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Department of Health and Human Services

Substance Abuse and Mental Health Services Administration Center for Substance Abuse Prevention Notice of Award FAIN# H79SP084314 Federal Award Date 08/29/2024

Recipient Information

1. Recipient Name

THE CURATORS OF THE UNIVERSITY OF MISSOURI 118 UNIVERSITY HALL COLUMBIA, MO 65211

2. Congressional District of Recipient 03

3. Payment System Identifier (ID) 1436003859A7

4. Employer Identification Number (EIN) 436003859

5. Data Universal Numbering System (DUNS) 010989619

6. Recipient's Unique Entity Identifier J9CDGR596MN3

7. Project Director or Principal Investigator

Holly Hagle Associate Research Professor hagleh@umkc.edu 412-478-5429

8. Authorized Official

Anthony Caruso ORS@umkc.edu 816-235-5839

Federal Agency Information

9. Awarding Agency Contact Information

Urvi Patel Grants Specialist urvi.patel@samhsa.hhs.gov 240-276-1446

10. Program Official Contact Information

Thia Walker Program Official thia.walker@samhsa.hhs.gov 240-276-1835

Federal Award Information

11. Award Number

1H79SP084314-01

12. Unique Federal Award Identification Number (FAIN)

H79SP084314

13. Statutory Authority

Section 516 of the Public Health Service Act, as amended

14. Federal Award Project Title

Prevention Technology Transfer Center Network Coordinating Center (PTTC NCC)

15. Assistance Listing Number

93.243

16. Assistance Listing Program Title

Substance Abuse and Mental Health Services_Projects of Regional and National Significance

17. Award Action Type

New Competing

18. Is the Award R&D?

No

Summary Federal Award Financial Information					
\$739,529					
\$694,997					
\$44,532					
\$739,529					
\$0					
\$739,529					
\$739,529					

28. Authorized Treatment of Program Income

Additional Costs

29. Grants Management Officer - Signature

Rosalie Vega

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



PTTC-24 Issue Date: 08/29/2024
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Center for Substance Abuse Prevention

Award Number: 1H79SP084314-01
FAIN: H79SP084314
Program Director: Holly Hagle

Project Title: Prevention Technology Transfer Center Network Coordinating Center (PTTC NCC)

Organization Name: THE CURATORS OF THE UNIVERSITY OF MISSOURI

Authorized Official: Anthony Caruso

Authorized Official e-mail address: ORS@umkc.edu

Budget Period: 09/30/2024 - 09/29/2025 **Project Period:** 09/30/2024 - 09/29/2029

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$739,529 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to THE CURATORS OF THE UNIVERSITY OF MISSOURI 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, Rosalie Vega Grants Management Officer Division of Grants Management Rosalie.Vega@samhsa.hhs.gov See additional information below

SECTION I - AWARD DATA - 1H79SP084314-01

Award Calculation (U.S. Dollars) Personnel(non-research)	\$200,168
Fringe Benefits	\$63,953
Travel	\$28,000
Supplies	\$4,288
Contractual	\$352,352
Other	\$46,236
Direct Cost	\$694,997
Indirect Cost	\$44,532
Approved Budget	\$739,529
Federal Share	\$739,529
Cumulative Prior Awards for this Budget Period	\$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$739,529

SUMMARY TOTALS FOR ALL YEARS						
YR	AMOUNT					
1	\$739,529					
2	\$739,529					
3	\$739,529					
4	\$739,529					
5	\$739,529					

Note: 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:
 1436003859A7

 Document Number:
 24SP84314A

 Fiscal Year:
 2024

IC	CAN	Amount
SP	C96V025	\$739,529

<u>IC</u>	<u>CAN</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>	<u>2028</u>
<u>SP</u>	C96V025	<u>\$739,529</u>	<u>\$739,529</u>	<u>\$739,529</u>	<u>\$739,529</u>	<u>\$739,529</u>

SP Administrative Data: PCC: PTTC-24 / OC: 4145

SECTION II - PAYMENT/HOTLINE INFORMATION - 1H79SP084314-01

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.

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 - SP SPECIAL TERMS AND CONDITIONS - 1H79SP084314-01

REMARKS

New Award- Cooperative Agreement PTTC

This Notice of Award (NoA) is issued to inform your organization that the application submitted through the funding opportunity number SP-24-002-Prevention Technology Transfer Center Cooperative Agreements (PTTC), has been selected for funding.

