

*Notice of Funding Availability (NOFA)*

**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Substance Abuse and Mental Health Services Administration**

**Funding Opportunity Title:** National Training and Technical Assistance Center for Child and Adolescent Mental Health Cooperative Agreement (Short Title: NTTAC)

**Announcement Type:** Initial

**Funding Opportunity Number:** SM-05-013

**Catalog of Federal Domestic Assistance (CFDA) Number:** 93.243

**Due Date for Applications:** April 29, 2005

[Note: Letters from State Single Point of Contact (SPOC) in response to E.O. 12372 are due June 29, 2005.]

**SUMMARY:** The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS), announces the availability of FY 2005 funds for a National Training and Technical Assistance Center for Child and Adolescent Mental Health (NTTAC) Cooperative Agreement. A synopsis of this funding opportunity, as well as many other Federal Government funding opportunities, is also available at the Internet site: [www.grants.gov](http://www.grants.gov).

For complete instructions, potential applicants must obtain a copy of SAMHSA's standard Infrastructure Grants Program Announcement (INF-05 PA) and the PHS 5161-1 (Rev. 7/00) application form before preparing and submitting an application. The INF-05 PA describes the general program design and provides instructions for applying for all SAMHSA Infrastructure Grants, including the NTTAC Cooperative Agreement. Additional instructions and specific requirements for the NTTAC Cooperative Agreement are described below.

**I. Funding Opportunity Description**

**Authority:** Section 520 A of the Public Health Service Act, as amended and subject to the availability of funds.

The National Training and Technical Assistance Center for Child and Adolescent Mental Health (NTTAC) Cooperative Agreement is one of SAMHSA's Infrastructure Grants. SAMHSA's Infrastructure Grants provide funds to increase the capacity of mental health and/or substance abuse service systems to support programs and services. An estimated 4.5 to 6.3 million children and youth in the United States suffer from a serious emotional disturbance and approximately 65% to 80% of these children and youth do not receive the specialty mental health services and supports they need. To address concerns about mental health service delivery, President Bush created the New Freedom Commission on

Mental Health to "study and make recommendations for improving America's mental health service delivery system." The Commission's report, *Achieving the Promise: Transforming Mental Health Care in America* (available at <http://www.mentalhealthcommission.gov>) calls for a fundamental transformation in the way mental health services are delivered in America.

SAMHSA, and its Center for Mental Health Services, have been charged with the responsibility to implement the goals and recommendations of the New Freedom Commission; the NTTAC is a crucial link in CMHS's ongoing efforts to implement the Report. Therefore, activities carried out under this announcement must be aligned with the six goals of the Report to meet the complex needs of children and youth with, or at risk for, serious emotional disturbances and their families.

The NTTAC will serve a key role in furthering Federal efforts to establish systems of care for children's mental health that began over 15 years ago, and have now been reiterated in the President's New Freedom Commission Report. These efforts promote the development of more accessible and appropriate home and community-based mental health service delivery systems for children, adolescents, and their families.

The NTTAC will serve as a national resource and training center to promote the planning and development of child- and family-centered, culturally competent, and coordinated systems of care for children and adolescents with, or at risk for, a serious emotional disturbance and their families within home- and community-based settings. The NTTAC will provide access to information and expertise on systems of care development, implementation, and policy issues through a variety of knowledge distribution approaches and technologies. Priority areas of focus will include: Strengthening the capacity of States and communities to transform their mental health system; State planning and policy development to implement family-driven and youth-guided comprehensive systems of care across child-serving systems; family and youth-centered care planning; financing strategies in public and private sectors; data management and accountability; workforce and leadership development; evidence-based practice; early identification and intervention; integration of care with primary health, child-care, schools, child welfare, juvenile justice, and substance abuse; cultural, racial, and geographic disparities; vulnerable population groups; and technology coordination and dissemination.

NTTAC will provide targeted technical assistance to State and local child-serving agencies, Indian tribes and tribal organizations, and Pacific Island jurisdictions to provide support for integrated, responsive mental health delivery systems for children, adolescents and their families (with families being broadly defined to include a variety of caretakers such as grandparents and extended kinship relationships). Activities will serve to implement the six goals set out by the President's New Freedom Commission Report, with a special focus on the following recommendations: create a comprehensive state mental health plan; promote the mental health of young children; advance evidence-based practices using dissemination and demonstration projects and create a public-private partnership to guide their implementation; improve and expand the workforce providing

evidence-based mental health services and supports; develop and implement integrated electronic health record and personal health information systems; create individualized plans of care for children and their families; address cultural, racial, and geographic disparities; and promote early identification and intervention.

