



## Recipient Information

### 1. Recipient Name

COUNTY OF NEVADA  
950 MAIDU AVE

NEVADA CITY, CA 95959

### 2. Congressional District of Recipient

01

### 3. Payment System Identifier (ID)

1946000526A1

### 4. Employer Identification Number (EIN)

946000526

### 5. Data Universal Numbering System (DUNS)

010979029

### 6. Recipient's Unique Entity Identifier

### 7. Project Director or Principal Investigator

Phebe Bell

Phebe.Bell@co.nevada.ca.us  
5304702784

### 8. Authorized Official

Priya Kannall  
priya.kannall@co.nevada.ca.us  
(530) 265-1790

## Federal Agency Information

### 9. Awarding Agency Contact Information

Sheri Jones

Center for Mental Health Services  
Sheri.Jones@samhsa.hhs.gov  
240-276-9761

### 10. Program Official Contact Information

Asha Stanly

Center for Mental Health Services  
asha.stanly@samhsa.hhs.gov  
240-276-1845

## Federal Award Information

### 11. Award Number

1H79SM085608-01

### 12. Unique Federal Award Identification Number (FAIN)

H79SM085608

### 13. Statutory Authority

Title XIX, Part B, Subpart I and Subpart III of the PHS Act

### 14. Federal Award Project Title

Nevada County Peer Expansion Program (PEP)

### 15. Assistance Listing Number

93.958

### 16. Assistance Listing Program Title

Block Grants for Community Mental Health Services

### 17. Award Action Type

New Competing

### 18. Is the Award R&D?

No

## Summary Federal Award Financial Information

### 19. Budget Period Start Date 09/30/2021 – End Date 09/29/2023

20. Total Amount of Federal Funds Obligated by this Action \$1,000,000

20a. Direct Cost Amount \$989,913

20b. Indirect Cost Amount \$10,087

21. Authorized Carryover \$0

22. Offset \$0

23. Total Amount of Federal Funds Obligated this budget period \$1,000,000

24. Total Approved Cost Sharing or Matching, where applicable \$0

25. Total Federal and Non-Federal Approved this Budget Period \$1,000,000

### 26. Project Period Start Date 09/30/2021 – End Date 09/29/2023

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period \$1,000,000

### 28. Authorized Treatment of Program Income

Additional Costs

### 29. Grants Management Officer - Signature

Odessa Crocker

### 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.



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

Notice of Award

**Issue Date:** 09/22/2021

**Award Number:** 1H79SM085608-01

**FAIN:** H79SM085608

**Program Director:** Phebe Bell

**Project Title:** Nevada County Peer Expansion Program (PEP)

**Organization Name:** COUNTY OF NEVADA

**Authorized Official:** Priya Kannall

**Authorized Official e-mail address:** priya.kannall@co.nevada.ca.us

**Budget Period:** 09/30/2021 – 09/29/2023

**Project Period:** 09/30/2021 – 09/29/2023

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$1,000,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to COUNTY OF NEVADA in support of the above referenced project. This award is pursuant to the authority of Title XIX, Part B, Subpart I and Subpart III of the PHS Act 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](http://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,  
Odessa Crocker  
Grants Management Officer  
Division of Grants Management

See additional information below

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**SECTION I – AWARD DATA – 1H79SM085608-01****Award Calculation (U.S. Dollars)**

Personnel(non-research)	\$45,398
Fringe Benefits	\$7,743
Supplies	\$9,932
Contractual	\$347,310
Other	\$579,530
Direct Cost	\$989,913
Indirect Cost	\$10,087
Approved Budget	\$1,000,000
Federal Share	\$1,000,000
Cumulative Prior Awards for this Budget Period	\$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$1,000,000

SUMMARY TOTALS FOR ALL YEARS			
BUDGET PERIOD	BUDGET PERIOD DATES		TOTAL AMOUNT
1	09/30/2021 - 09/29/2023		\$1,000,000
	INCREMENTAL PERIOD	INCREMENTAL PERIOD DATES	INCREMENTAL AMOUNTS FOR BUDGET PERIOD 1
	1-A*	(09/30/2021 - 09/29/2022)	\$1,000,000
	1-B	(09/30/2022 - 09/29/2023)	\$507,020

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

**Fiscal Information:**

CFDA Number: 93.958  
EIN: 1946000526A1  
Document Number: 21SM85608AC5  
Fiscal Year: 2021

IC	CAN	Amount
SM	C96D451	\$1,000,000

IC	CAN	2021
SM	C96D451	\$1,000,000

**SM Administrative Data:**

PCC: CMHC / OC: 4145

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**SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79SM085608-01**

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.

