requested are reasonable, allowable, and necessary for the achievement of the goals and objectives of this grant. Recipients must include the items' descriptions, quantities, and unit costs for every line item requested under each budget category to show how any lump sum estimates were calculated.

By **April 30, 2023,** please submit a revised budget via eRA Commons terms tracker breaking down each item of cost and providing additional justification in the narrative section:

1) Personnel: Please identify the Project Director's position inside the line item as well as in the narrative justification. The line item currently indicates "Grant/Project Manager –Administrator II" which is not a Key Position per the NOFO.

2) Fringe Benefits – 62.03%: Please provide documentation such as an organizational policy or a rate agreement /internal document to support the fringe benefits rate request.

3) Travel- Additional justification needed: In the budget narrative, please include the position titles of the staff members that will be traveling. Please further describe the purpose for the proposed travel and explain how these trips for personnel align with the program goals and objectives. Please also identify what "Misc Expenseses" are.

4) Supplies:

- **Additional justification needed:** Please identify the roles of the staff that will benefit from the supplies requested under each narrative section. Please ensure that the items requested is directly proportional to the number of personnel working on the project. If a staff member isn't working on the project 100%, please justify SAMHSA's fair share of the cost.
- **General Office Supplies ($2,400):** Recipients may charge supplies costs as direct costs of the grant if the supplies are needed for specific project activities; otherwise, "general

office supplies" should be covered by the indirect cost rate, if indirect costs are requested. As described in 45 CFR § 75.403, costs must be consistently charged as either indirect or direct costs but may not be double charged or inconsistently charged as both. Update the detailed budget narrative as appropriate.

5) Contractual:

- **Technical Assistance Contract with University of New Hampshire (UNH) ($100,000)- Lump Sum:** Please provide a breakdown of each cost included in this consultancy. Please use the check function in the SAMHSA budget template to add any applicable budget categories under this contract and provide a justification under each cost to help SAMHSA assess the reasonableness of your request.
- **Stipends to eight (8) CMHCs ($306,800):** Please clarify the funding mechanism being used (subaward/subcontract). Additionally, please provide a breakdown calculation of each cost/ service you'd like to support the CMHCs with. Please revise your justification to include how you've determined to pay for the selected costs/services and explain what gap will be filled by the funds provided that's not already being met by other sources of funding available to CMHCs.
- **Stakeholder Engagement Coordinator Contract with NAMI ($75,526):** Please clarify the funding mechanism being used (subaward/subcontract). Please complete the narrative section to justify the requested costs.
- **Contract for Outcomes and Planning Director with Brandeis University ($84,998):** Please clarify the funding mechanism being used (subaward/subcontract). Please provide a breakdown of each cost included in this contract. Please use the check function in the SAMHSA budget template to add any applicable budget categories under this contract and provide a justification under each cost to help SAMHSA assess the reasonableness of your request.
- **Actuarial work for PPS planning and development contract with Milliman ($100,000):** Please provide a breakdown of the costs included in this contract. For instance, indicate if there's an hourly rate being paid to the actuarial provider, if payment is being made towards deliverables or towards specific items of costs. This breakdown of your PPS contract will help SAMHSA assess the reasonableness of your request.
- **Contract to review of cost assessments for accuracy and compliance with Meyers and Stauffer ($60,000):** Please provide a breakdown of each cost included in this contract. Please use the check function in the SAMHSA budget template to add any applicable budget categories under this contract and provide a justification under each cost to help SAMHSA assess the reasonableness of your request.

6) Other-Telecommunications (phone, cell phone, conference calls) ($2,400): Please reallocate to "supplies" budget category and identify the project staff that will benefit from these items.

7) Cost Allocation Plan not provided: Please provide a copy of your Cost Allocation Plan to justify the $33,929 indirect costs request.

8) Funding Limitations/Restrictions: Please complete the Funding Limitations section of the budget considering *"No more than 20% of the total award for the budget period may be used for*

data collection, performance measurement, and performance assessment activities required". Please include each applicable item of cost under the appropriate budget category so when added, the total of such costs remains under 20%. The section currently reflects $1,000,000 and 100%.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to **https://www.samhsa.gov/grants/grants-training-materials** under heading **How to Respond to Terms and Conditions.**

STANDARD TERMS AND CONDITIONS

BSCA Standard Terms for Awards

Your organization must comply with the Standard Terms and Conditions for the Fiscal Year in which your grant was awarded. The Fiscal Year for your award is identified on Page 3 of your Notice of Award. SAMHSA's Terms and Conditions Webpage is located at: https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions.

Reasonable Costs for consideration

Recipients must exercise proper stewardship over Federal funds and ensure that costs charged to awards are allowable, allocable, reasonable, necessary, and consistently applied regardless of the source of funds according to "Reasonable Costs" consideration per 2 CFR § 200.404 and the "Factors affecting allowability of costs" per 2 CFR § 200.403. A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

Consistent Treatment of Costs

Recipients must treat costs consistently across all federal and non-federal grants, projects and cost centers. Recipients may not direct-charge federal grants for costs typically considered indirect in nature, unless done consistently. If part of the indirect cost rate, then it may not also be charged as a direct cost. *Examples of indirect costs include (administrative salaries, rent, accounting fees, utilities, office supplies, etc.).* If typical indirect cost categories are included in the budget as direct costs, it is SAMHSA's understanding that your organization has developed a cost accounting system adequate to justify the direct charges and to avoid an unfair allocation of these costs to the federal government. Also, note that all awards are subject to later review in accordance with the requirements of 45 CFR 75.364, 45 CFR 75.371, 45 CFR 75.386 and 45 CFR Part 75, Subpart F, *Audit Requirements.*

Compliance with Award Terms and Conditions

FAILURE TO COMPLY WITH THE ABOVE STATED TERMS AND CONDITIONS MAY RESULT IN ACTIONS IN ACCORDANCE WITH 45 CFR 75.371, REMEDIES FOR NON-COMPLIANCE AND 45 CFR 75.372 TERMINATION. THIS MAY INCLUDE WITHHOLDING PAYMENT, DISALLOWANCE OF COSTS, SUSPENSION AND DEBARMENT, TERMINATION OF THIS AWARD, OR DENIAL OF FUTURE FUNDING.

