MEMORANDUM

To: Joint Fiscal Committee members
From: Sorsha Anderson, Staff Associate
Date: October 20, 2021
Subject: Grant Request – JFO #3067

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the Administration. The VT Agency Human Services has requested an expedited review of JFO #3067. Please respond by Wednesday, October 27, 2021.

JFO #3067 – $953,336 to the VT Agency of Human Services from the Center for Medicare and Medicaid Services. Funds to help create a unified, equitable, mobile crisis response system of care which is statewide, community-based, and meets the needs of individuals in the mental health, substance use, developmental disability, and older adult systems of care. This grant is authorized by the American Rescue Plan Act of 2021. The grant had a tight notification and application timeline, explained on page 3 of the attached packet. The grant period is September 30, 2021 to September 29, 2022. [Received October 19, 2021, expedited review requested 10/19/2021]

Please review the enclosed materials and notify the Joint Fiscal Office (Sorsha Anderson: sanderson@leg.state.vt.us) if you have questions or would like this item held for legislative review. Members will be polled on Wednesday, October 27, 2021 if they have not responded before then.
STATE OF VERMONT  
FINANCE & MANAGEMENT GRANT REVIEW FORM

| Grant Summary: | This grant supports the mobile crisis response system of care, specifically - technical assistance for a statewide assessment, stakeholder engagement, and implementation plan design; identification of training needs and development of trainings to support providers, community-based organizations, and law enforcement; and implementation of state information systems edits and other related updates. |
| Date: | 9/29/2021 |
| Department: | Agency of Human Services - Central Office |
| Legal Title of Grant: | Community-Based Mobile Crisis Intervention Services |
| Federal Catalog #: | 93.639 |
| Grant/Donor Name and Address: | Centers for Medicare & Medicaid Services 750 Security Boulevard Baltimore, Maryland 21244-1850 |
| Grant Period: | From: 9/30/2021 To: 9/29/2022 |
| Grant/Donation | $953,336 |
| Grant Amount: | SFY 1 $476,668 SFY 2 $476,668 SFY 3 $ Total $953,336 |
| Position Information: | # Positions 0 Explanation/Comments Full amount of grant to be spent on contracts. |
| Additional Comments: | EXPEDITED REVIEW REQUESTED. |

Department of Finance & Management | Secretary of Administration | Sent To Joint Fiscal Office

Sent To Joint Fiscal Office

Candace Elliott

[Signature]

Date
To: Joint Fiscal Committee

From: Sarah Clark, CFO

Date: September 23, 2021

RE: Expedited Review of Grant Acceptance for Community-Based Mobile Crisis Intervention Services

The Agency of Human Services (AHS) has received a grant award of $953,336 from the Department of Health and Human Services, Centers for Medicaid & Medicaid Services. The grant, Community-Based Mobile Crisis Intervention Services was authorized by The American Rescue Plan Act of 2021 amended Title XIX of the SSA (the Act).

The project period for the grant is from September 30, 2021 to September 29, 2022. The award has no state match requirements.

The funding opportunity was announced on July 13, 2021 with an application deadline of August 13, 2021. AHS, through its component departments (Department of Vermont Health Access, Department of Mental Health, Department of Health, and Department of Disabilities, Aging, and Independent Living), has a variety of initiatives related to the mobile crisis response system of care which are either currently underway in a pilot phase, are in the planning and design process, or are conceptual ideas pending future developments such as funding or collaborative opportunities. The American Rescue Plan Act of 2021 Section 9813 state planning grant and subsequent funding for qualifying community-based mobile crisis intervention services affords AHS the transformative opportunity that is necessary to achieve its goal of a unified, equitable, mobile crisis response system of care which is statewide, community-based, and meets the needs of individuals in the mental health, substance use, developmental disability, and older adult systems of care. A mobile crisis system of care designed to meet these needs will reduce the strain on emergency departments and improve health outcomes for all Vermonters.

