

**SIGNATURE DOCUMENT FOR  
HEALTH AND HUMAN SERVICES COMMISSION  
CONTRACT NO. HHS000539700113  
UNDER THE SUBSTANCE USE DISORDER PREVENTION  
YOUTH PREVENTION SELECTIVE**

**I. PURPOSE**

The **Health and Human Services Commission** (“System Agency”), a pass-through entity, and **Mid-Coast Family Services, Inc.** (“Grantee”) (each a “Party” and collectively the “Parties”) enter into the following grant contract to provide funding for Youth Prevention Selective (YPS) services (the “Contract”).

**II. LEGAL AUTHORITY**

This Contract is authorized by and in compliance with the provisions of Texas Government Code Chapters 531.

**III. DURATION**

The Contract is effective on September 1, 2019, and terminates on August 31, 2024, unless renewed, extended, or terminated pursuant to the terms and conditions of the Contract. The System Agency, at its own discretion, may extend this Contract subject to terms and conditions mutually agreeable to both Parties.

**IV. BUDGET**

The total amount of this Contract will not exceed \$1,709,640.00. The funding by State Fiscal Year is as follows:

1. Fiscal Year 2020, September 1, 2019 through August 31, 2020: \$341,928.00
2. Fiscal Year 2021, September 1, 2020 through August 31, 2021: \$341,928.00
3. Fiscal Year 2022, September 1, 2021 through August 31, 2022: \$341,928.00
4. Fiscal Year 2023, September 1, 2022 through August 31, 2023: \$341,928.00
5. Fiscal Year 2024, September 1, 2023 through August 31, 2024. \$341,928.00

All expenditures under the Contract will be in accordance with **ATTACHMENT B, BUDGET**.

If an Indirect Cost Rate Letter is required but it is not issued at the time of Contract execution, the Parties agree to amend the Contract to include the Indirect Cost Rate Letter as **ATTACHMENT K** and revise **ATTACHMENT B** when the Indirect Cost Rate Letter is issued.

If the System Agency, at its sole discretion, approves or acknowledges an updated indirect cost rate, the new rate, together with the revised ICR Acknowledgement Letter, ICR Acknowledgement Letter – Ten Percent De Minimis, or the ICR Agreement Letter, will be included in the revised **ATTACHMENT K** and amended **ATTACHMENT B**.

**V. REPORTING REQUIREMENTS**

Grantee shall submit all documents identified below, in accordance with **ATTACHMENT A, STATEMENT OF WORK:**

1. Program Staffing Form
2. Copy of current Certified Prevention Specialist (CPS), Advanced Certified Prevention Specialist (ACPS), or Associate Prevention Specialist (APS) certifications/designations of all certified/designated prevention staff along with the Program Staffing Form.
3. CMBHS Security Attestation Form and Listing of Authorized Users
4. CIP – Fall Semester
5. CIP- Spring Semester
6. CIP- Summer Term
7. Financial Status Reports (FSRs)
8. Performance Measures
9. Curriculum Outcome Measures
10. Closeout Documents – Annual Report

**VI. CONTRACT REPRESENTATIVES.**

The following will act as the Representative authorized to administer activities under this Contract on behalf of their respective Party.

**System Agency**

Health and Human Services Commission  
P.O. Box 149347  
Austin, TX 78714  
Attention: Jennifer Molenaar, Contract Manager

**Grantee**

Mid-Coast Family Services, Inc.  
120 S. Main Street, Suite 175  
Victoria, TX, 77901  
Attention: Ginny Stafford, CEO

**VII. LEGAL NOTICES**

Any legal notice required under this Contract shall be deemed delivered when deposited by the System Agency either in the United States mail, postage paid, certified, return receipt requested; or with a common carrier, overnight, signature required, to the appropriate address below:

**System Agency**

Health and Human Services Commission  
1100 W. 49<sup>th</sup> Street, MC 1911\*  
Austin, TX 78756  
Attention: General Counsel

**Grantee**

Mid-Coast Family Services, Inc.  
120 S. Main Street, Suite 175  
Victoria, TX, 77901  
Attention: Ginney Stafford, CEO

Notice given by Grantee will be deemed effective when received by the System Agency. Either Party may change its address for notice by written notice to the other Party.

**VIII. NOTICE REQUIREMENTS**

Notice given by Grantee will be deemed effective when received by the System Agency. Either Party may change its address for notices by providing written notice to the other Party. All notices submitted to System Agency must:

- A. include the Contract number;
- B. be sent to the person(s) identified in the Contract; and,
- C. comply with all terms and conditions of the Contract.

**IX. ADDITIONAL GRANT INFORMATION**

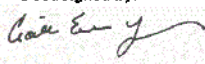
Federal Award Identification Number (FAIN):	B08TI010051-18
Federal Award Date:	10/01/2017
Name of Federal Awarding Agency:	Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA)
CFDA Name and Number:	93.959
Awarding Official Contact Information:	Odessa Crocker, Grants Management Officer, Point of Contact is Wendy Pang, Grants Specialist, Contact Number: (240) 276-1419, Facsimile: (240) 276-1430, Email: <a href="mailto:Wendy.Pang@samhsa.hhs.gov">Wendy.Pang@samhsa.hhs.gov</a>

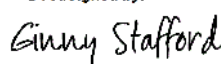
**SIGNATURE PAGE FOLLOWS**

**SIGNATURE PAGE FOR SYSTEM AGENCY CONTRACT NO. HHS000539700113**

**HEALTH AND HUMAN SERVICES COMMISSION**

**MID-COAST FAMILY SERVICES, INC.**

DocuSigned by:  
  
C80071B7895C4E9...  
Cecile Young

DocuSigned by:  
  
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Chief Deputy Executive Commissioner

Name: Ginny Stafford  
Title: CEO

Date of execution: August 18, 2019

Date of execution: August 19, 2019

**THE FOLLOWING ATTACHMENTS TO SYSTEM AGENCY CONTRACT NO. HHS000539700113 ARE HEREBY INCORPORATED BY REFERENCE:**

- ATTACHMENT A STATEMENT OF WORK**
- ATTACHMENT A-1 STATEMENT OF WORK SUPPLEMENTAL**
- ATTACHMENT A-2 SUBSTANCE ABUSE PREVENTION AND TREATMENT (SAPT) BLOCK GRANT CONTRACT SUPPLEMENTAL**
- ATTACHMENT B BUDGET**
- ATTACHMENT C GENERAL AFFIRMATIONS**
- ATTACHMENT D UNIFORM TERMS AND CONDITIONS**
- ATTACHMENT E SPECIAL CONDITIONS**
- ATTACHMENT F FEDERAL ASSURANCES AND CERTIFICATIONS**
- ATTACHMENT G DATA USE AGREEMENT**
- ATTACHMENT H FISCAL FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA) FORM**
- ATTACHMENT I SYSTEM AGENCY SOLICITATION NO. HHS0000776**
- ATTACHMENT J GRANTEE'S APPLICATION FOR SOLICITATION NO. HHS0000776**

**ATTACHMENTS FOLLOW**

## **ATTACHMENT A STATEMENT OF WORK**

### **I. PURPOSE**

To provide Youth Prevention Selective (YPS) services that promote a proactive process to address health and wellness for individuals, families, and communities by enhancing protective factors that increase knowledge, skills, and attitudes for making healthy choices. Selective prevention strategies target subgroups known to be at higher risk for substance use and misuse than the general population.

