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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

September 25, 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

Pursuant to 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 Cooperative Agreements for States and Territories to Improve Local 988 Suicide and Crisis Lifeline Capacity, in the amount of $978,802 effective upon Fiscal Committee and Governor and Executive Council approvals through June 30, 2025. Funding source: 100% Federal Funds.

05-95-92-920010-25940000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: BEHAVIORAL HEALTH DIV, DIV BEHAVIORAL HEALTH OPERATIONS, 988 GRANT

Class	Description	SFY25 Current Adjusted Authorized	Requested Action	Revised SFY25 Adjusted Authorized
000 – 400146 - 16	Federal Funds	$1,682,580	$978,802	$2,661,382
	General Funds	$0	$0	$0
	Total Revenue	**$1,682,580**	**$978,802**	**$2,661,382**
020 - 500200	Current Expenses	$600		$600
041 - 500801	Audit Fund Set Aside	$1,613	$979	$2,592
042 - 500620	Additional Fringe Benefits	$3,084		$3,084
059 - 500117	Temp Full Time	$28,897		$28,897
060 - 500601	Benefits	$17,438		$17,438
074 - 500585	Grants for Pub Asst and Rel	$1,627,994	$977,823	$2,605,817
080 - 500710	Out of State Travel Reimb	$2,954		$2,954
	Total Expenses	**$1,682,580**	**$978,802**	**$2,661,382**

EXPLANATION

This request is to accept and expend additional funding from SAMHSA to improve the 988 Suicide and Crisis Lifeline. The funding will support improved data collection, monitoring, and reporting. The 988 Suicide and Crisis Lifeline system provides immediate support and resources for anyone in crisis in NH, serving thousands of individuals in New Hampshire each year.

In July 2022, 988 became the national three-digit dialing code for the National Suicide Prevention Lifeline, replacing the previous phone number of 1-800-283-TALK (8255). In preparation for that transition, SAMHSA provided planning funding to states prior to this change. In late 2020, New Hampshire began planning for the implementation of 988, as well as a redesign of the existing crisis system and developed action steps toward that goal. As a part of ongoing efforts NH DHHS facilitates a diverse group of agencies and stakeholders to participate in the continuous quality improvement process. This includes representatives from 911, 211, the Doorways, the Community Mental Health Centers, NAMI NH, the American Foundation for Suicide Prevention, and people with lived experiences in New Hampshire.

SAMHSA previously awarded NH a planning grant, an initial Cooperative Agreement and a supplemental award to the initial Cooperative Agreement. To continue to strengthen crisis care infrastructure the Department is seeking to accept the second "Cooperative Agreements for States and Territories to Improve Local 988 Capacity" issued by SAMHSA and awarded to NH on July 23, 2024. DHHS is requesting to accept and expend year two funds of the Cooperative Agreement. This award ends on September 29, 2026.

The funds are to be budgeted as follows:

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

Funds in class 074, Grants for Pub Asst and Rel, will be used for contracting with New Hampshire's designated Lifeline Headrest for capacity expansion, and the University of New Hampshire for data work.

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,

for:

Lori A. Weaver
Commissioner

Division for Behavioral Health
988 Grant

Fiscal Situation: Account 05-92-92-920010-25940000

Income:		
Grant Award H79SM086074	$796,635	
Grant Award 1H79FG001183	$1,179,018	
Grant Award 5H79FG001183-02	$1,119,814	
Total Funds Available	**$3,095,467**	
Prior Fiscal Year Expenses	-$434,085	FFR Amount
Prior Fiscal Year Expenses	**-$434,085**	
SFY 2024 Adjusted Authorized Appropriations	-$1,682,580	
Allocated Indirect Costs		
Total Appropriations	**-$1,682,580**	
Net Grant Funds Remaining	$978,802	
This Request	**$978,802**	

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

Notice of Award
FAIN# H79FG001183
Federal Award Date
09/27/2023

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
Katherine Cox

katherine.m.cox@dhhs.nh.gov
16035344487

8. Authorized Official
Kyra Leonard
kyra.c.leonard@dhhs.nh.gov
603-271-5052

Federal Agency Information

9. Awarding Agency Contact Information
Edith Myerly
Grants Specialist
Edith.Myerly@samhsa.hhs.gov
240-276-2220

10. Program Official Contact Information
Mary Woodruff
Program Official
mary.woodruff@samhsa.hhs.gov
240-276-1733

Federal Award Information

11. **Award Number**
1H79FG001183-01

12. **Unique Federal Award Identification Number (FAIN)**
H79FG001183

13. **Statutory Authority**
Section 520E-3&520A of PHS Act (42 USC 290bb-36c & 290bb-32)