AHS’s plan is to support technical assistance for a statewide assessment, stakeholder engagement, and implementation plan design; identification of training needs and development of trainings to support providers, community-based organizations, and law enforcement; and implementation of state information systems edits and other related updates.

Therefore, AHS is asking for expedited review of this AA-1 due to the tight timeframe of the grant.

Please let us know if you have any questions or need additional information.
STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

BASIC GRANT INFORMATION

1. Agency: Agency of Human Services
2. Department: Secretary's Office
3. Program: Community-Based Mobile Crisis Intervention Services
4. Legal Title of Grant: Community-Based Mobile Crisis Intervention Services
5. Federal Catalog #: 93.639

6. Grant/Donor Name and Address:
   Department of Health and Human Services
   Centers for Medicare & Medicaid Services
   750 Security Boulevard
   Baltimore, Maryland 21244-1850

7. Grant Period: From: 9/30/2021 To: 9/29/2022

8. Purpose of Grant:
   The American Rescue Plan Act of 2021 Section 9813 state planning grant and funding for qualifying community-based mobile crisis intervention services affords AHS the transformative opportunity that is necessary to achieve its goal of a unified, equitable, mobile crisis response system of care which is statewide, community-based, and meets the needs of individuals in the mental health, substance use, developmental disability, and older adult systems of care. A mobile crisis system of care designed to meet these needs will reduce the strain on emergency departments and improve health outcomes for all Vermonters.

9. Impact on existing program if grant is not Accepted:
   This is an opportunity to leverage technical assistance in order to rollout a robust statewide community-based mobile response program.

10. BUDGET INFORMATION

<table>
<thead>
<tr>
<th>Expenditures:</th>
<th>SFY 1 FY 2022</th>
<th>SFY 2 FY 2023</th>
<th>SFY 3 FY</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Services</td>
<td>$476,668</td>
<td>$476,668</td>
<td>$</td>
<td>Contracts</td>
</tr>
<tr>
<td>Operating Expenses</td>
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<td>$</td>
<td>$</td>
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<tr>
<td>Grants</td>
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<td>$</td>
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<tr>
<td>Total</td>
<td>$476,668</td>
<td>$476,668</td>
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</table>

<table>
<thead>
<tr>
<th>Revenues:</th>
<th>SFY 1 FY 2022</th>
<th>SFY 2 FY 2023</th>
<th>SFY 3 FY</th>
<th>Comments</th>
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<tbody>
<tr>
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<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>$</td>
<td>$</td>
<td>$</td>
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</tr>
<tr>
<td>In-Kind</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Federal Funds:</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td></td>
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<tr>
<td>(Direct Costs)</td>
<td>$476,668</td>
<td>$476,668</td>
<td>$</td>
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<tr>
<td>(Statewide Indirect)</td>
<td>$</td>
<td>$</td>
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<tr>
<td>(Departmental Indirect)</td>
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<td>$</td>
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<tr>
<td>Other Funds:</td>
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<tr>
<td>Grant (source)</td>
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<td>$</td>
<td>$</td>
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<tr>
<td>Total</td>
<td>$476,668</td>
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Appropriation No: 3400001000 Amount: $953,336
STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE  (Form AA-1)

<p>| | | |</p>
<table>
<thead>
<tr>
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<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>Total</td>
<td>$953,336</td>
<td></td>
</tr>
</tbody>
</table>

PERSONAL SERVICE INFORMATION

11. Will monies from this grant be used to fund one or more Personal Service Contracts?  Yes No
If "Yes", appointing authority must initial here to indicate intent to follow current competitive bidding process/policy.

Appointing Authority Name: Jenney Samuelson  Agreed by: (initial)

12. Limited Service Position Information:

<table>
<thead>
<tr>
<th># Positions</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Positions</td>
<td></td>
</tr>
</tbody>
</table>

12a. Equipment and space for these positions:  Is presently available. Can be obtained with available funds.

