



Lori A. Shlbinette
Commissioner

Katja S. Fox
Director

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

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9445 1-800-852-3345 Ext. 9445
Fax: 603-271-4332 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

April 16, 2020

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division for Behavioral Health to accept and expend funds from the Substance Abuse and Mental Health Services Administration (SAMHSA), entitled Partnership for Success Initiative (PFS2), in the amount of \$85,000.00 effective upon Governor and Council approval through December 31, 2020. Funding source: 100% Federal Funds.

**05-92-92-920510-33950000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT,
HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL SERVICES, PFS2 GRANT**

<u>Class</u>	<u>Description</u>	<u>SFY20 Current Adjusted Authorized</u>	<u>Requested Action</u>	<u>Revised SFY20 Adjusted Authorized</u>
000 - 400146	Federal Funds	\$3,404,411.31	\$85,000.00	\$3,489,411.31
020 - 500200	Current Expense	\$1,544.00	\$0.00	\$1,544.00
037 - 500173	Technology Hardware	\$0.00	\$5,000.00	\$5,000.00
038 - 509038	Technology Software	\$0.00	\$5,000.00	\$5,000.00
039 - 500188	Telecommunications	\$5,800.00	\$0.00	\$5,800.00
041 - 500801	Audit Fund Set Aside	\$3,473.00	\$0.00	\$3,473.00
070 - 500704	In State Travel Reimbursement	\$580.00	\$0.00	\$580.00
080 - 500710	Out of State Travel Reimbursement	\$908.00	\$0.00	\$908.00
102 - 500731	Contracts for Program Services	\$3,392,106.31	\$75,000.00	\$3,467,106.31
	Total	\$3,404,411.31	\$85,000.00	\$3,489,411.31

EXPLANATION

The Department of Health and Human Services, Division of Behavioral Health, Bureau of Drug & Alcohol Services seeks approval to accept and expend New Hampshire Partnerships for Success Initiative funds in the amount of \$85,000.00 from the Substance Abuse and Mental Health Services Administration. This grant does not have a matching funds requirement. The New Hampshire Partnerships for Success Initiative will allow the Bureau of Drug & Alcohol Services to leverage the state's existing prevention system, its resources and capacities to effect change in priority substance abuse areas among high need and high risk populations in the communities where those populations reside. Specifically, this grant seeks to 1) prevent and reduce underage and high risk drinking and prescription drug misuse among persons aged 12 to 20; and 2) prevent and reduce underage and high risk drinking, prescription drug misuse and abuse, particularly prescription opioid misuse and heroin among persons aged 18 to 25. These funds need to be appropriated because there is not a sufficient amount budgeted to support the currently contracted agreements for SFY 2020, which are with organizations such as; the Regional Public Health Networks (RPHN) in order to provide prevention and early intervention to young adults who are most vulnerable and at risk for misusing substances and developing a substance abuse disorder; and vendors that operate the Student Assistance Program (SAP) to provide substance misuse prevention education needed during critical adolescent development years.

Funds will be used for:

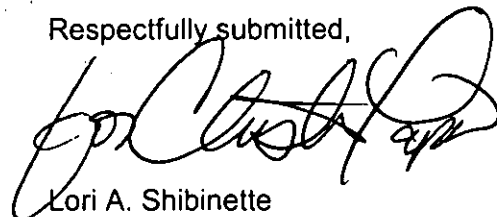
- Class 037 Funds are needed to procure hardware for wireless access point technology.
- Class 038 Funds are needed to procure software for wireless access point technology.
- Class 102 Contracts to support a number of sub recipients for direct prevention services specifically designed to impact the high-risk individuals identified above.

Area served: Statewide.