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### SECTION III – TERMS AND CONDITIONS – 1H79SM085608-01

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.

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### SECTION IV – SM SPECIAL TERMS AND CONDITIONS – 1H79SM085608-01

## **REMARKS**

### **New Award (Community Mental Health Centers)**

**This Notice of Award (NoA) is issued to inform your organization that the application submitted to Funding Opportunity Announcement Number SM-21-014, titled Community Mental Health Centers Grant Program, has been selected to receive funding.**

The purpose of this program is to enable community mental health centers to support and restore the delivery of clinical services that were impacted by the COVID-19 pandemic and effectively address the needs of individuals with serious emotional disturbance (SED), serious mental illness (SMI), and individuals with SMI or SED and substance use disorders, referred to as co-occurring disorder (COD).

**Funding for this program is authorized by the [Consolidated Appropriations Act, 2021](#) and the Coronavirus Response and Relief Supplemental Appropriations Act, 2021 [P.L. 116-260], to**

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prevent, prepare for, and respond to the Coronavirus (COVID-19) pandemic.

**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 originally 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.

**The individual identified as the Project Director (PD) in your application has 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 PD 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 PD position. SAMHSA will not be liable for any associated costs incurred.**

Key personnel for this program is the Project Director with a minimum level of effort of 0.5 FTE. The identified PD for this program is identified 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.

**Multi-Year Funding** – This grant award is multi-year funded for the full project period of September 30, 2021 – September 29, 2023. There are two separate 12-month incremental periods within the multi-year funded period. The Incremental Periods are:

- Incremental Period 1: 09/30/2021 – 09/29/2022
- Incremental Period 2: 09/30/2022 – 09/29/2023

The recipient organization is restricted from expending more than what is authorized for each 12-month Incremental Period. See the **Special Terms of Award** and **Special Conditions of Award** sections below for more information about multi-year funding.

**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 [Funding Opportunity Announcement](#) and all applicable Policies & Regulations.

The cost principles that delineate the allowable and unallowable expenditures for HHS recipients are described in the [45 CFR §75 Subpart E](#).

Funding Limitations and Restrictions are listed in the [Funding Opportunity Announcement](#).

You may also reference the SAMHSA grantee guidelines on [Financial Management](#)

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## 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](mailto: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 <https://www.samhsa.gov/grants/grants-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 amendment in eRA Commons: <https://www.samhsa.gov/grants/grants-management/post-award-amendments>

## **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.

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- 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 TERMS**

### **Multi-Year Grant Award Funding Amounts**

This award reflects multi-year funding for [2] 12-month incremental periods within the multi-year funded period, from 09/30/2021 – 09/29/2023, in the amount of \$1,000,000.

The recipient organization is restricted from expending more than the following amounts for each of the 12-month incremental period(s):

Incremental Period 1- 09/30/2021 – 09/29/2022: \$507,020

Incremental Period 2- 09/30/2022 – 09/29/2023: \$492,980

### **Delivery of Services**

CMHC grant recipients are required to begin delivery of services no later than four months post-award, i.e., January 31, 2022.

### **FUNDING LIMITATIONS/RESTRICTIONS**

The funding restrictions for this project are as follows:

- No more than 20 percent of the total grant award for each budget period may be used for data collection, performance measurement, and performance assessment, including incentives for participating in the required data collection follow-up.
- No more than 20 percent of the total grant award for each budget period may be used for infrastructure development.
- Grant funds cannot be used to fund technological devices for individual clients (e.g., iPads, laptop computers, mobile phones).

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 30, 2021, 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>



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\*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 Detailed Budget with Narrative Justification and SF-424A**

By **October 30, 2021**, submit the following via eRA Commons:

**1. Personnel (Behavioral Health Director):** The Project Director (PD), a key personnel position for this grant, must have a **minimum level of effort of 0.50 FTE** per the [FOA](#). Show the PD at the required level of effort in the budget even if the position is filled at no cost or is in kind to SAMHSA.

