



Lori A. Shabinette
Commissioner

Katja S. Fox
Director

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

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

December 29, 2021

The Honorable Karen Umberger, Chairman
Fiscal Committee of the General Court and

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

REQUESTED ACTION

Pursuant to the provisions of RSA 14:30-a, VI, authorize the Department of Health and Human Services, Division for Behavioral Health to amend Fiscal Item 21-241 approved by the Fiscal Committee on August 20, 2021, and item #28 approved by the Governor and Executive Council on August 18, 2021, by transferring funds in the amount of \$27,000.00 for the performance of work associated with the Emergency Grants to Address Mental and Substance Use Disorders During COVID-19 effective upon Fiscal Committee and Governor and Executive Council approvals through August 19, 2022. Funding source: 100% Federal Funds.

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

<u>Class</u>	<u>Description</u>	<u>SFY22 Current Adjusted Authorized</u>	<u>Requested Action</u>	<u>Revised SFY22 Adjusted Authorized</u>
000 - 400146	Federal Funds	\$4,032,269.67	\$0.00	\$4,032,269.67
018 - 500106	Overtime	\$15,000.00	\$0.00	\$15,000.00
020 - 500200	Current Expense	\$102,740.00	(\$27,000.00)	\$75,740.00
037 - 500173	Technology Hardware	\$1,500.00	\$0.00	\$1,500.00
039 - 500188	Telecommunications	\$4,800.00	\$0.00	\$4,800.00
041 - 500801	Audit Fund Set Aside	\$4,203.60	\$0.00	\$4,203.60
042 - 500260	Additional Fringe Benefits	\$16,078.15	\$0.00	\$16,078.15
059 - 500117	Full-Time Temp	\$128,264.20	\$0.00	\$128,264.20
060 - 500601	Benefits	\$74,609.99	\$0.00	\$74,609.99
066 - 500546	Employee Training	\$5,000.00	\$0.00	\$5,000.00
102 - 500731	Contracts for Program Services	\$3,680,073.73	\$27,000.00	\$3,707,073.73
	Total	\$4,032,269.67	\$0.00	\$4,032,269.67

The Honorable Karen Umberger, Chairman
Fiscal Committee of the General Court and

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State House
Concord, New Hampshire 03301
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EXPLANATION

The US Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) awarded states Emergency Grants to Address Mental and Substance Use Disorders During COVID-19. This grant is designed to address the increase in mental health and/or substance use disorder needs as a result of COVID-19. The New Hampshire (NH) COVID-19 Rapid Crisis Response Program (NH Rapid Response) provides the funding to the ten community mental health centers for crisis intervention services, referrals to mental and substance use disorder treatment, and other related recovery supports for youth and adults impacted by the COVID-19 pandemic. The purpose of this program is to address the needs of individuals with Severe Mental Illness (SMI) or Severe Emotional Disturbance (SED), with substance use disorders (SUD), and/or co-occurring SMI/SED and SUD who are under- or uninsured.

Funds are being shifted between Class 020 (Current Expense) and Class 102 (Contracts for Program Services) in order to align the appropriations with the contracted services for this grant funding.

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. Shabinette
Commissioner



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DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION FOR BEHAVIORAL HEALTH
BUREAU OF MENTAL HEALTH SERVICES

Lori A. Shibiakette
Commissioner

Katja S. Fox
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603-271-5000 1-800-852-3345 Ext. 5000
Fax: 603-271-5058 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

July 22, 2021

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

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

REQUESTED ACTION

- Pursuant to the provisions of RSA 14:30-a, 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 Emergency Grants to Address Mental and Substance Use Disorders During COVID-19, in the amount of \$2,853,251. Effective upon Fiscal Committee and Governor and Executive Council approvals through August 19, 2022. Funding source: 100% Federal Funds.
- Pursuant to the provisions of RSA 124:15 and contingent upon approval of Requested Action #1, authorize the Department of Health and Human Services, Division for Behavioral Health, to extend one (1) temporary full-time position, a Program Specialist IV (LG 25 - Position #9T3004), responsible for overseeing the implementation of the project activities, internal and external coordination, developing materials, and conducting meetings. Effective upon Fiscal Committee and Governor and Executive Council approvals through August 19, 2022. Funding source: 100% Federal Funds.