Source of Funds: 100% Federal Funds

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

Respectfully submitted,



Lori A. Shibinette
Commissioner

**Division of Behavioral Health
PFS2 Grant**

Fiscal Situation: Account 05-92-92-920510-33950000

Agency Income:

Grant Award 5U79SP020796-02	\$2,472,608.00
Grant Award 5U79SP020796-03	\$4,945,216.00
Grant Award 6U79SP020796-04M001	\$2,522,608.00

Total Funds Available	\$9,940,432.00
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Prior Fiscal Year Expenses	(\$5,271,643.09)
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Prior Fiscal Year Expenses	(\$5,271,643.09)
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SFY 2020 Adjusted Authorized Appropriations	(\$3,404,411.31)
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Total Appropriations	(\$3,404,411.31)
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Net Grant Funds Remaining	\$1,264,377.60
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This Request	\$85,000.00
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SPF-PFS
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Notice of Award

Issue Date: 07/18/2017

Center for Substance Abuse Prevention

Grant Number: 5U79SP020796-02 REVISED
FAIN: SP020796
Program Director: Valerie Morgan

Project Title: New Hampshire Partnership for Success Initiative (PFS2)

Grantee Address	Business Address
BUREAU OF DRUG AND ALCOHOL SERVICES Dept of Health and Human Svcs 105 Pleasant Street Main Building Concord, NH 033013852	Director NH DHHS, Bureau of Drug and Alc Svcs 105 Pleasant Street Main Building Concord, NH 03301

Budget Period: 09/30/2016 – 09/29/2017
Project Period: 09/30/2015 – 09/29/2020

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby revises this award (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to BUREAU OF DRUG AND ALCOHOL SERVICES in support of the above referenced project. This award is pursuant to the authority of Section 516 of the Public Health Service Act, as amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

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

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

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

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

See additional information below

SECTION I – AWARD DATA – 5U79SP020796-02 REVISED

Award Calculation (U.S. Dollars)

Salaries and Wages	\$58,487
Fringe Benefits	\$28,492
Personnel Costs (Subtotal)	\$86,979
Supplies	\$1,315
Consortium/Contractual Cost	\$2,807,255
Travel Costs	\$3,584
Other	\$156,151
Direct Cost	\$3,055,284
Approved Budget	\$3,055,284
Federal Share	\$3,055,284
Less Unobligated Balance	\$582,676
Cumulative Prior Awards for this Budget Period	\$2,472,608

AMOUNT OF THIS ACTION (FEDERAL SHARE) \$0

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
2	\$2,472,608
3	\$2,472,608
4	\$2,472,608
5	\$2,472,608

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

Fiscal Information:

CFDA Number: 93.243
 EIN: 1026000618B3
 Document Number: 15SP20796B
 Fiscal Year: 2016

IC CAN Amount
 SP C96V014 \$2,472,608

IC	CAN	2016	2017	2018	2019
SP	C96V014	\$2,472,608	\$2,472,608	\$2,472,608	\$2,472,608

SP Administrative Data:

PCC: PFS 2015 / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 5U79SP020796-02 REVISED

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

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-

800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 5U79SP020796-02 REVISED

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:
Additional Costs**

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

SECTION IV – SP Special Terms and Conditions – 5U79SP020796-02 REVISED

REMARKS:

This award removes the Special Condition of Award due October 31, 2016.

STANDARD TERMS OF AWARD:

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

It is essential that the Grant Number be included in the SUBJECT line of the email.

CONTACTS:

Kim Nesbitt, Program Official
Phone: (240) 276-1742 Email: Kim.Nesbitt@samhsa.hhs.gov

Eileen Bermudez, Grants Specialist
Phone: (240) 276-1412 Email: eileen.bermudez@samhsa.hhs.gov Fax: (240) 276-1430



SPF-PFS
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Notice of Award

Issue Date: 07/28/2017

Center for Substance Abuse Prevention

Grant Number: 5U79SP020796-03
FAIN: SP020796
Program Director: Valerie Morgan

Project Title: New Hampshire Partnership for Success Initiative (PFS2)

Grantee Address	Business Address
BUREAU OF DRUG AND ALCOHOL SERVICES Dept of Health and Human Svcs 105 Pleasant Street Main Building Concord, NH 033013852	Director NH DHHS, Bureau of Drug and Alc Svcs 105 Pleasant Street Main Building Concord, NH 03301

Budget Period: 09/30/2017 – 09/29/2019
Project Period: 09/30/2015 – 09/29/2020

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$4,945,216 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to BUREAU OF DRUG AND ALCOHOL SERVICES in support of the above referenced project. This award is pursuant to the authority of Section 516 of the Public Health Service Act, as amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