13. AUTHORIZATION AGENCY/DEPARTMENT

I/we certify that no funds beyond basic application preparation and filing costs have been expended or committed in anticipation of Joint Fiscal Committee approval of this grant, unless previous notification was made on Form AA-1PN (if applicable):

Signature: Jenney Samuelson  Date: 06/21/2021
Title: Deputy Secretary

14. SECRETARY OF ADMINISTRATION

Approved: Kristin Clouser

Digitally signed by Kristin Clouser  Date: 2021.10.17 12:21:38 -04'00'

15. ACTION BY GOVERNOR

Check One Box:  Accepted  Rejected

Date: 10/18/21

16. DOCUMENTATION REQUIRED

- [ ] Request Memo
- [ ] Dept. project approval (if applicable)
- [ ] Notice of Award
- [ ] Grant Agreement
- [ ] Grant Budget
- [ ] Notice of Donation (if any)
- [ ] Grant (Project) Timeline (if applicable)
- [ ] Request for Extension (if applicable)
- [ ] Form AA-1PN attached (if applicable)
The term "grant" refers to any grant, gift, loan, or any sum of money or thing of value to be accepted by any agency, department, commission, board, or other part of state government (see 32 V.S.A. §5).
### Recipient Information

1. **Recipient Name**  
   Vermont Agency of Human Services  
   280 State Dr  
   Waterbury, VT 05671-9501  
   [NO DATA]

2. **Congressional District of Recipient**  
   00

3. **Payment System Identifier (ID)**  
   1036000264C7

4. **Employer Identification Number (EIN)**  
   036000264

5. **Data Universal Numbering System (DUNS)**  
   809376155

6. **Recipient's Unique Entity Identifier**

7. **Project Director or Principal Investigator**  
   Ms. Judith Morse  
   Financial Manager  
   judith.morse@vermont.gov  
   802-241-0445

8. **Authorized Official**  
   Ms. Judith Morse  
   Financial Manager  
   judith.morse@vermont.gov  
   802-241-0445

### Federal Agency Information

Office of Acquisitions and Grants Management

9. **Awarding Agency Contact Information**  
   Ms. Linda Gmeiner  
   Grants Management Specialist  
   linda.gmeiner@cms.hhs.gov  
   410-786-9954

10. **Program Official Contact Information**  
    Effie George  
    Project Officer  
    effie.george@cms.hhs.gov  
    410-786-8639

### Federal Award Information

11. **Award Number**  
    212CMS331822-01-00

12. **Unique Federal Award Identification Number (FAIN)**  
    212CMS331822

13. **Statutory Authority**  
    The American Rescue Plan Act of 2021 amended Title XIX of the SSA (the Act): "SEC. 1947. State Option to Provide Qualifying Community-Based Mobile Crisis Intervention Services."

14. **Federal Award Project Title**  
    Community-Based Mobile Crisis Intervention Services

15. **Assistance Listing Number**  
    93.639

16. **Assistance Listing Program Title**  
    Section 9813: State Planning Grants for Qualifying Community-Based Mobile Crisis Intervention Services

17. **Award Action Type**  
    New

18. **Is the Award R&D?**  
    No

### Summary Federal Award Financial Information

19. **Budget Period Start Date**  
    09/03/2021  
    **End Date**  
    09/29/2022

20. **Total Amount of Federal Funds Obligated by this Action**  
    $953,336.00

20a. **Direct Cost Amount**  
    $953,336.00

20b. **Indirect Cost Amount**  
    $0.00

21. **Authorized Carryover**  
    $0.00

22. **Offset**  
    $0.00

23. **Total Amount of Federal Funds Obligated this budget period**  
    $0.00

24. **Total Approved Cost Sharing or Matching, where applicable**  
    $0.00

25. **Total Federal and Non-Federal Approved this Budget Period**  
    $953,336.00

26. **Project Period Start Date**  
    09/03/2021  
    **End Date**  
    09/29/2022

27. **Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period**  
    Not Available

28. **Authorized Treatment of Program Income**  
    ADDITIONAL COSTS

29. **Grants Management Officer - Signature**  
    Mrs. Mary Greene  
    Grants Management Officer

### Remarks

Funds have been authorized in accordance with the final negotiated budget dated 9/7/2021, conditional upon the restrictions noted in the Recipient Specific Terms and Conditions.