**2. Contract:**

**a. Client Supports @ \$36,750:** Food, clothing, personal care items, payment of housing expenses for clients/patients, and direct payments to clients/patients are unallowable under this program. These funds have been moved to the Other budget category. Reallocate funds elsewhere for other reasonable, necessary, and allowable grant activities/costs to achieve the goals and objectives of the program per the [FOA](#). Other sources of funds may be used for unallowable costs. For examples of unallowable costs, refer to the [FOA](#) – Standard Funding Restrictions, and [45 CFR § Part 75](#) – General Provisions for Selected Items of Cost.

**b. 1 Van/SUV @ \$37,000:** This cost has been moved to the Other budget category pending your responses to the questions below.

For vehicles and other high-value equipment, recipients should consider the cost benefits of rental/lease versus purchase. Recipients must consider the most cost-effective procurement method, which may be leasing instead of purchasing ([2 CFR § 200.318](#)). Include in the Equipment Narrative your responses to the following questions and attach the rental/lease versus purchase analysis and three (3) price/rate quotes with your budget submission:



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1. Justify the need for the vehicle rental/lease or purchase in relation to serving the population of focus within the geographic catchment area consistent with the required activities in the [FOA](#). Be sure to address the following:

- a. How many clients do you anticipate transporting each trip?
  - b. How often do you anticipate transporting clients (e.g., number of times each week)?
  - c. If requesting to rent/lease or purchase more than one vehicle, explain why more than one vehicle is necessary.
  - d. Who will drive the vehicle?
  - e. What is your budget for the driver's salary and fringe benefits in subsequent budget periods?
2. Does your organization have other SAMHSA grant awards where the rental/lease or purchase of vehicle was approved? If so, have you considered using the vehicle under other SAMHSA grant(s) or transferring the vehicle to the current grant?
3. Is your organization able to purchase the vehicle using its own funds or finance it? This allows the value of the vehicle to be depreciated over its useful life budgeted using grant funds.
4. Can the vehicle be purchased using other sources of funds (other federal or non-federal funds, e.g., program income, foundation funds, etc.)?
5. Has your organization considered a used vehicle?
6. Has your organization considered the following alternative transportation options for clients?
- a. Other vehicles in the organization that may be used considering that you may request reimbursement for POV mileage?
  - b. The use of ride sharing service(s)?
  - c. The use of public transportation?
7. Submit a rental/lease versus purchase analysis so SAMHSA can determine the most economical and practical procurement for the vehicle. Include price or rate quotes for both rental/lease and purchase options from three (3) qualified sources/vendors ([45 CFR §75.327d](#)).
8. For more information on vehicle leases, refer to the GSA guidance:

<https://www.gsa.gov/buying-selling/products-services/transportation-logistics-services/fleet-management/vehicle-leasing>

\*\*\*Vehicle lease or purchase should be prioritized for American made vehicles.\*\*\*

9. Will other programs/activities in the organization use the vehicle or will it be dedicated to the SAMHSA grant project only? If other programs/activities will use the vehicle, address the following:

- a. Describe the basis for determining SAMHSA's fair share of the vehicle lease/rental or purchase cost.
- b. Provide the breakdown of the vehicle lease/rental or purchase cost showing both the organization and SAMHSA's fair share?
- c. Will non-grant funds be used for maintenance/repairs, insurance, and fuel? If not, why?

**3. Other (Go bags @\$5,000):** Food, clothing, bags, equipment, and personal care items for clients are unallowable. Reallocate funds elsewhere for other reasonable, necessary, and allowable grant activities/costs to achieve the goals and objectives of the program per the [FOA](#). Other sources of funds may be used for unallowable costs.

**4. Funding Limitations:** Your budget must reflect the funding limitations/restrictions specified in Section IV-3 of the Funding Opportunity Announcement ([FOA](#)). Include a narrative and separate budget for each year of the grant that shows the percent of the total grant award that will be used in the area(s) where there is a limitation. Be sure to include in the narrative for each

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funding limitations/restriction the specific line items from the various budget categories that make up the costs shown for each funding limitation/restriction. A sample presentation of the funding limitation is included in your [FOA](#) to guide you in meeting this requirement.