Services will address the State's four prevention priorities: underage alcohol use, tobacco and nicotine products, marijuana and other cannabinoids use, and prescription drug misuse.

Grantees providing YPS services will work together with other System Agency-funded substance abuse prevention programs to address substance use and misuse, follow the Strategic Prevention Framework (SPF) model of the Substance Abuse and Mental Health Services Administration (SAMHSA), and strengthen prevention efforts and strategies for coordination across multiple levels of impact following the Social Ecological Model <http://journals.sagepub.com/doi/pdf/10.1177/109019818801500401>.

### **II. GOAL**

To provide selective prevention services that include strategies delivered to subgroups of the general population determined to be at risk for substance use and misuse.

### **III. GRANTEE RESPONSIBILITIES**

#### **A. GENERAL RESPONSIBILITIES**

Grantee will:

1. Provide prevention services and activities:
  - a. In accordance with the rules in [title 25 of the Texas Administrative Code \(TAC\), Chapter 447](#);
  - b. To the identified primary and secondary populations where the target population is located;
  - c. As specified in grantee's response to the solicitation document; and
  - d. As approved by the system agency.
2. Provide family-specific strategies, as appropriate,
3. Implement all required YPS activities only in counties approved by the system agency.
4. coordinate prevention service delivery with other System Agency-funded Grantees and other community partners to address gaps in services.
5. develop and implement written confidentiality policies and procedures.
6. Securely store and maintain privacy and confidentiality of information and records concerning participants and their family members.
7. Ensure all employees and volunteers follow the agency's confidentiality policies, procedures, and requirements.

8. Maintain policies and procedures as required by [1 TAC §392.511](#) and applicable laws, and make them available for inspection by the System Agency. Grantee will develop and implement policies and age-appropriate procedures to protect the rights of children, families, and adults participating in a prevention program.
9. Follow the National Standards for Culturally and Linguistically Appropriate Services in the Health and Health Care (The National CLAS Standards, 2013) for the target population and demonstrate good-faith efforts to reach out to underserved populations. These include, but are not limited to:
  - a. people of color;
  - b. people with low educational and/or socioeconomic status;
  - c. people with limited English proficiency;
  - d. persons with disabilities;
  - e. Native American Tribes;
  - f. military and veteran personnel and their families;
  - g. people who live in Colonias and;
  - h. persons who identify as lesbian, gay, bisexual, transgender, and queer (and/or questioning) (LGBTQ).
10. Ensure all participants have the right to be: free from abuse; neglect and exploitation; treated with dignity and respect; and make a complaint to Grantee or the System Agency at any time.
11. Implement the following Center for Substance Abuse Prevention (CSAP) strategies at the percentage effort noted below. These strategies will be comprehensive and age-appropriate activities:
  - a. Prevention Education (Percentage of Effort = 70%) is a two-way approach to teaching participants important social skills. These skills can include resisting pressure to use drugs, looking at the intent behind advertising, or developing other skills used in making healthy choices. Activities will be conducted using a System Agency-approved evidence-based curriculum proven to promote desired outcomes based on effective implementation strategies. Prevention education activities will target the Service Area specified in Grantee's response to the originally funded solicitation document, and demonstrate an effort to avoid the duplication of prevention education services. Grantee will:
    - i. Ensure that individuals delivering prevention education have received the developer's curriculum training through the System Agency-funded training entity prior to service delivery.
    - ii. Conduct activities with fidelity according to the curriculum developer and document each session for this strategy using the System Agency-approved form. In addition, Grantee will document each curriculum cycle using the System Agency-approved form.
    - iii. Use System Agency-approved procedures (including the System Agency-approved templates) for obtaining consent from participants and their parents/legal guardians. Grantee will maintain all relevant consent documentation on file.

- iv. Administer System Agency provided curriculum pre- and post- tests for all participants enrolled in prevention education. Online access to all required forms or templates will be provided by the System Agency.
    - v. Adhere to System Agency guidelines and expectations regarding the administering of all curriculum pre- and post- tests and maintain all pre- and post- tests in participant files for review by the System Agency.
  - b. Information Dissemination (Percentage of Effort = 15%) increases knowledge and changes attitudes through communications. This method is mainly one-way (i.e., classroom speakers or media campaigns). Information dissemination may be conducted in the form of Alcohol, Tobacco, and Other Drug (ATOD) Presentations or through Media Awareness Activities.
    - i. ATOD Presentations are conducted as stand alone, age-appropriate activities that increase knowledge or create awareness to the State's four prevention priorities. Grantee will conduct the information dissemination activities and document this strategy using the System Agency-approved template.
    - ii. Media Awareness Activities are marketing campaigns that serve the target population. Grantee will follow guidelines described in the SAMHSA toolkit, *Focus on Prevention- Strategies and Programs to Prevent Substance Use* (<https://store.samhsa.gov/product/Focus-on-Prevention/sma10-4120>), to create a successful media campaign and coordinate and collaborate with the System Agency Prevention Media Campaign and other System Agency-funded Grantees to develop and/or promote a consistent statewide message.
    - iii. ATOD Presentations and Media Awareness Activities that focus on minors and tobacco and other nicotine products will include information on tobacco/nicotine cessation, Texas tobacco laws as they apply to minors, and health consequences associated with the use of tobacco and other nicotine products.
  - c. Positive Alternatives and Community-Based Processes (Percentage of Effort = 10%)
    - i. **Positive Alternatives** provide fun, challenging, and structured activities with supervision so people have constructive and healthy ways to enjoy free time and learn skills. These alcohol and drug-free activities are provided with the intent to help people, particularly young people, stay away from situations that encourage use of alcohol, tobacco or other drugs.
      - 1) This strategy is documented using the System Agency-approved template. Any activities, including Positive Alternatives, that occur off-site or involve participant travel, require written consent from all participants and their parents/legal guardians.
      - 2) Allowable costs for Positive Alternatives will not exceed \$500 per event or \$10 per participant, whichever amount is less. Funds exceeding this amount will have prior approval from the System Agency.
    - ii. **Community-Based Processes** strengthen resources such as community coalitions to prevent substance use and misuse. Organizing, planning, and



networking are included in this strategy to increase the community's ability to deliver effective prevention and treatment services; educate and mobilize the community toward prevention efforts; and provide the Grantee with opportunities to obtain meaningful Community Agreements (CAs) with agencies, community sites, Prevention Resource Centers (PRCs) and other stakeholders that enhance prevention efforts. A Community Agreement may include a Memorandum of Understanding (MOU), a Letter of Agreement (LOA), and/or a Memorandum of Agreement (MOA). CAs will represent diversified resources that may include, but are not limited to: mentoring, substance abuse prevention related data, behavioral health services, counseling, school success, and other health and human needs.