The purpose of this program is to maintain and enhance the PTTC Network to provide training and technical assistance services to the substance misuse prevention field including professionals/pre-professionals, organizations, and others in the prevention community that serve and support children, youth, young adults, families, parents, and other adults. Recipients will be expected to work directly with SAMHSA and across the PTTC Network on activities aimed at improving the implementation and delivery of effective substance misuse prevention interventions.

The PTTC program is authorized under Section 516 of the Public Health Services Act.

Cooperative Agreement Requirements

This cooperative agreement notice of award sets out the terms and conditions governing a collaborative effort between the recipient organization and the Substance Abuse and Mental Health Services Administration (SAMHSA). While the responsibility for conducting these activities lies primarily with the recipient organization, SAMHSA, through its designated representatives shall provide continuing technical assistance, consultation, and coordination in the conduct of the project during the period of this

agreement.

The award is being made as a cooperative agreement because it requires substantial post-award federal programmatic participation in the oversight of the project. Under this cooperative agreement, the roles and responsibilities of the recipient and SAMHSA staff are:

Role of Recipient:

The Recipient must:

- 1) Comply with terms and conditions of the cooperative agreement award, and
- 2) Collaborate with SAMHSA staff in project implementation and monitoring.

In addition, the recipient must:

- 1) Submit performance measures data via SAMHSA s SPARS.
- 2) Submit biweekly updates.
- 3) Submit bimonthly reports.
- 4) Submit copies of all resources on a Monthly basis.

Role of SAMHSA Staff:

The GPO handles programmatic monitoring, including regular calls that may involve the Grants Management Specialist (GMS) and site visits. The GPO will work with you on implementing program and evaluation activities and will make recommendations about program continuance. Your GPOs will also oversee the publication of any project results and packaging and dissemination of products and materials to make the findings available to the field. SAMHSA staff will:

- 1) Review or approve one stage of a project before work may begin on a later stage during a current approved project period.
- 2) Participate on committees, such as policy and steering workgroups, which quide the course of long-term projects or activities.
- 3) Recommend outside consultants for training, site specific evaluation and data collection.
- 4) Maintain regular communication with recipients through routine conference calls and the provision of technical assistance and consultation.
- 5) Oversee development and implementation of a multi-site evaluation in partnership with evaluation contractors and recipients.
- 6) Review and approve all key personnel.
- 7) Review and approve performance data and progress reports.

The GMS is responsible for all business management aspects of negotiation, award, and financial and administrative aspects of the cooperative agreement. The GMS uses information from site visits, reviews of expenditure and audit reports, and other appropriate means to ensure the project operates in compliance with all applicable federal laws, regulations, guidelines, and the terms and conditions of award.

Policies and Regulations Accepting a grant award or cooperative agreement requires the recipient organization to comply with the terms and conditions of the NoA, as well as all applicable Federal Policies and Regulations. This award is governed by the Uniform Guidance 2 Code of Federal Regulations (CFR) 200 as codified by HHS at 45 CFR 75; Department of Health and Human Services (HHS) Grants Policy Statement; SAMHSA Additional Directives; and the Standard Terms and Conditions for the fiscal year in which the grant was awarded.

Key Personnel Key personnel are organization staff members or consultants/subrecipients who must be part of the project regardless of whether they receive a salary or compensation from the project. These individuals must make a substantial contribution to the execution of the project.

The key personnel for this program are as follows:

- 1. Holy Hagle, Project Director @ 12% level of effort
- 2. Rachel Witmer, Project Coordinator @100% level of effort

The Key Personnel identified in your application have not been approved by SAMHSA. Your assigned GPO will confirm approval via eRA Correspondence within 60 days of receipt of this NoA. If SAMHSA s review of the Key Personnel results in the proposed individual not being approved or deemed not qualified for the position, the organization will be required to submit a qualified candidate for the Key Personnel position. SAMHSA will not be liable for any related costs incurred on this grant award.

The identified PD for this program is listed in item #7 Project Director or Principal Investigator on the cover page of the NoA. If the individual identified on the NoA is incorrect, you must notify your assigned Government Project Officer (GPO) and Grants Management Specialist (GMS) via email immediately and plan to submit a post award amendment for a change in key personnel via eRA Commons. Key personnel or other grant-supported staff may not exceed 100% level of effort across all federal and non-federal funding sources.