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

<u>Class</u>	<u>Description</u>	<u>SFY22 Current Adjusted Authorized</u>	<u>Requested Action</u>	<u>Revised SFY22 Adjusted Authorized</u>
000 - 400146	Federal Funds	\$1,179,018.67	\$2,853,251.00	\$4,032,269.67
018 - 500106	Overtime	\$0.00	\$15,000.00	\$15,000.00
020 - 500200	Current Expense	\$33,120.00	\$69,620.00	\$102,740.00
037 - 500173	Technology Hardware	\$1,500.00	\$0.00	\$1,500.00
039 - 500188	Telecommunications	\$2,400.00	\$2,400.00	\$4,800.00
041 - 500801	Audit Fund Set Aside	\$1,342.60	\$2,861.00	\$4,203.60
042 - 500620	Additional Fringe Benefits	\$7,862.15	\$8,216.00	\$16,078.15
059 - 500117	Full Time Temp	\$66,514.20	\$61,750.00	\$128,264.20
060 - 500601	Benefits	\$35,940.99	\$38,669.00	\$74,609.99
066 - 500546	Employee Training	\$0.00	\$5,000.00	\$5,000.00
102 - 500731	Contracts for Program Services	\$1,030,338.73	\$2,649,735.00	\$3,680,073.73
	Total	\$1,179,018.67	\$2,853,251.00	\$4,032,269.67

The Honorable Ken Weyler, Chairman
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EXPLANATION

The US Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) is administering the Emergency Grants to Address Mental and Substance Use Disorders During COVID-19 grant. This grant is to address an expected increase in mental health and/or substance use disorder needs as a result of the current national crisis of COVID-19. Americans across the country will struggle with increases in depression, anxiety, trauma, and grief. There is also an anticipated increase in substance misuse as lives are impacted for individuals and families. The New Hampshire (NH) COVID-19 Rapid Crisis Response Program (NH Rapid Response) will provide crisis intervention services, mental and substance use disorder treatment, and other related recovery supports for youth and adults impacted by the COVID-19 pandemic. The purpose of this program is to address the needs of individuals with Severe Mental Illness (SMI) or Severe Emotional Disturbance (SED), with substance use disorders (SUD), and/or co-occurring SMI/SED and SUD who are under- or uninsured. We will also provide crisis services for other individuals in need of behavioral health supports, including health care personnel. This funding is also for one full-time temporary position, for overseeing the implementation of the project activities, internal and external coordination, developing materials, and conducting meetings. The funds being accepted in with this request are additional funds in supplementing the original award.

The funds are to be budgeted as follows:

Funds in class 018, Overtime, are for bureau staff to work additional time needed to support the program.

Funds in class 020, Current Expense, are for supplies and client incentive procurements.

Funds in class 039, Telecommunications, are for telecommunication expenses associated with the position.

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

Funds in class 042, Additional Fringe Benefits, for payments to retiree's health insurance.

Funds in class 059, Temp Full Time, are needed to pay for one (1) full-time temporary position titled Program Specialist IV (LG 25 - Position #9T3004). These funds are being accepted in to ensure the position is fully appropriated through the end of the grant period.

Funds in class 060, Benefits, are needed to pay benefits costs associated with the full-time temporary staffing and overtime. These funds are being accepted in to ensure the position is fully appropriated through the end of the grant period.

Funds in class 066, Employee Training, are for employee training registrations.

Funds in class 102, Contracts for Program Services, are to contract with the Community Mental Health Centers to provide crisis intervention services, mental and substance use disorder treatment, and other related recovery supports for youth and adults impacted by the COVID-19 pandemic.

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

1) *List of personnel involved:* One (1) full-time temporary position titled Program Specialist IV (LG 25 - Position #9T3004).

2) *Nature, Need, and Duration:* This position is responsible for overseeing the implementation of the project activities, internal and external coordination, developing materials, and conducting meetings. The position will also

The Honorable Ken Weyler, Chairman
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develop and oversee subcontracts and coordinate project communications, information dissemination, training, and reporting. The proposed grant funding for this position ends on May 31, 2022.

