Follow the six steps in the application process:

1. Review the Opportunity
2. Get Ready to Apply
3. Prepare Your Application
4. Learn About Review and Award
5. Submit Your Application
6. Learn About What Happens After Award

Substance Abuse and Mental Health Services Administration (SAMHSA)

NOFO Name: Behavioral Health Partnerships for Early Diversion of Adults and Youth

Short Title: Early Diversion

NOFO Number: SM-26-025

Step 1: Review the Opportunity

Basic Information

Key Facts

Opportunity Name: Behavioral Health Partnerships for Early Diversion of Adults and Youth

Short Title: Early Diversion

Opportunity Number: SM-26-025

Announcement Version: Original

Federal Assistance Listing: 93.532

Eligible Applicants: Eligibility is statutorily limited to States; political subdivisions of states; Indian tribes or tribal organizations (as defined in Section 4 of the Indian Self-Determination and Education Assistance Act), acting directly or through agreements with public or nonprofit entities; or a health facility or program operated in accordance with a contract or award with the Indian Health Service.

See **Eligibility** for complete eligibility information.

Key Dates

Application deadline: **July 15, 2026**

Expected Award Date: 09/01/2026

Expected Start Date: 09/30/2026

Response to Executive Order 12372: See **Intergovernmental Review** and ***Section J*** in the *Application Guide.*

Important Resources

You are expected to follow guidance provided in the ***FY 2026 NOFO Application Guide*** (the *Application Guide*). This document provides information about the application process, including registration, required attachments, budget, and federal policies and regulations. In addition, see the **SAMHSA Grants Glossary** for definitions of terms used in this NOFO.

Authorizing Statute

Section 520G of the Public Health Service Act, (42 U.S. Code 290bb-38), as amended.

Agency Contacts

Program and Eligibility Questions

Gregory Crawford
Center for Mental Health Services
240-276-2754
earlydiversionmailbox@samhsa.hhs.gov

Financial and Budget Questions

Office of Financial Resources
Division of Grants Management
240-276-1940
NOFOBudget.CMHS@samhsa.hhs.gov

Review Process and Application Status Questions

Office of Financial Resources
Division of Grant Review
Eileen Smith
Eileen.Smith@samhsa.hhs.gov

Summary

The purpose of this program is to develop and implement a program to divert youth and/or adults with mental health or co-occurring disorders who are at risk of criminal and/or juvenile justice involvement to community-based services **before arrest or booking**. Working with community partners, the program identifies where help is needed to provide early diversion services to stabilize the individual. Services could include outreach, screening, crisis evaluation, brief counseling or support, and connecting the person to longer-term care in the community.

With this program, SAMHSA aims to reduce the number of adults and/or youth with a mental health or co-occurring disorder from becoming involved in the criminal justice system through diversion to needed services. [**NOTE**: Priority points will be given if you are proposing to serve veterans. See **Merit Review, Section A**.]

This program is designed to advance SAMHSA's Strategic Priorities and the Make America Healthy Again agenda.

Funding Details

Funding Type: Grant

Estimated Total Available Funding: $7,027,991

Estimated Number of Awards: 10

Estimated Award Amount: Up to $650,000 per year per award

Length of Project Period: Up to 5 Years

Your annual budget cannot be more than $650,000 in total costs (direct and indirect) in any year of the project. Annual continuation awards are contingent on the availability of funds, progress in meeting project goals and objectives, timely submission of required data and reports, compliance with all terms and conditions of award, and alignment with SAMHSA, HHS, and Trump Administration priorities.

Program Description

Purpose

The purpose of this program is to develop and implement a program to divert youth and/or adults with mental health or co-occurring disorders who are at risk of criminal and/or juvenile justice involvement to community-based services **before arrest or booking**.

Individuals with mental health or co-occurring disorders are overrepresented in justice systems. Pre-arrest diversion programs may effectively reduce crime recidivism, incarceration, and overdose deaths. These programs can also improve public safety.

This program aligns with July 2025 Executive Order, "**Ending Crime and Disorder on America's Streets**." The program also aligns with **SAMHSA's Strategic Priorities** by:

- Addressing serious mental illness
- Expanding crisis intervention care and services
- Improving access to evidence-based treatment for mental illness, substance use, and co-occurring disorders

All activities proposed in your application and budget narrative must align with applicable law, including but not limited to statutes, executive orders, federal regulations and applicable judicial holdings. Accordingly, discretionary awards shall not be used to fund, promote, encourage, subsidize, or facilitate; racial preferences or other forms of racial discrimination by the recipient, including activities where race or intentional proxies for race will be used as a selection criterion for employment or program participation; denial by the recipient of the sex binary in humans, or the belief that sex is a chosen or mutable characteristic; illegal immigration; or any other initiatives that compromise public safety. If an application does not align, the application will not receive funding to the extent permitted by law and applicable court orders.

In addition, applications must also align with SAMHSA Strategic Priorities and the application and budget narrative must not support harm reduction as outlined in SAMHSA's Dear Colleague Letter on harm reduction.

As of October 1, 2025, HHS has adopted **2 CFR Part 200**, with some modifications included in 2 CFR Part 300. These regulations replace those in 45 CFR Part 75.

Key Personnel

Key Personnel are essential to the successful implementation and oversight of your SAMHSA-funded project. These individuals, even if their salaries are not paid for with grant funding, must play a substantive role in project execution and be actively involved in monitoring, reporting, and compliance activities throughout the project period.

The Key Personnel for this program are as follows:

- **Project Director (PD):** The PD must oversee the grant to ensure goals are met, all reports are filed on time, and all rules are followed. The PD must be 100% level of effort of a full-time equivalent (FTE) position. The PD role can be shared by two individuals.
- **Project Evaluator (PE):** The PE must oversee tasks related to GPRA data collection and other evaluation activities required to demonstrate the effectiveness of the project's goals and objectives**.** The PE level of effort must be a minimum of 25% FTE.

Below are the expectations, requirements, and compliance obligations for Key Personnel under this NOFO:

- Key Personnel are expected to participate regularly in program monitoring and maintain consistent communication with SAMHSA staff.
- Key Personnel selected/hired for this grant must be based only on merit and qualifications. Executive Orders strictly prohibit using demographics (like race or sex) to give preference in hiring.
- Key Personnel must have the skills, time, and commitment to meet the expectations of the grant.
- If awarded funding, approved Key Personnel will be identified on the Notice of Award.
- Changes to Key Personnel require written prior approval from SAMHSA. This includes:
    - Replacing or removing Key Personnel.
    - Reducing any Key Personnel's level of effort by 25% or more.