All previous terms and conditions remain in effect until specifically approved and removed by the Grants Management Officer.

BSCA Quarterly Programmatic Progress Report

Submit **Quarterly Reports** via eRA Commons only and submitted as a .pdf to the View Terms

Tracking Details page in the eRA Commons System.

- The first quarterly progress report on project performance will be due no later than **July 15, 2023.**
- The second quarterly progress report on project performance will be due no later than **October 15, 2023.**
- The third quarterly progress report on project performance will be due no later than **January 15, 2024.**
- The fourth quarterly progress report on project performance will be due no later than **April 15, 2024.**

The **Quarterly Progress Report** must, at a minimum, include the following information:

- Data and progress for performance measures as reflected in your application regarding goals and evaluation activities.
- A summary of key program accomplishments to-date.
- Description of the changes, if any, that were made to the project that differ from the application for this incremental period.
- Description of any difficulties and/or problems encountered in achieving planned goals and objectives including barriers to accomplishing program objectives, and actions to overcome barriers or difficulties.

Note: Recipients must also comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the FOA or by the Grant Program Official (GPO). This information is needed in order to comply with PL 102-62, which requires that Substance Abuse and Mental Health Services Administration (SAMHSA) report evaluation data to ensure the effectiveness and efficiency of its programs.

The response to this term must be submitted as .pdf documents in eRA Commons. Please contact your Government Program Official (GPO) for program specific submission information.

For more information on how to respond to tracked terms and conditions please refer to **https://www.samhsa.gov/grants/grants-training-materials** under heading **How to Respond to Terms and Conditions.**

Additional information on reporting requirements is available at https://www.samhsa.gov/grants/grants-management/reporting-requirements.

Annual Federal Financial Report (FFR or SF-425)

All financial reporting for recipients of Health and Human Services (HHS) grants and cooperative agreements has been consolidated through a single point of entry, which has been identified as the Payment Management System (PMS). The Federal Financial Report (FFR or SF-425) initiative ensures all financial data is reported consistently through one source; shares reconciled financial data to the HHS grants management systems; assists with the timely financial monitoring and grant closeout; and reduces expired award payments.
The FFR is required on an annual basis no later than 90 days after the end of each Budget Period. The FFR should reflect cumulative amounts. Additional guidance to complete the FFR can be found at http://www.samhsa.gov/grants/grants-management/reporting-requirements.

SAMHSA reserves the right to request more frequent submissions of FFRs. If so, the additional submission dates will be shown below.

Your organization is required to submit an FFR for this grant funding as follows:

- **By June 29th, 2023** submit the Federal Financial Report (FFR)/(SF-425).

- The grant recipient staff member(s) responsible for FFR preparation, certification and submission of the FFR must either submit a request for New User Access or Update User Access to the FFR Module as applicable. Refer to the PMS User Access website https://pms.psc.gov/grant-recipients/user-access.html for information on how to submit a New User Access, Update User Access or Deactivate User Access. You can also view PMS' Video on how to request new user access @ https://youtu.be/kdoqaXfiul0 and PDF resource with instructions on Requesting Access @ https://pms.psc.gov/forms/New-User-Request_Grantee.pdf
- Instructions on **how to submit a FFR via PMS** are available at https://pmsapp.psc.gov/pms/app/help/ffr/ffr-grantee-instructions.html (The user must be logged in to PMS to access the link). Updates to the FFR instructions effective 4/1/2022 are also available @ https://pms.psc.gov/grant-recipients/ffr-updates.html
- While recipients must submit the FFR in PMS, the FFR can also be accessed by connecting seamlessly from the eRA Commons to PMS by clicking the "Manage FFR" link on the "Search for Federal Financial Report (FFR)" page in eRA Commons, which will redirect to PMS. SAMHSA will not accept FFRs submitted by email or uploaded as an attachment into eRA. To access the "Manage FFR" link in eRA Commons, the individual must be registered in eRA Commons and assigned the Financial Status Reporter (FSR) role for their organization. The individual assigned the FSR role is responsible for reporting the statement of grant expenditures for their organization. Refer to the Managing User Accounts: Add or Remove Roles, Unaffiliate Account document for instructions on how to assign a the FSR role.

If you have questions about how to set up a PMS account for your organization, please contact the PMS Help Desk at PMSSupport@psc.hhs.gov or 1-877-614-5533.
Note: Recipients will use PMS to report all financial expenditures, as well as to drawdown funds; SAMHSA recipients will continue to use the eRA Commons for all other grant-related matters including submitting progress reports, requesting post-award amendments, and accessing grant documents such as the Notice of Award.

Closeout Requirements - Discretionary Grants

Recipients must complete all actions required for closeout to include:

- Liquidate all obligations incurred under the award. All payment requests must be submitted before the end of the **(120) days post-award reconciliation/liquidation period.**
- Reconcile financial expenditures to the reported total disbursements and charges in PMS.
- Return any funds due to PMS as a result of refunds, corrections, or audits. Refer the following link for additional guidance https://pms.psc.gov/grant-recipients/returning-funds-

interest.html

Recipients must close the award in accordance with 2 CFR 200.344 Closeout and the terms and conditions listed in the grant notice of award. Recipients must liquidate all obligations incurred under an award not later than one hundred twenty (120) days after the end of awards obligation and project period. **After one hundred twenty (120) days, PMS account is automatically - locked. SAMHSA does not approve payment requests after one hundred twenty (120) days post-award reconciliation/liquidation period.** Therefore, recipients are expected to complete all expenditure requests within the approved project period and the aforementioned 120-day post-award reconciliation/liquidation period. **Recipients late withdrawal requests occurring after the aforementioned periods will be denied. Final reports are due to SAMHSA no later than 120 days after the end of the project period.** Final reports include:

- Submit via PMS the Final Federal Financial Report (Final FFR, SF-425) (PDF | 1.2 MB).
- Submit in eRA Commons the Final Progress Report (FPR) or other reports required by the terms and conditions of the award.
- Submit in eRA Commons a Tangible Personal Property Report (TPPR SF-428, SF428B & if needed additional forms from SF428 series) to account for any property acquired with federal funds or indicate on the form that you have no property to report.