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. Refer to SAMHSA s website for more information on submitting a key personnel change. See SAMHSA PD Account Creation Instructions for a quick step-by-step guide and SAMHSA Grantee PD Account Creation Slides for additional information on the eRA Commons registration process for the PD

Funding Limitations SAMHSA reserves the right to disallow costs under this grant award at any time during the award project period. Award recipients are responsible for ensuring that costs allocated to the grant award are reasonable and allowable in accordance with the Notice of Funding Opportunity and all applicable Policies & Regulations.

The Cost Principles that delineate the allowable and unallowable expenditures for HHS recipients are described in the <u>Code of Federal Regulations</u>.

Funding Limitations and Restrictions are listed in the Notice of Funding Opportunity

Unallowable Costs Recipients must exercise proper stewardship over Federal funds and ensure that costs charged to awards are allowable, allocable, reasonable, necessary, and consistently applied regardless of the source of funds according to the Factors affecting allowability of costs per <u>2 CFR 200.403</u> and the Reasonable costs considerations per <u>2 CFR 200.404</u>. A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

Supplanting Supplement Not Supplant grant funds may be used to supplement existing activities. Grant funds may not be used to supplant current funding of existing

activities. Supplant is defined as replacing funding of a recipient s existing program with funds from a federal grant.

Award Payments 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). First time PMS users must obtain access to view available funds, request funds, or submit reports. Users will need to request permission and be approved by PSC. Inquiries regarding payments should be directed to PMS by emailing the helpdesk at PMSSupport@psc.hhs.gov or call 1-877-614-553. You should also visit the PSC website for more information about their services - https://pms.psc.gov/

Special Terms & Conditions of Award There may be special terms and conditions associated with your grant award. Recipients must address all special terms and conditions by the reflected due date. See the Special Terms of Award and Special Conditions of Award sections below for the specific terms and conditions associated with your grant award. A recipient's failure to comply with the terms and conditions of award, may cause SAMHSA to take one or more actions, depending on the severity and duration of the non-compliance. SAMHSA will undertake any such action in accordance with applicable statutes, regulations, and policies.

Responding to Award Terms & Conditions All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions or how to submit a post award amendment request please refer to Training Materials under the heading Grant Management Reference Materials for Grantees.

Prior Approval Requirements Prior approval is required for the following changes to your grant award: Changes in the status of the Project Director, or other key personnel named in the NoA; Changes in scope; Significant re-budgeting and Transfer of substantive programmatic work; Carryover of unobligated balances; Change of grantee organization; Deviation from award terms and conditions; No-cost extension and Transfer of substantive programmatic work. A full list of actions requiring prior approval can be found on page II-49 of the HHS <u>Grants Policy Statement</u> Exhibit 5 (Summary of Actions Requiring OPDIV Prior Approval). **All prior approval actions must be submitted as post award amendment requests in eRA Commons.**

Post Award Amendments If information on the NoA needs to be changed, it will require approval from the federal agency before the grant recipient can implement the modification. Please refer to the SAMHSA website for specific SAMHSA guidance on how to submit a <u>Post Award Amendments</u> in eRA Commons:

Primary Contacts

- For technical support, contact <u>eRA Service Desk</u> at 866-504-9552 (Press 6 for SAMHSA Grantees).
- For budget and grants management related questions, contact your assigned GMS.
- For programmatic questions, contact your assigned GPO.

Contact information for the GMS and GPO are listed on the last page of this NoA.

Training & Resources Visit the following pages on our website for more information on implementation, monitoring and reporting on your new grant award:

- Grants Management
- Training & Resources for recipients
- eRA Commons

SPECIAL TERMS

Risk Assessment

The Office of Financial Advisory Services (OFAS), SAMHSA may perform an administrative review of your organization s financial management systems, policies, procedures and records. If the review discloses material weaknesses or other financial management concerns, grant funding may be restricted in accordance with 45 CFR 75/2 CFR 200, as applicable. The restriction will affect your organization s ability to withdraw funds from the Payment Management System account, until the concerns are addressed.

Disparity Impact Statement (DIS)

By **November 29, 2024,** submit via eRA Commons a completed **Disparity Impact Statement**.