Please see the attached Recipient Specific, Program, and Standard Terms and Conditions.
Recipient Information

Recipient Name
Vermont Agency of Human Services
280 State Dr
Waterbury, VT 05671-9501
[NO DATA]

Congressional District of Recipient
00

Payment Account Number and Type
1036000264C7

Employer Identification Number (EIN) Data
036000264

Universal Numbering System (DUNS)
809376155

Recipient's Unique Entity Identifier
Not Available

31. Assistance Type
Cooperative Agreement

32. Type of Award
Other

33. Approved Budget
(Excludes Direct Assistance)

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<thead>
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</thead>
<tbody>
<tr>
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</tr>
<tr>
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<tr>
<td>b. Fringe Benefits</td>
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<tr>
<td>c. Total Personnel Costs</td>
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<tr>
<td>d. Equipment</td>
<td>$0.00</td>
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<td>e. Supplies</td>
<td>$0.00</td>
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<td>f. Travel</td>
<td>$0.00</td>
</tr>
<tr>
<td>g. Construction</td>
<td>$0.00</td>
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<tr>
<td>h. Other</td>
<td>$953,336.00</td>
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<tr>
<td>i. Contractual</td>
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<td>j. TOTAL DIRECT COSTS</td>
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<td>k. INDIRECT COSTS</td>
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<td>l. TOTAL APPROVED BUDGET</td>
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<td>m. Federal Share</td>
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<tr>
<td>n. Non-Federal Share</td>
<td>$0.00</td>
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</table>

34. Accounting Classification Codes

<table>
<thead>
<tr>
<th>FY-ACCOUNT NO.</th>
<th>DOCUMENT NO.</th>
<th>ADMINISTRATIVE CODE</th>
<th>OBJECT CLASS</th>
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AWARD ATTACHMENTS

Vermont Agency of Human Services

1. Recipient Specific Terms & Conditions
2. Program Terms & Conditions
3. Standard Terms & Conditions
American Rescue Plan Act (ARP) of 2021: Section 9813 State Planning Grants for Qualifying Community-Based Mobile Crisis Intervention Services

Recipient Specific Terms and Conditions

In order to ensure that the amount of funds awarded for this program do not exceed the total funds available, the final award amounts were reduced from the original applications for each Recipient. As a result, Recipients are asked to submit a revised budget to reflect the final award amount as shown on this Notice of Award (NoA). The instructions are provided below.

1. **Restriction of Funds:**
   - The Recipient will not have access to funds until a revised budget is submitted to CMS for review and approval through issuance of an amended NoA. If CMS has additional questions or follow-up with the Recipient’s application beyond those already addressed in these Recipient Specific Terms and Conditions, CMS will send out those additional items within 7 business days through the use of Grant Notes correspondence in GrantSolutions.

2. **Submission Requirements:**
   - Award funds are currently allocated in the “other” budget cost category. Revised documents for submission include an SF-424, an SF-424A, and a revised Budget Narrative to depict the reallocation of funds to the appropriate budget cost categories and include all required information.

   - The Recipient must submit a “Revision (Budget)” amendment to GrantSolutions within 30 calendar days and include a cover letter signed by the Authorized Organizational Representative (AOR), as well as a revised SF-424, SF-424A, and a revised Excel budget workbook that addresses all requirements included in these Recipient Specific Terms & Conditions.