Failure to complete the closeout actions in 120 days after the project period end may result in a unilateral closeout of the grant by SAMHSA. This may affect future funding of federal programs and result in the reimbursement of funding to SAMHSA. **If the recipient does not submit all reports satisfactorily in accordance with 2 CFR 200.344 SAMHSA will report the recipients material failure to comply with the terms and conditions of the award with the OMB-designated integrity and performance system (currently FAPIIS). Federal awarding agencies may also pursue other enforcement actions per 2 CFR 200.339.** Refer to the following SAMHSA for Closeout Standard Terms and Conditions https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions. Additional information on closeout is available at https://www.samhsa.gov/grants/grants-management/grant-closeout.

Staff Contacts:

Leila Disola, Program Official
Phone: 240-276- **Email:** LEILA.DISOLA@SAMHSA.HHS.GOV

Bryan Rivera, Grants Specialist
Phone: 240-276-1921 **Email:** bryan.riveralopez@samhsa.hhs.gov

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STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION FOR BEHAVIORAL HEALTH

105 PLEASANT STREET, CONCORD, NH 03301
603-271-5000 1-800-852-3345 Ext. 5000
Fax: 603-271-5058 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

Lori A. Weaver
Interim Commissioner

Katja S. Fox
Director

April 3, 2023

The Honorable Ken Weyler, Chairman
Fiscal Committee of the General Court and

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, NH 03301

REQUESTED ACTION

Pursuant to the provisions of RSA 14:30-a, VI authorize the Department of Health and Human Services, Division for Behavioral Health to accept and expend funds from the Substance Abuse and Mental Health Services Administration (SAMHSA), entitled New Hampshire Certified Community Behavioral Health Clinic Planning Year grant, in the amount of $873,500, and create new expenditure class codes, effective upon Fiscal Committee and Governor and Executive Council approvals through June 30, 2023, and further authorize the allocation of these funds in the account below. Funding source: 100% Federal Funds.

05-95-92-922010-19090000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SERVICES, SAMHSA GRANT

Class	Description	SFY23 Current Adjusted Authorized	Requested Action	Revised SFY23 Adjusted Authorized
000 - 400146 - 16	Federal Funds	$2,622,358	$873,500	$3,495,858
	General Funds	$0	$0	$0
	Total Revenue	**$2,622,358**	**$873,500**	**$3,495,858**
018 - 500106	Overtime	$13,837	$0	$13,837
020 - 500200	Current Expenses	$75,740	$2,640	$78,380
037 - 500173	Technology-Hardware	$1,500	$3,900	$5,400
038- 500175	Technology-Software	$0	$200	$200
039 - 500188	Telecommunications	$4,800	$2,400	$7,200
041 - 500801	Audit Fund Set Aside	$2,858	$1,000	$3,858
042 - 500260	Additional Fringe Benefits	$16,037	$411	$16,448
059 - 500117	Temp Full Time	$128,264	$4,761	$133,025

060 - 500601	Benefits	$74,352	$2,542	$76,894
066 - 500546	Employee Training	$5,000	$0	$5,000
070 - 500704	In-State Travel Reimburse	$0	$1,755	$1,755
074 - 500589	Grants For Pub Asst And Rel	$0	$505,893	$505,893
080 - 500710	Out Of State Travel Reimb	$0	$3,000	$3,000
102 - 500731	Contracts For Program Servi	$2,299,970	$344,998	$2,644,968
	Total Expenses	**$2,622,358**	**$873,500**	**$3,495,858**

EXPLANATION

New Hampshire DHHS was awarded a $1,000,000 planning grant by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) to expand access to high quality, evidence-based and trauma-informed behavioral health services. The full amount of the grant is not being accepted as appropriations with this item because a portion of the grant is allocated toward indirect expenses that are spread across the Department, and the grant revenue will be recognized in the accounting unit where the expenses are incurred based on the Department's cost allocation plan methodology. Additionally, another portion of the grant is not being accepted as appropriations with this item due to the timing of utilization, because the position expenses associated with a full-time temporary position, which will function as project director, will be over the full time span of the grant term. DHHS will use the funding to plan for a new, more integrated approach to community-based services in New Hampshire—called the Certified Community Behavioral Health Clinic (CCBHC) model—that has been associated with numerous positive outcomes in other states, including reduced emergency department visits and hospital readmissions. The funding will support the efforts of the State's community mental health centers to expand infrastructure and capacity. New Hampshire is one of only 15 states to receive the grant from SAMHSA.

The purpose of the CCBHC model is to transform community behavioral health systems to ensure easy access to comprehensive, coordinated behavioral health services. CCBHCs must meet high quality standards and core criteria that fall into six key program areas:

1. **Staffing** – Staffing driven by local needs assessment, licensing, and training to support service delivery
2. **Availability and Accessibility of Services** – Standards for timely and meaningful access to services, outreach and engagement, 24/7 access to crisis services, treatment planning, and acceptance of all patients regardless of ability to pay or place of residence
3. **Care Coordination** – Care coordination agreements across services and providers (e.g., Federally Qualified Health Centers, inpatient and acute care), defining accountable treatment team, health information technology, and care transitions
4. **Scope of Services** – Nine required services, as well as person-centered, family-centered, and recovery-oriented care
5. **Quality and Other Reporting** – Required quality measures, a plan for quality improvement, and tracking of other program requirements
6. **Organizational Authority and Governance** – Consumer representation in governance, appropriate state accreditation

By the end of the planning year, three of NH's community mental health centers will have completed their community needs assessment, expanded services according to local need, completed their cost estimate, and provided data and quality reports. DHHS will support all other NH community mental health centers in developing the knowledge and capacity necessary to begin implementing the model through similar supports geared to their introductory needs: learning communities, consultation, and technical assistance.