**5. Submit a Revised Detailed Budget with narrative justification and SF-424A** incorporating the above revisions with reasonable, allowable, and necessary grant costs/activities **equal to but not exceeding the award amount on Page 3 of your NoA.**

**6.** To expedite the review of revised budget submissions, it is highly recommended you use the “**SAMHSA Budget Template (PDF)**” available at: <https://www.samhsa.gov/grants/applying/forms-resources>. For SAMHSA to view all budget data, you must convert the PDF to a non-editable format by **PRINTING TO PDF** before submission.

**Note: To download the “SAMHSA Budget Template (PDF)”:**

- a. **Right-click on the link “SAMHSA Budget Template (PDF)”**
- b. **Select “save link as” and save to a location on your computer**
- c. **Go to the saved location and open the “SAMHSA Budget Template (PDF)”**

**IMPORTANT: For the PDF template to function as designed, it must be opened directly in Adobe Acrobat or Reader, instead of with your browser.**

**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.**

### **Post Award Amendment Required – Change in Key Personnel**

Key personnel positions require prior approval by SAMHSA after a review of staff qualifications and position descriptions. Once you have identified the Project Director (PD), you must submit a post award amendment request for change in key personnel via eRA Commons. For key personnel post award amendments, refer to the following link: <https://www.samhsa.gov/grants/grants-management/post-award-amendments#change-in-key-personnel>

Ensure you coordinate with your Program Official/Government Project Officer (GPO) to identify key staff at the required level of effort and qualifications per the FOA. Inform your GPO if there are any barriers or challenges to filling key staff positions.

### **Multi-Year Incremental Period Submission**

**By March 30, 2022**, for the next incremental period 09/30/2022 – 09/29/2023, you must submit in eRA Commons the following documentation:

#### **Application for Federal Assistance SF-424**

A completed SF-424 with the Project Director (PD) name and contact information listed in Section 8f and the Authorized Representative listed in Section 21. The contact information for the PD in Section 8f must match the eRA Commons ID for the PD/PI provided in the Section 4. Applicant Identifier Section. A blank SF-424 can be accessed at [https://apply07.grants.gov/apply/forms/sample/SF424\\_3\\_0-V3.0.pdf](https://apply07.grants.gov/apply/forms/sample/SF424_3_0-V3.0.pdf)

#### **SF-424A - BUDGET INFORMATION - Non-Construction Programs**

Recipients must identify in Section B Budget Categories, federal dollars in column 1 and non-federal dollars in column 2 for the next 12-month incremental period. The SF-424A BUDGET INFORMATION - Non-Construction Programs can be found at:

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<https://apply07.grants.gov/apply/forms/sample/SF424A-V1.0.pdf>

Upload the completed .pdf of the SF-424A Budget Page to the View Terms Tracking Details page in eRA Commons.

### Detailed Budget with Narrative Justification

You must determine if a single direct cost budget category will deviate (increase or decrease) from the approved amount for that budget category, by more than 25 percent or \$250,000, whichever is less:

- **If there will be no deviations**, the approved budget remains in effect. Please **submit** the following comment in the eRA Commons Terms Tracker: **A single direct cost budget category in the budget will not deviate (increase or decrease) from the approved amount for that budget category, by more than 25 percent or \$250,000, whichever is less.**
- **If there will be deviations**, recipients must **submit** a **Revised Detailed Budget with Narrative Justification** via the eRA Commons Terms Tracker. It is highly recommended that the SAMHSA Budget Template be used to submit the revised budget. The SAMHSA Budget Template, guidance, and a completed Sample Budget-NON-MATCH" can be accessed at <https://www.samhsa.gov/grants/applying/forms-resources>.

**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 <https://www.samhsa.gov/grants/grants-training-materials> under heading Grant Management Reference Materials for Grantees.