14. **Federal Award Project Title**
FY 2023 Cooperative Agreements for States and Territories to Improve Local 988 Capacity

15. **Assistance Listing Number**
93.243

16. **Assistance Listing Program Title**
Substance Abuse and Mental Health Services_Projects of Regional and National Significance

17. **Award Action Type**
New Competing

18. **Is the Award R&D?**
No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/30/2023 – End Date 09/29/2024	
20. Total Amount of Federal Funds Obligated by this Action	$1,179,018
20a. Direct Cost Amount	$1,179,018
20b. Indirect Cost Amount	$0
21. Authorized Carryover	
22. Offset	
23. Total Amount of Federal Funds Obligated this budget period	$1,179,018
24. Total Approved Cost Sharing or Matching, where applicable	$0
25. Total Federal and Non-Federal Approved this Budget Period	$1,179,018
26. Project Period Start Date 09/30/2023 – End Date 09/29/2026	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	$1,179,018

28. **Authorized Treatment of Program Income**
Additional Costs

29. **Grants Management Officer - Signature**
Rosalie Vega

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

988 States and Territories Cooperative Agreement **Issue Date:** 09/27/2023
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Center for Flex Grants

Award Number: 1H79FG001183-01
FAIN: H79FG001183
Program Director: Katherine Cox

Project Title: FY 2023 Cooperative Agreements for States and Territories to Improve Local 988 Capacity

Organization Name: NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES

Authorized Official: Kyra Leonard

Authorized Official e-mail address: kyra.c.leonard@dhhs.nh.gov

Budget Period: 09/30/2023 – 09/29/2024
Project Period: 09/30/2023 – 09/29/2026

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of $1,179,018 (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 Section 520E-3&520A of PHS Act (42 USC 290bb-36c & 290bb-32) 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,
Rosalie Vega
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 1H79FG001183-01

Award Calculation (U.S. Dollars)

Contractual	$1,118,694
Other	$60,324
Direct Cost	$1,179,018
Approved Budget	$1,179,018
Federal Share	$1,179,018
Cumulative Prior Awards for this Budget Period	$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	$1,179,018

SUMMARY TOTALS FOR ALL YEARS	
YR	**AMOUNT**
1	$1,179,018
2	$1,119,814
3	$1,119,814

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

Fiscal Information:

CFDA Number:	93.243
EIN:	1026000618B3
Document Number:	23FG01183A
Fiscal Year:	2023

IC	CAN	Amount
SM	C96J913	$1,179,018

IC	CAN	2023	2024	2025
SM	C96J913	$1,179,018	$1,119,814	$1,119,814

FG Administrative Data:
PCC: 988ST-23 / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79FG001183-01

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 – 1H79FG001183-01

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 – FG SPECIAL TERMS AND CONDITIONS – 1H79FG001183-01

REMARKS

New Cooperative Agreement- 988 State and Territory Improvement

New Cooperative Agreement- 988 State and Territory Improvement
This Notice of Award (NoA) is issued to inform your organization that the application submitted through the funding opportunity number FG-23-006 (**FY 2023 Cooperative Agreements for States and Territories to Improve Local 988 Capacity**), has been selected for funding.
The purpose of the States and Territories to Improve Local 988 Capacity program is to improve state and territory response to 988 contacts (including calls, chats, and texts) originating in the state/territory. Building on SAMHSA's FY 2022 988 funding, the goals of this program are to increase workforce support for the growing 988 demand, improve the public communication of 988 services including those for high-risk populations, and continue to expand post-contact support connections with services such as mobile crisis outreach and crisis stabilization services.
This cooperative agreement notice of award sets out the terms and conditions governing a collaborative effort between the recipient organization and the Substance Abuse and Mental Health Services Administration (SAMHSA). While the responsibility for conducting these activities lies primarily with the recipient organization, 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.