This planning grant opportunity will enable NH DHHS to:

- Obtain stakeholder input into the NH CCBHC model
- Develop an infrastructure to support community mental health centers to expand to the CCBHC model
- Develop new Medicaid payment systems
- Improve models and infrastructure for data and metrics tracking, and quality oversight
- Be eligible to apply for a federal 4-year multi-million-dollar implementation grant

Through these activities, New Hampshire will be prepared to implement the new behavioral health service system and be eligible to participate in a national demonstration project.

The funds are to be budgeted as follows:

Funds in class 020, Current Expenses, for general office supplies and postage.

Funds in class 037, Technology-Hardware, for a computer for the staff person associated with this grant.

Funds in class 038, Technology-Software, for desktop software for the grant staff person.

Funds in class 039, Telecommunications, for phone expenses for the grant staff person.

Funds in class 041, Audit Fund Set Aside, for financial and compliance audits.

Funds in class 042, Additional Fringe Benefits, for post-retirement used to reimburse the general fund for payments for retiree health insurance for the grant staff person.

Funds in class 059, Temp Full Time, for one (1) full-time temporary position titled Administrator II (LG 29), position #9T2927, to function as project director for the New Hampshire Certified Community Behavioral Health Clinic Planning Year grant.

Funds in class 060, Benefits, for the benefits for the grant staff person.

Funds in class 070, In-State Travel Reimbursement, for in-state travel by the grant staff person.

Funds in class 074, Grants for Pub Asst and Rel, for grants to providers for the work associated with the CCBHC Planning Grants Program.

Funds in class 080, Out Of State Travel Reimbursement, for out of state travel associated with the CCBHC Planning Grants Program.

Funds in class 102, Contracts for Program Services, for contracts with vendors for the work associated with the CCBHC Planning Grants Program.

Area served: Statewide.

Source of Funds: 100% Federal Funds

In the event that Federal Funds become no longer available, general funds will not be requested to support the program expenditures.

Respectfully submitted,

Lori A. Weaver
Interim Commissioner

Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services

Notice of Award
FAIN# H79SM087622
Federal Award Date
03/15/2023

Recipient Information

1. Recipient Name
NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES
129 PLEASANT ST
CONCORD, 03301

2. Congressional District of Recipient
02

3. Payment System Identifier (ID)
1026000618B3

4. Employer Identification Number (EIN)
026000618

5. Data Universal Numbering System (DUNS)
011040545

6. Recipient's Unique Entity Identifier
LA2HR1U97VC6

7. Project Director or Principal Investigator
Kerri Swenson
julianne.carbin@dhhs.nh.gov
160-327-1837

8. Authorized Official
Julianne Carbin
julianne.carbin@dhhs.nh.gov
160-327-1837

Federal Agency Information

9. Awarding Agency Contact Information
Bryan Rivera
Center for Mental Health Services
bryan.riveralopez@samhsa.hhs.gov
240-276-1921

10. Program Official Contact Information
Leila Disola
Center for Mental Health Services
LEILA.DISOLA@SAMHSA.HHS.GOV
240-276-

Federal Award Information

11. Award Number
1H79SM087622-01

12. Unique Federal Award Identification Number (FAIN)
H79SM087622

13. Statutory Authority
223 Medicare Act PL113-93, amended BSCA Sec 11001 PL117-159

14. Federal Award Project Title
New Hampshire Certified Community Behavioral Health Clinic Planning Year

15. Assistance Listing Number
93.829

16. Assistance Listing Program Title
Section 223 Demonstration Programs to Improve Community Mental Health Services.

17. Award Action Type
New Competing

18. Is the Award R&D?
No

Summary Federal Award Financial Information

19. Budget Period Start Date 03/31/2023 – End Date 03/30/2024	
20. Total Amount of Federal Funds Obligated by this Action	$1,000,000
20a. Direct Cost Amount	$966,071
20b. Indirect Cost Amount	$33,929
21. Authorized Carryover	
22. Offset	
23. Total Amount of Federal Funds Obligated this budget period	$1,000,000
24. Total Approved Cost Sharing or Matching, where applicable	$0
25. Total Federal and Non-Federal Approved this Budget Period	$1,000,000
26. Project Period Start Date 03/31/2023 – End Date 03/30/2024	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	$1,000,000

28. Authorized Treatment of Program Income
Additional Costs

29. Grants Management Officer - Signature
Eileen Bermudez

30. Remarks
Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Notice of Award

CCBHC Planning Grants
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Center for Mental Health Services

Issue Date: 03/15/2023

Award Number: 1H79SM087622-01
FAIN: H79SM087622
Program Director: Kerri Swenson

Project Title: New Hampshire Certified Community Behavioral Health Clinic Planning Year

Organization Name: NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES

Authorized Official: Julianne Carbin

Authorized Official e-mail address: julianne.carbin@dhhs.nh.gov

Budget Period: 03/31/2023 – 03/30/2024
Project Period: 03/31/2023 – 03/30/2024

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of $1,000,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES in support of the above referenced project. This award is pursuant to the authority of 223 Medicare Act PL113-93, amended BSCA Sec 11001 PL117-159 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at www.samhsa.gov (click on "Grants" then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,
Eileen Bermudez
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 1H79SM087622-01

