



BOARD OF SUPERVISORS AGENDA ITEM REPORT

CONTRACTS / AWARDS / GRANTS

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: January 14, 2020

** = Mandatory, information must be provided*

or Procurement Director Award ☐

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

Arizona Board of Regents - University of Arizona

***Project Title/Description:**

Bridges to Wellness (B-Well).

***Purpose:**

The purpose of Bridges to Wellness (B-Well) is to develop a solid foundation, infrastructure, and capacity to deliver and sustain quality, accessible, evidence-based Substance Abuse (SA), HIV, and Viral Hepatitis (VH) prevention services to reduce the onset of SA, HIV and VH infection among system-involved minority youth ages 13-17 in Pima County. The Pima County Health Department (PCHD) is responsible for only the HIV prevention services.

Amendment #3 is to approve funding for Year 4 in the amount of \$18,751.00 and include the Notice of Award from the Substance Abuse and Mental health Services Administration (SAMHSA) for this grant year.

***Procurement Method:**

This Revenue Contract is a non-Procurement contract and not subject to Procurement rules.

***Program Goals/Predicted Outcomes:**

Goal 1: Conduct a needs assessment relevant to substance abuse, HIV/AIDS, and VH in Pima County and develop a corresponding comprehensive strategic plan;

Goal 2: Mobilize and build capacity to address SA, HIV and VH prevention needs among racial/ethnic minority, system-involved youth ages 13-17 years in Pima County;

Goal 3: Implement evidence-based SA/HIV/VH prevention intervention strategies with racial/ethnic minority, system-involved youth ages 13-17 years in Pima County; and

Goal 4: Assess performance of B-Well through process, implementation, and outcome evaluations and utilize findings for ongoing continuous quality improvement and to assess impact of the project on behavioral health disparities.

***Public Benefit:**

Reduction of substance abuse, HIV and viral hepatitis incidence in Pima County minority youth ages 13-17.

***Metrics Available to Measure Performance:**

- 1) Provide HIV testing to 560 youth
- 2) Provide training on HIV testing and counseling to identified medical providers
- 3) Collect and submit data

***Retroactive:**

Yes. The grant funding for the 4th Year of the contract began September 30, 2019. However, this amendment was not received from the University of Arizona until December 13, 2019. If not approved, Pima County will not be able to continue this program in collaboration with the U of A.

Contract / Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e.,15-123): _____

Effective 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.: _____

Effective 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 ☒ AmendmentDocument Type: GTAM Department Code: HD Grant Number (i.e.,15-123): 20-23Effective Date: 09/30/2019 Termination Date: 09/29/2020 Amendment Number: 03☐ Match Amount: \$ _____ ☒ Revenue Amount: \$ 18,751.00***All Funding Source(s) required:** Substance Abuse and Mental Health Services Administration (SAMHSA) (federal) via Arizona Board of Regents***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)?**Via the Arizona Board of RegentsContact: Sharon GrantDepartment: HealthTelephone: 724-7842Department Director Signature/Date: Bob Epler 12/23/2019Deputy County Administrator Signature/Date: Sharon 12/30/2019County Administrator Signature/Date: C. Decker 12/31/19
(Required for Board Agenda/Addendum Items)

GRANT APPLICATION APPROVAL REQUEST

Instructions: Fill out the top section of this form completely. Contact the program Grants Management & Innovation (GMI) Lead if you require assistance (724-2240). Email your completed request to: GMI@pima.gov. Your request will be forwarded to County Administration for review. Notification of approval requests should be submitted at least 15 business days prior to the application's submission deadline (AP 5-1 Procedure).