Role of the Recipient

The recipient must:

1. Comply with the terms and conditions of the cooperative agreement award.
2. Collaborate with SAMHSA staff on project implementation and monitoring.

Role of SAMHSA Staff

Roles of the Government Project Officer (GPO)

The Government Project Officer will have overall programmatic responsibility for monitoring the conduct and progress of the recipients, not excluding conducting site visits. The GPO will provide substantial input, in collaboration with the recipient, both in the planning and implementation of the grants and in evaluation activities. SAMHSA staff will:

1. Assist the recipient in the development of a selection process for the grant's subawards and review all sub-recipient contracts and awards.
2. Participate on committees, such as policy and steering workgroups, that are responsible for helping to guide the course of the grant projects or activities.
3. Recommend outside consultants for training, site specific evaluation, and data collection.
4. Review and approve all key personnel.
5. Submit required clearance packages to the U.S. Office of Management and Budget (OMB) using information and materials provided by the recipient.
6. Approve data collection plans and institute data collection policies.
7. Approve quality improvement monitoring plan and institute policies regarding quality improvement.
8. Disseminate data reports upon request.
9. Ensure flow down requirements for reporting on subawards/subcontracts.
10. Maintain regular communication with recipients through routine conference calls and the provision of technical assistance and consultation.
11. Facilitate the sharing of information regarding state or territory procedures via blog, email, conference calls, or other forums to improve the quality of the 988 response overall.

Roles of the Grants Management Specialist (GMS)

The Grants Management Specialist is responsible for all business management aspects of negotiation, award, and financial and administrative aspects of the cooperative agreement. The GMO utilizes information from site visits, reviews of expenditure and audit reports, and other appropriate means to assure that the project is operated in compliance with all applicable Federal laws, regulations, guidelines, and the terms and conditions of award. Required approvals must be provided in writing and the GMO is the only person, except for the SAMHSA Administrator, who may grant such required approvals. Written approvals granted by other officials are not binding on the government. All changes in the terms of the cooperative agreement award must be issued in writing by the GMO. For more specific information on the roles and responsibilities please refer to the Funding Opportunity Announcement for this award

Policies and Regulations – Accepting a grant award or cooperative agreement requires the recipient organization to comply with the terms and conditions of the NoA, as well as all applicable Federal Policies and Regulations. This award is governed by the Uniform Guidance 2 Code of Federal Regulations (CFR) § 200 as codified by HHS at 45 CFR § 75; Department of Health and Human Services (HHS) Grants Policy Statement; SAMHSA Additional Directives; and the Standard Terms and Conditions for the fiscal year in which the grant was awarded.

Key Personnel – Key personnel are organization staff members or consultants/subrecipients

who must be part of the project regardless of whether they receive a salary or compensation from the project. These individuals must make a substantial contribution to the execution of the project.

Key Personnel for this program are the Project Director, and the Project Evaluator. The Project Director is responsible for oversight of the entire project.

The minimum level of effort Level of Effort (LoE) for the two key personnel are:

- Project Director with a LoE of 0.50 FTE
- Project Evaluator with a LoE of 0.25 FTE

If awarded, recipients will be notified by SAMHSA about whether the individuals designated for these positions have been approved.

This position requires prior approval by SAMHSA after a review of staff credentials and job descriptions.

The Key Personnel identified in your application have not been approved by SAMHSA. Your assigned GPO will confirm approval via eRA Correspondence within 60 days of receipt of this NoA. If SAMHSA's review of the Key Personnel results in the proposed individual not being approved or deemed not qualified for the position, the organization will be required to submit a qualified candidate for the Key Personnel position. SAMHSA will not be liable for any related costs incurred on this grant award.

The identified PD for this program is listed in item #7 "Project Director or Principal Investigator" on the cover page of the NoA. If the individual identified on the NoA is incorrect, you must notify your assigned Government Project Officer (GPO) and Grants Management Specialist (GMS) via email immediately and plan to submit a post award amendment for a change in key personnel via eRA Commons.

Key personnel or other grant-supported staff may not exceed 100% level of effort across all federal and non-federal funding sources.

Any changes to key staff, including level of effort involving separation from the project for more than three months or a 25 percent reduction in time dedicated to the project, requires prior approval, and must be submitted as a post-award amendment in eRA Commons. Refer to SAMHSA's website for more information on submitting a key personnel change. See SAMHSA PD Account Creation Instructions for a quick step-by-step guide and SAMHSA Grantee PD Account Creation Slides for additional information on the eRA Commons registration process for the PD.