Grantee will:

- 1) Participate in, and collaborate with, System Agency-funded coalitions in order to strengthen and promote prevention activities, and promote behavioral health environmental strategies. If a System Agency-funded coalition is not located within the Grantee's service area, the Grantee will then collaborate with a non-System Agency-funded coalition, and/or
  - 2) Conduct and/or participate in Community-Based Education and Mobilization Activities. Such activities may include, but are not limited to, participation in community health fairs, parent-teacher nights, school board meetings, and other related community-based activities.
- d. Identification of Problems and Referral to Services (Percentage of Effort = 5%) includes determining when the needs of participant requires additional education or intensive services and strategies outside the scope of the activities in this Contract and properly refer participants who present a need for individualized services outside the scope of prevention.

## **B. REPORTING REQUIREMENTS**

Grantee will use System Agency-approved templates for all reporting requests. Online access to all required forms or templates will be provided by the System Agency.

Requirements for the Certified Prevention Specialist (CPS) certification, Advanced Certified Prevention Specialist (ACPS) certification, and the Associate Prevention Specialist (APS) designation may be obtained by visiting the Texas Certification Board of Addiction Professionals (TCBAP) website at [www.tcbap.org](http://www.tcbap.org).

Grantee will:

1. Submit Curriculum Implementation Plans (CIP) outlining the prevention education activities to be conducted during this fiscal term submitted to the System Agency for each school semester (Fall and Spring) as well as a Summer term.
2. Submit a Program Staffing Form to the System Agency providing details of all direct prevention program staff for the Grantee's System Agency-funded prevention programs.



3. Notify the System Agency within ten (10) business days of any prevention program staffing changes by updating and re-submitting the Program Staffing Form.
4. Submit all current CPS/ACPS certifications and APS designations with the Program Staffing Form and maintain copies for review by the System Agency upon request.
5. Ensure all CPS/ACPS certifications and APS designations are current or renewed within 30 days of expiration and submit the renewals along with an updated Program Staffing Form.

### **C. WAIVERS/REVISION REQUESTS**

Grantee will:

1. Receive written approval from the System Agency and the Curriculum Developer prior to implementing any adaptations or modifications to the curriculum implementation structure. Modification to the implementation structure of the curriculum may include the frequency of session delivery or modification to the length of each session but is not applicable to any modification of the grade range for which the System Agency has not expressly approved.
  - a. System Agency will consider a request to modify the grade range only in the case that the National Registry of Evidence-Based Programs and Practices (NREPP) of SAMHSA revises and expands a target grade range for a curriculum based on the addition of evaluation research demonstrating statistically significant effectiveness.
  - b. Grantee will submit this request in writing, and obtain written approval from the System Agency, prior to the delivery of any amended prevention services to the target population.
2. In the event an individual responsible for delivering curriculum is unable to receive and complete formal curriculum training through the System Agency-funded training entity prior to service delivery, Grantee will:
  - a. Submit an In-House Curriculum Training Waiver for System Agency approval using the System Agency-approved form.
  - b. Ensure that individuals delivering prevention education have received the developer's curriculum training prior to service delivery.
  - c. Receive written approval from the System Agency prior to implementing in-house curriculum training.
  - d. Ensure that any individual receiving in-house curriculum training will complete formal curriculum training through the System Agency-funded training entity by the due date required in the System Agency-approved In-House Curriculum Training Waiver.
  - e. Ensure any individual conducting in-house curriculum training has completed formal curriculum training from the System Agency-funded training entity no more than three (3) years prior to the proposed in-house training date.

### **D. POLICY/PROCEDURAL REQUIREMENTS**

Grantee will:

1. Secure CAs with schools, community sites, and any agency, business or community partners, having an interest in the target population. CAs will be:
  - a. Established prior to service delivery;
  - b. Renewed on an annual basis where applicable;
  - c. Individualized as much as possible to address the needs of each particular school, community site, or partnering agency;
  - d. Secure CAs with schools and community sites where prevention education services will be conducted to establish a detailed outline of the service delivery and implementation structure. The CA will establish responsibilities of entering parties based on guidelines from the System Agency-approved template; and
  - e. Secure CAs with community partners who have an interest in the primary or secondary target populations designed to ensure accessible services for program participants and their families, providing a network for service coordination and referrals that address gaps in services and the needs of participants that are beyond the scope of prevention.
2. At the beginning of the solicitation period, receive curriculum for all program staff completing curriculum training through the System Agency-funded training entity.
3. Maintain curriculum and all related materials throughout the solicitation period by completing the Curriculum Inventory Tracking Form annually, provided by the System
4. Agency, and maintain a copy for System Agency review upon request. Provide prevention services in a secure, clean, well-lit, and well-maintained environment. The site where activities will be held (including building, electrical, lighting, plumbing, sanitation, ventilation, and mechanical systems, appliances, equipment, and furniture) will be structurally sound, functional, and in good repair. The site's building and grounds will be clean and free of garbage and debris.
5. Develop and maintain current written policies and procedures, available for System Agency review, for employees, contracted labor, and volunteers who work directly or indirectly with participants. The written policies and procedures will address participant safety and ensure that all activities with participants are conducted in a respectful, non-threatening, non-judgmental, and confidential manner.
6. Ensure that the Prevention Program Director conducts and documents quarterly fidelity and quality assurance checks of all required strategies provided by prevention program staff and maintain all documentation of these checks on file and make them available for review by the System Agency upon request.
7. Post and make available in English and Spanish the System Agency-developed prevention Participant Rights document during the delivery of educational sessions. Additional languages, appropriate to the population being served, may be requested and will be developed by the System Agency for use by the Grantee. Postings will be conveyed in an appropriate manner to participants who has an impairment of vision, hearing, or cognition.
8. Post in a prominent location, legible prohibitions against firearms, weapons, alcohol, and illegal drugs, illegal activities, and violence at program sites that do not have the existing prohibitions posted.

9. Post the hours and days of operation at all building entrances of Grantee's administrative site. Standard days of operation will reflect a forty-hour workweek Monday through Friday.
10. Post exit diagrams conspicuously throughout program sites (except in one-story buildings where all exits are clearly designated as such).
11. Ensure that the Prevention Program Director paid under this Contract attends the System Agency's Annual Directors' Meeting
12. Ensure that the Prevention Program Director and at least one Prevention Specialist, paid under this Contract, attend the System Agency's Annual Prevention Provider Meeting.
13. Submit any additional documents and information as requested by the System Agency staff for determining and assessing program technical assistance needs.
14. Ensure that all staff providing YPS services receives a copy of this Statement of Work (SOW) and any revised sows.