In fulfilling its responsibilities, the NTTAC may implement any of the infrastructure development activities listed in the INF-05PA. However, the NTTAC must undertake the following:

- **Collaboration and Coordination:** NTTAC will be required to demonstrate collaborative efforts across child and family mental health service system partners, including the Council on Collaboration and Coordination for the cooperative agreements funded under the Comprehensive Community Mental Health Services for Children and Their Families Program, also referred to as the Children's Mental Health Initiative. The CCC is an organization comprising the leadership of the Child, Adolescent and Family Branch, CMHS-contracted technical assistance providers, and representatives of family members, youth, and leaders from the CMHS-funded Children's Mental Health Initiative funded communities. The mission of the CCC is to help the grantee sites envision and implement comprehensive systems of care for children and youth with serious mental health problems, and their families. This is done through a team process of collaboration among the technical assistance providers, which puts the communities at the center of a coordinated approach to technical assistance and support.

Another area of collaboration is to assist with the Federal National Partnership (FNP) for children's mental health. The FNP is a coalition representing over 21 child-serving Federal agencies, over 30 national child-serving organizations, as well as family and youth leaders. The purpose of the FNP is to implement the child, youth, and family recommendations from *Achieving the Promise: Transforming Mental Health Care in America*. The NTTAC shall provide support to coordinate FNP activities, including assisting the Government Project Officer responsible for the FNP implement an annual meeting, and provide ongoing support between annual meetings to help ensure that FNP participants follow through with the implementation of any measurable outcomes proposed at each meeting and approved by SAMHSA in coordination with ongoing SAMHSA efforts.

- **Major Meetings and Training Activities:** An effective technical assistance tool has been the use of various institutes and meetings such as Policy Academies, Training Institutes, an Early Childhood Academy, a Workforce Development Academy, System of Care Primer Training, and a Leadership Academy. It is anticipated that this type of activity will be continued and new training programs developed.

**[Note: The successful applicant must be prepared and agree to assume responsibility for ongoing hotel and other logistical arrangements that may be underway for the planned 2006 Training Institutes.]**

- Cultural and Linguistic Competence/Cultural Disparities: The NTTAC will be expected to focus specific attention and dedicate resources on strategies to improve cultural and linguistic competence and responsiveness, and to eliminate racial, ethnic and geographic disparities within the health care delivery system. This includes demonstrating the ability to provide technical assistance to ensure that age, gender, and culture are addressed.
- Support to Child and Adolescent Mental Health and Substance Abuse State Infrastructure Grantees: The NTTAC will be expected to provide technical assistance for State capacity building in cooperation with the Center for Substance Abuse Treatment technical assistance contractor. As part of this program NTTAC shall assist States in learning new skills and strategies for comprehensive cross-agency planning designed to improve service delivery systems for youth with co-occurring disorders and their families.
- Support to States/Collaboration with National Organizations: The NTTAC will be expected to coordinate efforts with other national organizations to help build knowledge and skill in child, adolescent and family mental health. As part of this effort, the NTTAC shall assist with State efforts to transform the child, youth and family service system.
- Create Training Forums and Materials – The NTTAC will be expected to develop and conduct a schedule of monthly national conference calls that offer opportunities to discuss strategies that promote systems development and improve outcomes for children and their families. The applicant will develop and use web-based data and technical assistance resources to provide the most current and relevant information on emerging issues in the field. The applicant will also produce policy briefs on topical subject areas that could include, but are not limited to, evidence-based interventions, financing strategies, early intervention, early childhood mental health, co-occurring substance abuse and mental disorders, vulnerable populations and data management and accountability.

## II. Award Information

**1. Estimated Funding Available/Number of Awards:** It is expected that up to a total of \$3.35 million will be available to fund one NTTAC award in FY 2005. Of this total amount, approximately \$250,000 is included to provide technical assistance for State capacity building to grantees initially funded in FY 2004 under the Child and Adolescent Mental Health and Substance Abuse State Infrastructure Grants Program (announcement number SM 04-006).