Funding Limitations – SAMHSA reserves the right to disallow costs under this grant award at any time during the award project period. Award recipients are responsible for ensuring that costs allocated to the grant award are reasonable and allowable in accordance with the Notice of Funding Opportunity and all applicable Policies & Regulations.

The Cost Principles that delineate the allowable and unallowable expenditures for HHS recipients are described in the Code of Federal Regulations .

Funding Limitations and Restrictions are listed in the Notice of Funding Opportunity

You may also reference the SAMHSA grantee guidelines on Financial Management Requirements.

Unallowable Costs – 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 the "Factors affecting allowability of costs" per 2 CFR § 200.403 and the "Reasonable costs" considerations per 2 CFR § 200.404. 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.

Supplanting – "Supplement Not Supplant" grant funds may be used to supplement existing

activities. Grant funds may not be used to supplant current funding of existing activities. "Supplant" is defined as replacing funding of a recipient's existing program with funds from a federal grant.

Award Payments – 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). First time PMS users must obtain access to view available funds, request funds, or submit reports. Users will need to request permission and be approved by PSC. Inquiries regarding payments should be directed to PMS by emailing the helpdesk at PMSSupport@psc.hhs.gov or call 1-877-614-553. You should also visit the PSC website for more information about their services - https://pms.psc.gov/

Special Terms & Conditions of Award – There may be special terms and conditions associated with your grant award. Recipients must address all special terms and conditions by the reflected due date. See the Special Terms of Award and Special Conditions of Award sections below for the specific terms and conditions associated with your grant award. A recipient's failure to comply with the terms and conditions of award, may cause SAMHSA to take one or more actions, depending on the severity and duration of the non-compliance. SAMHSA will undertake any such action in accordance with applicable statutes, regulations, and policies.

Responding to Award Terms & Conditions – 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 or how to submit a post award amendment request please refer to Training Materials under the heading "Grant Management Reference Materials for Grantees."

Prior Approval Requirements – Prior approval is required for the following changes to your grant award: Changes in the status of the Project Director, or other key personnel named in the NoA; Changes in scope; Significant re-budgeting and Transfer of substantive programmatic work; Carryover of unobligated balances; Change of grantee organization; Deviation from award terms and conditions; No-cost extension and Transfer of substantive programmatic work. A full list of actions requiring prior approval can be found on page II-49 of the HHS Grants Policy Statement Exhibit 5 (Summary of Actions Requiring OPDIV Prior Approval). All prior approval actions must be submitted as post award amendment requests in eRA Commons.

Post Award Amendments – If information on the NoA needs to be changed, it will require approval from the federal agency before the grant recipient can implement the modification. Please refer to the SAMHSA website for specific SAMHSA guidance on how to submit a Post Award Amendments in eRA Commons:

Primary Contacts

- For technical support, contact eRA Service Desk at 866-504-9552 (Press 6 for SAMHSA Grantees).
- For budget and grants management related questions, contact your assigned GMS.
- For programmatic questions, contact your assigned GPO.

Contact information for the GMS and GPO are listed on the last page of this NoA.

Training & Resources – Visit the following pages on our website for more information on implementation, monitoring and reporting on your new grant award:

- Grants Management
- Training & Resources for recipients

- eRA Commons

Special Remark

Not all states applied to the FY 2023 Cooperative Agreements for States and Territories to Improve Local 988 Capacity funding; therefore, the remaining funds have been redistributed based on the formula per the Notice of Funding Opportunity (NOFO). As a result, the difference has been placed in the "Other" budget category and a Budget Revision is required per the Special Condition of Award below.

SPECIAL TERMS

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.

Funding Limitations and Restrictions

The funding restrictions for this project are as follows. Be sure to identify these expenses in your proposed budget.

• No more than 20% of funding may be used for technology expansion, including (but not limited to) infrastructure, platform, data dashboards, and cybersecurity consultation and cybersecurity services.

SAMHSA recipients must also comply with SAMHSA's standard funding restrictions, which are included in Appendix I (Standard Funding Restrictions)

Disparity Impact Statement (DIS)

By **November 29,2023**, submit via eRA Commons a completed **Disparity Impact Statement**.