   - In the budget narrative, the Recipient must provide a detailed, itemized budget for all activities/costs including subrecipients, contracts, or consultants. Lump sum totals are not acceptable. If an itemized budget cannot be provided for any activity/cost within 30 calendar days of issuance of this NoA, funding restrictions will remain in place for any activities/costs not yet approved until the Recipient provides the requested information and CMS provides approval through an amended NoA.
If applicable, any questions or follow-up requests provided by CMS through Grant Notes correspondence must also be addressed and provided.

CMS will review the revised budget information submitted and will either request additional revisions or issue an amended NoA releasing funds to support the approved activities/costs.

3. **Additional Required Documentation:**
   - The Recipient shall provide a response to the comments as noted in the "Business Assessment of Applicant Organization". This document will be sent to you via Grant Notes correspondence by your Grants Management Specialist.
The American Rescue Plan Act of 2021 (ARP) Section 9813
State Planning Grants for Qualifying Community-Based Mobile Crisis Intervention Services

PROGRAM TERMS AND CONDITIONS

1. The project period for the American Rescue Plan Act Section 9813 State Planning Grants for Qualifying Community-Based Mobile Crisis Intervention Services is from September 30, 2021, to September 29, 2022. The start date for the award is September 30, 2021. No cooperative agreement funds can be used for expenses incurred prior to this date.

2. With the initial expenditure of funds, the Recipient certifies that the State Medicaid Agency, meaning the single state agency for medical assistance provided under Title XIX of the Social Security Act (the Act), meets the definition of an "eligible entity" as defined in the Notice of Funding Opportunity (NOFO) which corresponds to Section 2113(f) of the Act.

3. This Notice of Award (NoA) includes funding for the 12-month budget period, September 30, 2021 through September 29, 2022.

4. The Recipient must have and maintain an account with GrantSolutions (GS) in order to communicate, receive, and obtain documentation from the Centers for Medicare & Medicaid Services (CMS). If the designated Recipient Authorized Organizational Representative (AOR) and Project Director (PD) do not already have accounts in GS, they should contact GS immediately upon receipt of award to complete a user account form. Any change in personnel with access to GS must also be communicated to CMS and GS staff on a timely basis so that the key individuals responsible for this award are current and correct within the GS system.

5. The Recipient is responsible for transmitting a copy of the NoA and accompanying documents to the individual at the state who is authorized to request funds from the Payment Management System (PMS).

6. The Recipient is required to participate in all required communications (e.g., monitoring or guidance calls, emails) and participate in technical assistance activities as specified in these program terms and conditions or as requested by CMS. Required communication regarding grant-related activities includes, but is not limited to the following topics:

   a. Cooperative agreement implementation status;
   
   b. Strategies employed;
   
   c. Challenges and responses;

09/13/2021
d. Drawdown of cooperative agreement funds, as appropriate for the cooperative agreement period; and

e. Progress with program monitoring and improvements as needed.

7. REPORTING REQUIREMENTS

Quarterly and Final Progress Reports:

The Recipient is required to submit quarterly progress reports as well as a final progress report when the project period ends. These reports should include narrative updates on planning grant activities as well as information on each Recipient’s approved work plan as specified in each Recipient’s approved application.

Qualifying community-based mobile crisis intervention services must meet the requirements contained in section 1947(b) of the Act and necessitate the successful submission and approval of a State Plan Amendment (SPA), section 1115 demonstration application, or section 1915(c) or 1915(b) waiver program request or amendment.

CMS will provide Recipients with additional instructions for the quarterly progress report and the final progress report submissions.

Satisfactory progress will be determined by the Recipient’s adherence to the CMS approved detailed project work plan and timeline, and in accordance with the terms and conditions.

Submission of Recipient progress reports are required to be completed 30 days after the end of each fiscal year quarter: Quarter One ends December 31; Quarter Two ends March 31; Quarter Three ends June 30; Quarter Four ends September 30.