Requesting department or entity:	Health	Date: 12/13/19
Contact information:	Name: Sharon Grant	Telephone: (520) 724-7842
Funding opportunity title:	Bridges to Wellness (B-Well)	
Link to opportunity:	Applied for 3 years ago. CFDA 93.243	
Funding agency:	Substance Abuse and Mental Health Services Administration (SAMHSA) via U of Arizona	
Amount to be requested:	\$ 18,751.00	
Due date and time:	Select One	
What are you going to spend the money on?	<p>As with previous years, the majority of this year's budget will be spent on personnel: - .15 FTE for Program Coordinator for HIV testing services = \$9,866 - .15 FTE (total for 2 people) for staff to conduct outreach, counseling, testing and other HIV prevention activities = \$6,944</p> <p>Other expenses include: - Travel (mileage) = \$373 - HIV Rapid Test Kits @ \$8 each = \$960 - Project and medical supplies = \$608</p>	
What will be the benefit to Pima County?	<p>Bridges to Wellness (B-Well) is a collaboration between the University of Arizona's Southwest Institute for Research on Women (SIROW) (applicant organization), Intermountain Centers for Human Development (ICHD - youth services provider), the Pima County Health Department (PCHD – the HIV/AIDS counseling, testing, training provider), and the Community Prevention Coalition. The purpose of the project, B-Well, is to develop a solid foundation, infrastructure, and capacity to deliver and sustain quality, accessible, evidence-based Substance Abuse (SA), HIV, and Viral Hepatitis (VH) prevention services to reduce the onset of SA, HIV and VH infection among system-involved minority youth ages 13-17 in Pima County. The Pima County Health Department (PCHD) is responsible for only the HIV prevention services.</p> <p>The project aims to serve 560 youth over the length of the project.</p>	
Indirect costs – check one:	<input type="checkbox"/> I will be requesting indirect costs. Indirect-cost rate to be requested: _____ % <input checked="" type="checkbox"/> I have attached a request for waiver of indirect costs (GMI Intranet) <input type="checkbox"/> I need help understanding indirect costs	
By: <u>[Signature]</u> Date: <u>12/13/19</u> Department Director or Designee		

GRANT COST/BENEFIT ANALYSIS**To be completed by GMI staff**

CFDA No.	93.243		
Competitive Criteria:	Pima County is currently in year 4 of its 5 year agreement with the U of A, first approved by the BOS on 1/17/17. Intermountain Centers and the Community Prevention Coalition have also received this funding. The Do-not-exceed amount for the total program period (9/30/16 - 9/29/2021) is \$90,651. This is a cost-reimbursement contract.		
Other Factors:	The U of A received \$234,598 from SAMHSA; SAMHSA's title for this program is "Capacity Building Initiative for Substance Abuse and HIV Prevention Services for At-Risk Racial/Ethnic Minority Youth and Young Adults". SAMHSA made 24,889,726 available to 19 applicants who are community-level public and private non-profit entities.		
Number of Awards:	19	Total amount to be awarded: \$ 24,889,726.00	
Match Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If required what is the amount/percent: _____			
Terms Notes (e.g. unusual restrictions, reporting burdens, etc.):	Compliance with GPRA standards apply. Amendment 3 of the UA agreement states carryover is not automatic, and any funding not fully expended in prior budget periods cannot be carried over to future periods without formal documentation. Pg. 2 of the UA agreement states funds may only be used to purchase supplies, equipment, travel and employ personnel necessary to provide direct service; however 2CFR200 also applies (per the UA contract) and indirect costs at the 10% de minimis are allowed per Federal guidelines.		
Will this project require additional office/project space?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Will this project require staff time that cannot be paid for by the grant?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Will your project require any equipment items over \$5,000 per item?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the proposal use a fixed price contract?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is this project subject to Human Subjects compliance?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does this project involve subrecipients?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is there a Statutory Funding Preference from the funding agency?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Allowable Indirect Rate: 10% If Indirect is not allowed, attach documentation.			
List any other proposal or funder specific requirements:	Indirect costs were not requested in the original application, which was submitted before AP5-1 thru 4 were distributed. Per the attached waiver, requesting indirect costs for future years would reduce the amount of direct services provided to youth/young adults as the negotiated budget strictly provides for personnel and supplies related to direct service. PCHD spent the entirety of last year's award on direct service, and anticipates spending the entirety of this award to provide direct service as well.		
GMI notes & recommendations: Completed by: MH			
By: <u>Amy Fish</u>		Date: <u>12/31/19</u>	
GMI Director			
County Administrator Approval Request			
Approved: <u> / / </u> Not Approved: _____ Subject to Further Review: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If your project is subject to further review, please contact your GMI Lead to discuss necessary revisions prior to resubmission of the Grant Approval Application Request.			
By: <u>[Signature]</u>		Date: <u>12-31-2019</u>	
County Administrator or Designee			

REQUEST FOR WAIVER OF INDIRECT COSTS

Requestor (Department Lead)	Sharon Grant
Project Title	Bridges to Wellness (B-Well)
Sponsor Due Date:	N/A - Amendment
GMI Lead	

Pima County's Indirect Cost Waiver Policy:

Refer to County Administrator's March 5, 2019 directive regarding recovery of indirect costs:
"No grant acceptance on behalf of the County is to be processed unless there is a clear indication that indirect costs can and are being reimbursed" (insert link to memo).