By November 29, 2023, **submit via eRA Commons.**
The DIS should be consistent with information in your application regarding access, *service use and outcomes for the program and include three components as described below. Questions about the DIS should be directed to your GPO. Examples of DIS can be found on the SAMHSA website at: https://www.samhsa.gov/grants/grants-management/disparity-impact-statement
*Service use is inclusive of treatment services, prevention services as well as outreach, engagement, training, and/or technical assistance activities.
The disparity impact statement consists of three components:
1. Proposed number of individuals to be served and/or reached by subpopulations in the grant implementation area should be provided in a table that covers the entire grant period. The

disparate population(s) should be identified in a narrative that includes a description of the population and rationale for how the determination was made.
2. A quality improvement plan for how you will use your program (GPRA) data on access, use and outcomes to monitor and manage program outcomes by race, ethnicity and LGBT status, when possible. The quality improvement plan should include strategies for how processes and/or programmatic adjustments will support efforts to reduce disparities for the identified sub-populations.
3. The quality improvement plan should include methods for the development and implementation of policies and procedures to ensure adherence to the Enhanced Culturally and Linguistically Appropriate Services (CLAS) Standards and the provision of effective care and services that are responsive to:
a. Diverse cultural health beliefs and practices;
b. Preferred languages; and
c. Health literacy and other communication needs of all sub-populations within the proposed geographic region.
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.**

SPECIAL CONDITIONS

Revised Budget and SF-424A

By **10/30/2023/**, submit via eRA Commons.

NOTE: The year 1 awarded amount is $ 1,179,018, please submit a revised budget for this amount.

Revised Budget
Personnel

- The key personnel are not identified on the budget. If these staff are in-kind, please complete the in-kind section of the Personnel category.

Contractual

- Headrest
  - Travel
    - In state travel – Update the narrative to state the staff that will be traveling
  - Supplies
    - Computers – This cost is excessive. We will allow $1,200 per computer. The remaining funds will have to be reallocated.
    - Office Furniture – Provide a breakdown to include item to be purchase, quantity and cost of each.
  - Other

- Direct Occupancy Expense – Provide the methodology for how this cost was determined.
- Audit and Background Check Expense – These should be two separate line items. Provide the cost of each.
- Insurance – Provide a breakdown of the cost of insurance. Please be advised the home/auto coverage is not allowable.
- Marketing/Communications – Provide a cost breakdown for the $5,000
- Telephone – Update the narrative to provide the breakdown for the telephone and cell phone costs.
- Maintenance – Provide a cost breakdown for the adding/moving phone lines. The renovation costs need to be a separate line item and the cost breakdown must be provided for the work to be done.
- Staff Training – Please clarify if this is the cost of the Relias platform? If so, for how many staff at a cost of $102,818.
- UNH Subcontract – Provide a cost breakdown for the services to be performed and cost of each that total $200,000

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

Reporting Requirements

Data Collection/Performance Measurement - Government Performance and Results Act (GPRA)
All SAMHSA recipients are required to collect and report certain data so SAMHSA can meet its obligation under the Government Performance Results (GPRA) Modernization Act of 2010. These GPRA data are collected and reported using SAMHSA's Performance Accountability and Reporting System (SPARS). SPARS is an online data entry, reporting, and training system that supports grantee recipients in reporting timely and accurate data to SAMHSA. A username and password are required to gain access to SPARS system, https://spars.samhsa.gov. Your assigned Government Project Officer will provide additional information about these reporting requirements after award.
To help grant recipients understand the reporting requirements and systems used to monitor progress, all grant recipients are required to complete online SPARS training within the first 90 days after award (i.e. December 31, 2023).

The 988 State and Territory Improvement are required to report performance on the following measures:
SPARS reporting requirements: The recipient will be required to collect and report data on the following:
Infrastructure, Prevention, and Promotion (IPP) indicators:
• WD2 (Workforce Development): The number of people in the mental-health and related workforce trained in mental-health-related practices or activities consistent with the goals of the grant.
• AW1 (Awareness): The number of individuals exposed to mental health awareness messages.