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

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

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

Sincerely yours,
Roger George
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 5U79SP020796-03**Award Calculation (U.S. Dollars)**

Salaries and Wages	\$116,974
Fringe Benefits	\$56,984
Personnel Costs (Subtotal)	\$173,958
Supplies	\$2,630
Consortium/Contractual Cost	\$4,449,158
Travel Costs	\$7,168
Other	\$312,302
Direct Cost	\$4,945,216
Approved Budget	\$4,945,216
Federal Share	\$4,945,216
Cumulative Prior Awards for this Budget Period	\$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$4,945,216

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
3	\$4,945,216
4	\$2,472,608

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

Fiscal Information:

CFDA Number: 93.243
EIN: 1026000618B3
Document Number: 15SP20796B
Fiscal Year: 2017

IC	CAN	Amount
SP	C96V014	\$4,945,216

IC	CAN	2017	2019
SP	C96V014	\$4,945,216	\$2,472,608

SP Administrative Data:

PCC: PFS 2015 / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 5U79SP020796-03

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

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

Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 5U79SP020796-03

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:**Additional Costs**

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

SECTION IV – SP Special Terms and Conditions – 5U79SP020796-03**REMARKS:**

1. This Notice of Award (NoA) is issued to inform your organization that the application submitted through the Strategic Prevention Framework Partnerships for Success State and Tribal Initiative (SPF-PFS 2015) is being continued.
2. This award reflects approval of the budget submitted January 23, 2017 as part of the continuation application by your Organization.
3. This award also reflects acceptance of the additional responses submitted May 9, 2017.
4. Recipients are expected to plan their work to ensure that funds are expended within the 12-month budget period reflected on this Notice of Award. If activities proposed in the approved budget cannot be completed within the current budget period, SAMSHA cannot guarantee the approval of any request for carryover of remaining unobligated funding.
5. Register your Organization and Program Director/Project Director (PD) in eRA Commons: You must complete registrations in order to submit an FY18 Continuation Application in eRA Commons. You must register both the Organization and the PD. Additional information for eRA registration can be found at: https://era.nih.gov/reg_accounts/register_commons.cfm.

SPECIAL TERMS OF AWARD:**Multi-Year**

This award reflects approval for multi-year funding. Funding for the period of 9/30/17 through 9/29/19 is in the amount of \$4,945,216. Funding for each 12 month period(s) is restricted and the recipient organization may not expend more than:

9/30/2017 - 9/29/2018: \$2,472,608

9/30/2018 - 9/29/2019: \$2,472,608

SPECIAL CONDITIONS OF AWARD:

Multi Year

You must submit by *May 1, 2018* for each 12 month interval of 9/30/2018 through 09/29/2019 the following:

1. SF-424 – Face Page: recipient should identify Federal and Non-Federal dollars separately by funding source and dollar amount(s) in box #18. Include your grant number (SP#,SM#,TI#) as reflected on your last NoA
2. SF-424A - budget page (add total amount for each budgeted cost category). Recipient should identify Federal and Non-Federal dollars separately by funding source and dollar amount(s).
3. HHS Checklist form with parts C and D completed.
4. (a) Submit a budget and explanation/justification including supporting documentation for any changes above 25% of the total budget from the current 12 month period; or, (b) an attestation signed and dated by the Authorized Representative on your organization's letterhead, stating that the detailed budget and narrative justification has not changed above 25% of the total budget from the current 12 month period.
5. Key staff changes (NEW or ANTICIPATED) must be requested in advance as stated in the terms/conditions of award. Describe the change and submit resumes and job descriptions, level of effort and annual salary for each position.
6. The Project/Program Narrative which is limited to five (5) pages only must outline any changes, progress and accomplishments resulting from the past year of support and progress or milestones anticipated with this continuation funding request and must use the Supplementary Instructions as follows: A description and explanation of changes, if any, made during this budget period affecting the following:
 1. Goals and objectives
 2. Projected timeline for project implementation
 3. Approach and strategies proposed in the initially approved and funded application
 4. Report on progress relative to approved objectives, including progress on evaluation activities.
 5. Summary of key program accomplishments to date and list progress
 6. Description of difficulties/problems encountered in achieving planned goals and objectives including:
 - a. Barriers to accomplishment and
 - b. Actions to overcome difficulties
 - c. Report on milestones anticipated with the new funding request

*Specific programmatic instructions may be provided by the Government Project Officer.