SAMHSA?s Behavioral Health Disparity Impact Statement (DIS) is a data-driven, quality improvement approach to advance behavioral health equity for all. The DIS is a grant requirement that helps grantees identify racial, ethnic, sexual, and gender minority groups at the highest risk of experiencing behavioral health disparities within their grant projects and implement a disparity reduction action plan with a quality improvement process to address and close the identified gap(s). The DIS should be consistent with the Population of Focus and Statement of Need identified in the grant application and include the components as described below. Please refer to the DIS worksheet, examples, and other resources on the SAMHSA website at: https://www.samhsa.gov/grants/grants-management/disparity-impact-statement

The main components of the DIS are:

- Identify and describe the behavioral health disparity within the population of focus of the grant project that experience disparate access, use, and outcomes.
- o Provide a demographic table of the proposed number of individuals to be served, reached, or trained in the grant project that covers the entire grant period. Identify the data sources used to support the rationale for how the determination of the disparity was made.
- o Identify the social determinants of health (SDOH) domains and the Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS) Standards that the grantee organization will work to address and improve for the identified population(s) of focus.
- Develop a disparity reduction quality improvement action plan to address behavioral health disparities based on the available data on access, use, and outcomes.

In accordance with the reporting requirements outlined in the Notice of Funding

Opportunity (NOFO), the grantee is required to provide an update on the project's progress towards addressing quality care of underserved populations related to the Disparity Impact Statement (DIS), barriers encountered, including challenges serving populations of focus, efforts to overcome these barriers; evaluation activities for tracking DIS efforts; and a revised quality improvement plan if the DIS does not meet the quality of care requirements as stated in the DIS.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to https://www.samhsa.gov/grants/grants-training-materials under heading How to Respond to Terms and Conditions in the Notice of Award.

Annual Implementation Plan

Recipients must conduct an annual needs assessment and develop an annual implementation workplan. The annual implementation workplans must be submitted to the GPO within two months (60 days) of the beginning of each budget period in eRA. By November 29, 2024, submit an annual implementation workplan via the eRA Commons Terms Tracker.

Annual Communication Plan

The National Coordinating Center (NCC) recipient is required to submit a communication plan and marketing plan within 120 days of the award in eRA. In subsequent years, recipients must update and submit the plan for approval by the Government Project Officer (GPO) at the beginning of each budget period, which describes the intent to regularly promote activities and services and conduct outreach to diverse audiences. By January 28, 2025, submit the annual communication plan via the eRA Commons Terms Tracker.

Annual Marketing Plan

The National Coordinating Center (NCC) recipient is required to submit a communication plan and marketing plan within 120 days of the award in eRA. In subsequent years, recipients must update and submit the plan for approval by the Government Project Officer (GPO) at the beginning of each budget period, which describes the intent to regularly promote activities and services and conduct outreach to diverse audiences. By January 28, 2025, submit the annual communication plan via the eRA Commons Terms Tracker.

SPECIAL CONDITIONS

Revised Budget Narrative & SF-424A

By October 30, 2024 submit the following via eRA Terms Tracker:

- 1. **SF-424A**: The SF-424A total amount must be equal to and not exceed the **Total Amount of the Federal Award** shown on page 1 of this NoA. The categorical budget must be updated to match the revised detailed budget as per below. A <u>blank SF-424A</u> can be accessed in the Grants.gov Forms Repository.
- 2. Detailed Budget with Justification: Provide a detailed line-item breakdown of

costs with an accompanying narrative justification. To prevent calculation errors and expedite review, it is highly recommended to use the SAMHSA Budget Template. The SAMHSA Budget Template, user guide, and sample budget can be accessed

at https://www.samhsa.gov/grants/applying/forms-resources.

Revise the budget to address the following:

1. Travel-

- CADCA- Airfare cost is excessive. Per GSA, per diems are reimbursed 75% for the first and last day of travel. Please clarify local mileage is allocated along with airfare. Identify project staff in attendance, and dates of travel for each request.
- Society for Prevention- Airfare cost is excessive. Per GSA, per diems are reimbursed 75% for the first and last day of travel. Please clarify local mileage is allocated along with airfare. Identify project staff in attendance, and dates of travel for each request.
- 3. NPN- Airfare cost is excessive. Per GSA, per diems are reimbursed 75% for the first and last day of travel. Please clarify local mileage is allocated along with airfare. Identify project staff in attendance, and dates of travel for each request.
- 4. NASADAD- Airfare cost is excessive. Per GSA, per diems are reimbursed 75% for the first and last day of travel. Please clarify local mileage is allocated along with airfare. Identify project staff in attendance, and dates of travel for each request.
- 5. SAMHSA Meeting- Disallowed. Per the NOFO, the meetings will be held virtually. Please reallocate appropriately