An additional \$150,000 may become available through agreement with another Federal agency to support a position for an expert in issues related to child welfare and mental health. Applicants should include these additional dollars in their proposed budgets and should include a corresponding plan for the staff and support positions in the Project Narrative of the application.

The maximum allowable award is \$3.5 million in total costs (direct and indirect) per year for up to five years. **Proposed budgets cannot exceed the allowable amount in any year of the proposed project.** Annual continuations will depend on the availability of funds, grantee progress in meeting program goals and objectives, and timely submission of required data and reports.

## **2. Funding Instrument:** Cooperative Agreement

### Role and Responsibilities of Federal Staff:

It is the responsibility of the Government Project Officer (GPO) who is overseeing the cooperative agreement to monitor the overall progress of the program. The GPO's role for this cooperative agreement includes: (1) providing technical assistance to the grantee in implementing project activities throughout the course of the project; (2) reviewing and approving each stage of project activities; and (3) providing technical monitoring to permit oversight of the project activities. The project officer may conduct site visits to monitor the development of the training and technical assistance activities and/or engage consultants to provide advice on programmatic issues and conduct site visits.

### Role and Responsibilities of the Grantee:

The grantee is expected to participate and cooperate fully with CMHS staff in the implementation and evaluation of the project. Activities include: (1) compliance with all aspects of the terms and conditions of the cooperative agreement; (2) cooperation with CMHS staff in accepting guidance and responding to requests for data; (3) participation on policy steering committee or other work groups established to facilitate accomplishment of the project goals; and, (4) authorship or co-authorship of publications to make results of the project available to other programs impacting children's mental health.

## **III. Eligibility Information**

**1. Eligible Applicants** are domestic public and private nonprofit entities. For example, State, local or tribal governments, public or private universities and colleges, community- and faith-based organizations, and tribal organizations may apply. The statutory authority for this program prohibits grants to for-profit organizations.

**2. Cost Sharing or Matching** is not required.

**3. Other:** Applicants must also meet certain application formatting and submission requirements or the application will be screened out and will not be reviewed. These requirements are described in Section IV-2 below as well as in Section IV-2.3 of the INF-05 PA.

## IV. Application and Submission Information

**1. Address to Request Application Package:** Complete application kits may be obtained from the National Mental Health Information Center at 1-800-789-2647. When requesting an application kit for this program, the applicant must specify the funding opportunity title (NTTAC) and number (SM-05-013). All information necessary to apply, including where to submit applications and application deadline instructions, is included in the application kit. The PHS 5161-1 application form is also available electronically via SAMHSA's World Wide Web Home Page: <http://www.samhsa.gov> (Click on 'Grant Opportunities'), and the INF-05 PA is available electronically at: <http://www.samhsa.gov/grants/standard/2005/Infrastructure/index.asp>.

When submitting an application, be sure to type "SM-05-013/NTTAC" in Item Number 10 on the face page of the application form. Also, SAMHSA applicants are required to provide a DUNS number on the face page of the application. To obtain a DUNS Number, access the Dun and Bradstreet web site at [www.dunandbradstreet.com](http://www.dunandbradstreet.com) or call 1-866-705-5711.

**2. Content and Form of Application Submission:** Information including required documents, required application components, and application formatting requirements is available in the INF-05 PA in Section IV-2.

**Please note that the Project Narrative for this announcement may not exceed 50 pages. This provision is unique to the NTTAC Cooperative Agreement and supersedes the 25 page limit contained in the INF-05 PA.**

### Checklist for Formatting Requirements

*SAMHSA's goal is to review all applications submitted for grant funding. However, this goal must be balanced against SAMHSA's obligation to ensure equitable treatment of applications. For this reason, SAMHSA has established certain formatting requirements for its applications. **If you do not adhere to these requirements, your application will be screened out and returned to you without review.***

- Use the PHS 5161-1 application.
- Applications must be received by the application deadline or have proof of timely submission, as detailed in Section IV-3 of the INF-05 PA.
- Information provided must be sufficient for review.

- ❑ Text must be legible. (For Project Narratives submitted electronically in Microsoft Word, see separate requirements below under “Guidance for Electronic Submission of Applications.”)
  - Type size in the Project Narrative cannot exceed an average of 15 characters per inch, as measured on the physical page. (Type size in charts, tables, graphs, and footnotes will not be considered in determining compliance.)
  - Text in the Project Narrative cannot exceed 6 lines per vertical inch.
  