Required Activities

Funds for this program are primarily used to support services delivery and strengthen a community's ability to divert youth and/or adults with a mental health or co-occurring disorder who are at risk of criminal or juvenile justice involvement. Services must begin within **four** months after receiving the award.

- In the Project Narrative (**B.2**), you will provide a description of how you will implement all required activities listed below.

Nothing in the required or allowable activities described below allows you to use grant funds for prohibited activities described in the **Funding Restrictions and Limitations** section of this NOFO.

Your organization is required to implement all required activities listed below:

1. **Conduct an Early Diversion Community System Mapping**

   When: Within **two months after award**, and update again during the fourth quarter of Year 3

   Conduct an Early Diversion Community System Mapping (e.g., **Sequential Intercept Model** (SIM)) with input from the Coalition Key Partners, as outlined in Required Activity #5. The mapping must identify:

   - At the Community Level: the early intervention points, current resources and gaps; key elements for diversion at this level
   - At the Law Enforcement Level: how law enforcement and emergency services respond to youth and/or adults with mental and co-occurring disorders; current resources and gaps; key elements for diversion at this level
   - Local community-based mental health and substance use providers to support diversion
   - Other local, state and/or federal resources
   - Ways to enhance referrals, trainings, and resources across providers and community stakeholders

2. **Develop an Early Diversion Plan**

   When: Within **three months of award**, and updated annually

   Develop an Early Diversion Plan that is informed by your Community System Mapping to create or expand evidence-based community-based mental health services for individuals being diverted from the criminal and/or juvenile justice system and integrate the program into an existing system of care. The Plan must include:

- A list of local, state and/or federal community-based mental health and substance use disorder services that are available for adults and/or youth
- Identification of linkages to services, supports, and case management in lieu of booking or arrest
- Identification of linkages to other related community-based services (e.g., medication management, peer recovery support services, psychiatric rehabilitation, life skills training, housing placement, job placement, vocational training, healthcare)
- Identification of training needs and resources for community-based providers and other local stakeholders
- All items you will be delivering for Required Activity #3

3. **Create or expand community-based mental health services**

   When: Within four months of award

   Using your Early Diversion Plan, create or expand evidence-based community-based mental health services for individuals being diverted from the criminal justice system and integrate the program into an existing system of care. Services should include:

   - Short-term (less than 3 months) Early Diversion services for behavioral health stabilization that may include:
     - Case management
     - Outreach to individuals at risk for criminal justice involvement
     - Screening of youth and/or adults with mental illness or co-occurring disorder for risk of criminal or juvenile justice involvement
     - Crisis assessment and intervention
     - Brief interventions to engage individuals in care
     - Individual supportive therapy
   - Referral to appropriate longer-term services that may include:
     - Assertive community treatment
     - Medication management access
     - Integrated mental health and co-occurring substance use treatment
     - Peer recovery support services
     - Psychiatric rehabilitation
     - Illness education and symptom coping skills training
     - Supported employment services

- Assistance with activities of daily living

4. **Coordinate the Community-Based Mental Health Services with Social Services**

   Coordinate the community-based mental health services with social services. The social services could include:

   - Life skills training
   - Housing placement
   - Vocational training
   - Education and job placement
   - Health care

5. **Establish and Lead an Early (Pre-Arrest/Booking) Diversion Coalition**

   When: Throughout the project period, and continue to meet at least quarterly for the entire project period

   Establish and lead an Early Diversion Coalition (Coalition) that brings together the primary agencies/organizations that come into contact with youth and/or adults with a mental illness or co-occurring disorder who are at risk of criminal and/or juvenile justice involvement.

   The purpose of the Coalition is to develop, strengthen, and implement cross-system strategies to divert individuals from arrest and booking into community-based services.

   The Coalition is responsible for:

   - Establishing the scope, purpose, and goals of the coalition
   - Leading the development and tracking progress of Early Diversion Community System Mapping and the Early Diversion Plan
   - Developing and Providing Early Diversion Training and Resources
   - Identifying and implementing strategies for sustainability after Federal support ends

   At a minimum, the Coalition must include these Key Coalition Partners from the community:

   - Mental health system
   - Substance use disorder treatment system
   - Criminal and/or juvenile justice systems
   - Crisis response providers (e.g., 988 Suicide & Crisis Lifeline centers, mobile crisis teams, mobile crisis stabilization units, co-responder programs)

- Law enforcement officers and/or other first responders (e.g., police officers, emergency medical technicians/paramedics, firefighters)

Letters of Intent (LOIs) from each of these Key Coalition Partner organization must be submitted with the application as Attachment 1. See **Attachment 1** for further details.

6. **Develop and Provide Early Diversion Training and Resources**

   When: Within **six months after award**, and updated throughout the project period

   Develop and provide training and resources to community-based providers and other local stakeholders on the functions of the Coalition and early diversion practices. The training and resources could include:

   - Screening to identify the adults and/or youth at risk of criminal and/or juvenile justice involvement
   - Coordination and referrals from the Coalition partners on diversion efforts prior to arrest and booking
   - Follow-up and outreach to ensure adults and/or youth who are diverted are connected to services and supports
   - Mental illness and substance use awareness and identification
   - Crisis resolution practices (e.g., crisis intervention and de-escalation techniques)

   The trainings and resources should be directly aligned with your Coalition's plans to divert individuals. The community-based providers and local stakeholders to be trained could include, but are not limited to:

   - Mental health and substance use treatment providers/professionals
   - Paraprofessionals
   - Judges and judiciary staff
   - Law enforcement officers and corrections
   - Attorneys (e.g. prosecutors, public defenders)
   - Other first responders and health professionals
   - Community supervision providers (e.g., parole, probation)

7. **Create and Implement a Sustainability Plan**

   When: By the end of Year 3

   Create and implement a Sustainability Plan with input and buy-in from the Coalition. The Sustainability plan will identify ways for sustaining activities following the conclusion of federal support.