3) *Relationship to existing agency programs:* This position will work in coordination with the ten (10) Community Mental Health Centers to oversee and support implementation of the required grant activities. The position will also work in collaboration with the University of NH's Institute for Health Policy and Practice to collect, analyze, and report data and program evaluation activities as required by the grant.

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

5) *Why wasn't funding included in the agency's budget request?* These funds were unanticipated at the time the budget was created.

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

7) *Estimate the funds required to continue this position:* Funds for these positions are estimated at \$98,782 for a full fiscal year.

Area served: Statewide.

Source of Funds: 100% Federal Funds

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

Respectfully submitted,



For

Lori A. Shibinette
Commissioner

**Division of Behavioral Health
Emergency Grants to Address Mental and Substance Use Disorders During COVID-19**

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

Agency Income:

Grant Award H79FG000210	\$2,000,000.00
Grant Award H79FG000652	\$2,859,647.00

Total Funds Available	\$4,859,647.00
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Prior Fiscal Year Expenses	(\$816,581.33)
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Prior Fiscal Year Expenses	(\$816,581.33)
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SFY 2022 Adjusted Authorized Appropriations	(\$1,179,018.67)
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Allocated Indirect Costs	(\$4,400.00)
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Total Appropriations	(\$1,183,418.67)
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Net Grant Funds Remaining	\$2,859,647.00
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This Request	\$2,853,251.00
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Recipient Information	Federal Award Information																								
1. Recipient Name HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE/DEPT OF 129 PLEASANT ST CONCORD, NH 03301	11. Award Number 6H79FG000210-01M004																								
2. Congressional District of Recipient 02	12. Unique Federal Award Identification Number (FAIN) H79FG000210																								
3. Payment System Identifier (ID) 1026000618B3	13. Statutory Authority Emergency COVID-19 is authorized under 501(o) of the PHS Act																								
4. Employer Identification Number (EIN) 026000618	14. Federal Award Project Title NH Rapid Response to Behavioral Health Needs During Covid- 19																								
5. Data Universal Numbering System (DUNS) 011040545	15. Assistance Listing Number 93.665																								
6. Recipient's Unique Entity Identifier	16. Assistance Listing Program Title Emergency Grants to Address Mental and Substance Use Disorders During COVID-19																								
7. Project Director or Principal Investigator Erica Ungarelli erica.ungarelli@dhhs.nh.gov 603-271-5006	17. Award Action Type Amendment																								
8. Authorized Official Kyra Leonard Kyra.Leonard@dhhs.nh.gov 603-271-5052	18. Is the Award R&D? No																								
Federal Agency Information	<table border="1"> <thead> <tr> <th colspan="2">Summary Federal Award Financial Information</th> </tr> </thead> <tbody> <tr> <td colspan="2">19. Budget Period Start Date 04/20/2020 - End Date 08/19/2022</td> </tr> <tr> <td>20. Total Amount of Federal Funds Obligated by this Action</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td> 20a. Direct Cost Amount</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td> 20b. Indirect Cost Amount</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>21. Authorized Carryover</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>22. Offset</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>23. Total Amount of Federal Funds Obligated this budget period</td> <td style="text-align: right;">\$2,000,000</td> </tr> <tr> <td>24. Total Approved Cost Sharing or Matching, where applicable</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>25. Total Federal and Non-Federal Approved this Budget Period</td> <td style="text-align: right;">\$2,000,000</td> </tr> <tr> <td colspan="2">26. Project Period Start Date 04/20/2020 - End Date 08/19/2022</td> </tr> <tr> <td>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period</td> <td style="text-align: right;">\$2,000,000</td> </tr> </tbody> </table>	Summary Federal Award Financial Information		19. Budget Period Start Date 04/20/2020 - End Date 08/19/2022		20. Total Amount of Federal Funds Obligated by this Action	\$0	20a. Direct Cost Amount	\$0	20b. Indirect Cost Amount	\$0	21. Authorized Carryover	\$0	22. Offset	\$0	23. Total Amount of Federal Funds Obligated this budget period	\$2,000,000	24. Total Approved Cost Sharing or Matching, where applicable	\$0	25. Total Federal and Non-Federal Approved this Budget Period	\$2,000,000	26. Project Period Start Date 04/20/2020 - End Date 08/19/2022		27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$2,000,000
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9. Awarding Agency Contact Information Lesley Schrier Center for Flex Grants lesley.schrier@samhsa.hhs.gov 240-276-0566	28. Authorized Treatment of Program Income Additional Costs																								
10. Program Official Contact Information Valerie Kolick Center for Flex Grants valerie.kolick@samhsa.hhs.gov 240-276-1738	29. Grants Management Officer - Signature Lesley Schrier																								
30. Remarks Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.																									