#### **E. CRIMINAL BACKGROUND VERIFICATION REQUIREMENTS**

Grantee will:

1. Not employ or allow a subcontractor to use any individual who is on probation or parole to deliver prevention services to youth and their families.
2. Prior to employment, conduct criminal background checks and pre-employment drug testing of Grantee's potential employees and subcontractors who will deliver prevention services or have direct contact with youth and their families.
3. Conduct annual criminal background checks for Grantee's current staff and subcontractors who will deliver prevention services or have direct contact with youth and their families.
4. Conduct criminal background checks of interns or volunteers who will deliver prevention services or have direct contact with youth and their families.
5. Ensure that any individual who is on probation, parole and/or is the subject of an ongoing investigation by law enforcement is prohibited from working directly with youth and their families.
6. Develop and maintain current written policies and procedures addressing the requirements for criminal background checks as a condition for employment of potential employees, subcontractors, interns, and volunteers who work directly with youth and their families.
7. Develop and maintain policies and procedures that require individuals (staff, subcontractors, interns, and volunteers) to notify the Grantee of an arrest, conviction, investigation, or any other legal involvement.
8. Maintain documentation of each notification of arrest, conviction, investigation, or any other legal involvement and make available to the System Agency for review upon request.
9. Maintain documentation of each criminal background check and all drug testing and make available to System Agency upon request.

#### **F. STAFFING AND STAFF COMPETENCY REQUIREMENTS**

Grantee will:

1. Hire the number of prevention program staff specified in the Grantee's response to the solicitation document within 30 days of the start date of this Contract, as approved by the System Agency. This will include the following:
  - a. A Prevention Program Director, dedicated at a minimum of 25%, who will be responsible for ensuring that contractual requirements are fulfilled and provide oversight and coordination for prevention services of this Contract.
  - b. A minimum of one (1) Prevention Program Specialist who will conduct prevention program services for this Contract.
2. Ensure that the Prevention Program Director and any individual providing oversight or assisting in the coordination of programmatic services is a Certified Prevention Specialist (CPS), Advanced Certified Prevention Specialist (ACPS) or, at a minimum, an Associate Prevention Specialist (APS), working towards CPS certification at the time of hire for this position. CPS certification is required within 12 months of employment.
3. Ensure that each Prevention Specialist, and any individual providing prevention services, achieves, at a minimum, an APS designation within 20 months of employment in this program. Grantee will submit a copy of Prevention Specialist's designation along with the Program Staffing Form, maintain a copy in their personnel file, and make it available for review by the System Agency upon request.
4. Ensure that the Prevention Program Director and all Prevention Specialists complete the following required trainings as specified below:
  - a. Evidence-Based Curriculum Training – This required training will be completed through the System Agency-funded training entity prior to curriculum delivery.
    - i. Prevention Program Director for this Contract will complete the evidence-based curriculum training for the specified curriculum in the Grantee's response to the solicitation document, as approved by the System Agency. The training will be completed within 60 days from the start of this Contract or within 60 days from the date of hire for the position, whichever is later. To ensure the most up-to-date information, and to provide the most effective oversight, Prevention Program Director will receive curriculum training on each curriculum they provide oversight every three (3) years through the System Agency-funded training entity. Grantee will maintain documentation of successful completion for System Agency review upon request.
    - ii. Prevention Specialists working under this Contract will complete the training for the implementation of the evidence-based curriculum specified in the Grantee's response to the solicitation document, as approved by the System Agency. To ensure the most up-to-date information on effective delivery of the curriculum, all Prevention Specialists conducting Prevention Education curriculum, will receive training in the curriculum they deliver every three (3) three years through the System Agency-funded training

entity. Grantee will maintain documentation of successful completion for System Agency review upon request.

- b. 15-Hour Prevention Skills Training (PST) – This required training will be completed through the System Agency-funded training entity. All prevention program staff and directors will complete the 15-hour Prevention Skills Training (PST) within six (6) months from the date of hire. This is a one-time requirement for all prevention program staff and directors. This training includes a minimum of three (3) hours in each of the following Prevention-specific areas:
  - i. Cultural competency;
  - ii. Risk and protective factors/building resiliency;
  - iii. Child development and/or adolescent development, as appropriate;
  - iv. Communication; and
  - v. Prevention across the lifespan.
- c. Substance Abuse Prevention Skills Training (SAPST) – This is a required training for all prevention program staff with a minimum of 12 months experience delivering prevention services. Program Directors and any individual providing oversight of prevention services will have completed the SAPST training upon the date of hire for the supervisory position and provide documentation to the System Agency. This is a one-time required training to be conducted through the System Agency-funded training entity. In addition, Grantee will:
  - i. ensure that all Prevention Program Staff, employed under this Contract, complete the SAPST training no later than 20 months after the date of hire for this program.
  - ii. maintain a copy of employees' SAPST certification in the employees' personnel file and make them available for review by the System Agency.
- d. Prevention Continuing Education – A minimum of 15 hours of continuing education units (CEUs), specifically related to prevention and/or job-related duties will be completed annually. Training will include subject matter that addresses the six (6) Prevention Domains:
  - i. Planning and Evaluation;
  - ii. Prevention Education and Service Delivery;
  - iii. Communication;
  - iv. Community Organization;
  - v. Public Policy and Environmental Change; and
  - vi. Professional Growth and Responsibility.In addition to the trainings listed above, training on Cultural Competence and Prevention-related Ethics, will be obtained annually and will be counted toward the 15 hours of continuing education units.

Prevention Continuing Education hours may be obtained through the System Agency-funded training entity, the Annual Prevention Provider meeting; the Annual Texas Behavioral Health Institute (TBHI); or other entities approved by the Texas Certification Board of Addiction Professionals (TCBAP).

Information on TCBAP-approved continuing education providers may be found on the TCBAP website at [www.tcbap.org](http://www.tcbap.org). All CEUs will be obtained prior to the end of each funded fiscal year and made available to System Agency for review.

- e. Cardiopulmonary Resuscitation (CPR) and First Aid Certifications – Grantee will ensure that all prevention staff complete CPR and First Aid certifications within 60 days of employment for this Contract or have valid certifications upon hire. All certifications will be maintained as current and reported on the Program Staffing Form. All certifications will be maintained within the employee’s file and made available for System Agency review upon request.
  - f. Suicide Prevention Training – Grantee’s prevention staff will be required to attend at least one suicide prevention training each year to build competence and encourage integration of mental health promotion strategies in their work.
  - g. Mental Health First Aid Training – Grantee’s prevention staff will be required to attend at least one Mental Health First Aid training to build competence and encourage integration of mental health promotion strategies in their work. This training will be coordinated by the System Agency-funded training entity.
5. Ensure that all volunteers and/or interns that assist prevention staff with any prevention activity/strategy, at a frequency of more than one (1) time per month, receive and complete the following trainings:
    - a. Cardiopulmonary Resuscitation (CPR) and First Aid – This is a one-time required training. Documentation of completion will be maintained for all volunteers and/or interns providing on-going assistance in prevention activities for System Agency review upon request.
    - b. Prevention Training for Volunteers/Interns – This is a one-time required training to be conducted through the System Agency-funded training entity. Documentation of the completion of this training will be maintained for System Agency review upon request and will be maintained for all volunteers/interns providing on-going assistance in prevention activities.
  6. Ensure that all volunteers/interns, conducting activities with youth or adults, are supervised and chaperoned in-person by an agency or prevention staff member.