2. Contractual Costs

- 1. NASADAD- Per project narrative, the meetings are being virtually. Please provide additional justification for the travel costs.
- 2. Lanitek- Please include the justification for the request. Additionally, identify consultants, provide annual salary/hourly rate, # of hours/level of effort, duration, etc to justify the cost.
- 3. KC Web Programmers- Please include the justification for the request. Additionally, provide annual salary/hourly rate, # of hours/level of effort, duration, etc to justify the cost.
- 4. Cecilia Fichter-DeSando- Please include the justification for the request. Additionally, provide annual salary/hourly rate, # of hours/level of effort, duration, etc to justify the cost.
- 5. Kristen Pamula- Please include the justification for the request. Additionally, provide annual salary/hourly rate, # of hours/level of effort, duration, etc to justify the cost.
- 6. Comm Consultant for Network- Please include the justification for the request. Additionally, identify consultants, provide annual salary/hourly rate, # of hours/level of effort, duration, etc to justify the cost.
- 7. VASTEC Accessibility & 508 Services- Please include the justification for the request. Additionally, please breakdown the cost by unit cost, quantity, etc.
- 8. Sara Trompter- Please include the justification for the request. Additionally, provide annual salary/hourly rate, # of

- hours/level of effort, duration, etc to justify the cost.
- 9. Interpreters Inc.- Please include the justification for the request. Additionally, please breakdown the cost by unit cost, quantity, etc.

3. Other

- 1. Conference Exhibiting- Please provide a detailed breakdown of this request consist of.
- 2. Conference Registrations- Please include which conferences and how many registrations
- 3. Phone Services- Please provide in the justification the methodology used to determine SAMHSA s fairshare. Costs should be allocated based on level of effort.
- 4. Software- Please provide additional justification for the methodology used to determine SAMHSA s fair share. Are these tools, software, etc only specific to this project? If so, include it in the justification.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to https://www.samhsa.gov/grants/grants-training-materials under heading How to Respond to Terms and Conditions.

STANDARD TERMS AND CONDITIONS

Programmatic Progress Reports

Recipients are required to submit semi-annual Programmatic Progress Reports (at 6 months and at 12 months) in Year 1, then an annual report in the subsequent years in eRA. The progress report at six-months is due within 30 days of the end of the second quarter. The annual report is due within 90 days of the end of each budget period. Please refer to the SP 24-002 NOFO for details regarding the reporting requirements in Sections VI.3 and I.5. For each annual progress report, the progress and evaluation of the Disparities Impact Statement (DIS) must be reported at this time. You are expected to collect data to evaluate whether the disparities you identified in your Disparity Impact Statement (DIS) are being effectively addressed.

- By <u>April 30, 2025</u>, submit via eRA Commons: Mid-Year Programmatic Progress Report.
- By <u>December 28, 2025</u>, submit via eRA Commons: <u>Annual Programmatic</u> Progress Report.

Recipients must submit a final performance report within 120 days after the end of the project period in eRA. This report must be cumulative and report on all activities during the entire project period.

The response to this term must be submitted as PDF documents in eRA Commons under the View Terms Tracking Details page. For more information on how to respond to tracked terms and conditions, refer to https://www.samhsa.gov/grants/grants-training-materials under heading *How to Respond to Terms and Conditions*.

Annual Federal Financial Report (FFR or SF-425)

All financial reporting for recipients of Health and Human Services (HHS) grants and

cooperative agreements has been consolidated through a single point of entry, which has been identified as the Payment Management System (PMS). The Federal Financial Report (FFR or SF-425) initiative ensures all financial data is reported consistently through one source; shares reconciled financial data to the HHS grants management systems; assists with the timely financial monitoring and grant closeout; and reduces expired award payments.

The FFR is required on an annual basis and must be submitted **no later than 90** days after the end of each incremental period/budget period. The FFR should reflect cumulative amounts. Additional guidance to complete the FFR can be found at http://www.samhsa.gov/grants/grants-management/reporting-requirements.

SAMHSA reserves the right to request more frequent submissions of FFRs. If so, the additional submission dates will be shown below.