• S3 (Screening): The number of individuals screened for suicide ideation as a result of the grant.
• R1 (Referral): The number of individuals referred to mental health services as a result of the grant.
• AC1 (Access): The number and percentage of individuals receiving mental health or related services after referral.
• T7 (Types/Targets of Practices): The number of individuals who died by suicide.
• T8 (Types/Targets of Practices): The number of individuals who attempted suicide.

Recipients are required to submit data via SAMHSA's Performance Accountability and Reporting System (SPARS); and access will be provided upon award.

988 call, chat, and text response data.
Recipients will also be required to collect data regarding all 988 calls, chats, and text interactions that:
1. Include suicide attempts in progress.
2. Result in emergency rescue – with law enforcement
3. Result in emergency rescue – without law enforcement
4. Result in mobile crisis outreach referrals.
5. Identify individuals in substance use crisis.

Recipients will also be required to attempt to collect demographic data on individuals who are served through 988 (race, ethnicity, age, gender identity, sexual orientation, military service status*), including through the specified interactions above. * Provision of demographic information is not a requirement for eligibility or receipt of 988 services.

These data will be collected monthly and reported in aggregate as part of the quarterly Project Performance Assessment report.

State/territory-level KPI data from 988 Network Administrator Recipients will also be required to review data on the following state/territory 988 Lifeline crisis center Key Performance Indicators (KPIs) with their Government Project Officer (GPO) and include these data in your quarterly Project Performance Assessment ("quarterly report"). These data will be provided by the Lifeline Administrator to the Project Director and GPO. Recipients should discuss any data variances, concerns, or changes with the GPO on the required monthly calls.

To meet these requirements annually, grant recipients are expected to provide quarterly reports into SPARS no later than:
• Quarter 1: Jan.31, 2024 reporting period includes Oct. 1, 2023 – Dec.31, 2023
• Quarter 2: Apr. 30, 2024 reporting period includes Jan.1, 2024– Mar.31, 2024.
• Quarter 3: Jul. 31, 2024 reporting period includes Apr. 1, 2024 – Jun. 30, 2024.
• Quarter 4: Oct. 31, 2024 reporting period includes Jul. 1, 2024 – Sept. 30, 2024.
The approved Quarter 4 report must be uploaded into eRA Commons by December 31, 2024.

Programmatic Progress Report

By ***December 28,2024***, submit via eRA Commons.

The 988 State and Territory Improvement recipients are required to submit an annual progress report on project performance within 90 days of the end of each budget period. A final performance report must be submitted within 120 days after the end of the project period. The final performance report must be cumulative and report on all activities during the entire project period.

The Annual Programmatic 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 budget period.

Additional Terms and Conditions:
• As described in the NOFO, the following plans must be uploaded in eRA Commons by the specified due dates:
o A communications plan must be submitted by 12/31/2023.
o A tribal engagement plan must be submitted by 1/31/2024.
o The mobile crisis service options report must be submitted by 1/31/2024.
o The 988/911 report must be submitted by 3/31/2024.
• A national cross-site evaluation may be required to build the evidence base for this program. If implemented, award recipients would be required to participate fully in all aspects of the evaluation, which may include collection of additional client-level data and participation of sub-recipients. Details on the evaluation, including type of evaluation and research questions, will be provided upon award or at a later date.
• Grantees must comply with HHS and SAMHSA policies for privacy, confidentiality, and disclosure of personally identifiable information (PII).
Note: Recipients must also comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the NOFO 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 **12/28/2024**, 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 page Managing eRA User Accounts on SAMHSA's website 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.

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 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.

Standards for Financial Management

Recipients and subrecipients are required to meet the standards and requirements for financial

management systems set forth in 45 CFR part 75 Subpart D. The financial systems must enable the recipient and subrecipient to maintain records that adequately identify the sources of funds for federally assisted activities and the purposes for which the award was used, including authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and any program income. The system must also enable the recipient and subrecipient to compare actual expenditures or outlays with the approved budget for the award. SAMHSA funds must retain their specific identity – they may not be commingled with non-federal funds or other federal funds. "Commingling funds" typically means depositing or recording funds in a general account without the ability to identify each specific source of funds with related expenditures.

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.