Allowable Activities

Allowable activities are **not** required. However, your organization may propose to use funds for the following activities:

1. Identify and/or develop technology (e.g., mobile applications) that increases efficiency and effectiveness during crisis response to foster diversion from arrest and/or booking.
2. Consider the communities that will be affected by this project and engage them in the overall program planning. To do so, SAMHSA encourages applicants to:
    - Engage communities, when practicable, during the design phase, and
    - Develop programs in consultation with communities benefiting from or impacted by the program.
3. Collaborate with SAMHSA-supported and other federal and non-federal technical assistance (TA) programs to identify opportunities for obtaining TA on early diversion and other topics. See e.g., **https://www.samhsa.gov/technical-assistance**

Eligibility

Eligible Applicants

Eligibility is statutorily limited to:

- States
- Political subdivisions of states
- Indian Tribes and Tribal organizations (as the terms ‘‘Indian tribes’’ and ‘‘tribal organizations’’ are defined in section 4 of the **Indian Self-Determination and Education Assistance Act**), acting directly or through agreements with other public or nonprofit entities
- A health facility, or program operated by or in accordance with a contract or award with the Indian Health Service.

NOTE: If you are a nonprofit organization, you must provide documentation of your nonprofit status in **Attachment 8** of your application.

NOTE: In **Attachment 11,** you must submit a statement that your application and project focus is on developing the capacity and services to divert youth and/or adults with SMI or co-occurring disorder prior to arrest and booking only.

- Applications that do not include a completed **Attachment 11** will be screened out and not reviewed.

- If your application indicates that you will be developing the capacity and services to divert individuals after arrest or booking, SAMHSA may reach out to you to request additional information. **If it is confirmed that you are not diverting individuals before arrest or booking, your application will not be considered for award.**

NOTE: If you are currently funded under **SM-23-012**, you are not eligible to apply under this NOFO. A complete list of ineligible applicants can be found in **Appendix A.**

For general information on eligibility for federal awards, see the **Grants.gov website**. For specific eligibility questions, see **Agency Contacts**.

Cost Sharing

This program requires cost sharing/match under Section 520G of the Public Health Service Act, as amended. For each year of the project, you must provide matching non-federal funds that are no less than 25 percent of the total award. Non-federal contributions may be in cash or in-kind.

A letter certifying that matching funds for the proposed project are available and are non-federal funds must be included in **Attachment 10** as the Non-Federal Match Certification letter.

The non-Federal match letter must specify the following:

- The names of the expected source(s) of funding;
- The amount of matching funds from each funding source; and
- The type of sources (e.g., juvenile justice, criminal justice).

Cost-sharing/match funds must go toward the costs of approved project activities. For more information on cost-sharing, see **FAQs**.

Data Collection, Performance Measurement, and Performance Assessment

You must collect and report data and document your plan for data collection and reporting in **Section E** of your Project Narrative.

You must collect and report in SAMHSA's Performance Accountability and Reporting System (SPARS) project-level data on a quarterly basis. Data are to be submitted within 30 days after the end of each quarter. You will be required to report on performance measurement indicators related to:

- Number of new individuals trained to identify signs and symptoms of co-occurring mental illness and substance use disorders.
- Number of individuals who have received training on mental health promotion.

- Number of new individuals trained in suicide prevention and/or behavioral health crisis response.
- Number of new individuals who received behavioral health services.

You will receive training and technical assistance on SPARS after award.

The data you collect allows SAMHSA to report on key outcome measures. Performance data may be reported to the public.

Using Evidence-Based and Evidence-Informed Practices

SAMHSA funds are used to provide services or practices that are proven to be evidence based and are appropriate for the individuals to be served by the project. In **Section C** of the Project Narrative, you must identify the evidence-based practice (EBP) and/or evidence-informed practice (EIP) that will be used. For more information, see the **Grants Glossary.**

If an EBP(s) exists for the individuals to be served and types of problems or disorders being addressed, it is expected you will use the available EBP(s). If an EBP does not exist but there are evidence-informed practices that are appropriate, you may implement these interventions. In **C.3**, you must discuss how you will ensure the fidelity of the practices you will implement.

You can visit SAMHSA's **Evidence-Based Practices Resource Center** to identify the appropriate practices for mental illness and substance use prevention, treatment, and recovery support that can be used in your project.

Performance Assessment

Discretionary awards should include clear benchmarks/objectives for measuring success and progress toward relevant goals. Recipients are required to submit programmatic progress reports that demonstrate if you are meeting the objectives you selected for this project and achieving the outcomes you anticipated, and if any changes need to be made. You must review your performance data to find out if you are making progress and improving project management. Refer to **Reporting Requirements** for information on submitting these reports.

For more information on completing this section, see **Developing Goals and Measurable Objectives** and **Developing the Plan for Data Collection and Performance Measurement**.

SAMHSA Strategic Priorities and Other Expectations

When developing your project, you must consider **SAMHSA's Strategic Priorities**, which includes recovery, a commitment to innovation, data, gold-standard science, and access to high quality services for all, which align with the Administration's **Make America Healthy Again**

initiative. In addition, there are other expectations included in ***Section I*** in the *Application Guide* that you must consider as you design your project.

As a part of the project funded under this NOFO, you are required to adhere to the following principles where consistent with the authority and scope of the award and its activities:

1. **Evidence-Based and Outcome-Focused Practices:** Design and deliver services using evidence-based or evidence-informed approaches grounded in gold-standard science, establish measurable performance goals, and use data to monitor outcomes and drive continuous improvement and accountability.
2. **Program Integrity and Fiscal Stewardship:** Administer funds in accordance with all applicable federal statutes, regulations, and award conditions; maintain strong internal controls; and ensure the efficient and effective use of taxpayer dollars while preventing waste, fraud, and abuse.
3. **Partnership and Coordination:** Consistent with program purpose and authorization, coordinate with law enforcement, juvenile and criminal justice systems, civil courts and civil commitment systems (including Assisted Outpatient Treatment programs where available and in alignment with state law), crisis services (including the 988 Crisis and Suicide Lifeline), and state, tribal, territorial, local, and community partners, as appropriate, to engage individuals in prevention activities, treatment, and support while tailoring services to meet community needs.

In addition, your organization should advance the following objectives in programs that are authorized to advance them:

4. **Treatment for Serious Mental Illness and Complex Needs:** Serve individuals with the most serious and complex behavioral health needs, including those with serious mental illness and co-occurring substance use disorders, through access to evidence-based treatment.
5. **Crisis Intervention and Emergency Services:** Expand access to crisis intervention care and services, coordinating with crisis systems and first responders to ensure public safety and suicide prevention.

You must demonstrate ongoing compliance with these principles and objectives, in all programs that are authorized to advance them, through program design, implementation, reporting, and evaluation. Failure to meaningfully align funded activities with the applicable requirements may result in corrective action, additional reporting requirements, or other enforcement actions consistent with federal grant regulations found at 2 C.F.R. Part 200 and the terms and conditions of this award.