Notice of Award

Issue Date: 05/26/2021

E-COVID
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Center for Flex Grants

Award Number: 6H79FG000210-01M004
FAIN: H79FG000210
Program Director: Erica Ungarelli

Project Title: NH Rapid Response to Behavioral Health Needs During Covid- 19

Organization Name: HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF

Authorized Official: Kyra Leonard

Authorized Official e-mail address: Kyra.Leonard@dhhs.nh.gov

Budget Period: 04/20/2020 – 08/19/2022
Project Period: 04/20/2020 – 08/19/2022

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 HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF in support of the above referenced project. This award is pursuant to the authority of Emergency COVID-19 is authorized under 501(o) 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.

This award addresses the following Amendment action: No-Cost Extension

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,
Lesley Schrier
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 6H79FG000210-01M004

Award Calculation (U.S. Dollars)

Personnel(non-research)	\$76,750
Fringe Benefits	\$38,669
Supplies	\$5,620
Contractual	\$1,792,945
Other	\$81,616
Direct Cost	\$1,995,600
Indirect Cost	\$4,400
Approved Budget	\$2,000,000
Federal Share	\$2,000,000
Cumulative Prior Awards for this Budget Period	\$2,000,000

AMOUNT OF THIS ACTION (FEDERAL SHARE) \$0

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	\$2,000,000

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

Fiscal Information:

CFDA Number: 93.665
 EIN: 1026000618B3
 Document Number: 20FG00210AC3
 Fiscal Year: 2020

IC	CAN	Amount
FG	C96D320	\$0

IC	CAN	2020
FG	C96D320	\$0

FG Administrative Data:

PCC: E-COVID / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 6H79FG000210-01M004

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 – 6H79FG000210-01M004

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 (FAPIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

SECTION IV – FG Special Terms and Conditions – 6H79FG000210-01M004**REMARKS****Post Award Amendment - No Cost Extension**

This award approves a 12-month **NO COST EXTENSION** extending the budget and project period from **08/19/2021 to 08/19/2022** for your current award funded through opportunity announcement **FG-20-006, Emergency Grants to Address Mental and Substance Use Disorders During COVID-19**.

You are required to continue currently approved activities in your most recently approved budget.

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

You are required to submit a 16-month **FFR (SF-425) (PDF | 268 KB)** no later than 90 days after the close of the original project period as well as a final FFR no later than 90 days after

the end of the No Cost Extension project period as per Closeout guidance. <https://www.samhsa.gov/grants/grants-management/grant-closeout>

- o Annual FFR (16-month) Due: November 19, 2021
- o Final FFR Due: 90 days after the end of the No Cost Extension

STANDARD TERMS OF AWARD:

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.

STANDARD TERMS AND CONDITIONS

Closeout

In accordance with 45 CFR 75.309 and 75.381, recipients must liquidate all obligations incurred under an award not later than ninety (90) days after the end of award's obligation and expenditure period (i.e., the project period) which also coincides with the due date for submission of the FINAL Federal Financial Report (SF-425). After ninety (90) days, letter of credit accounts are locked. SAMHSA does not approve extensions to the ninety (90) day post-award reconciliation/liquidation period. Therefore, recipients are expected to complete all work and reporting within the approved project period and the aforementioned 90-day post-award reconciliation/liquidation period. Recipients (late) withdrawal requests occurring after the aforementioned periods are denied.

Refer to the following SAMHSA for Closeout Standard Terms and Conditions <https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>.

Additional information on closeout is available at <https://www.samhsa.gov/grants/grants-management/grant-closeout>.