Instructions for Requesting Indirect Cost Waiver

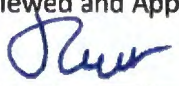
Please be aware the request for waiver must be submitted with the Grant Application Approval Request. All requests for waiver of indirect costs must present a compelling reason. Reasons that do not meet the "compelling reason" justification include:

- ✓ An application will be more competitive without indirect costs requested
- ✓ A budget cut is anticipated in future years

We are seeking a waiver of indirect costs for this project based on the following:

The University of Arizona invited the Pima County Health Department to participate in this project in 2016. The five year budget was negotiated at that time and does not include indirect costs.

The total budget is only \$18,751 per year. Adding indirect costs would mean a reduction in the amount the grant pays for current staff or HIV tests that can be conducted.

Reviewed and Approved by: 	Date: <u>12/31/2019</u>
County Administrator or his Designee	

Approved as this is year 3 of an ongoing grant. Will not be approved for future grants.



MODIFICATION NO. 3

TO THE

COST REIMBURSABLE SUBCONTRACT

BETWEEN

ARIZONA BOARD OF REGENTS, UNIVERSITY OF ARIZONA

AND

Pima County Government, Pima County Health Department

UNDER PURCHASE ORDER NO. 363753

This Modification revises the above-referenced Subcontract Agreement as follows:

September 30, 2019 to September 29, 2020 is hereby added to the Obligated Period of Performance.

The Obligated Amount of Funding for Project Year 4 is **\$18,751**. The Budget and Budget Justification are included on the following page(s) and incorporated as Appendix A to this Modification.

Total Amount of Funds Obligated to Date are **\$68,548.26**.

Carryover is not automatic, the "Total Amount of Funds Obligated to Date" stated above may not reflect the actual balance available. The Subrecipient is responsible for tracking unobligated balances and subsequent carryover approvals from prior budget periods. In the event that funding was not fully expended by the Subrecipient during the prior period, the Subrecipient is not authorized to use funds from any prior periods, unless approval is granted by ARIZONA.

The Scope of Work shall remain unchanged.

Prime Award Modifications 04, 04S1 and 04M001 are included on the following page(s) and incorporated as Appendix B to this Modification.

All other terms and conditions of this Subcontract Agreement remain in full force and effect.

FOR Pima County Government, Pima County Health Department:

Date

Date

12/16/19
Date

Cindy Nguyen, Deputy County Attorney

12/23/2019
Date

Bob Ehl

FOR THE ARIZONA BOARD OF REGENTS, UNIVERSITY OF ARIZONA:

Date

Stephen G. Harsy, PhD
Director, Contracting and Preaward Services

Appendix A

Pima County Health Department (PCHD)

Name	Service	Rate	Other	Cost
Pima County Health Department (Miguel Soto)	Program Coordinator for HIV testing services and training for Project Staff	.15 FTE @ \$6,962 salary and \$2,904 ERE		\$9,866 Yrs 1-5
Pima County Health Department	HIV Rapid Test Kits Year One (26 tests year 1 for B-Well participants and 15 tests for community youth done at targeted outreach events)	\$8.00 per test		Yr 1 \$328 Yr 2 \$672 Yr 3 \$960 Yr 4 \$960 Yr 5 \$960
Pima County Health Department (CDI/Outreach Staff)	Staff to conduct outreach, counseling, testing and other applicable HIV prevention activities (2 staff at 6.25% - 7.5%FTE)	12.5%-15% FTE ERE calculated at 30% See narrative for annual salary		Yr 1 \$5,787 Yrs 2-5 \$6,944