- ❑ Paper must be white paper and 8.5 inches by 11.0 inches in size.
  
- ❑ To ensure equity among applications, the amount of space allowed for the Project Narrative cannot be exceeded. (For Project Narratives submitted electronically in Microsoft Word, see separate requirements below under “Guidance for Electronic Submission of Applications.”)
  - Applications would meet this requirement by using all margins (left, right, top, bottom) of at least one inch each, and adhering to the 50 page limit for the Project Narrative.
  - Should an application not conform to these margin or page limits, SAMHSA will use the following method to determine compliance: The total area of the Project Narrative (excluding margins, but including charts, tables, graphs and footnotes) cannot exceed 58.5 square inches multiplied by the 50 page limit. This number represents the full page less margins, multiplied by the total number of allowed pages.
  - Space will be measured on the physical page. Space left blank within the Project Narrative (excluding margins) is considered part of the Project Narrative, in determining compliance.

To facilitate review of your application, follow these additional guidelines. Failure to adhere to the following guidelines will not, in itself, result in your application being screened out and returned without review. However, the information provided in your application must be sufficient for review. Following these guidelines will help ensure your application is complete, and will help reviewers to consider your application.

- ❑ The 10 application components required for SAMHSA applications should be included. These are:
  - Face Page (Standard Form 424, which is in PHS 5161-1)
  - Abstract
  - Table of Contents
  - Budget Form (Standard Form 424A, which is in PHS 5161-1)
  - Project Narrative and Supporting Documentation
  - Appendices

- Assurances (Standard Form 424B, which is in PHS 5161-1)
  - Certifications (a form in PHS 5161-1)
  - Disclosure of Lobbying Activities (Standard Form LLL, which is in PHS 5161-1)
  - Checklist (a form in PHS 5161-1)
- Applications should comply with the following requirements:
- Provisions relating to confidentiality, participant protection and the protection of human subjects, as indicated in the INF-05 PA.
  - Budgetary limitations as indicated in Sections I, II, and IV-5 of the INF-05 PA.
  - Documentation of nonprofit status as required in the PHS 5161-1.
- Pages should be typed single-spaced in black ink, with one column per page. Pages should not have printing on both sides.
- Please number pages consecutively from beginning to end so that information can be located easily during review of the application. The cover page should be page 1, the abstract page should be page 2, and the table of contents page should be page 3. Appendices should be labeled and separated from the Project Narrative and budget section, and the pages should be numbered to continue the sequence.
- The page limit for Appendices stated in the specific funding announcement should not be exceeded.
- Send the original application and two copies to the mailing address in the funding announcement. Please do not use staples, paper clips, and fasteners. Nothing should be attached, stapled, folded, or pasted. Do not use heavy or lightweight paper, or any material that cannot be copied using automatic copying machines. Odd-sized and oversized attachments such as posters will not be copied or sent to reviewers. Do not include videotapes, audiotapes, or CD-ROMs.

### **Guidance for Electronic Submission of Applications**

SAMHSA is now offering the opportunity for you to submit your application to us either in electronic or paper format. Electronic submission is voluntary. No review points will be added or deducted, regardless of whether you use the electronic or paper format.

To submit an application electronically, you must use the [www.Grants.gov](http://www.Grants.gov) apply site. You will be able to download a copy of the application package from [www.Grants.gov](http://www.Grants.gov), complete it off-line, and then upload and submit the application via the Grants.gov site. E-mail submissions will not be accepted.

You must search the Grants.gov site for the downloadable application package, by the Catalogue of Federal Domestic Assistance (CFDA) number. You can find the CFDA number on the first page of the funding announcement.

You must follow the instructions in the User Guide available at: [www.Grants.gov](http://www.Grants.gov) apply site, on the Customer Support tab. In addition to the User Guide, you may wish to use the following sources for help:

- By e-mail: [support@Grants.gov](mailto:support@Grants.gov)
- By phone: 1-800-518-4726 (1-800-518-GRANTS). The Customer Support Center is open from 7:00 a.m. to 9:00 p.m. Eastern Time, Monday through Friday.