Staff Contacts:

Mary Woodruff, Program Official
Phone: 240-276-1733 **Email:** mary.woodruff@samhsa.hhs.gov

Edith Myerly, Grants Specialist
Phone: 240-276-2220 **Email:** Edith.Myerly@samhsa.hhs.gov

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

Notice of Award
FAIN# H79FG001183
Federal Award Date
07/23/2024

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
Katherine Cox
katherine.m.cox@dhhs.nh.gov
160-353-4448

8. Authorized Official
Kyra Leonard
kyra.c.leonard@dhhs.nh.gov
603-271-5052

Federal Agency Information

9. Awarding Agency Contact Information
Edith Myerly
Grants Specialist
Edith.Myerly@samhsa.hhs.gov
240-276-2220

10. Program Official Contact Information
Chelsea L Booth
Program Official
Chelsea.Booth@samhsa.hhs.gov
(240) 276-0416

Federal Award Information

11. Award Number
5H79FG001183-02

12. Unique Federal Award Identification Number (FAIN)
H79FG001183

13. Statutory Authority
Section 520E-3&520A of PHS Act (42 USC 290bb-36c & 290bb-32)

14. Federal Award Project Title
FY 2023 Cooperative Agreements for States and Territories to Improve Local 988 Capacity

15. Assistance Listing Number
93.243

16. Assistance Listing Program Title
Substance Abuse and Mental Health Services_Projects of Regional and National Significance

17. Award Action Type
Non-Competing Continuation

18. Is the Award R&D?
No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/30/2024 – End Date 09/29/2025	
20. Total Amount of Federal Funds Obligated by this Action	$1,119,814
20a. Direct Cost Amount	$1,119,814
20b. Indirect Cost Amount	$0
21. Authorized Carryover	
22. Offset	
23. Total Amount of Federal Funds Obligated this budget period	$1,119,814
24. Total Approved Cost Sharing or Matching, where applicable	$0
25. Total Federal and Non-Federal Approved this Budget Period	$1,119,814
26. Project Period Start Date 09/30/2023 – End Date 09/29/2026	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	$2,298,832

28. Authorized Treatment of Program Income
Additional Costs

29. Grants Management Officer - Signature
Rosalie Vega

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

988 States and Territories Cooperative Agreement **Issue Date:** 07/23/2024
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Center for Flex Grants

Award Number: 5H79FG001183-02
FAIN: H79FG001183
Program Director: Katherine Cox

Project Title: FY 2023 Cooperative Agreements for States and Territories to Improve Local 988 Capacity

Organization Name: NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES

Authorized Official: Kyra Leonard

Authorized Official e-mail address: kyra.c.leonard@dhhs.nh.gov

Budget Period: 09/30/2024 – 09/29/2025
Project Period: 09/30/2023 – 09/29/2026

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of $1,119,814 (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 Section 520E-3&520A of PHS Act (42 USC 290bb-36c & 290bb-32) 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,
Rosalie Vega
Grants Management Officer
Division of Grants Management
Rosalie.Vega@samhsa.hhs.gov
See additional information below

SECTION I – AWARD DATA – 5H79FG001183-02

Award Calculation (U.S. Dollars)

Contractual	$1,118,694
Other	$1,120
Direct Cost	$1,119,814
Approved Budget	$1,119,814
Federal Share	$1,119,814
Cumulative Prior Awards for this Budget Period	$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	$1,119,814

SUMMARY TOTALS FOR ALL YEARS	
YR	**AMOUNT**
2	$1,119,814
3	$1,119,814

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

Fiscal Information:

CFDA Number:	93.243
EIN:	1026000618B3
Document Number:	23FG01183A
Fiscal Year:	2024

IC	CAN	Amount
SM	C96J913	$1,119,814

IC	CAN	2024	2025
SM	C96J913	$1,119,814	$1,119,814

FG Administrative Data:
PCC: 988ST-23 / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 5H79FG001183-02

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 – 5H79FG001183-02

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 – FG SPECIAL TERMS AND CONDITIONS – 5H79FG001183-02

REMARKS

Continuation Award

1. This Notice of Award (NoA) is issued to inform your organization that the application submitted for FY 2023 Cooperative Agreements for States and Territories to Improve Local 988 Capacity program is being continued.

- This award reflects approval of the budget submitted **02/09/2024** as part of the continuation application by your organization.

2. **Key Personnel**

Key Personnel are listed below:

Katherine Cox, Project Director @ 50% level of effort

TBD, Project Evaluator @ 25% level of effort

Organizations receiving Federal Funds may not exceed 100% level of effort for any program staff member (Key Personnel or otherwise) across all federally funded sources.