Name	Service	Rate	Other	Cost
Pima County Health Department	<u>Mileage to travel to and outreach events</u> 2 event in year 1	30 miles(round trip) x 2 x.445/mile		Yr 1 \$26
	4 events/year in years 2-5	30 miles(round trip) x 4 x.445/mile		Yrs 2-5 \$52
	<u>Mileage to travel to and from Inter-mountain in Tucson</u> 6 trips in year 1	20 miles round trip x 6 x.445/mile		Yr 1 \$53
	12 trips years 2-5	20 miles round trip 12 x.445/mile		Yrs 2-5 \$107
	<u>Mileage to travel to and from Inter-mountain in Sells</u> in years 3-5	120 miles (round trip) x 4 x.445/mile		Yrs 3-5 \$214
Pima County Health Department	Project and Medical Supplies	Varies		Yr 1 \$0
	Needed to conduct testing (gauze, alcohol, band aids) and other project specific supplies.			Yr 2 \$697
				Yr 3-5 \$608
			TOTAL	See Chart below

Category	Year 1	Year 2	Year 3	Year 4	Year 5	Total Contractual Cost
Contractual	\$16,060	\$18,338	\$18,751	\$18,751	\$18,751	\$90,651

JUSTIFICATION:

Program Coordinator, Miguel Soto: This position directs the overall operation of Pima County's component of the project; is responsible for coordinating staff; coordinating and developing partnerships with other agencies; participating in program planning; leading HIV Training to build capacity among youth professionals and preparation of program reports related

to Pima County's role in the project. The annual salary and ERE is \$65,775.00 and will be covered at .15% FTE during PYs 1 -5 of the contract, totaling \$9,866 per year.

HIV Rapid Test Kits

Year One (26 tests for B-Well participants and 15 tests for community youth done at targeted outreach events) \$8.00 per test x 41 tests - \$328.00

Year Two (54 tests for B-Well participants and 30 tests for community youth done at targeted outreach events) \$8.00 per test x 84 tests - \$672.00

Year Three (80 tests for B-Well participants and 40 tests for community youth done at targeted outreach events) \$8.00 per test x 120 tests - \$960.00

Year Four (80 tests for B-Well participants and 40 tests for community youth done at targeted outreach events) \$8.00 per test x 120 tests - \$960.00

Year Five (80 tests for B-Well participants and 40 tests for community youth done at targeted outreach events) \$8.00 per test x 120 tests - \$960.00

CDI/Outreach Staff

These staff will be responsible for conduction HIV testing, follow-up on reports of actual or suspected disease, locate affected persons and their contacts and provide partner services and linkage to care. These staff members will also counsel and educate the target population about disease prevention; confer with staff of medical facilities, visit physicians and laboratories; enter, track and prepare data for program reports. The annual salary and ERE is \$46,293 and each position (2) will be covered at 6.25% FTE during PY 1 totaling \$5,787 and 7.5% FTE during PY 2-5 of the contract, totaling \$6,944 per year.

Mileage

Mileage to travel to and from 2-4 outreach events per year.

Year1 = 30 miles round trip at .445/mile two times per year one totals \$26.

Year 2-5 = 30 miles round trip at .445/mile four times per year totals \$52.

Mileage to travel to Intermountain Tucson, AZ testing site to conduct testing, education and follow up services

Year1 = 20 miles round trip at .445/mile six times per year totals \$53.

Year 2-5 = 20 miles round trip at .445/mile twelve times per year totals \$107.

Mileage to travel to site to Intermountain Sells, AZ testing to conduct testing, education and follow up services

Year 3-5 = 120 miles round trip at .445/mile four times per year totals \$214.

Appendix B



Notice of Award

HIV CBI

Issue Date: 07/27/2019

Department of Health and Human Services

Substance Abuse and Mental Health Services Administration

Center for Substance Abuse Prevention

Grant Number: 5H79SP021778-04

FAIN: H79SP021778

Program Director: Alison Greene

Project Title: Bridges to Wellness (B-Well)

Organization Name: UNIVERSITY OF ARIZONA

Business Official: Paul Sandoval

Business Official e-mail address: sponsor@email.arizona.edu

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

Project Period: 09/30/2016 – 09/29/2021

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$234,598 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to UNIVERSITY OF ARIZONA 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 – 5H79SP021778-04**Award Calculation (U.S. Dollars)**