Staff Contacts:

Valerie Kolick, Program Official
Phone: 240-276-1738 Email: valerie.kolick@samhsa.hhs.gov

Lesley Schrier, Grants Specialist
Phone: 240-276-0566 Email: lesley.schrier@samhsa.hhs.gov



Recipient Information	Federal Award Information																								
1. Recipient Name HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT. OF 129 PLEASANT ST CONCORD, NH 03301	11. Award Number 6H79FG000652-01M001																								
2. Congressional District of Recipient 02	12. Unique Federal Award Identification Number (FAIN) H79FG000652																								
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20a. Direct Cost Amount	\$-6,396																								
20b. Indirect Cost Amount	\$6,396																								
21. Authorized Carryover	\$0																								
22. Offset	\$0																								
23. Total Amount of Federal Funds Obligated this budget period	\$2,859,647																								
24. Total Approved Cost Sharing or Matching, where applicable	\$0																								
25. Total Federal and Non-Federal Approved this Budget Period	\$2,859,647																								
26. Project Period Start Date 02/01/2021 - End Date 05/31/2022																									
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$2,859,647																								
10. Program Official Contact Information Valerie Kolick Center for Flex Grants valerie.kolick@samhsa.hhs.gov 240-276-1738	28. Authorized Treatment of Program Income Additional Costs																								
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.	29. Grants Management Officer - Signature Lesley Schrier																								



E-COVID
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Notice of Award

Issue Date: 04/20/2021

Center for Flex Grants

Award Number: 6H79FG000652-01M001
FAIN: H79FG000652
Program Director: Audrey Orphanos

Project Title: NH Rapid Response to Behavioral Health Needs During Covid- 19

Organization Name: HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF

Authorized Official: Kyra Leonard

Authorized Official e-mail address: Kyra.Leonard@dhhs.nh.gov

Budget Period: 02/01/2021 – 05/31/2022

Project Period: 02/01/2021 – 05/31/2022

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 HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF in support of the above referenced project. This award is pursuant to the authority of Emergency COVID-19 is authorized under 501(o) 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.

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,
Lesley Schrier
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 6H79FG000652-01M001

Award Calculation (U.S. Dollars)

Personnel(non-research)	\$76,750
Fringe Benefits	\$38,669
Supplies	\$5,620
Contractual	\$2,649,735
Other	\$82,477
Direct Cost	\$2,853,251
Indirect Cost	\$6,396
Approved Budget	\$2,859,647
Federal Share	\$2,859,647
Cumulative Prior Awards for this Budget Period	\$2,859,647

AMOUNT OF THIS ACTION (FEDERAL SHARE) \$0

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	\$2,859,647

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

Fiscal Information:

CFDA Number: 93.665
 EIN: 1026000618B3
 Document Number: 21FG00652AC5
 Fiscal Year: 2021

IC	CAN	Amount
FG	C96D470	\$0

IC	CAN	2021
FG	C96D470	\$0

FG Administrative Data:

PCC: ECOVIDS / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 6H79FG000652-01M001

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 – 6H79FG000652-01M001

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

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

Treatment of Program Income:

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

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

SECTION IV – FG Special Terms and Conditions – 6H79FG000652-01M001**REMARKS****COVID-19 Removal of Special Condition of Award**

This award removes the following *Special Conditions of Award* based on documentation submitted on April 9, 2021.

COVID-19 Funding Limitations (70/10/20) due on March 1, 2021 based on the documentation received on April 9, 2021.

Revised Budget due on March 1, 2021 based on the documentation received on April 9, 2021.

- o The recipient is responsible for ensuring that all costs in supplemental grant FG 652 do not duplicate costs in the parent grant FG 210. Specifically, PERSONNEL costs and SUPPLY costs may not overlap.
- o Costs and services in grant FG 652 are intended to commence as of

this Notice of Award and are not intended to commence at the end of the project period of grant FG 210.

Revised SF 424A due on March 1, 2021 based on the documentation received on April 9, 2021.

STANDARD TERMS OF AWARD:

Compliance with 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 NONCOMPLIANCE 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:

Valerie Kolick, Program Official
Phone: 240-276-1738 Email: valerie.kolick@samhsa.hhs.gov

Lesley Schrier, Grants Specialist
Phone: 240-276-0566 Email: lesley.schrier@samhsa.hhs.gov