## **G. GUIDANCE ON ALLOWABLE PURCHASES**

1. Gift cards, used as a requirement of a Family-Focused program where a food-based activity is provided, may be provided to families, participating in the family-focused program.
2. Food or snacks, purchased for participants in a prevention activity occurring after-school or outside the school setting for four (4) or more hours, may be purchased. Costs for the purchase of food or snacks will be reasonable. Food or snacks may be donated from outside stakeholders and/or businesses, but is not considered as match unless considered an allowable purchase.
3. T-shirts with a “no use” message may be purchased for participants as a way to educate or create awareness of the harmful effects of alcohol, tobacco, and other drugs.



4. Materials used to educate and/or create awareness of the harmful effects of alcohol, tobacco, and other drugs, or that engage participants in prevention activities may be purchased. The cost for these materials will be reasonable.
5. Costs for Positive Alternatives will not exceed \$500 per event or \$10 per participant, whichever is less. Grantee will receive written approval from the System Agency prior to the delivery of any Positive Alternative event exceeding \$500 or \$10 per participant.

## H. SUBMISSION SCHEDULE AND REPORTING REQUIREMENTS

Grantee will:

1. Submit all documents identified below by the due dates specified by the System Agency. Grantee will submit documents to the assigned contract manager and designated substance abuse mailbox, [SubstanceAbuse.Contracts@hhsc.state.tx.us](mailto:SubstanceAbuse.Contracts@hhsc.state.tx.us), unless otherwise noted. Grantee's duty to submit required documents will survive the termination or expiration of this Contract.

Report Form	Due Date*
Program Staffing Form	By the 30th day after the Contract start date. Within 10 business days of a revision.
Copy of CPS, APS, and/or ACPS certifications of any supervisory employees and any other employees having a current certification/designation	By the 30th day after the Contract start date, and within 10 days of any new certifications or renewals.
CMBHS Security Attestation Form and Listing of Authorized Users	September 15 <sup>th</sup> and March 15 <sup>th</sup>
Curriculum Implementation Plan (CIP) – Fall Semester	By the 30th day after the Contract start date.
CIP – Spring Semester	January 31
CIP –Summer Term	May 31
Financial Status Reports (FSRs)	Last business day of the month following the end of each quarter of the fiscal term. *Last FSR is due 45 days after the end of this fiscal term.
Performance Measures	15th of each month following the month being reported. Submit into the CMBHS reporting system.
Curriculum Outcome Measures Reports	Due within 20 calendar days after the curriculum cycle has been completed. Submit into the CMBHS reporting system each individual curriculum cycle and the associated outcomes.
Closeout Documents – Annual Report	45 days after the end of the fiscal term.

**\*If the Due Date is on a weekend or holiday, the Due Date is the next business day.**



2. Grantee's duty to submit required documents will survive the termination or expiration of this Contract.
3. In regions 8, 9, 10, and 11, document the number of participants receiving services who are residents of a Colonia (an unincorporated community within 62 miles of the international border), which will be reported along with the monthly performance measures submitted into the CMBHS system.
4. Comply with the System Agency's definition of completion rate as follows:  
Completion rate is the number of youth who complete the curriculum cycle being reported (the number of youth that attend the required number of curriculum sessions) divided by the number of youth who were enrolled per group cycle. Grantee will achieve an 80% completion rate per curriculum cycle.
5. Provide per request for the System Agency information that supports performance measures, required reports, information or data related to the scope of work of the Grantee solicitation document approved by the System Agency.

#### **I. BILLING INSTRUCTIONS**

1. Grantee shall submit all invoices to the System Agency through CMBHS monthly.
2. Grantee shall be paid on a monthly basis and in accordance with services performed under this Contract.
3. All invoices must reference Purchase Order Number.

#### **J. INVOICE AND FINANCIAL REQUIREMENTS**

Grantee shall:

1. Submit all monthly invoices to the System Agency through CMBHS. Grantee shall ensure the supportive documents for the expenditures are emailed to the assigned contract manager and copied to the Substance Use Disorder Contracts Mailbox: [SubstanceAbuse.Contracts@hhsc.state.tx.us](mailto:SubstanceAbuse.Contracts@hhsc.state.tx.us).
2. Be paid on a monthly basis and in accordance with services performed under this Contract.
3. Comply with the requirements applicable in the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, 2 CFR 200, and the Uniform Grant Management Standards (UGMS) Standards.
4. Review and comply with the System Agency's Grants Technical Assistance guide, which provides guidance on financial administration in order to clarify applicable laws, rules and regulations. The Guide is located at the following: <https://hhs.texas.gov/doing-business-hhs/grants>.
5. Grantee may access the Transactions List report in CMBHS to identify the amount of federal funds allocated to this award for each transaction.
6. The Catalog of Federal Domestic Assistance (CFDA) number for the Substance Abuse Prevention and Treatment (SAPT) Block Grant is 93.959. The CFDA number is identified in the CMBHS Transactions List report.

**ATTACHMENT A-1**  
**STATEMENT OF WORK SUPPLEMENTAL**

**A. CONTRACT INFORMATION**

Vendor ID:	74-26056697
Grantee Name:	Mid-Coast Family Services, Inc.
Contract Number:	HHS000539700113
Contract Type	Prevention
Payment Method:	Cost Reimbursement
DUNS Number:	790072524
Federal Award Identification Number (FAIN)	B08TI010051-18
	Texas Health and Human Services Commission, Request for Applications for Substance Use and Misuse Prevention Services, RFA #HHS0000776, issued March 11, 2019.

**B. SERVICE AREA**

Services or activities will be provided to participants and/or clients from the following counties:

Region (8): Calhoun, Dewitt, Goliad, Gonzales, Jackson, Lavaca, Victoria

**C. POPULATION SERVED**

1. The primary population is youth Pre-Kindergarten to 12<sup>th</sup> grade who are at risk for substance use and misuse because they belong to a subgroup of the general population that is known to have risk factors that increase the likelihood of substance use and misuse. Targeted subgroups may be defined by, but not limited to, academic factors such as school failure or truancy, and place of residence such as high drug-use or low-income neighborhoods.

2. The secondary population may include:
  - a. parents, grandparents, guardians, and siblings of youth participants, and
  - b. community members in the funded service area.

#### D. RENEWALS

No renewal options available for this Contract.

