



**BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS**

Award Contract Grant

Requested Board Meeting Date: June 23, 2020

* = Mandatory, information must be provided

or Procurement Director Award

***Contractor/Vendor Name/Grantor (DBA):**

Substance Abuse and Mental Health Services Administration (SAMHSA)

***Project Title/Description:**

Unified Medication Assisted Treatment Targeted Engagement Response (U-MATTER)

***Purpose:**

Post-Award Amendment for Change in Scope: On April 22, 2020, County's post award amendment for a change in scope was approved in the Notice of Award (NOA) Grant Number 6H79TI081559-02M007. NOA approved a decrease in the SPARS-CSAT Target Intake Goal to 45 individuals in Year 2 and 55 individuals in Year 3. Year 1 target goal (72 individuals) and all other provisions of grant remain in effect.

***Procurement Method:**

Not applicable

***Program Goals/Predicted Outcomes:**

U-MATTER will provide access to Medication Assisted Treatment (MAT) for 172 individuals during the projects three year period (FFY2018-2021). In addition, outreach to 2,160 community members to promote access to MAT and to coordinate treatment referrals. Law Enforcement, Arizona Superior Court in Pima County- Pretrial Services, Fire Departments and other community agencies will receive training in best-practices in each of the three program years.

***Public Benefit:**

The program will continue to address the opioid epidemic by connecting individuals with substance-use disorders, who would otherwise be arrested, with medication assisted treatment and recovery support service to help them address their disorder and initiate their pathway to recovery. In addition, this program is developing referral pathways for criminal justice systems to treatment providers, to increase and enhance access to services for community members.

***Metrics Available to Measure Performance:**

Project Director, Grant Evaluator and project team utilize project data to evaluate the project regarding its impact on health disparities on a quarterly basis or more often as needed. Based on this ongoing evaluation, the project team implements quality improvement, which are monitored for effectiveness and revised as needed.

***Retroactive:**

Yes retroactive, the effective date for approval is the date of the Notice of Award (NOA) Grant Number 6H79TI081559-02M007, April 22, 2020. Due to COVID-19 and Governor's Executive Orders, Program Manager was out of the office on Pandemic Leave. She was recalled to the office when appointing authority deemed employee as essential. Program Manager has been working with Grants Management and Innovation staff upon her return.

G.M. Approved 6-18-20 JSS

Contract / Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____
Commencement Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____
 Expense Amount: \$* _____ Revenue Amount: \$ _____

***Funding Source(s) required:**

Funding from General Fund? Yes No If Yes \$ _____ % _____
Contract is fully or partially funded with Federal Funds? Yes No
If Yes, is the Contract to a vendor or subrecipient? _____
Were insurance or indemnity clauses modified? Yes No
If Yes, attach Risk's approval.
Vendor is using a Social Security Number? Yes No
If Yes, attach the required form per Administrative Procedure 22-10.

Amendment / Revised Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____
Amendment No.: _____ AMS Version No.: _____
Commencement Date: _____ New Termination Date: _____
Prior Contract No. (Synergen/CMS): _____
 Expense or Revenue Increase Decrease Amount This Amendment: \$ _____
Is there revenue included? Yes No If Yes \$ _____

***Funding Source(s) required:**

Funding from General Fund? Yes No If Yes \$ _____ % _____

Grant/Amendment Information (for grants acceptance and awards) Award Amendment

Document Type: GTAM Department Code: CA Grant Number (i.e., 15-123): 20*056
Commencement Date: 09/30/2019 Termination Date: 09/29/2021 Amendment Number: 2
 Match Amount: \$ -- Revenue Amount: \$ --

***All Funding Source(s) required:** SAMHSA

***Match funding from General Fund?** Yes No If Yes \$ -- % --
***Match funding from other sources?** Yes No If Yes \$ -- % --

***Funding Source: --**

***If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?** Direct Federal funding

Contact: Mayra Ramos, Project Manager
Department: CA-Criminal Justice Reform Initiatives Telephone: (520) 724-4716
Department Director Signature/Date: [Signature] June 17, 2020
Deputy County Administrator Signature/Date: [Signature]
County Administrator Signature/Date: C. Dunkelberg 6/18/20
(Required for Board Agenda/Addendum Items)



PDOA-18
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Center for Substance Abuse Treatment

Grant Number: 6H79TI081559-02M007

FAIN: H79TI081559

Program Director: Mayra Ramos

Project Title: Unified Medication Assisted Treatment Targeted Engagement Response (U-MATTER)

Organization Name: PIMA COUNTY COMMUNITY AND ECONOMIC DEVELOPMENT DEPARTMENT

Business Official: Regina Kelly

Business Official e-mail address: Regina.Kelly@pima.gov

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

Project Period: 09/30/2018 – 09/29/2021

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 PIMA COUNTY COMMUNITY AND ECONOMIC DEVELOPMENT DEPARTMENT in support of the above referenced project. This award is pursuant to the authority of PHS Act, Section 509; 42 U.S.C 290bb-2 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 requests:

- Change in Scope (6H79TI081559-02L001)

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,
Andrew Payne
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 6H79TI081559-02M007

Award Calculation (U.S. Dollars)

| | |
|--|------------------|
| Personnel(non-research) | \$66,300 |
| Fringe Benefits | \$23,271 |
| Travel | \$4,364 |
| Supplies | \$1,548 |
| Contractual | \$369,003 |
| Other | \$55,887 |
| | |
| Direct Cost | \$520,373 |
| Approved Budget | \$520,373 |
| Federal Share | \$520,373 |
| Cumulative Prior Awards for this Budget Period | \$520,373 |
| | |
| AMOUNT OF THIS ACTION (FEDERAL SHARE) | \$0 |

| SUMMARY TOTALS FOR ALL YEARS | |
|------------------------------|-----------|
| YR | AMOUNT |
| 2 | \$520,373 |

*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: 1866000543B2
 Document Number: 18TI81559A
 Fiscal Year: 2019

| | | |
|----|---------|--------|
| IC | CAN | Amount |
| TI | C96N076 | \$0 |

| IC | CAN | 2019 |
|----|---------|------|
| TI | C96N076 | \$0 |

TI Administrative Data:

PCC: PDOA-18 / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 6H79TI081559-02M007

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 – 6H79TI081559-02M007

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 – TI Special Terms and Conditions – 6H79TI081559-02M007**REMARKS****Post Award Amendment - Change in Scope**

Effective the date of this Notice of Award, this award approves a change in scope to your **PDOA-18** per the post award amendment request submitted/dated **March 17, 2020**. This action is based on the understanding that no additional federal funds will be requested or provided now or in the future. In other words, this change in scope must be supported within the level of grant funds currently awarded and this approval in no way obligates the **Center for Treatment**, SAMHSA to any further support.

This award also reflects acceptance of the response(s) to the Request for Additional Materials (RAM) received on **March 18, 2020**.

This is a post-award amendment; therefore, this NoA reflects the current budget year only.

STANDARD TERMS OF AWARD

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

Staff Contacts:

Gerlinda Somerville, Program Official

Phone: 240-276-1613 **Email:** Gerlinda.Somerville@samhsa.hhs.gov

Andrew Payne, Grants Specialist

Phone: (240) 276-1238 **Email:** Andrew.Payne@samhsa.hhs.gov **Fax:** (240) 276-1430