Personnel(non-research)	\$70,531
Fringe Benefits	\$22,006
Travel	\$200
Supplies	\$1,785
Contractual	\$98,300
Other	\$14,794
 Direct Cost	 \$207,616
Indirect Cost	\$26,982
Approved Budget	\$234,598
Federal Share	\$234,598
Cumulative Prior Awards for this Budget Period	\$0
 AMOUNT OF THIS ACTION (FEDERAL SHARE)	 \$234,598

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
4	\$234,598
5	\$234,598

*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:	1742652689C5
Document Number:	16SP21778A
Fiscal Year:	2019

IC	CAN	Amount
SP	C96V040	\$234,598

IC	CAN	2019	2020
SP	C96V040	\$234,598	\$234,598

SP Administrative Data:

PCC: HIV-CBI / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 5H79SP021778-04

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 – 5H79SP021778-04

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 – 5H79SP021778-04

REMARKS

Continuation Award

1. This Notice of Award (NoA) is issued to inform your organization that the application submitted for the **Capacity Building Initiative for Substance Abuse (SA) and HIV Prevention Services for At-Risk Racial/Ethnic Minority Youth AND Young Adults** program is being continued.

1a) This award reflects acceptance of the attestation letter signed and dated *January 31, 2019* by the Authorized Representative of the Organization, that there are no budget changes above 25% of the total previous budget period in response to the continuation application request.

2. Key Staff

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

Alison Greene **Program Director @ 30%** level of effort
Monica Davis **Project Coordinator @ 45%** level of effort
Josephine Korchmaros **Project Evaluator @ 10%** level of effort

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.

For additional information on how to submit a post-award amendment, please visit the SAMHSA website: <https://www.samhsa.gov/grants/grants-management/post-award-changes>. Any technical questions regarding the submission process should be directed to the eRA Service Desk: <http://grants.nih.gov/support/>.

3. All responses to award terms and conditions and prior approval requests must be submitted in eRA Commons.

For additional information on how to upload a document in response to a tracked term, please reference under heading **4 Additional Materials grantee** in the User Guide located at: https://era.nih.gov/files/TCM_User_Guide_Granttee.pdf

4. Recipients are expected to plan their work and 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, SAMHSA cannot guarantee the approval of any request for carryover of remaining unobligated funding.

STANDARD TERMS AND CONDITIONS

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 2 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>.

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.

Annual Federal Financial Report (SF-425)

By December 29, 2020, submit via eRA Commons.

The Federal Financial Report (FFR) (SF-425) is required on an annual basis and should reflect only cumulative actual Federal funds authorized and disbursed, any non-Federal matching funds (if identified in the Funding Opportunity Announcement (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. Additional guidance to complete the FFR can be found at <http://www.samhsa.gov/grants/grants-management/reporting-requirements>.

FFR reporting must be entered directly into the eRA Commons system. Instructions on how to submit a Federal Financial Report (FFR) via the eRA Commons is available at <https://www.samhsa.gov/sites/default/files/samhsa-grantee-submit-ffr-10-22-17.pptx>

Annual Programmatic Progress Report

By **December 29, 2020** 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 budget period.

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

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

Note: Recipients must also comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the FOA or by the Grant Program Official (GPO). This information is needed in order to comply with PL 102-62, which requires that Substance Abuse and Mental Health Services Administration (SAMHSA) report evaluation data to ensure the effectiveness and efficiency of its programs.

The response to this term must be submitted as .pdf documents in the View Terms Tracking Details page in eRA Commons. Please contact your Government Program Official (GPO) for program specific submission information.

For more information on how to upload a document in response to a tracked term, please reference under heading **4 Additional Materials grantee** in the User Guide located at: https://era.nih.gov/files/TCM_User_Guide_Granttee.pdf

Additional information on reporting requirements is available at

<https://www.samhsa.gov/grants/grants-management/reporting-requirements>.