If this is the first time you have submitted an application through Grants.gov, you must complete four separate registration processes before you can submit your application. Allow at least **two weeks** (10 business days) for these registration processes, prior to submitting your application. The processes are: DUNS Number registration, Central Contractor Registry (CCR) registration, Credential Provider registration, and Grants.gov registration.

**It is strongly recommended that you submit your grant application using Microsoft Office products (e.g., Microsoft Word, Microsoft Excel, etc.).** If you do not have access to Microsoft Office products, you may submit a PDF file. Directions for creating PDF files can be found on the Grants.gov Web site. Use of file formats other than Microsoft Office or PDF may result in your file being unreadable by our staff.

The Project Narrative must be a separate document in the electronic submission. Formatting requirements for SAMHSA grant applications are described above, and in Section IV-2.3 and Appendix A of the standard grant announcement. These requirements also apply to applications submitted electronically, with the following exceptions only for Project Narratives submitted electronically in Microsoft Word. These requirements help to ensure the accurate transmission and equitable treatment of applications.

- *Text legibility:* Use a font of Times New Roman 12, line spacing of single space, and all margins (left, right, top, bottom) of one inch each. Adhering to these standards will help to ensure the accurate transmission of your document. If the type size in the Project Narrative of an electronic submission exceeds 15 characters per inch, or the text exceeds 6 lines per vertical inch, SAMHSA will reformat the document to Times New Roman 12, with line spacing of single space. Please note that this may alter the formatting of your document, especially for charts, tables, graphs, and footnotes.

- *Amount of space allowed for Project Narrative:* The Project Narrative for an electronic submission may not exceed 25,750 words. **Any part of the Project Narrative in excess of the word limit will not be submitted to review.** To determine the number of words in your Project Narrative document in Microsoft Word, select file/properties/statistics.

Applicants are strongly encouraged to submit their applications to Grants.gov early enough to resolve any unanticipated difficulties prior to the deadline. You may also submit a back-up paper submission of your application. Any such paper submission must be received in accordance with the requirements for timely submission detailed in Section IV-3 of the grant announcement. The paper submission must be clearly marked: “Back-up for electronic submission.” The paper submission must conform with all requirements for non-electronic submissions. If both electronic and back-up paper submissions are received by the deadline, the electronic version will be considered the official submission.

After you electronically submit your application, you will receive an automatic acknowledgement from Grants.gov that contains a Grants.gov tracking number. It is important that you retain this number.

The Grants.gov Web site does not accept electronic signatures at this time. Therefore, you must submit a signed paper original of the face page (SF 424), the assurances (SF 424B), and the certifications, and hard copy of any other required documentation that cannot be submitted electronically. **You must reference the Grants.gov tracking number for your application, on these documents with original signatures, and send the documents to the following address. The documents must be received at the following address within 5 business days of your electronic submission.** Delays in receipt of these documents may impact the score your application receives or the ability of your application to be funded.

**For United States Postal Service:**

Crystal Saunders, Director of Grant Review  
Office of Program Services  
Substance Abuse and Mental Health Services Administration  
Room 3-1044  
1 Choke Cherry Road  
Rockville, MD **20857**  
ATTN: Electronic Applications

**For other delivery service (DHL, Falcon Carrier, Federal Express, United Parcel Service):**

Crystal Saunders, Director of Grant Review  
Office of Program Services  
Substance Abuse and Mental Health Services Administration  
Room 3-1044  
1 Choke Cherry Road  
Rockville, MD **20850**  
ATTN: Electronic Applications

If you require a phone number for delivery, you may use (240) 276-1199.

**3. Submission Dates and Times:** Applications must be received by April 29, 2005. You will be notified by postal mail that your application has been received. Additional submission information is available in the INF-05 PA in Section IV-3.

**4. Intergovernmental Review:** Applicants for this funding opportunity must comply with Executive Order 12372 (E.O.12372). E.O.12372, as implemented through Department of Health and Human Services (DHHS) regulation at 45 CFR Part 100, sets up a system for State and local review of applications for Federal financial assistance. Instructions for complying with E.O. 12372 are provided in the INF-05 PA in Section IV-4. A current listing of State Single Points of Contact (SPOCs) is included in the application kit and is available at [www.whitehouse.gov/omb/grants/spoc.html](http://www.whitehouse.gov/omb/grants/spoc.html).