As referenced in the **SAMHSA's Dear Colleague letter** on MAT, if your proposed project funds MAT/MOUD, this funding should be used to provide comprehensive treatment and recovery support services rather than medication-only models for opioid use disorder. Services should

include medications, where clinically indicated, in conjunction with psychosocial and other treatment and recovery support services. Funding can also be used to support individualized tapering and discontinuation of medications when clinically indicated.

Upon achieving stability in treatment and building sufficient recovery support, *and at least annually*, clinicians should engage in a discussion with patients to assess treatment and recovery goals and the continued use of medications. Continuation should be evaluated on an individual basis, taking into consideration progress toward treatment goals, stability in treatment, recovery capital, and patient preference.

When a shared decision to discontinue medication is made, discontinuation should be a gradual process with intensified support and monitoring to guard against resumption of drug use and done in the context of ongoing comprehensive care.

If your proposed project funds training/TA related to MAT/MOUD, this funding should be used to provide training to clinicians and other behavioral health providers on the clinically appropriate use of medications in the treatment of substance use disorders, including options for safe tapering and discontinuation when clinically indicated, and regular, at least annual, reviews for continuing treatment. This training should include strategies to support shared decision-making by ensuring patients are fully informed of the risks and benefits of medication treatment initiation, continuation, and discontinuation. Training must ensure providers educate patients about and facilitate access to comprehensive substance use treatment and recovery support services.

Training should include tools to support the development of individualized comprehensive treatment plans with patients that include consideration of medication treatment duration, and tapering and discontinuation, as clinically indicated based on the patient's individual circumstances, recovery, and preferences.

Recipient Meetings and Technical Assistance

You are expected to participate in SAMHSA technical assistance activities as directed by SAMHSA.

We plan to hold virtual grant meetings and your full participation in these meetings is expected (including the project director). You will be given more information about these meetings at a future date.

Budget revisions will be allowed if SAMHSA decides to have an in-person meeting at a later date.

Funding Restrictions and Limitations

The following are funding restrictions for this project:

- Food is an allowable expense[1] in conjunction with mental and/or substance use disorder treatment services. The amount cannot be more than $10.00 per client per day.
- Capitalizable infrastructure, such as computer systems or software, is recoverable as depreciation through an approved negotiated indirect cost rate or 15 percent de minimis rate in accordance with your organization's existing capitalization/amortization policies.
- You must comply with all applicable Federal anti-discrimination laws material to the government's payment decisions for purposes of 31 U.S.C. § 3729(b)(4).
- Discretionary awards shall not be used to fund, promote, encourage, subsidize, or facilitate:
    - Racial preferences or other forms of racial discrimination by the recipient, including activities where race or intentional proxies for race will be used as a selection criterion for employment or program participation.
    - Denial by the recipient of the sex binary in humans, or the belief that sex is a chosen or mutable characteristic;
    - Illegal immigration; or
    - Any other initiatives that compromise public safety.
- Discretionary awards must not support harm reduction as outlined in SAMHSA's Dear Colleague Letter on harm reduction.
- Discretionary awards must not support "housing first" policies that fail to ensure accountability and fail to promote treatment, recovery, and self-sufficiency.

You must also comply with SAMHSA's Standards for Financial Management, Standard Funding Restrictions and Principles in *Section G* in the *Application Guide*.

All activities proposed in your application and budget narrative must align with applicable law, including but not limited to statutes, executive orders, federal regulations and applicable judicial holdings. Applications must also align with SAMHSA's Strategic Priorities. If an application does not align, the application will not receive funding to the extent permitted by law and applicable court orders.

[1] Appropriated funds can be used for an expenditure that bears a logical relationship to the specific program, makes a direct contribution, and be reasonably necessary to accomplish specific program outcomes established in the grant award or cooperative agreement. The expenditure cannot be justified merely because of some social purpose and must be more than merely desirable or even important. The expenditure must neither be prohibited by law nor provided for through other appropriated funding.

Other Requirements

Evidence of Experience and Credentials

SAMHSA trusts that only existing, experienced, and appropriately credentialed organizations with an established record of service delivery and expertise are able to provide the required services quickly and effectively. All required activities must be provided by you directly, by subrecipients, or through referrals to partnering agencies.

In **Attachment 1,** you must submit Letter(s) of Intent (LOI) to show that you can meet the following requirements:

1. **LOI**: from at least one service provider: You must submit a LOI from at least one services provider for mental health and co-occurring disorders services that will be involved in the project. The provider may be your organization, or another organization committed to the project as demonstrated by the LOI that states their commitment to that service provision.

In **Attachment 12**, you must submit official documents to show that you can meet the following requirements:

1. Each mental health and co-occurring disorders services provider organization (which may include the applicant and any partners) must have at least two years of experience (as of the due date of the application) providing relevant services.

2. Official documents (such as licensure or certification) must show that the organization has provided relevant services for the last two years.

3. Each service provider must be in compliance with all applicable local (city or county) and state licensing, accreditation, and certification requirements, as of the due date of the application.

The above requirements apply to all service provider organizations. An individual's license cannot be used.

Tribes and tribal mental health and co-occurring disorders services providers must follow all applicable tribal licensing, accreditation, and certification requirements, as of the due date of the application.

This is not a screen-out criterion. Following the review of your application, you may be requested to submit additional documentation or verify that the documentation submitted is complete. **Your application will not be considered for an award if the requested information is not received by the due date.**

Step 2: Get Ready to Apply

Get Registered

SAM.gov

You must have an active account with SAM.gov to apply. SAM.gov registration can take several weeks. Begin that process today.

To register:

- Go to SAM.gov Entity Registration and select Get Started. From the same page, you can also select the Entity Registration Checklist for the information you will need to register.
- You must agree to the financial assistance general certifications and representations specifically. Those for contracts are different.

When you register, you will also receive your required Unique Entity Identifier (UEI).

Once you register:

- You will have to maintain your registration throughout the life of any award.
- If your organization has multiple UEIs, use the one associated with your physical location.

Grants.gov

You must also have an active account with **Grants.gov**. You can see step-by-step instructions in the Grants.gov **Quick Start Guide for Applicants**.

eRA Commons

You must register in **eRA Commons**. Register at least six weeks before the application deadline.