Award Calculation (U.S. Dollars)	
Personnel(non-research)	$61,893
Fringe Benefits	$38,392
Travel	$4,755
Supplies	$6,740
Contractual	$850,891
Other	$3,400
Direct Cost	$966,071
Indirect Cost	$33,929
Approved Budget	$1,000,000
Federal Share	$1,000,000
Cumulative Prior Awards for this Budget Period	$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	$1,000,000

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	$1,000,000

Note: Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

Fiscal Information:

CFDA Number:	93.829
EIN:	102600061883
Document Number:	23SM87622A
Fiscal Year:	2023

IC	CAN	Amount
SM	C96CMS3	$1,000,000

IC	CAN	2023
SM	C96CMS3	$1,000,000

SM Administrative Data:
PCC: BSCA-CD / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79SM087622-01

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 1H79SM087622-01

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

a. The grant program legislation and program regulation cited in this Notice of Award.
b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
c. 45 CFR Part 75 as applicable.
d. The HHS Grants Policy Statement.
e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

Treatment of Program Income:
Use of program income – Additive: Recipients will add program income to funds committed to the project to further eligible project objectives. Sub-recipients that are for-profit commercial organizations under the same award must use the deductive alternative and reduce their subaward by the amount of program income earned.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than $10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

SECTION IV – SM SPECIAL TERMS AND CONDITIONS – 1H79SM087622-01

REMARKS

BSCA New Cooperative Agreement

This Notice of Award (NoA) is issued to inform your organization that the application submitted through the Cooperative Agreements for Certified Community Behavioral Health Clinic Planning Grants Notice of Funding Opportunity (NOFO) # SM-23-015 has been selected for funding. This award reflects funding for **a 12-month** period, from **3/31/2023 - 3/30/2024** in the amount of **$1,000,000.**

This award reflects **conditional approval** of the budget submitted **12/19/2022** as part of the application by your organization. **See Special Conditions of Award.**

The CCBHC Planning Grants Program, as authorized by Section 223 of the Protecting Access to Medicare Act (Public Law 113-93, 42 U.S.C. 1396a note)

as amended in the Bipartisan Safer Communities Act, Section 11001 (Public Law 117-159).), includes funds to support states to develop and implement certification systems for CCBHCs, establish Prospective Payment Systems (PPS) for Medicaid reimbursable services, and prepare an application to participate in a four-year CCBHC Demonstration program.
This cooperative agreement Notice of Award sets out the terms and conditions governing a collaborative effort between the NH ST DEPARTMENT OF HEALTH & HUMAN SERVICES and THE CENTER FOR MENTAL HEALTH SERVICES (CMHS), Substance Abuse and Mental Health Services Administration (SAMHSA). While the responsibility for conducting these activities lies primarily with NH ST DEPARTMENT OF HEALTH & HUMAN SERVICES, CMHS and SAMHSA, through its designated representatives, shall provide continuing technical assistance, consultation, and coordination in the conduct of the project during the period of this agreement.

Funding for this award is also pursuant to the authority of the Bipartisan Safer Communities Act (BSCA; P.L. 117-159).
All Post-Award Amendments must be submitted in eRA Commons for prior approval.
Please refer to the SAMHSA website for specific SAMHSA guidance on how to submit a post-award amendment in eRA Commons:
https://www.samhsa.gov/grants/grants-management/post-award-changes
Prior approval is required for but is not limited to: a change in key personnel and level of effort, a budget revision, a change in scope, a formal carryover request, and a no cost extension. Reference the full prior approval term on the SAMHSA website under Standard Terms and Conditions at:
https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions
Technical questions regarding the submission of a post-award amendment in eRA Commons should be directed to the eRA Service Desk:
http://grants.nih.gov/support/
All responses to award terms and conditions and post award amendment requests must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions or how to submit a post award amendment request please refer to https://www.samhsa.gov/grants/grants-training-materials under heading Grant Management Reference Materials for Grantees.

SPECIAL TERMS

CCBHC - Required Key Personnel

CCBHC - Required Key Personnel
By **April 30, 2023,** submit in eRA, a Key Personnel - Post Award Amendment, for a Project Director candidate.

The application for this grant did not list a Project Director. Per the NOFO, the grantee must receive approval for key positions to be filled. Please submit a Post Award Amendment for Key

Personnel identifying the Project Director. Ensure that the individual is registered within eRA as the Project Director and the level of effort is at a **minimum of 50 percent** as stipulated within the NOFO SM-23-015. Submit a cover letter, the Resume, Position Description, and level of effort associated with the Project Director identified in the application. Refer to the following website for additional guidance:https://www.samhsa.gov/grants/grants-management/post-award-amendments#change-inkey-personnel.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons.

Disparity Impact Statement (DIS)
By 05/30/2023, submit via eRA Commons a completed SAMHSA DIS Worksheet.

Please refer to the Special Conditions of Awards for Behavioral Health Disparity Impact Statement (DIS) website for the most up-to-date DIS worksheet and resources.

SAMHSA's Behavioral Health Disparity Impact Statement (DIS) is a data-driven, quality improvement approach to advance equity for all, and to identify racial, ethnic, sexual and gender minority, and rural populations at highest risk for experiencing behavioral health disparities as part of their grant projects. The purpose of the DIS is for recipients to identify and address health disparities and to develop and implement an action plan with a disparity reduction quality improvement process to close the identified gap(s). The aim is to achieve targeted behavioral health equity for disparate populations and improve systems.

Recipients are expected to use the DIS Worksheet that can be found at https://www.samhsa.gov/grants/grants-management/disparity-impact-statement. This website also contains DIS resources for recipients to use when developing, monitoring, and reporting on DIS.