Multi-year reporting requirements must be submitted via email to the Grants Management Specialist and Government Project Officer. Do not send via Grants.gov.

FAILURE TO COMPLY WITH THE ABOVE STATED REPORTING REQUIREMENT MAY RESULT IN ACTIONS IN ACCORDANCE WITH 45 CFR 75.3 71, 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.

STANDARD TERMS OF AWARD: (Cooperative Agreement):

Refer to the following SAMHSA website for Standard Terms for All Awards for FY 2017: Standard Terms and Conditions Webpage (<https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>). Please be sure to also reference the following Standard Terms:

- * Standard Terms and Conditions (PDF | 264 KB), applicable to all awards
- * Continuation (PDF | 154 KB), applicable to all awards
- * Cooperative Agreement Standard Terms (PDF | 161 KB)

Key Staff

Key staff (or key staff positions, if staff has not been selected) are listed below:

Valerie Morgan, Project Director @ 15% level of effort

Any changes in 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. Reference the Prior Approval Standard Term for additional information and instructions.

REPORTING REQUIREMENTS:

Programmatic Progress Reports

Submission of a *Quarterly* Programmatic Progress Report is due no later than the dates as follows:

- 1st Report – January 31, 2018*
- 2nd Report – April 30, 2018*
- 3rd Report – July 31, 2018*
- 4th Report – October 31, 2018*

Please submit your Programmatic Progress Report to DGMProgressReports@samhsa.gov and copy your Program Official. (DO NOT SUBMIT HARD COPIES)

Annual Federal Financial Report (FFR)

The Federal Financial Report (FFR) (SF-425) is required on an annual basis and must be submitted no later than 90 days after the end of the budget period. The annual FFR should reflect only cumulative actual federal funds authorized and disbursed, any non-federal matching funds (if identified in the FOA), unliquidated obligations incurred, the unobligated balance of the federal funds for the award, as well as program income generated during the timeframe covered by the report. The SF-425 is available at (<http://apply07.grants.gov/apply/forms/sample/SF425-V1.0.pdf>). Additional guidance to complete the FFR can be found: <http://www.samhsa.gov/grants/grants-management/reporting-requirements>.

Annual FFRs must be submitted to the applicable email:

CSAP Grants (e.g., SP-12345-01): CSAPFFR@samhsa.gov

Failure to comply with the above stated terms and conditions may result in suspension, classification as Restriction status, termination of this award or denial of funding in the future.

All responses to special terms and conditions of award and post award requests may be electronically mailed to the Grants Management Specialist and to the Program Official as identified on your Notice of Award.

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

It is essential that the Grant Number be included in the SUBJECT line of the email.

CONTACTS:

Kim Nesbitt, Program Official

Phone: (240) 276-1742 Email: Kim.Nesbitt@samhsa.hhs.gov

Eileen Bermudez, Grants Specialist

Phone: (240) 276-1412 Email: eileen.bermudez@samhsa.hhs.gov Fax: (240) 276-1430



SPF-PFS
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Notice of Award

Issue Date: 10/11/2019

Center for Substance Abuse Prevention

Grant Number: 6U79SP020796-04M001
FAIN: U79SP020796
Program Director: Valerie Morgan

Project Title: New Hampshire Partnership for Success Initiative (PFS2)

Organization Name: NH STATE DEPT/HLTH STATISTICS/DATA MGMT

Business Official: Annette Escalante

Business Official e-mail address: Annette.Escalante@dhhs.nh.gov

Budget Period: 09/30/2019 – 09/29/2020

Project Period: 09/30/2015 – 09/29/2020

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$0 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to NH STATE DEPT/HLTH STATISTICS/DATA MGMT in support of the above referenced project. This award is pursuant to the authority of Section 516 of the Public Health Service Act, as amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