Any changes to Key Personnel including level of effort involving separation from the project for any continuous period of three months or longer, or a reduction in time dedicated to the project of 25% or more requires a prior approval and must be submitted as a post-award amendment in eRA Commons.

Note: If an organization is awarded a grant and chooses to move forward with hiring an individual for a Key Personnel position before receiving SAMHSA s formal approval, this will be done at the organization s own risk.

For additional information on how to submit a post-award amendment, please visit the SAMHSA website: https://www.samhsa.gov/grants/grants-management/post-award-amendments.

3. 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.

4. Recipients are expected to plan their work and ensure that funds are expended within the 12-month budget period reflected on this Notice of Award. If activities proposed in the approved budget cannot be completed within the current budget period, SAMHSA cannot guarantee the approval of any request for carryover of remaining un-obligated funding.

SPECIAL CONDITIONS

Revised Detailed Budget with Narrative Justification

By **10/30/2024**, submit the following via the eRA Commons Terms Tracker:

SAM.gov

- Verify the physical address of your organization. The address listed on your SAM.gov registration differs from the address listed on your SF-424 application and your eRA grant file.

Revised Budget

Personnel

- Project Director - The Project Director is listed at 10% LOE, but the required LOE per the Notice of Funding Opportunity is 50% LOE.

Contractual

- Headrest
  - Travel
    - American American Association of Suicidology conference
      - Lodging This cost is excessive. We will allow $120 per night per GSA (Based on historical rate for location of this conference the last two years)
      - Per Diem This cost is excessive. We will allow $69 per day. The first and last day must be pro-rated $51.75
  - Other
    - Direct Occupancy Expense
      - Provide the signed lease agreement for both locations and show the calculation for how this amount was determined. Also,
      - utilities are typically and indirect cost per 2 CFR 200. Provide a copy of the policy that states you direct charge these costs across all federal programs.
      - This amount was determined by factoring in the number of additional staff at any given time and the assumed usage of office space, utilities, wear/tear on the building and length/frequency of time on the property. This is not allowable.
    - Telephone - Additional cell phone at $85/month = $1,020.- Who are these additional cell phones are and how are they to be utilized?

        - Staff Training Conditional approval for this line item. Before funds are authorized, you must provide the name of the training course, cost and number of staff to attend.
- University of New Hampshire
    - Personnel
        - Coalition Development Why is this position both coalition and CQI activities? Please provide more details as the position description and what duties this position will be performing
    - Fringe Benefits
        - Provide a breakdown of what is included in the 33.20%
    - Supplies
        - Provide a narrative for this line item
    - Other
        - Consultation with community organizations what community organizations?

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.**

Project Evaluator - Required Key Personnel

Submit a post award amendment request for a change in key personnel via eRA Commons once the Project Evaluator has been hired.

For submission requirements and instructions, refer to the SAMHSA website at https://www.samhsa.gov/grants/grants-management/post-award-amendments#change-in-key-personnel.

Note that per the Notice of Funding Opportunity FG-23-006, Key Personnel for this program includes the Project Director with a minimum 50% level of effort and Project Evaluator at 25% level of effort.

STANDARD TERMS AND CONDITIONS

Annual Programmatic Progress Report

By **12/28/2025**, submit via eRA Commons: **Annual Programmatic Progress Report**.

The Programmatic Progress Report (PPR) is required on an annual basis and must be submitted no later than 90 days after the end of each 12-month budget period/incremental period.

The Annual PPR 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 budget 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.

Please contact your Government Program Official (GPO) for program specific submission information. 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 SAMHSA to 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 under the *View Terms Tracking Details* page. For more information on how to respond to tracked terms and conditions, 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 and must be submitted **no later than 90 days after the end of each incremental period/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.

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- By **12/28/2025**, 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 page Managing eRA User Accounts on SAMHSA's website for instructions on how to assign a the FSR role.

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Staff Contacts:

Chelsea L Booth, Program Official
Phone: (240) 276-0416 **Email:** Chelsea.Booth@samhsa.hhs.gov **Fax:** (240) 276-1150

Edith Myerly, Grants Specialist
Phone: 240-276-2220 **Email:** Edith.Myerly@samhsa.hhs.gov