The main components of the DIS are:

- Identify and describe the scope of the problem (i.e., behavioral health disparity) related to the grant program and the population(s) of focus that experience disparate access, use, and outcomes. Identify data sources that will be used to inform the DIS (this should be in alignment with the information provided in your application). Complete a table that includes this information at the individual/client, organizational or systemic level as it relates to the grant data collection requirements: NOMS, IPP, or both in relation to access, use, and outcomes.
- Identify Social Determinants of Health (SDOH) domain(s) that your organization will work to address and improve for the identified population(s) of focus using the Notice of Funding Opportunity (NOFO). Visit Healthy People 2030 for more information on the five (5) domains. Using the Behavioral Health Implementation Guide, identify CLAS standards that your organization plans to meet, expand, or improve through this grant opportunity. Review the Behavioral Health Implementation Guide for full explanations of the overarching themes and 15

CLAS Standards with behavioral health related samples, strategies, and examples.

- Develop and implement a disparity reducing quality improvement action plan to address the behavioral health disparity(ies) experienced by underserved population differences based on the GPRA data on access, use and outcomes of activities. The plan should include the activities (using SMART goals and objectives) that will be implemented to address disparities, the intended impact, timeline, client/peer/partner involvement, measurement, evaluation, and sustainability. Ensure documentation of the processes, progress, and outcomes on how the identified behavioral health disparity(ies) have improved. SMART goals and objectives are as follows:
  - Specific (simple sensible, significant);
  - Measurable (meaningful, motivating);
  - Achievable (agreed, attainable);
  - Relevant (reasonable, realistic and resourced, results-based);
  - Time bound (time-based, time limited, time/cost limited, timely, time-sensitive).

Recipients are expected to provide at a minimum, an annual update on the disparity impact statement (e.g. what worked, what did not work, what modifications were made) as part of the programmatic progress reports per the NOFO.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to https://www.samhsa.gov/grants/grants-training-materials under heading **How to Respond to Terms and Conditions.**

SPARS

CCBHC Planning grant recipients are required to collect and report certain data so that SAMHSA can meet its obligation under the Government Performance and Results Act (GPRA) Modernization Act of 2010. These data are gathered using SAMHSA's Performance and Accountability Reporting System (SPARS). CCBHC Planning grant recipients are required to: (1) complete Annual Goals training and enter annual goals data into SPARS by June 30, 2023; and (2) begin collecting and reporting data into SPARS in the 4th quarter (July - September 2023). SPARS training and technical assistance will be provided post award.

CCBHC Funding Limitations Term

The following funding restrictions apply for this program:

- No more than 20 percent of the total award for the budget period may be used for data collection, performance measurement, and performance assessment.

Risk Assessment

The Office of Financial Advisory Services (OFAS), SAMHSA may perform an administrative review of your organization's financial management systems, policies, procedures and records. If the review discloses material weaknesses or other financial management concerns, grant funding may be restricted in accordance with 45 CFR 75/2 CFR 200, as applicable. The

restriction will affect your organization's ability to withdraw funds from the Payment Management System account, until the concerns are addressed.

SPECIAL CONDITIONS

Expired SAM Registration

Your organization's SAM registration has recently lapsed. **By April 30, 2023**, your organization must reactivate your SAM registration and notify SAMHSA with evidence that it has been reestablished. No funds may be drawn from the award account in the Payment Management System until this condition has been met. Failure to meet this condition may result in additional specific award conditions and progressive actions under 45 CFR §75.207, Specific award conditions. Recipients of federal awards are required to maintain an active SAM registration with current information at all times during which it has an active Federal award or an application or plan under consideration by a Federal awarding agency (45 CFR §75.203 (c), Appendix I, D.3.iii). **All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons.** For more information on how to respond to tracked terms and conditions please refer to **https://www.samhsa.gov/grants/grants-training-materials** under heading **How to Respond to Terms and Conditions.**

CCBHC - Additional Documentation Required

Recipients are required to provide a detailed breakdown and justification to demonstrate whether the costs requested are reasonable, allowable, and necessary for the achievement of the goals and objectives of this grant. Recipients must include the items' descriptions, quantities, and unit costs for every line item requested under each budget category to show how any lump sum estimates were calculated.
By **April 30, 2023**, please submit a revised budget via eRA Commons terms tracker breaking down each item of cost and providing additional justification in the narrative section:

1) Personnel: Please identify the Project Director's position inside the line item as well as in the narrative justification. The line item currently indicates "Grant/Project Manager –Administrator II" which is not a Key Position per the NOFO.

2) Fringe Benefits – 62.03%: Please provide documentation such as an organizational policy or a rate agreement /internal document to support the fringe benefits rate request.

3) Travel- Additional justification needed: In the budget narrative, please include the position titles of the staff members that will be traveling. Please further describe the purpose for the proposed travel and explain how these trips for personnel align with the program goals and objectives. Please also identify what "Misc Expenseses" are.

4) Supplies:

- **Additional justification needed:** Please identify the roles of the staff that will benefit from the supplies requested under each narrative section. Please ensure that the items requested is directly proportional to the number of personnel working on the project. If a staff member isn't working on the project 100%, please justify SAMHSA's fair share of the cost.
- **General Office Supplies ($2,400):** Recipients may charge supplies costs as direct costs of the grant if the supplies are needed for specific project activities; otherwise, "general

office supplies" should be covered by the indirect cost rate, if indirect costs are requested. As described in 45 CFR § 75.403, costs must be consistently charged as either indirect or direct costs but may not be double charged or inconsistently charged as both. Update the detailed budget narrative as appropriate.

5) Contractual:

- **Technical Assistance Contract with University of New Hampshire (UNH) ($100,000)- Lump Sum:** Please provide a breakdown of each cost included in this consultancy. Please use the check function in the SAMHSA budget template to add any applicable budget categories under this contract and provide a justification under each cost to help SAMHSA assess the reasonableness of your request.
- **Stipends to eight (8) CMHCs ($306,800):** Please clarify the funding mechanism being used (subaward/subcontract). Additionally, please provide a breakdown calculation of each cost/ service you'd like to support the CMHCs with. Please revise your justification to include how you've determined to pay for the selected costs/services and explain what gap will be filled by the funds provided that's not already being met by other sources of funding available to CMHCs.