See guidance at **eRA Help and Tutorials** and *Section A* in the *Application Guide.*

Find the Application Package

The application package has all the forms you need to apply. You can find it online. Go to **Search Grants at Grants.gov** or **eRA ASSIST** and search for opportunity number: SM-26-025.

If you can't use Grants.gov to download application materials, you may request them from **dgr.applications@samhsa.hhs.gov**

Step 3: Build Your Application

Application checklist

Make sure that you have everything you need to apply:

Narratives

Component	Form to use	Page limit
☐ Project abstract	Project Abstract Summary Form	1 page
☐ Project narrative	Project Narrative Attachment form	10 pages
☐ Budget narrative	Budget Narrative Attachment form	None

Attachments

Insert each in the Other Attachments form (Grants.gov) or Other Narratives Attachment form (eRA ASSIST) in this order.

Component	Page limit
☐ 1. Letters of Intent (LOIs)	None
☐ 2. Data collection instruments and interview protocols	None
☐ 3. Sample consent forms	None
☐ 4. Project timeline	2 pages
☐ 5. Biographical sketches and position descriptions	2 pages
☐ 6. Confidentiality and SAMHSA Participant Protection	None
☐ 7. Letter to the State Point of Contact	None
☐ 8. Documentation of nonprofit status	None
☐ 9. Negotiated Indirect Cost Rate Agreement (NICRA), if applicable	None
☐ 10. Non-Federal Match Certification letter	None
☐ 11. Statement Affirming Application and Project Focuses on Developing the Infrastructure to Divert Individuals Prior to Arrest and Booking Only	1 page
☐ 12. Official Documents from Service Provider(s)	None

Other required forms

Use each required form in Grants.gov or eRA.

Component	Page limit
☐ Application for Federal Assistance (SF-424)	None
☐ Budget Information for Non-Construction Programs (SF-424A)	None
☐ Assurances for Non-Construction Programs (SF-424B)	None
☐ Project/Performance Site Location(s)	None
☐ Grants.gov Lobbying Form	None

Application Contents and Format

This section includes guidance on each item found in the application checklist.

The following links contain information on:

- **Formatting instructions and information on system validation requirements**
- **Completing forms and required components** (***Section A*** in the *Application Guide*)

Project Abstract

Page limit: 1 page

Your project abstract should include:

- The project name,
- The geographic area served,
- The population size in the service area and number of people to be served annually and throughout the lifetime of the project,
- The age range and distribution of the population planned to be served,
- The clinical characteristics (diagnoses, service needs, etc.) of the population planned to be served,
- Strategies and interventions that will be implemented through the grant,
- Project goals, and
- Measurable objectives (whenever possible, focus on objectives that relate to **SAMHSA's Strategic Priorities**).

In the first five or fewer lines of your abstract, write a summary of your project that can be used in publications, reports to Congress, and press releases, if you are funded.

Project Narrative

Page limit: 10 pages

Filename: Project narrative

In developing your Project Narrative:

- Provide a detailed response to the **merit review criteria.**
- Follow the **required formatting instructions.**
- Stay within the page limit or we will not review your application. We recommend page limits for the subsections, but they are for guidance only. You may place citations in an attachment, which does not count in the 10-page limit.

Budget Narrative

Page limit: none

Filename: BNF

The budget narrative supports the information you provide in Standard Form 424-A. See **Other Required Forms**.

It includes added detail and justifies the costs you request. As you develop your budget, consider:

- Whether the costs are reasonable and consistent with your project's purpose and activities.
- The restrictions on spending funds. See **funding limitations**.

To create your budget narrative, see detailed instructions and a template in the *Application Guide.*

Attachments

You will upload attachments in Grants.gov using the **Other Attachments form** or in eRA ASSIST using the **Other Narratives Attachment form**.

Use only the following attachments listed. If your application includes any attachments not required in this document, they will be disregarded.

Do not use attachments to extend or replace any of the sections of the Project Narrative. Reviewers will not consider them if you do.

Name the attachments: Attachment 1, Attachment 2, and so on.

Attachment 1: Letter(s) of Intent (LOI)

In Attachment 1, submit LOIs from all Key Coalition Partners (mental health, substance use, criminal/juvenile justice, law enforcement). Refer to **Required Activity #5**. The LOIs should be on organizational letterhead and signed by staff in senior leadership position.

Each LOI must include:

- The intent to fully participate in the Early Diversion Coalition,
- A description of the functions of the partnering organization,
- A description of support for the grant project,
- A person(s) with decision-making abilities who will serve in the Coalition, and
- The partnering organization's roles and responsibilities in the grant project.

Note: You must submit Letter(s) of Intent (LOIs) from the proposed service provider for mental health and co-occurring disorders services provider organizations involved in the project. The provider may be your organization, or another organization committed to the project as demonstrated by an LOI that states their commitment to that service provision. See **Other Requirements: Evidence of Experience and Credentials** for more information.

Attachment 2: Data Collection Instruments and/or Interview Protocols

If you are using standardized data collection instruments or interview protocols, you do not need to include these in your application. Instead, provide a web link to the appropriate instrument or protocol.

If the data collection instrument or interview protocol is not standardized, include a copy in Attachment 2.

Attachment 3: Sample Consent Forms

Include, as appropriate, informed consent forms for the collection of data.

Attachment 4: Project Timeline

Page limit**:** 2 pages

This attachment is scored by reviewers. Provide a chart or graph depicting a realistic timeline for the entire **5** years of the project period. Show dates, key activities, and responsible staff. The key activities must include the requirements outlined in **Required Activities**.

Attachment 5: Biographical Sketches and Position Descriptions

See **biographical sketches and position descriptions** for more information. Position descriptions should be no longer than one page each and biographical sketches should be no more than two pages.

Attachment 6: Confidentiality and SAMHSA Participant Protection

See **Section E** in the *Application Guide* for full information about how to complete this required attachment.

Attachment 7: Letter to the State Point of Contact

Review information on **Intergovernmental Review** and in ***Section J*** in the *Application Guide* for detailed information on E.O. 12372 requirements to determine if this applies.

Attachment 8: Documentation of Nonprofit Status

All private nonprofit organizations: you must submit proof of nonprofit status in your application. Any of the following is acceptable evidence of nonprofit status:

- A reference to the applicant organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations, as described in Section 501(c)(3) of the IRS Code.
- A copy of a current and valid IRS tax exemption certificate.
- A statement from a state taxing body, state attorney general, or other appropriate state official certifying the applicant organization has nonprofit status.
- A certified copy of the applicant organization's certificate of incorporation or similar document that establishes nonprofit status.
- Any of the above proof for a state or national parent organization **and** a statement signed by the parent organization that the applicant organization is a local non-profit affiliate.