The Recipient will submit other information as requested by CMS. Submission of web-based Recipient logs are required to be completed 30 days after the end of each fiscal year quarter: Quarter One ends December 31; Quarter Two ends March 31; Quarter Three ends June 30; Quarter Four ends September 30.

Financial Reports:

CMS is requiring that financial reports be submitted via PMS on a semi-annual basis, and will be due 30 days after the end of each 6-month period.

Please refer to the Standard Terms and Conditions entitled, FINANCIAL REPORTING, that provides detailed financial reporting instructions and be familiar with BOTH financial report requirements (quarterly cash transaction report as well as the semi-annual report).

8. CMS reserves the right to modify required data elements reported in all technical documents and reports submitted, to better measure outcomes for Recipients with specialized goals and

09/13/2021
strategies. CMS may also require the reporting of additional data elements over the course of the cooperative agreement in order to fully assess Recipient performance.

9. The Recipient shall assume responsibility for the accuracy and completeness of the information contained in all technical documents and reports submitted.

10. All program progress reports must be uploaded into the Grant Notes section of GrantSolutions, and be titled “Program Progress Report” that will be reviewed by the CMS Project Officer and Grant Management Specialist. Upon review, the CMS Project Officer will either accept or return to the Recipient for additional information or clarification. The cooperative agreement will not be considered complete and in accordance with the terms and conditions until all required reports have been accepted by both the CMS Project Officer and Grants Management Specialist.

11. All written reports must be in a format compliant with section 508 of the Rehabilitation Act (29 U.S.C. 794d).

12. Personnel Changes:

The Recipient is required to notify the CMS Project Officer and the CMS Grant Specialist within ten (10) days of any key personnel changes affecting the award. The AOR, PD, and Financial Officer (who is responsible for completing the Financial Report SF-425), as well as any Key Contractor staff are considered key personnel changes. Certain key personnel changes require prior CMS approval as well as an amendment request submitted in GS.

13. The Recipient may not deviate from the original scope of work as described in the CMS approved grant application and work plan for which the cooperative agreement was awarded without first receiving written prior approval from CMS. If proposing changes, the Recipient must first consult with the CMS Project Officer. The formal request must include a detailed explanation for the change to the scope of work, including revised time line, work plan, and budget and be submitted as an amendment in GS. The CMS Grants Management Officer makes the final decision to approve or deny a request for a change in scope of work.

14. All attachments to these program terms and conditions are integral to the agreement between CMS and the Recipient and must be observed as such. As stated in the NOFO, Section F3, Terms and Conditions, CMS may terminate this award for material noncompliance. Material noncompliance includes, but is not limited to violation of the terms and conditions of the award; failure to perform award activities in a satisfactory matter; improper management of funds; or fraud, waste, abuse, mismanagement, or criminal activity. CMS will consider the Recipient for corrective action, funding restrictions, or termination if they do not meet the requirements outlined in their terms and conditions as stated in the Standard Terms and Conditions, Term #35. CMS reserves the right to reduce funds or terminate the cooperative agreement based on the Recipient’s performance.

15. The Recipient is responsible for ensuring that no federal funds provided under this award are used to provide technical assistance or other services that are duplicative of funds and services

09/13/2021
authorized under other federal initiatives. The Recipient may be requested by CMS to provide evidence of well-documented internal controls to ensure that resources are used in the most efficient manner and that activities are not duplicative as stated above. If any duplication occurs, the Recipient must notify the CMS Grants Management Specialist and the CMS Project Officer at the time of discovery and provide a mitigation plan to the CMS Grants Management Specialist and to the CMS Project Officer.
ATTACHMENT A:

The American Rescue Plan (ARP) Act of 2021 Section 9813
State Planning Grants for Qualifying Community-Based Mobile Crisis Intervention Services