- **Stakeholder Engagement Coordinator Contract with NAMI ($75,526):** Please clarify the funding mechanism being used (subaward/subcontract). Please complete the narrative section to justify the requested costs.

- **Contract for Outcomes and Planning Director with Brandeis University ($84,998):** Please clarify the funding mechanism being used (subaward/subcontract). Please provide a breakdown of each cost included in this contract. Please use the check function in the SAMHSA budget template to add any applicable budget categories under this contract and provide a justification under each cost to help SAMHSA assess the reasonableness of your request.

- **Actuarial work for PPS planning and development contract with Milliman ($100,000):** Please provide a breakdown of the costs included in this contract. For instance, indicate if there's an hourly rate being paid to the actuarial provider, if payment is being made towards deliverables or towards specific items of costs. This breakdown of your PPS contract will help SAMHSA assess the reasonableness of your request.
- **Contract to review of cost assessments for accuracy and compliance with Meyers and Stauffer ($60,000):** Please provide a breakdown of each cost included in this contract. Please use the check function in the SAMHSA budget template to add any applicable budget categories under this contract and provide a justification under each cost to help SAMHSA assess the reasonableness of your request.

6) Other-Telecommunications (phone, cell phone, conference calls) ($2,400): Please reallocate to "supplies" budget category and identify the project staff that will benefit from these items.

7) Cost Allocation Plan not provided: Please provide a copy of your Cost Allocation Plan to justify the $33,929 indirect costs request.

8) Funding Limitations/Restrictions: Please complete the Funding Limitations section of the budget considering *"No more than 20% of the total award for the budget period may be used for*

data collection, performance measurement, and performance assessment activities required". Please include each applicable item of cost under the appropriate budget category so when added, the total of such costs remains under 20%. The section currently reflects $1,000,000 and 100%.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to **https://www.samhsa.gov/grants/grants-training-materials** under heading **How to Respond to Terms and Conditions.**

STANDARD TERMS AND CONDITIONS

BSCA Standard Terms for Awards

Your organization must comply with the Standard Terms and Conditions for the Fiscal Year in which your grant was awarded. The Fiscal Year for your award is identified on Page 3 of your Notice of Award. SAMHSA's Terms and Conditions Webpage is located at: https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions.

Reasonable Costs for consideration

Recipients must exercise proper stewardship over Federal funds and ensure that costs charged to awards are allowable, allocable, reasonable, necessary, and consistently applied regardless of the source of funds according to "Reasonable Costs" consideration per 2 CFR § 200.404 and the "Factors affecting allowability of costs" per 2 CFR § 200.403. A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

Consistent Treatment of Costs

Recipients must treat costs consistently across all federal and non-federal grants, projects and cost centers. Recipients may not direct-charge federal grants for costs typically considered indirect in nature, unless done consistently. If part of the indirect cost rate, then it may not also be charged as a direct cost. *Examples of indirect costs include (administrative salaries, rent, accounting fees, utilities, office supplies, etc.).* If typical indirect cost categories are included in the budget as direct costs, it is SAMHSA's understanding that your organization has developed a cost accounting system adequate to justify the direct charges and to avoid an unfair allocation of these costs to the federal government. Also, note that all awards are subject to later review in accordance with the requirements of 45 CFR 75.364, 45 CFR 75.371, 45 CFR 75.386 and 45 CFR Part 75, Subpart F, *Audit Requirements.*

Compliance with Award Terms and Conditions

FAILURE TO COMPLY WITH THE ABOVE STATED TERMS AND CONDITIONS MAY RESULT IN ACTIONS IN ACCORDANCE WITH 45 CFR 75.371, REMEDIES FOR NON-COMPLIANCE AND 45 CFR 75.372 TERMINATION. THIS MAY INCLUDE WITHHOLDING PAYMENT, DISALLOWANCE OF COSTS, SUSPENSION AND DEBARMENT, TERMINATION OF THIS AWARD, OR DENIAL OF FUTURE FUNDING.

All previous terms and conditions remain in effect until specifically approved and removed by the Grants Management Officer.

BSCA Quarterly Programmatic Progress Report

Submit **Quarterly Reports** via eRA Commons only and submitted as a .pdf to the View Terms

Tracking Details page in the eRA Commons System.

- The first quarterly progress report on project performance will be due no later than **July 15, 2023.**
- The second quarterly progress report on project performance will be due no later than **October 15, 2023.**
- The third quarterly progress report on project performance will be due no later than **January 15, 2024.**
- The fourth quarterly progress report on project performance will be due no later than **April 15, 2024.**

The **Quarterly Progress Report** must, at a minimum, include the following information:

- Data and progress for performance measures as reflected in your application regarding goals and evaluation activities.
- A summary of key program accomplishments to-date.
- Description of the changes, if any, that were made to the project that differ from the application for this incremental period.
- Description of any difficulties and/or problems encountered in achieving planned goals and objectives including barriers to accomplishing program objectives, and actions to overcome barriers or difficulties.

Note: Recipients must also comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the FOA or by the Grant Program Official (GPO). This information is needed in order to comply with PL 102-62, which requires that Substance Abuse and Mental Health Services Administration (SAMHSA) report evaluation data to ensure the effectiveness and efficiency of its programs.

The response to this term must be submitted as .pdf documents in eRA Commons. Please contact your Government Program Official (GPO) for program specific submission information.

For more information on how to respond to tracked terms and conditions please refer to https://www.samhsa.gov/grants/grants-training-materials under heading **How to Respond to Terms and Conditions**.

Additional information on reporting requirements is available at https://www.samhsa.gov/grants/grants-management/reporting-requirements.