#### E. CONTACT INFORMATION

Name:	Jennifer Molenaar
Email:	Jennifer.Molenaar@hhsc.state.tx.us
Telephone:	(512) 206-5153
Address:	909 W 45 <sup>th</sup> Street, Bldg 552 (MC 2058)
City/Zip:	Austin TX 78751

#### F. PERFORMANCE MEASURES

1. Grantee's performance will be measured in part on the achievement of the following key performance measures.
2. Grantee shall report these performance measures monthly through CMBHS under the Measures component.
3. Each report is due by the 15<sup>th</sup> of the following month for the month being reported. *\*If the 15<sup>th</sup> falls on a weekend, the report is due the next business day following the 15<sup>th</sup>.*

Measure:	Sept-Nov	Dec-Feb	Mar-May	Jun-Aug	Annual Goal
Number of youth receiving prevention education (approved evidence-based curriculum)	153	153	87	43	436
Number of adults receiving prevention education (approved evidence-based curriculum)	0	0	0	0	0
Number of adults involved in Positive Alternatives	264	264	396	396	1320
Number of youth involved in Positive Alternatives	528	528	792	792	2640
Number of alcohol, tobacco, and other drugs (ATOD) Presentations	62	35	44	35	176
Number youth attending alcohol, tobacco, and other drugs (ATOD) Presentations	616	352	440	352	1760
Number adults attending alcohol, tobacco, and other drugs (ATOD) Presentations	308	176	220	176	880
Number of social media messages related to the Statewide Media Campaign (YPU, YPS, YPI)	12	12	12	12	48
Number of youth attending Community-Based Education and Mobilization Activities	528	528	792	792	2640

Number of adults attending Community-Based Education and Mobilization Activities	264	264	396	396	1320
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## J. PERFORMANCE MEASURES DEFINITIONS AND GUIDANCE:

### 1. Number of youth receiving prevention education (approved evidence-based curriculum)

Prevention education is a two-way approach to teaching participants important social skills. These skills can include resisting pressure to use drugs, looking at the intent behind advertising, or developing other skills used in making healthy choices. Activities will be conducted using a System Agency-approved evidence-based curriculum (see Appendix B: HHSC-Approved Curriculum List by Grade Level and Program Type) proven to promote desired outcomes based on effective principles. These sessions follow a structured evidence-based curriculum, build on skills in a sequential manner and offer culturally and developmentally appropriate objectives for the approved target population.

Guidance:

*Report the number of new youth enrolled to receive prevention education services.*

Youth must be reported for the month they first attended a prevention education session.

Sessions must be appropriate and adequate in duration and intensity according to the age, gender, ethnicity and other needs of the approved target population.

Sessions must be implemented according to the state's approved implementation structure and as designed by the curriculum developer.

### 2. Number of adults receiving prevention education (for programs implementing approved evidence-based family-focused curriculum only)

Prevention education is a two-way approach to teaching participants important social skills. These skills can include resisting pressure to use drugs, looking at the intent behind advertising, or developing other skills used in making healthy choices. Activities will be conducted using a System Agency-approved evidence-based curriculum (see Appendix B: HHSC-Approved Curriculum List by Grade Level and Program Type) proven to promote desired outcomes based on effective principles. These sessions follow a structured evidence-based curriculum, build on skills in a sequential manner and offer culturally and developmentally appropriate objectives for the approved target population.

Guidance:

*Report the number of new adults enrolled to receive prevention education services in a family-focused program.*

Adults must be reported for the month they first attended a prevention education session.

Sessions must be appropriate and adequate in duration and intensity according to the age, gender, ethnicity and other needs of the approved target population.

Sessions must be implemented according to the state's approved implementation structure and as designed by the curriculum developer.

3. **Number of youth involved in Positive Alternatives**

Positive Alternatives provide fun, challenging, and structured activities with supervision so people have constructive and healthy ways to enjoy free time and learn skills. These alcohol- and drug-free activities help people, particularly young people, to stay away from situations that encourage use of alcohol, tobacco or illegal drugs.

Guidance:

*Report the number of youth involved in each Positive Alternative conducted that month.*

Positive Alternatives were formerly known as Alternative Activities.

These activities must be free of substance use, but discussion of substances is not necessary. The activities themselves have been proven to positively impact substance use outcomes among participants.

Each activity must take place for at least 30 minutes with the same participants.

4. **Number of adults involved in Positive Alternatives**

Positive Alternatives provide fun, challenging, and structured activities with supervision so people have constructive and healthy ways to enjoy free time and learn skills. These alcohol- and drug-free activities help people, particularly young people, to stay away from situations that encourage use of alcohol, tobacco or illegal drugs.

Guidance:

*Report the number of adults involved in each Positive Alternative conducted that month.*

Positive Alternatives were formerly known as Alternative Activities.

These activities must be free of substance use, but discussion of substances is not necessary. The activities themselves have been proven to positively impact substance use outcomes among participants.

Each activity must take place for at least 30 minutes with the same participants.

5. **Number of alcohol, tobacco, and other drugs (ATOD) Presentations**

ATOD Presentations are conducted as standalone, age-appropriate activities that increase knowledge or create awareness of the state's four prevention priorities.

Guidance:

*Report the number of ATOD Presentations made that address one or more of the State's four prevention priorities.*

This measure captures the number of presentations, not the number of people in attendance at the presentations. For example, your program conducts four ATOD presentations in September. You would report four presentations for the month of September.

Each presentation must take place over at least 30 minutes with the same audience.

6. Number youth attending alcohol, tobacco, and other drugs (ATOD) Presentations

ATOD Presentations are conducted as standalone, age-appropriate activities that increase knowledge or create awareness of the state's four prevention priorities.

Guidance:

*Report the number of youth that attended ATOD Presentations.*

Each presentation must take place over at least 30 minutes with the same audience.

7. Number adults attending alcohol, tobacco, and other drugs (ATOD) Presentations

ATOD Presentations are conducted as standalone, age-appropriate activities that increase knowledge or create awareness of the state's four prevention priorities.

Guidance:

*Report the number of adults that attended ATOD Presentations.*

Each presentation must take place over at least 30 minutes with the same audience.

8. Number of social media messages related to the Statewide Media Campaign

Social Media Messages are a type of Media Awareness Activity conducted through social media sites such as Facebook and Instagram.

Guidance:

*Report the number of messages delivered through social media.*

Each message may only be counted once.

All messages counted toward this measure must focus on the state's four prevention priorities or consist of content provided through the statewide media campaign. Content, including graphics and texts, provided through the statewide media campaign must not be altered or used in any other form without prior System-Agency review and written approval.

9. Number of youth attending Community-Based Education and Mobilization Activities  
Community-Based Education and Mobilization Activities educate and/or mobilize community stakeholders and enhance prevention efforts.

Guidance:

*Report the number of youth attending Community-Based Education and Mobilization Activities.*

Such activities may include, but are not limited to participation in:

- a. Community health fairs
- b. Parent-teacher nights
- c. School board meetings
- d. Other related community-based activities to enhance community connectedness and/or educate the community on prevention services

10. Number of adults attending Community-Based Education and Mobilization Activities  
Community-Based Education and Mobilization Activities educate and/or mobilize community stakeholders and enhance prevention efforts.

Guidance:

*Report the number of adults attending Community-Based Education and Mobilization Activities.*

Such activities may include, but are not limited to participation in:

- a. Community health fairs
- b. Parent-teacher nights
- c. School board meetings
- d. Other related community-based activities to enhance community connectedness and/or educate the community on prevention services



**ATTACHMENT A-2**

**SUBSTANCE ABUSE PREVENTION AND TREATMENT (SAPT)**  
**BLOCK GRANT CONTRACT SUPPLEMENT**

The following are important details regarding federal award requirements for Grantees funded with SAPT Block Grant funds:

- The Catalog of Domestic Federal Assistance (CFDA) number for the SAPT Block Grant is 93.959.
- The award period covers the term identified in the Contract.