**5. Funding Restrictions:** Information concerning funding restrictions is available in the INF-05 PA in Section IV-5.

**V. Application Review Information**

**1. Evaluation Criteria:** Applications will be reviewed against the Evaluation Criteria and requirements for the Project Narrative specified in the INF-05 PA. The following information describes exceptions or limitations to the INF-05 PA and provides special requirements that pertain only to NTTAC grants. Applicants must discuss the following requirements in their applications, in addition to the requirements specified in the INF-05 PA:

**1.1 In “Section A: Statement of Need”:**

In describing the needs of the target population and the need for an enhanced infrastructure, as required by the first two bullets under Section A-Statement of Need in the INF-05 PA, applicants must describe the needs of the primary users of the NTTAC (States, territories and tribal nations) for training and technical assistance on children’s mental health issues. [Note that the “catchment area” for

the NTTAC is the nation as a whole.] Applicants must discuss the key issues relating to child mental health that confront the primary users of the NTTAC, as well as the types of training and technical assistance needed by these entities to enable them to respond adequately to those issues. Applicants must also specifically address the need for training and technical assistance addressing the priority focus areas referenced in Section I-Funding Opportunity Description of this NOFA.

## **1.2 In “Section B: Proposed Approach”:**

- a. In describing the proposed project, as required in the second bullet of Section B in the INF-05 PA, applicants must describe plans for implementing the following required activities in a manner that addresses the needs identified in Section A: training institutes, policy academies, leadership development, efforts to address cultural competence, and other training and technical assistance activities.
- b. Applicants must also describe plans for integrating the priority focus areas (described in Section I – Funding Opportunity Description of this NOFA) into the planned activities for the project.
- c. Applicants are **not** required to provide a plan to secure resources to sustain the proposed infrastructure enhancements when Federal funding ends, as is required in Section B in the INF-05 PA.

**1.3 Additional Information:** Applicants should refer to the Notice of Funding Availability for Child and Adolescent Mental Health and Substance Abuse State Infrastructure Grants, SM 04-006, for information on requirements for providing technical assistance for State capacity building to programs funded under SM 04-006, available at [www.samhsa.gov](http://www.samhsa.gov).

**1.4 Performance Measurement:** All SAMHSA grantees are required to collect and report certain data so that SAMHSA can meet its obligations under the Government Performance and Results Act (GPRA). Grantees of the NTTAC program will be required to report performance in the following areas.

- Increase outreach to prospective technical assistance recipients, including community-based and faith-based organizations.
- Increase the number of technical assistance recipients that demonstrate inclusion of family members and youth in planning, policy, and service delivery decisions.
- Increase the use of evidence-based models/interventions by technical assistance recipients.
- Increase the number of technical assistance recipients using a system-of-care approach.

Applicants must document their ability to collect and report the required data in “Section D: Evaluation and Data” of their applications. At the present time, SAMHSA has not established standard definitions or a standard methodology for

collecting data on the performance measures listed above. SAMHSA will work with grantees to finalize a standard methodology related to these and other indicators shortly after award.

**2. Review and Selection Process:** Information about the review and selection process is available in the INF-05 PA in Section V-2.

**VI. Award Administration Information:** Award administration information, including award notices, administrative and national policy requirements and reporting requirements are available in the INF-05 PA in Section VI. SAMHSA's standard terms and conditions are available at [http://www.samhsa.gov/grants/generalinfo/grants\\_management.aspx](http://www.samhsa.gov/grants/generalinfo/grants_management.aspx).

**VII. Agency Contact for Additional Information:** For questions concerning program issues, contact: Michele Herman, SAMHSA/CMHS, Child, Adolescent and Family Branch, 1 Choke Cherry Road, Room 6-1041; Rockville, MD 20857; 240-276-1924; E-mail: [michele.herman@samhsa.hhs.gov](mailto:michele.herman@samhsa.hhs.gov). For questions on grants management issues, contact: Kimberly Pendleton, SAMHSA/Division of Grants Management, 1 Choke Cherry Road, Room 7-1085; Rockville, MD 20857; 240-276-1400; E-mail: [kimberly.pendleton@samhsa.hhs.gov](mailto:kimberly.pendleton@samhsa.hhs.gov).

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Dated:

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Signed: Daryl Kade  
Director, Office of Policy Planning and Budget  
Substance Abuse and Mental Health Services  
Administration