Staff Contacts:

Judith Ellis, Program Official

Phone: (240) 276-2567 **Email:** judith.ellis@samhsa.hhs.gov

Heather Cooper, Grants Specialist

Phone: 240-276-1612 **Email:** Heather.Cooper@samhsa.hhs.gov



Notice of Award

Issue Date: 09/18/2019

HIV CBI
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Center for Substance Abuse Prevention

Grant Number: 3H79SP021778-04S1

FAIN: H79SP021778

Program Director: Alison Greene

Project Title: Bridges to Wellness (B-Well)

Organization Name: UNIVERSITY OF ARIZONA

Business Official: Paul Sandoval

Business Official e-mail address: sponsor@email.arizona.edu

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

Project Period: 09/30/2016 – 09/29/2021

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a supplement in the amount of \$25,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to UNIVERSITY OF ARIZONA 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 – 3H79SP021778-04S1**Award Calculation (U.S. Dollars)**

Personnel(non-research)	\$70,531
Fringe Benefits	\$22,006
Travel	\$200
Supplies	\$1,785
Contractual	\$98,300
Other	\$39,794
 Direct Cost	 \$232,616
Indirect Cost	\$26,982
Approved Budget	\$259,598
Federal Share	\$259,598
Cumulative Prior Awards for this Budget Period	\$234,598
 AMOUNT OF THIS ACTION (FEDERAL SHARE)	 \$25,000

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
4	\$259,598
5	\$234,598

*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:	1742652689C5
Document Number:	16SP21778A
Fiscal Year:	2019

IC	CAN	Amount
SP	C96V040	\$25,000

IC	CAN	2019
SP	C96V040	\$25,000

SP Administrative Data:

PCC: HIV-CBI / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 3H79SP021778-04S1

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 – 3H79SP021778-04S1

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 – 3H79SP021778-04S1**REMARKS****\$25,000 Supplement (R)****Technical Assistance Supplement**

This Notice of Award is issued to inform your organization that Supplemental funding in the amount of \$25,000 is being continued for the previously approved purchase of Technical Assistance or for the implementation of other previously approved allowable activities as outlined in the FOA of your grant award. Funds have been placed in the "Other" cost category.

Any post award change – including a key staff change, a budget revision, or a change in scope – requires prior approval and must be submitted as a post award amendment in eRA Commons.

For additional information on how to submit a post-award amendment, please visit the SAMHSA website: <https://www.samhsa.gov/grants/grants-management/post-award-changes>. Any technical questions regarding the submission process should be directed to the eRA Service Desk: <http://grants.nih.gov/support/>.

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

Staff Contacts:

Judith Ellis, Program Official

Phone: (240) 276-2567 **Email:** judith.ellis@samhsa.hhs.gov

Heather Cooper, Grants Specialist

Phone: 240-276-1612 **Email:** Heather.Cooper@samhsa.hhs.gov



Notice of Award

Issue Date: 10/11/2019

HIV CBI
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Center for Substance Abuse Prevention

Grant Number: 6H79SP021778-04M001

FAIN: H79SP021778

Program Director: Alison Greene

Project Title: Bridges to Wellness (B-Well)

Organization Name: UNIVERSITY OF ARIZONA

Business Official: Paul Sandoval

Business Official e-mail address: sponsor@email.arizona.edu

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

Project Period: 09/30/2016 – 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 UNIVERSITY OF ARIZONA 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 – 6H79SP021778-04M001**Award Calculation (U.S. Dollars)**

Personnel(non-research)	\$70,531
Fringe Benefits	\$22,006
Travel	\$200
Supplies	\$1,785
Contractual	\$98,300
Other	\$39,794
 Direct Cost	 \$232,616
Indirect Cost	\$26,982
Approved Budget	\$259,598
Federal Share	\$259,598
Cumulative Prior Awards for this Budget Period	\$259,598
 AMOUNT OF THIS ACTION (FEDERAL SHARE)	 \$0

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
4	\$259,598

*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:	1742652689C5
Document Number:	16SP21778A
Fiscal Year:	2019

IC	CAN	Amount
SP	C96V040	\$0

IC	CAN	2019
SP	C96V040	\$0

SP Administrative Data:

PCC: HIV-CBI / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 6H79SP021778-04M001

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 – 6H79SP021778-04M001

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

SECTION IV – SP Special Terms and Conditions – 6H79SP021778-04M001

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

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

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

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-rbs>; 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:

Judith Ellis, Program Official

Phone: (240) 276-2567 **Email:** judith.ellis@samhsa.hhs.gov

Heather Cooper, Grants Specialist

Phone: 240-276-1612 **Email:** Heather.Cooper@samhsa.hhs.gov