Attachment 9: Negotiated Indirect Cost Rate Agreement (NICRA)

If you have a NICRA, the document must be submitted.

Attachment 10: Non-Federal Match Certification letter

Cost sharing/match is required for this program under Section 520G of the Public Health Service Act, as amended (see **Cost Sharing**). In Attachment 10, you must submit a letter certifying that matching funds for the proposed project are available and are non-federal funds. The letter must include the following:

- The names of the expected source(s) of funding;
- The amount of matching funds from each funding source; and
- The type of sources (e.g., juvenile justice, criminal justice).

Attachment 11: Statement Affirming and Project Focuses Only on Serving Individuals Before Arrest and Booking

Page limit: 1 page

In **Attachment 11**, you must submit a statement that your application and project will focus only on developing the capacity and providing services to divert youth and/or adults with mental illness or co-occurring disorder **prior to arrest and booking only.**

- Applications that do not include a completed **Attachment 11 will be screened out and not reviewed.**
- If your application indicates that you will be developing the capacity and services to divert individuals **after arrest or booking,** SAMHSA may reach out to you to request additional information. If it is confirmed that you are not diverting individuals before arrest or booking, your application will not be considered for award.

Attachment 12: Official Documents from Service Provider(s)

In **Attachment 12**, you must submit official documents to show that you can meet the following requirements:

1. Each mental health and co-occurring disorders services provider organization (which may include the applicant and any partners) must have at least two years of experience (as of the due date of the application) providing relevant services.

2. Official documents (such as licensure or certification) must show that the organization has provided relevant services for the last two years.

3. Each service provider must be in compliance with all applicable local (city or county) and state licensing, accreditation, and certification requirements, as of the due date of the application.

The above requirements apply to all service provider organizations. An individual's license cannot be used.

Tribes and tribal mental health and co-occurring disorders services providers must follow all applicable tribal licensing, accreditation, and certification requirements, as of the due date of the application.

This is not a screen-out criterion. Following the review of your application, you may be requested to submit additional documentation or verify that the documentation submitted is complete. **Your application will not be considered for an award if the requested information is not received by the due date.**

Other Required Forms

You will need to complete some standard forms. Upload the following standard forms as listed on Grants.gov. You can find them in the NOFO **Application Package** or review them and their instructions on **Grants.gov Forms**.

Forms	Submission Requirement
Application for Federal Assistance (SF-424)	With application
Budget Information for Non-Construction Programs (SF-424A)	With application
Assurances for Non-Construction Programs (SF-424B)	With application
Project/Performance Site Location(s) Form	With application
Grants.gov Lobbying Form	With application

- **SF-424** – Fill out all sections of the SF-424.
  - In **Line 4** (Applicant Identifier), enter the eRA Commons Username of the Project Director (PD)/Principal Investigator (PI).
  - In **Line 8b** (Employer/Taxpayer Identification Number (EIN/TIN)), enter the recipient organization's **12-character EIN and suffix** as registered with the Payment Management System (PMS), if applicable. If not registered in PMS, enter the recipient organization's EIN.
  - In **Line 8f**, enter the name and contact information of the PD identified in the budget and listed in Line 4 (eRA Commons Username).
  - In **Line 17** (Proposed Project Date), enter: a. Start Date: 9/30/2026; b. End Date: 9/29/2031.
  - In **Line 18** (Estimated Funding), enter the amount requested or to be contributed for the first budget/funding period only by each contributor.
  - **Line 21** is the Authorized Representative and should not be the same individual as the PD in Line 8f.

  It is recommended you review the sample **completed SF-424**.

- **SF-424A BUDGET INFORMATION FORM –** Fill out all sections of the SF-424A using the instructions below. **The totals in Sections A, B, and D must match.**

  Section A – Budget Summary:
  - As cost sharing/match **is required,** use the second row (Line 2) to report the total non-federal funds (f) for the **first year** of your project only.

  Section B – Budget Categories:
  - As cost sharing/match **is required**, use the second column (Column 2) to report the budget category breakouts for the **first year** of your project only.

  Section C – Non-Federal Resources:

- As cost sharing/match **is required,** use the second row (line 9) to report non-federal match for the **first year** only.

Section D – Forecasted Cash Needs:

- Enter the total funds requested, broken down by quarter, only for **Year 1** of the project period.
- Use the first row for federal funds and the second row (Line 14) for **non-federal** funds.

Section E – Budget Estimates of Federal Funds Needed for the Balance of the Project:

- Enter the total funds requested for the out years (e.g., Year 2, Year 3, Year 4, and Year 5).
  (b) First column is the budget for the second budget period;
  (c) Second column is the budget for the third budget period;
  (d) Third column is the budget for the fourth budget period;
  (e) Fourth column is the budget for the fifth budget period.
  Use Line 16 for federal funds and Line 17 for non-federal funds.

See **Formatting Requirements** to review common errors in completing the SF-424 and the SF-424A. These errors will prevent your application from being successfully submitted.

It is highly recommended you use the Budget Template on the SAMHSA website.
See the **Budget Template Users Guide** and the sample completed SF-424A forms at **Sample SF-424A (Match Required)**. **For additional information, see *Section F* in the *Application Guide* and Budget Related FAQs.**

Step 4: Learn About Review and Award

Application Review

Initial Review

We review each application to make sure it meets basic requirements. We will not consider an application that:

- Is from an organization that does not meet all eligibility criteria.
- Is submitted after the **deadline**.
- Exceeds the 10-page limit for the Project Narrative.

Merit Review

Project Narrative: Your Project Narrative describes the proposed project. Peer reviewers will assess your response to the criteria below. The following instructions should be considered as you develop the Project Narrative:

- The Project Narrative cannot be longer than 10 pages.
- There are five sections (Sections A–E) and you must use the section numbers and headings listed in the Evaluation Criteria.
- Include the section letter and number (e.g., A.1, B.2) **before the response to each criterion.** You do not need to type the full criterion in each section.
- Do not combine two or more criteria or refer to another section of the Project Narrative in your response.
- Reviewers will only consider information included in the appropriate numbered criterion.
- The number of points after each section heading is the maximum number of points a reviewer may give for that section.
- Unless required, cost-sharing will not be a factor in the review of your response to the criteria.