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>TIMELINE</th>
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</thead>
<tbody>
<tr>
<td>Cooperative Agreement Project Period</td>
<td>September 30, 2021 through September 29, 2022</td>
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<tr>
<td>Cooperative Agreement period begins</td>
<td>September 30, 2021</td>
</tr>
<tr>
<td>Acceptance of Cooperative Agreement Award</td>
<td>Upon initial draw of funds from PMS</td>
</tr>
<tr>
<td>Monitoring Calls with CMS PO</td>
<td>Monthly beginning on or after September 30, 2021</td>
</tr>
<tr>
<td>Quarterly Progress Reports</td>
<td>30 days after the end of each fiscal year quarter: Quarter One, December 31; Quarter Two, March 31; Quarter Three, June 30; Quarter Four, September 30</td>
</tr>
<tr>
<td>Semi-Annual Financial Reports</td>
<td>30 days after the end of each semi-annual period. See Standard Terms and Conditions for Financial Reporting Instructions</td>
</tr>
<tr>
<td>Final Progress Report</td>
<td>January 30, 2022</td>
</tr>
</tbody>
</table>
Centers for Medicare & Medicaid Services
Standard Grant/Cooperative Agreement Terms and Conditions

1. Recipient. The Recipient is the Grantee designated in the Notice of Award (NoA).

2. Acceptance of Application & Terms of Agreement. Initial drawdown of funds by the Recipient constitutes acceptance of this award.

3. Notice of Funding Opportunity (NOFO). All relevant project requirements outlined in the NOFO apply to this award and are incorporated into these terms and conditions by reference.

4. Uniform Administrative Requirements, Cost Principles, and Audit Requirements. This award is subject to 45 CFR Part 75 [available at http://www.ecfr.gov/cgi-bin/text-idx?node=pt45.1.75&rgn=div5], which implements 2 CFR Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards ("Uniform Guidance") for the U.S. Department of Health & Human Services (HHS) operating divisions, effective December 26, 2014. All recipients must comply with Subparts A-F unless as described immediately below under Cost Principles and Audit Requirements.

- Uniform Administrative Requirements. All Recipients must comply with Subparts A-D of 45 CFR Part 75.

- Cost Principles. Centers for Medicare and Medicaid Services (CMS) grant awards provide for reimbursement of actual, allowable costs incurred and are subject to the Federal cost principles. The cost principles establish standards for the allowability of costs, provide detailed guidance on the cost accounting treatment of costs as direct or indirect, and set forth allowability and allocability principles for selected items of cost. Applicability of a particular set of cost principles depends on the type of organization. CMS recipients must comply with the cost principles set forth in HHS regulations at 45 CFR Part 75, Subpart E with the following exceptions: (1) hospitals must follow Appendix IX to part 75 and commercial (for-profit) organizations are subject to the cost principles located at 48 CFR subpart 31.2.3.

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1 Standard Terms and Conditions include all possible grants administrative requirements for CMS awards. All standard terms and conditions apply unless the requirement is not applicable based on the project awarded. Recipients should contact their assigned Grants Management Specialist if they have questions about whether an administrative term and condition applies.

2 A Cooperative Agreement is an alternative assistance instrument to be used in lieu of a grant whenever substantial Federal involvement with the recipient during performance is anticipated. The difference between grants and cooperative agreements is the degree of Federal programmatic involvement rather than the type of administrative requirements imposed. Therefore, statutes, regulations, policies, and the information contained in these Standard Terms and Conditions that are applicable to grants also apply to cooperative agreements, unless otherwise stated.

3 There are no cost principles specifically applicable to grants to for-profit organizations. Therefore, the cost principles for commercial organizations set forth in the FAR (48 CFR subpart 31.2) generally are used to determine allowable costs under CMS grants to for-profit organizations. As provided in those costs principles, allowable travel costs may not exceed those established by the FTR (available on-line at http://gsa.gov/portal/content/104790). The cost principles in 45 CFR 75, Appendix IX, determine allowable costs under CMS grants to proprietary hospitals.