### Multi-Year Incremental Period Submission (Program Narrative)

**By March 30, 2022**, for the next incremental period 09/30/2022 – 09/29/2023, you must submit in eRA Commons the following documentation:

An updated Program Narrative for the new incremental period to address the following:

1. Describe and explain changes, if any, made during the current budget period affecting the following for the new incremental period:
  - a. Goals and objectives.
  - b. Projected timeline for project implementation.
  - c. Approach and strategies proposed in the initially approved and funded application.
2. Report on progress relative to approved objectives, including progress on evaluation activities.
3. Summarize key program accomplishments to date and list progress.
4. Describe difficulties/problems encountered in achieving planned goals and objectives including:
  - a. Barriers to accomplishment; and
  - b. Actions to overcome difficulties.
5. Report on milestones anticipated with the funding for the new incremental period.
6. Key personnel changes (new and anticipated) must be requested in advance as stated in the terms and conditions of award. Describe any key personnel changes for the new incremental period and submit resumes and job descriptions, level of effort and annual salary for each key personnel position to be charged to the project.

**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

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<https://www.samhsa.gov/grants/grants-training-materials> under heading Grant Management Reference Materials for Grantees.

## **STANDARD TERMS AND CONDITIONS**

### **Reporting Requirements**

Data Collection and Performance Measurement:

CMHC Expansion grant recipients are required to collect and report certain data so SAMHSA can meet its obligation under the Government Performance Results Act (GPRA) Modernization Act of 2010. These data are gathered using SAMHSA's Performance and Accountability Reporting System (SPARS).

CMHC recipients are required to collect and report two types of data: one data set (infrastructure or IPP) is reported on a quarterly basis; the second data set is for the national outcome measures (NOMS) and data are collected and reported at baseline (i.e., upon entry of each client into the project), at six month follow-up and at discharge.

Recipients are required to do the following:

- (1) Complete SPARS Annual Goals training and enter NOMS and IPP annual goals data into SPARS by December 30, 2021;
- (2) NOMS Data: Begin entering NOMS baseline interview data into SPARS within 7 calendar days after completion of each intake interview; conduct a NOMs reassessment interview and enter these data into SPARS six months following the intake interview and every 6 months thereafter; and complete a Clinical Discharge NOMS interview and enter these data into SPARS at the time of client discharge;
- (3) IPP Data: Collect and begin reporting IPP data into SPARS during the 2nd quarter (January - March 2022) and quarterly thereafter.

Information about SPARS training and data reporting will be provided upon award.

### **Multi-Year Programmatic Progress Report**

By December 30, 2022, submit via eRA Commons.

The Programmatic Report is required on an annual basis and must be submitted as a .pdf to the View Terms Tracking Details page in the eRA Commons System no later than 90 days after the end of each 12- month incremental period.

The Annual Programmatic Report must, at a minimum, include the following information:

- o Data and progress for performance measures as reflected in your application regarding goals and evaluation activities.
- o A summary of key program accomplishments to-date.
- o Description of the changes, if any, that were made to the project that differ from the application for this incremental period.
- o 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.

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

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Respond to Terms and Conditions.

### **Multi-Year Federal Financial Report (FFR or SF-425)**

1st FFR for the period of 09/30/2021 – 09/29/2022 - Due no later than December 30, 2022 (90 days after the first 12-month incremental period)

2nd FFR for the period of 09/30/2022 – 09/29/2023 - Due no later than December 30, 2023 (90 days after the second 12-month incremental 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>.

All financial reporting for recipients of Health and Human Services (HHS) grants and cooperative agreements will be 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.

**Effective January 1, 2021**, recipients can connect seamlessly from the **eRA Commons FFR Module** to **PMS** by clicking the **Manage FFR** button on the **Search for Federal Financial Report (FFR)** page.

- Recipients who do not have access to PMS may use the following instructions on how to update user permission: <https://pms.psc.gov/grant-recipients/access-newuser.html>.
- Recipients who currently have access to PMS and are submitting or certifying the FFR on behalf of their organization, should login to PMS and update their permissions to request access to the FFR Module using the following instructions: <https://pms.psc.gov/grant-recipients/access-changes.html>.
  - Instructions on how to submit a FFR via PMS are available at <https://pmsapp.psc.gov/pms/app/help/ffr/ffr-grantee-instructions.html> (**Must be logged into PMS to access link**)

**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](mailto: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 Page 3 of your Notice of Award. SAMHSA's Terms and Conditions Webpage is located at: <https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>.

### **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,*

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*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:**

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