A: Population of focus and need statement (15 to 20 points – approximately 2 pages)

NOTE: If you are proposing to serve veterans, you are eligible to receive an additional five (5) priority points (i.e., up to 20 points total). You **must** address in A3 how your project will serve the needs of veterans for all project years in your geographic catchment area(s) to receive the priority points.

Applicants that do not propose to serve veterans can only receive a maximum of 15 points.

1. Identify and describe the geographic catchment area(s) where this project will be implemented.
2. Identify the youth and/or adults with mental illness or co-occurring disorders you will divert from juvenile and/or criminal justice involvement prior to arrest and booking to community-based mental health and substance use disorder services and other supports.
3. Provide a demographic profile of the youth and/or adults with mental illness or co-occurring disorders your program will serve (e.g., psychiatric diagnosis, language, sex, age, socioeconomic status, veterans). **Note:** Racial preferences or other forms of racial discrimination by the recipient are not allowed.

   If applying for Priority Points: If you are proposing to serve veterans, you must address in Section A3 how your project will serve the needs of veterans for all project years in your geographic catchment area(s) to receive the priority points.

4. Describe why there is a need for this project, including:
    - Any gaps in coordination of early diversion services
    - The need for improved collaboration between local stakeholders
    - The need for federal funds

    Note: The data sources must be identified (e.g., **National Survey on Drug Use and Health (NSDUH)**). Current prevalence rates or incidence data must be used to document the need. Citations may be included in an attachment and will not count towards the page limit.

B: Proposed implementation approach (30 points – approximately 3 pages)

1. Describe the goals and measurable objectives of your proposed project. See **Developing Goals and Measurable Objectives**. They must align with the Statement of Need in A.4. Provide the following table:

Number of Unduplicated Individuals to be Served with Award Funds					
Year 1	Year 2	Year 3	Year 4	Year 5	Total

2. Describe how you will implement all the **required activities** and selected allowable activities, including how these funds will be used to supplement existing funds in your community.
3. Describe how your proposed implementation approach will address **SAMHSA Strategic Priorities**.
4. Describe how you will use the Early Diversion Coalition to support and implement the required activities.
5. In **Attachment 4**, provide no more than a two-page chart or graph depicting a realistic timeline for the entire 5 years of the program. It must include dates, key activities that must also include required activities, and responsible staff. Indicate when service delivery will begin. The timeline does not count towards the page limit for the Program Narrative.

C: Proposed evidence-based practice (EBP), and/or evidence-informed practices (EIP) (15 points – approximately 1 page)

1. Identify the EBP(s) and/or EIP(s) that you will use. Discuss how each intervention chosen is appropriate for the individuals you will serve.

2. Describe any modifications you will make to the EBP(s) and/or EIP(s) and the reasons the modifications are necessary. If you are not proposing to make any modifications, indicate so in your response.

3. Describe how you will ensure the fidelity of the selected practice(s) that will be implemented. For more information about monitoring fidelity, see **Fidelity Monitoring Tip Sheet**.

D. Organizational experience and staffing (25 points – approximately 3 pages)

1. Describe your organization's experience with similar projects and engaging youth and/or adults with mental illness or co-occurring disorders who are at risk of or are involved in the juvenile/criminal justice system.

2. Identify any organization(s) you will partner with, including:

    - The Key Coalition Partners (**Note**: Letters of Intent from all Key Coalition Partners must be included in **Attachment 1** at the time of application**.** One of the LOIs must be from at least one proposed mental health or co-occurring service provider**.**)

    - A description, including roles and responsibilities, of how you will partner with community-based mental health and substance use providers.

3. Provide a complete list of all significant staff positions for the project, including the key personnel (Project Director and Project Evaluator). For each, describe their:

    - Role
    - Level of effort (LOE), stated as a percentage of employment (e.g., 1.0 FTE = full-time)
    - Qualifications, including their experience providing services to adults and youth with mental illness or co-occurring disorders.

E: Data collection and performance measurement (10 points – approximately 1 page)

1. Describe how you will collect the performance measures and measurable objectives data for this project, which will measure the success and progress towards your goals.

2. Describe how you will use the data to manage, monitor, and enhance the program (see **Developing the Plan for Data Collection and Performance Measurement**).

Risk Review

Before making an award, we review the risk that you will not prudently manage federal funds. We need to make sure you've handled any past federal awards well and demonstrated sound business practices.

We use SAM.gov **Responsibility/Qualification** to check this history for all awards likely to be over $250,000.

You can comment on your organization's information in SAM.gov. We'll consider your comments before making a decision about your level of risk.

If we find a significant risk, we may choose not to fund your application or to place specific conditions on the award.

For more details, see **2 CFR Part 200**.

Review and Selection Process

When making funding decisions, we consider:

- Peer review results. Reviewers evaluate an application's scientific/technical aspects through the merit review process, which is an evaluation of the merits of the submitted application(s) based on the criteria/guidelines provided in the NOFO. The results of that merit review are advisory in nature only. Program offices and approving officials make final determinations for funding.
- Alignment with agency priorities. Before final funding decisions are made, applications will be reviewed for consistency with applicable laws and alignment with **SAMHSA's Strategic Priorities**. To the extent permitted by law and applicable court orders, applications that do not align with SAMHSA Strategic Priorities will not receive funding.

The program office and approving official make the final determination for funding based on the following:

- When the individual award is over $250,000, approval by the Center for Mental Health Services National Advisory Council.
- Availability of funds.
- Equitable distribution across all U.S. geographic regions.
- Per Section 520G(d), priority points will be given to organizations proposing to serve veterans. See **Merit Review, Section A**.
- Submission of any required documentation that must be submitted prior to making an award.
- Submission of **Attachment 11**, stating that your project focuses only on developing the capacity and services to divert individuals prior to arrest and booking only. If your application does not include **Attachment 11, your application will be screened out and not reviewed**.
- If your application indicates that you will be developing the capacity and services to divert individuals **after arrest or booking,** SAMHSA may reach out to you to request

additional information. If it is confirmed that you are not diverting individuals before arrest or booking, your application will not be considered for award.

- **NOTE**: If you are currently funded under **SM-23-012**, you are not eligible to apply under this NOFO. A complete list of ineligible applicants can be found in **Appendix A**.