Your organization is required to submit an FFR for this grant funding as follows:

- By <u>December 28, 2025</u>, submit the Federal Financial Report (FFR)/(SF-425).
- The grant recipient staff member(s) responsible for FFR preparation, certification and submission of the FFR must either submit a request for New User Access or Update User Access to the FFR Module as applicable. Refer to the PMS User Access website https://pms.psc.gov/grant-recipients/user-access.html for information on how to submit a New User Access, Update User Access or Deactivate User Access. You can also view PMS Video on how to request new user access @ https://youtu.be/kdoqaXfiul0 and PDF resource with instructions on Requesting Access @ https://pms.psc.gov/forms/New-User-Request Grantee.pdf
- Instructions on how to submit an FFR via PMS are available at https://pmsapp.psc.gov/pms/app/help/ffr/ffr-grantee-instructions.html (The user must be logged in to PMS to access the link). Updates to the FFR instructions effective 4/1/2022 are also available @ https://pms.psc.gov/grant-recipients/ffr-updates.html
- While recipients must submit the FFR in PMS, the FFR can also be accessed by connecting seamlessly from the eRA Commons to PMS by clicking the Manage FFR link on the Search for Federal Financial Report (FFR) page in eRA Commons, which will redirect to PMS. SAMHSA will not accept FFRs submitted by email or uploaded as an attachment into eRA. To access the Manage FFR link in eRA Commons, the individual must be registered in eRA Commons and assigned the Financial Status Reporter (FSR) role for their organization. The individual assigned the FSR role is responsible for reporting the statement of grant expenditures for their organization. Refer to the page Managing eRA User Accounts on SAMHSA's website for instructions on how to assign the FSR role.

If you have questions about how to set up a PMS account for your organization, please contact the PMS Help Desk at PMSSupport@psc.hhs.gov or 1-877-614-5533.

Note: While recipients will use PMS to report all financial expenditures as well as to drawdown funds, recipients will continue to use eRA Commons for all other grant-related matters, including submitting progress reports, requesting post award amendments, and accessing grant documents such as the Notice of Award.

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 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.

Standards for Financial Management

Recipients and subrecipients are required to meet the standards and requirements for financial management systems set forth in 45 CFR part 75 Subpart D. The financial systems must enable the recipient and subrecipient to maintain records that adequately identify the sources of funds for federally assisted activities and the purposes for which the award was used, including authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and any program income. The system must also enable the recipient and subrecipient to compare actual expenditures or outlays with the approved budget for the award. SAMHSA funds must retain their specific identity — they may not be commingled with nonfederal funds or other federal funds. Commingling funds typically means depositing or recording funds in a general account without the ability to identify each specific source of funds with related expenditures.

Reasonable Costs for consideration

Recipients must exercise proper stewardship over Federal funds and ensure that costs charged to awards are allowable, allocable, reasonable, necessary, and consistently applied regardless of the source of funds according to Reasonable Costs consideration per 2 CFR 200.404 and the Factors affecting allowability of costs per 2 CFR 200.403. A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

Consistent Treatment of Costs

Recipients must treat costs consistently across all federal and non-federal grants, projects and cost centers. Recipients may not direct-charge federal grants for costs typically considered indirect in nature, unless done consistently. If part of the indirect cost rate, then it may not also be charged as a direct cost. Examples of indirect costs include (administrative salaries, rent, accounting fees, utilities, office supplies, etc.). If typical indirect cost categories are included in the budget as direct costs, it is SAMHSA s understanding that your organization has developed a cost accounting system adequate to justify the direct charges and to avoid an unfair allocation of these costs to the federal government. Also, note that all awards are subject to later review in accordance with the requirements of 45 CFR 75.364, 45 CFR 75.371, 45 CFR 75.386 and 45 CFR Part 75, Subpart F, Audit Requirements.

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.

GPRA/SPARS Reporting Requirements

PTTC recipients are required to collect and report in SAMHSA's Performance Accountability and Reporting System (SPARS) using the Training and Technical Assistance (TTA) Program Monitoring tool:

- (1) Event Description data on each project event (e.g., meeting, technical assistance, training event). The data must be collected and entered into SPARS within 7 days after each event using the event description form.
- (2) Voluntary survey data from participants after each event using the TTA Post Event form. Anonymous voluntary survey responses must be entered in SPARS within 7 days after the event.
- (3) Follow-up survey data for events that are longer than three hours. For participants who agree to be contacted, the TTA Follow-Up form will be used 60 days after the end of the event. The data must be entered into SPARS 120 days after the event.

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