Annual Federal Financial Report (FFR or SF-425)

All financial reporting for recipients of Health and Human Services (HHS) grants and cooperative agreements has been consolidated through a single point of entry, which has been identified as the Payment Management System (PMS). The Federal Financial Report (FFR or SF-425) initiative ensures all financial data is reported consistently through one source; shares reconciled financial data to the HHS grants management systems; assists with the timely financial monitoring and grant closeout; and reduces expired award payments.
The FFR is required on an annual basis no later than 90 days after the end of each Budget Period. The FFR should reflect cumulative amounts. Additional guidance to complete the FFR can be found at http://www.samhsa.gov/grants/grants-management/reporting-requirements.

SAMHSA reserves the right to request more frequent submissions of FFRs. If so, the additional submission dates will be shown below.

Your organization is required to submit an FFR for this grant funding as follows:

- **By June 29th, 2023** submit the Federal Financial Report (FFR)/(SF-425).

- The grant recipient staff member(s) responsible for FFR preparation, certification and submission of the FFR must either submit a request for New User Access or Update User Access to the FFR Module as applicable. Refer to the PMS User Access website https://pms.psc.gov/grant-recipients/user-access.html for information on how to submit a New User Access, Update User Access or Deactivate User Access. You can also view PMS' Video on how to request new user access @ https://youtu.be/kdogaXfiuI0 and PDF resource with instructions on Requesting Access @ https://pms.psc.gov/forms/New-User-Request_Grantee.pdf

- Instructions on **how to submit a FFR via PMS** are available at https://pmsapp.psc.gov/pms/app/help/ffr/ffr-grantee-instructions.html (The user must be logged in to PMS to access the link). Updates to the FFR instructions effective 4/1/2022 are also available @ https://pms.psc.gov/grant-recipients/ffr-updates.html

- While recipients must submit the FFR in PMS, the FFR can also be accessed by connecting seamlessly from the eRA Commons to PMS by clicking the "Manage FFR" link on the "Search for Federal Financial Report (FFR)" page in eRA Commons, which will redirect to PMS. SAMHSA will not accept FFRs submitted by email or uploaded as an attachment into eRA. To access the "Manage FFR" link in eRA Commons, the individual must be registered in eRA Commons and assigned the Financial Status Reporter (FSR) role for their organization. The individual assigned the FSR role is responsible for reporting the statement of grant expenditures for their organization. Refer to the Managing User Accounts: Add or Remove Roles, Unaffiliate Account document for instructions on how to assign a the FSR role.

If you have questions about how to set up a PMS account for your organization, please contact the PMS Help Desk at PMSSupport@psc.hhs.gov or 1-877-614-5533.
Note: Recipients will use PMS to report all financial expenditures, as well as to drawdown funds; SAMHSA recipients will continue to use the eRA Commons for all other grant-related matters including submitting progress reports, requesting post-award amendments, and accessing grant documents such as the Notice of Award.

Closeout Requirements - Discretionary Grants

Recipients must complete all actions required for closeout to include:

- Liquidate all obligations incurred under the award. All payment requests must be submitted before the end of the **(120) days post-award reconciliation/liquidation period.**
- Reconcile financial expenditures to the reported total disbursements and charges in PMS.
- Return any funds due to PMS as a result of refunds, corrections, or audits. Refer the following link for additional guidance https://pms.psc.gov/grant-recipients/returning-funds-

interest.html

Recipients must close the award in accordance with 2 CFR 200.344 Closeout and the terms and conditions listed in the grant notice of award. Recipients must liquidate all obligations incurred under an award not later than one hundred twenty (120) days after the end of awards obligation and project period. **After one hundred twenty (120) days, PMS account is automatically - locked. SAMHSA does not approve payment requests after one hundred twenty (120) days post-award reconciliation/liquidation period.** Therefore, recipients are expected to complete all expenditure requests within the approved project period and the aforementioned 120-day post-award reconciliation/liquidation period. **Recipients late withdrawal requests occurring after the aforementioned periods will be denied. Final reports are due to SAMHSA no later than 120 days after the end of the project period.** Final reports include:

- Submit via PMS the Final Federal Financial Report (Final FFR, SF-425) (PDF | 1.2 MB),
- Submit in eRA Commons the Final Progress Report (FPR) or other reports required by the terms and conditions of the award.
- Submit in eRA Commons a Tangible Personal Property Report (TPPR SF-428, SF428B & if needed additional forms from SF428 series) to account for any property acquired with federal funds or indicate on the form that you have no property to report.

Failure to complete the closeout actions in 120 days after the project period end may result in a unilateral closeout of the grant by SAMHSA. This may affect future funding of federal programs and result in the reimbursement of funding to SAMHSA. **If the recipient does not submit all reports satisfactorily in accordance with 2 CFR 200.344 SAMHSA will report the recipients material failure to comply with the terms and conditions of the award with the OMB-designated integrity and performance system (currently FAPIIS). Federal awarding agencies may also pursue other enforcement actions per 2 CFR 200.339.** Refer to the following SAMHSA for Closeout Standard Terms and Conditions https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions. Additional information on closeout is available at https://www.samhsa.gov/grants/grants-management/grant-closeout.

Staff Contacts:

Leila Disola, Program Official
Phone: 240-276- **Email:** LEILA.DISOLA@SAMHSA.HHS.GOV

Bryan Rivera, Grants Specialist
Phone: 240-276-1921 **Email:** bryan.riveralopez@samhsa.hhs.gov

Division for Behavioral Health
SAMHSA Grants

Fiscal Situation: Account 05-92-92-920010-19090000

Agency Income:	
Grant Award H79FG000210	$2,000,000.00
Grant Award H79FG000652	$2,859,647.00
Grant Award H79SM087622	$1,000,000.00
Total Funds Available	**$5,859,647.00**
SFY 21 Expenses	($816,581.33)
SFY 22 Expenses	($1,409,911.66)
Prior Fiscal Year Expenses	**($2,226,492.99)**
SFY 2023 Adjusted Authorized Appropriations	($2,622,358.01)
Allocated Indirect Costs	($38,329.00)
Total Appropriations	**($2,660,687.01)**
Net Grant Funds Remaining	$972,467.00
This Request	**$873,500.00**