As a subrecipient of the SAPT Block Grant, the Grantee must adhere to each of the applicable requirements below:

***45 CFR § 96.127 REQUIREMENTS REGARDING TUBERCULOSIS (TB)***

- A. The Grantee must, directly or through arrangements with other public or nonprofit private entities, routinely make available the following TB services to each individual receiving treatment for substance abuse:
  - 1. Counseling the individual with respect to TB
  - 2. Testing to determine whether the individual has been infected with mycobacteria TB to determine the appropriate form of treatment for the individual
  - 3. Appropriate medical evaluation and treatment for individuals infected by mycobacteria TB
- B. For clients denied admission on the basis of lack of capacity, the Grantee must refer such clients to other providers of TB services.
- C. The Grantee must have infection control procedures that are consistent with those established by Texas Department of State Health Services, Infectious Disease Control Unit, to prevent the transmission of TB and that address the following:
  - a) Screening and identifying those individuals who are at high risk of becoming infected
  - b) Meeting all State reporting requirements while adhering to Federal and State confidentiality requirements, including 42 CFR part 2
  - c) Case management activities to ensure that individuals receive such services
- D. The Contractor must report all individuals with active TB to the Texas Department of State Health Services, Infectious Disease Control Unit, as required by State law and in accordance with Federal and State confidentiality requirements, including 42 CFR part 2.

***CFR § 96.131 TREATMENT SERVICES FOR PREGNANT WOMEN***

- A. The Grantee must give preference in admission to pregnant women who seek or are referred for and would benefit from Block Grant-funded treatment services.

- B. If the Grantee serves an injecting drug-abusing population, the Grantee must give preference to treatment as follows:
  - 1. Pregnant injecting drug users
  - 2. Other pregnant substance abusers
  - 3. Other injecting drug users
  - 4. All others
- C. The Grantee must refer pregnant women to the State when the Grantee has insufficient capacity to provide services to any such pregnant women who seek the services of the program.
- D. The Grantee must make interim services available within 48 hours to pregnant women who cannot be admitted because of lack of capacity.
- E. The Grantee must offer interim services, when appropriate, that include, at a minimum<sup>1</sup>, the following:
  - 1. Counseling and education about HIV and TB, the risks of needle-sharing, the risks of transmission to sexual partners and infants, and steps that can be taken to ensure that HIV and TB transmission does not occur
  - 2. Referral for HIV or TB treatment services, if necessary
  - 3. Counseling pregnant women on the effects of alcohol and other drug use on the fetus
  - 4. Refer pregnant women for prenatal care

***45 CFR § 96.132 ADDITIONAL REQUIREMENTS***

- A. The Grantee must make continuing education in substance abuse treatment and prevention available to employees who provide the services.
- B. The Grantee must have in effect a system to protect patient records from inappropriate disclosure, and the system must:
  - 1. Comply with all applicable State and Federal laws and regulations, including 42 CFR part 2
  - 2. Include provisions for employee education on confidentiality requirements and the fact that disciplinary action may occur upon inappropriate disclosure

***45 CFR § 96.135 RESTRICTIONS ON THE EXPENDITURE OF THE GRANT***

- A. The Grantee cannot expend SAPT Block Grant funds to provide inpatient hospital substance abuse services, except in cases when each of the following conditions is met:
  - 1. The individual cannot be effectively treated in a community-based, nonhospital, residential treatment program
  - 2. The daily rate of payment provided to the hospital for providing the services does not exceed the comparable daily rate provided by a community-based, nonhospital, residential treatment program
  - 3. A physician makes a determination that the following conditions have been met:
    - a. The primary diagnosis of the individual is substance abuse, and the physician certifies that fact
    - b. The individual cannot be safely treated in a community-based, nonhospital, residential treatment program

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<sup>1</sup> Interim services may also include federally approved interim methadone maintenance.

- c. The service can reasonably be expected to improve the person's condition or level of functioning
- d. The hospital-based substance abuse Contractor follows national standards of substance abuse professional practice
4. The service is provided only to the extent that it is medically necessary (e.g., only for those days that the patient cannot be safely treated in a residential, community-based program)

B. Further, the Grantee cannot expend SAPT Block Grant funds to:

1. Purchase or improve land; purchase, construct, or permanently improve (other than minor remodeling) any building or other facility; or purchase major medical equipment
2. Satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds
3. Provide financial assistance to any entity other than a public or nonprofit private entity
4. Make payments to intended recipients of health services
5. Provide individuals with hypodermic needles or syringes
6. Provide treatment services in penal or correctional institutions of the State

***45 CFR § 96.137 PAYMENT SCHEDULE***

The Grantee must ensure that SAPT Block Grant funds for special services for pregnant women and women with dependent children, TB services, and HIV early intervention services are the "payment of last resort," and the Grantee must make every reasonable effort to do the following to pay for these services:

- A. Collect reimbursement for the costs of providing such services to persons entitled to insurance benefits under the Social Security Act, including programs under Title XVIII and Title XIX, any State compensation program, any other public assistance program for medical expenses, any grant program, any private health insurance, or any other benefit program.
- B. Secure from individuals or clients payments for services in accordance with their ability to pay.

**Audit**

The Grantee shall adhere to the following requirements:

- A. If the Contractor expends \$500,000 or more in Federal financial assistance during the program's fiscal year, an independent financial and compliance audit must be completed by a Certified Public Accounting firm in accordance with Office of Management and Budget (OMB) Circular A-133. The Contractor must submit two copies of the audit report to the State's Health and Human Services Commission Contract Oversight and Support, and the Office of Inspector General within thirty (30) calendar days of receipt of the audit reports required by the Independent Single or Program-Specific Audit section of the State's General Provisions or Universal Terms and Conditions.

- B. The Grantee must also submit a data collection form and reporting package to the Federal Audit Clearinghouse.
- C. The Grantee may access the Transactions List report in the Clinical Management for Behavioral Health Services (CMBHS) system to identify the amount of Federal Financial Assistance included in this award by each transaction.
- D. If the A-133 audit report includes findings or questioned costs, the Grantee may be required to develop and implement a corrective action plan that addresses the audit findings and recommendations contained therein. The Grantee must submit the corrective action plan to the State's Health and Human Services Commission, Office of Inspector General (OIG) by the designated due date identified in the OIG Agency Findings Letter.
- E. The Grantee must retain records to support expenditures and make those records available for review or audit by appropriate officials of SAMHSA, the awarding agency, the General Accountability Office and/or their representatives.

### **Salary Limitation**

The Grantee cannot use the SAPT Block Grant to pay salaries in excess of Level I of the Federal Senior Executive pay scale.