This award addresses the following Amendment action: Change in Terms and Conditions

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

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

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

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

See additional information below

SECTION I – AWARD DATA – 6U79SP020796-04M001

Award Calculation (U.S. Dollars)

Personnel(non-research)	\$57,494
Fringe Benefits	\$24,625
Travel	\$4,642
Supplies	\$5,450
Contractual	\$2,322,781
Other	\$107,616
Direct Cost	\$2,522,608
Approved Budget	\$2,522,608
Federal Share	\$2,522,608
Cumulative Prior Awards for this Budget Period	\$2,522,608
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$0

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
4	\$2,522,608

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

Fiscal Information:

CFDA Number: 93.243
 EIN: 1026000618B3
 Document Number: 15SP20796B
 Fiscal Year: 2019

IC	CAN	Amount
SP	C96V014	\$0

IC	CAN	2019
SP	C96V014	\$0

SP Administrative Data:

PCC: PFS 2015 / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 6U79SP020796-04M001

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

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

SECTION III – TERMS AND CONDITIONS – 6U79SP020796-04M001

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:

Additional Costs

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

SECTION IV – SP Special Terms and Conditions – 6U79SP020796-04M001

SPECIAL TERMS

MJ Grant Language

Grant funds may not be used, directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder. Grant funds also cannot be provided to any individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders. See, e.g., 45 C.F.R. § 75.300(a) (requiring HHS to “ensure that Federal funding is expended . . . in full accordance with U.S. statutory . . . requirements.”); 21 U.S.C. §§ 812(c)(10) and 841 (prohibiting the possession, manufacture, sale, purchase or distribution of marijuana). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the DEA and under an FDA-approved investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned controlled substance under federal law.

Please email any related questions to [MJQuestions@SAMHSA.HHS.GOV](mailto: MJQuestions@SAMHSA.HHS.GOV)

SPECIAL CONDITIONS

MJ Attestation Letter

No later than **November 18, 2019**, please submit a response through eRA Commons.

Please submit an attestation statement certifying that the grantee organization/recipient, State and all sub-recipients (contractor & sub-awardee) will comply with the following Special Term of

Page-3

Award.

The attestation statement should read: I certify that the grantee organization/recipient, State and all sub-recipients will comply with the following NoA language:

Grant funds may not be used, directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder. Grant funds also cannot be provided to any individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders. See, e.g., 45 C.F.R. § 75.300(a) (requiring HHS to "ensure that Federal funding is expended . . . in full accordance with U.S. statutory . . . requirements."); 21 U.S.C. §§ 812(c)(10) and 841 (prohibiting the possession, manufacture, sale, purchase or distribution of marijuana). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the DEA and under an FDA-approved investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned controlled substance under federal law.

The attestation statement must be on letterhead and signed by the **Authorized Representative** or **Business Official**.

Please email any related questions to [MJQuestions@SAMHSA.HHS.GOV](mailto: MJQuestions@SAMHSA.HHS.GOV)

All responses to award terms and conditions must be submitted as .pdf documents in the "View Terms Tracking Details" page in eRA Commons.

For more information on how to upload a document in response to a tracked term, please reference the SAMHSA training materials on the website, which include a video to provide SAMHSA grantees a brief overview of Terms and Conditions in eRA Commons, and how to respond to tracked terms and conditions listed in your Notice of Award located at https://youtu.be/GJT74T-r_bs; and a terms and conditions reference sheet located at https://www.samhsa.gov/sites/default/files/grants/grantee_terms_reference_sheet.pdf.

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

Staff Contacts:

Mary Ewald, Program Official

Phone: (240) 276-2435 Email: [Mary.Ewald@samhsa.hhs.gov](mailto: Mary.Ewald@samhsa.hhs.gov)

Nicole Saulnier, Grants Specialist

Phone: 240-276-1165 Email: [Nicole.Saulnier@samhsa.hhs.gov](mailto: Nicole.Saulnier@samhsa.hhs.gov)