Other principles that may be considered in funding decisions include:

- Preference for discretionary awards should be given to institutions with lower indirect cost rates.
- Discretionary grants should be given to a broad range of recipients rather than to a select group of repeat players. Grants should be awarded to a mix of recipients likely to produce immediately demonstrable results and recipients with the potential for potentially longer-term, breakthrough results, in a manner consistent with the funding opportunity announcement.
- To the extent institutional affiliation is considered in making discretionary awards, agencies should prioritize an institution's commitment to rigorous, reproducible scholarship over its historical reputation or perceived prestige. As to science grants, agencies should prioritize institutions that have demonstrated success in implementing Gold Standard Science.

Award Notices

You will receive an email from eRA Commons that describes how you can access the application review results, including the application score. If your application is approved for funding, a **Notice of Award (NoA)** will be emailed to: (1) the Signing Official identified on page 3 of the SF-424 (Authorized Representative section); and (2) the Project Director identified on page 1 of the SF-424 (8f).

If your application is not funded, an email will be sent to you from eRA Commons. This email will include a summary of the peer reviewer comments and scores. It may take up to four months from the program's award date for this information to be sent to you.

The NoA is the only document that authorizes recipients to receive federal funding for a project.

Step 5: Submit Your Application

Submission Requirements and Deadlines

Go to **Find the Application Package** to make sure you have everything you need.

Make sure you are current with SAM.gov and UEI requirements. See **Get Registered**.

You must maintain your registration throughout the life of any award.

Deadlines

Application

Due on **July 15, 2026**.

- For electronic submissions, the due time is 11:59 p.m. ET.
- If you receive an exemption from electronic submission, the due time is 4:30 p.m. ET. See exemptions for paper applications (3.2) in ***Section A*** in the *Application Guide***.**
- When your application is submitted, it must pass validation checks for both Grants.gov and eRA. You will receive emails from both systems to either confirm the application successfully passed validation checks, or to notify you that there were errors that must be fixed before the application can be considered successfully submitted.
- If using the Grants.gov Workspace tool, use the Preview Grantor Validation feature in Grants.gov before submitting your application. Doing so will allow you to validate your application and review/fix all errors and warnings before submitting.
- It is strongly advised that organizations log into their eRA Commons account post submission to confirm submission status, as emails from each system could be placed in a recipient's junk mail folder and go unread.

Intergovernmental Review

You will need to submit application information for intergovernmental review under **Executive Order 12372**. Under this order, states may design their own processes for obtaining, reviewing, and commenting on some applications. See ***Section J*** in the *Application Guide*.

This requirement does not apply to states or American Indian and Alaska Native tribes or tribal organizations.

Step 6: Learn What Happens After Award

Post-award Requirements and Administration

Administrative and National Policy Requirements

There are important rules you need to know if you get an award. You must follow:

- All terms and conditions in the NoA. We incorporate this NOFO by reference. You can see SAMHSA's **standard terms and conditions** on our website.
- The regulations at **2 CFR Part 200** – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards, modifications at 2 CFR 300, and any superseding regulations.
- The HHS **Grants Policy Statement** (GPS). Your NoA will reference this document. If there are any exceptions to the GPS, they'll be listed in your NoA.
- All federal statutes and regulations relevant to federal financial assistance, including those highlighted in **HHS Administrative and National Policy Requirements**. See ***Section H*** in the *Application Guide*.
- All anti-discrimination laws: By applying for or accepting federal funds from HHS, you certify compliance with all federal antidiscrimination laws and these requirements. Complying with those laws is a material condition of receiving federal funding streams. You are responsible for ensuring subrecipients, contractors, and partners also comply.
- SAMHSA grants must align with SAMHSA and presidential priorities and policies.
- SAMHSA may terminate an award in accordance with any of the conditions set forth in 2 CFR 200.340(a)(1)–(4), including when an award no longer effectuates program goals or agency priorities as provided in **2 CFR 200.340(a)(4)**.

Reporting Requirements

If funded, you will have to follow reporting requirements. The NoA will provide specific details.

You are required to submit an annual Programmatic Progress Report (PPR) in years one through four and a cumulative Final Progress Report (FPR) in year five.

You will need to submit your completed PPRs in eRA Commons.

The annual PPR for years one through four is due within 90 days of the end of each budget period.

The **Programmatic Progress Report** must discuss:

- Updates on key personnel, budget, or project changes (as applicable);
- Progress achieving goals and objectives and implementing evaluation activities;
- Progress implementing required activities, including accomplishments, challenges and barriers, and adjustments made to address these challenges;
- If you had proposed to serve veterans, discuss the efforts and accomplishments in serving this population; and
- Success stories.

You must submit the FPR within 120 days of the end of the project. This report must be cumulative and include all activities during the entire project period.

After receiving your grant award, you will be required to submit various financial reports to SAMHSA. Please see **SAMHSA Reporting Requirements**.

Appendix A: Ineligible Organizations

Grant #	Organization	State	NOFO #
SM089496	ALTAPOINTE HEALTH SYSTEMS, INC	AL	SM-23-012
SM089494	PIMA PREVENTION PARTNERSHIP	AZ	SM-23-012
SM089507	RECOVERY NETWORK OF PROGRAMS, INC	CT	SM-23-012
SM089486	HIGHLAND RIVERS COMMUNITY SERVICE BOARD	GA	SM-23-012
SM089493	COUNTY OF FULTON	GA	SM-23-012
SM089505	SIOUXLAND HUMAN INVESTMENT PARTNERSHIP	IA	SM-23-012
SM089492	SOUTHWEST DISTRICT HEALTH	ID	SM-23-012
SM089495	COUNTY OF KANKAKEE	IL	SM-23-012
SM089499	OAKLAWN PSYCHIATRIC CENTER INC	IN	SM-23-012
SM089504	KENTUCKY RIVER COMMUNITY CARE, INC	KY	SM-23-012
SM089497	CHOICES INC	MA	SM-23-012
SM089500	CASA ESPERANZA, INC	MA	SM-23-012
SM089503	HENNEPIN COUNTY	MN	SM-23-012
SM089506	MISSISSIPPI STATE DEPARTMENT OF MENTAL HEALTH	MS	SM-23-012
SM089484	COASTAL HORIZONS CENTER, INC	NC	SM-23-012
SM089487	VEGAS STRONGER	NV	SM-23-012
SM089488	NEW YORK CITY HEALTH/MENTAL HYGIENE	NY	SM-23-012
SM089483	WRAP INC	OK	SM-23-012
SM089490	BLUEBONNET TRAILS COMMUNITY MHMR CENTER	TX	SM-23-012
SM089489	WEST VIRGINIA STATE DEPT HLTH/HUMAN RSCS	WV	SM-23-012