### **Charitable Choice**

- A. If the Grantee is an SAPT Block Grant-funded Grantee that is part of a faith-based organization, the Grantee may:
  - 1. Retain the authority over its internal governance
  - 2. Retain religious terms in its name
  - 3. Select board members on a religious basis
  - 4. Include religious references in the mission statements and other governing documents
  - 5. Use space in its facilities to offer Block Grant-funded activities without removing religious art, icons, scriptures, or other symbols
- B. If the Grantee is part of a faith-based organization, the Grantee cannot use SAPT Block Grant funds for inherently religious activities such as the following:
  - 1. Worship
  - 2. Religious instruction
  - 3. Proselytization
- C. The Grantee may only engage in religious activities listed under 2. above if both of the following conditions are met:
  - 1. The activities are offered separately, in time or location, from Block Grant-funded activities
  - 2. Participation in the activities is voluntary
- D. In delivering services, including outreach activities, SAPT Block Grant-funded religious organizations cannot discriminate against current or prospective program participants based upon:
  - 1. Religion
  - 2. Religious belief
  - 3. Refusal to hold a religious belief
  - 4. Refusal to actively participate in a religious practice

- E. If an otherwise eligible client objects to the religious character of the Grantee, the Grantee shall refer the client to an alternative provider within a reasonable period of time of the objection.
- F. If the Grantee is a religious organization, the Grantee must:
  - 1. Use generally accepted auditing and accounting principles to account for SAPT Block Grant funds similar to other nongovernmental organizations.
  - 2. Segregate Federal funds from non-Federal funds.
  - 3. Subject Federal funds to audits by the government.
  - 4. Apply Charitable Choice requirements to commingled funds when State/local funds are commingled with Block Grant funds.

***45 CFR § 96.126 CAPACITY OF TREATMENT FOR INTRAVENOUS SUBSTANCE ABUSERS***

If the Grantee treats injecting drug users, the Grantee must:

- A. Within seven (7) days, notify the State whenever the Grantee has reached 90 percent of its treatment capacity.
- B. Admit each individual who requests and is in need of treatment for intravenous drug abuse:
  - 1. No later than fourteen (14) days after making the request, or
  - 2. Within 120 days of the request if the Grantee has no capacity to admit the individual, the Grantee makes interim services available within 48 hours, and the Grantee offers the interim services until the individual is admitted into a substance abuse treatment program
- C. Offer interim services, when appropriate, that include, at a minimum, two (2) of the following:
  - 1. Counseling and education about HIV and tuberculosis (TB), the risks of needle-sharing, the risks of transmission to sexual partners and infants, and steps that can be taken to ensure that HIV and TB transmission do not occur
  - 2. Referral for HIV or TB treatment services, if necessary
  - 3. Counseling pregnant women on the effects of alcohol and other drug use on the fetus and referrals for prenatal care for pregnant women
- D. Maintain a waiting list that includes a unique individual identifier for each injecting drug abuser seeking treatment, including individuals receiving interim services while awaiting admission.
- E. Maintain a mechanism that enables the program to:
  - 1. Maintain contact with individuals awaiting admission
  - 2. Consult with the State's capacity management system to ensure that waiting list clients are admitted or transferred to an appropriate treatment program within a reasonable geographic area at the earliest possible time

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<sup>2</sup> Interim services may also include federally approved interim methadone maintenance.

**ATTACHMENT B**  
**BUDGET**

- A. Funding from the United States Health and Humans Services (HHS) and the Substance Abuse and Mental Health Services Administration (SAMSHA),
- B. The Substance Abuse Prevention Treatment Block Grant, CFDA number 93.959 requires a five percent match requirement.
- C. Any unexpended balance associated with any other System Agency-funded contract may not be applied to this Contract.
- D. Funding
  - 1. System Agency Share total reimbursements will not exceed \$1,709,640.00 for the period from September 1, 2019 through August 31, 2024, as follows:
    - a. Fiscal Year 2020, September 1, 2019 through August 31, 2020 - \$341,928.00
    - b. Fiscal Year 2021, September 1, 2020 through August 31, 2021 - \$341,928.00
    - c. Fiscal Year 2022, September 1, 2021 through August 31, 2022 - \$341,928.00
    - d. Fiscal Year 2023, September 1, 2022 through August 31, 2023 - \$341,928.00
    - e. Fiscal Year 2024, September 1, 2023 through August 31, 2024 - \$341,928.00
  - 2. For each Fiscal Year noted in Section D, (1) (a-e), Grantee shall provide a five percent (5%) match requirement of \$17,096.00.
  - 3. Total Contract Amounts, per fiscal year, is documented below:
    - a. Fiscal Year 2020, September 1, 2019 through August 31, 2020 - \$359,024.00
    - b. Fiscal Year 2021, September 1, 2020 through August 31, 2021 - \$359,024.00
    - c. Fiscal Year 2022, September 1, 2021 through August 31, 2022 - \$359,024.00
    - d. Fiscal Year 2023, September 1, 2022 through August 31, 2023 - \$359,024.00
    - e. Fiscal Year 2024, September 1, 2023 through August 31, 2024 - \$359,024.00
- E. Cost Reimbursement Budget
  - 1. System Agency shall provide written notification through technical guidance correspondence documenting approval of Grantee's negotiated Cost Reimbursement budget, provided within the Request For Application, No. HHS0000076. The notification shall be incorporated into the Contract, and the information will be documented in CMBHS.
  - 2. The Cost Reimbursement budget documents all approved and allowable expenditures; Grantee shall *only* utilize the funding detailed in Attachment B for approved and allowable costs. If Grantee requests to utilize funds for an expense not documented on the approved budget, Grantee shall notify, in writing, the System Agency assigned contract manager and request approval prior to utilizing

the funds. System Agency shall provide written notification regarding if the requested expense is approved.

3. If needed, Grantee may revise the System Agency approved Cost Reimbursement budget. The requirements are as follows:
  - a. Grantee is allowed to transfer funds from the budgeted direct categories only; with the exception of the Equipment Category. Grantee may transfer up to ten (10) percent of the Fiscal Year Contract value without System Agency approval. Budget revisions exceeding the ten percent requirement require System Agency's written approval.
  - b. Grantee may request revisions to the approved Cost Reimbursement budgeted direct categories that exceed the ten (10) percent requirement stated in (E)(3)(a), by submitting a written request to the Assigned contract manager. This change is considered a minor administrative change, and does not require an amendment. The System Agency shall provide written notification if the budget revision is approved; and the assigned Contract Manager will update CMBHS, as needed.
  - c. Grantee may revise the Cost Reimbursement budget 'Equipment' and/or 'Indirect Cost' Categories, however a formal Amendment is required. Grantee shall submit to the assigned contract manager a written request to revise the budget, which includes a justification for the revisions. The assigned Contract Manager shall provide written notification stating if the requested revision is approved. If the revision is approved, the budget revision is *not* authorized and funds *cannot* be utilized until the Amendment is executed and signed by both parties.
4. The budgeted indirect cost amount is provisional and subject to change. The System Agency reserves the right to negotiate Grantee's indirect cost amount, which may require Grantee to provide additional supporting documentation to the assigned contract manager.