

**Department of Health and Human Services
Substance Abuse and Mental Health Services
Administration**

Request for Applications (RFA): PART II

**General Policies and Procedures Applicable to all
SAMHSA Applications for Discretionary Grants and
Cooperative Agreements**

[Note to Applicants: This document must be used in conjunction with SAMHSA's "Request for Applications: PART I – Programmatic Guidance". PART I is individually tailored for each RFA. PART II includes requirements that are common to all SAMHSA RFAs. You must use both documents in preparing your application.]

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I. APPLICATION SUBMISSION INFORMATION

1. APPLICATION REQUIREMENTS

You must comply with the following three requirements, or your application will be screened out and will not be reviewed:

- Use of the SF-424 application form and Budget Information form SF-424A;
- Application submission requirements below; and
- Formatting requirements provided in Appendix A of this document.

2. SUBMISSION REQUIREMENTS

You must go to both Grants.gov (<http://www.Grants.gov>) and the SAMHSA website (<http://www.samhsa.gov/grants/applying>) to download the required documents you will need to apply for a SAMHSA grant.

Your application must be submitted through <http://www.Grants.gov>. Please refer to Appendix B – Guidance for Electronic Submission of Applications, of this document.

Grants.gov

How to Download Forms from Grants.gov (see Appendix B for information on applying through Grants.gov)

To view and/or download the required application forms, you must first search for the appropriate funding announcement number (called the opportunity number).

On the Grants.gov site (<http://www.Grants.gov>), select the Apply for Grants option from the Applicants Tab at the top of the screen. Under STEP 1, click on the red button labeled: 'Download a Grant Application Package'. Enter either the Funding Opportunity Number (SAMHSA's Funding Announcement #) or the Catalogue of Federal Domestic Assistance (CFDA) Number exactly as they appear on the cover page of the Request for Applications (RFA): PART I that you are applying for, then click the Download Package button. In the Instructions column, click the Download link.

You can view, print or save all of these forms. You can complete the forms for electronic submission to Grants.gov. Completed forms can also be saved and printed for your records. These required forms include:

- Application for Federal Assistance (SF-424);
- Budget Information – Non-Construction Programs (SF-424A);

- Project/Performance Site Location(s) Form;
- Disclosure of Lobbying Activities; and
- Checklist.

SAMHSA's Grants Website

You will find additional materials you will need to complete your application on SAMHSA's website (<http://www.samhsa.gov/grants/applying>). These include:

- Request for Applications (RFA): PART I – Provides a description and requirements of the program, specific information about the availability of funds, and instructions for completing the grant application;
- Request for Applications (RFA): PART II – Provides requirements common to all SAMHSA grants. This document is the Request for Applications (RFA): PART II;
- Assurances – Non-Construction Programs;
- Certifications;
- Charitable Choice Form SMA 170; and
- Examples of behavioral health disparities impact statements.

See Section IV-1 of the Request for Applications (RFA): Part I, to determine if you are required to submit Charitable Choice Form SMA 170. If you are, you can upload this form to Grants.gov when you submit your application.

3. REQUIRED APPLICATION COMPONENTS

Applications must include the following 10 required application components:

- **Application for Federal Assistance (SF-424)** – This form must be completed by applicants for all SAMHSA grants. [Note: Applicants must provide a DUN and Bradstreet (DUNS) number to apply for a grant or cooperative agreement from the federal government. SAMHSA applicants are required to provide their DUNS number on the first page of the application. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access the Dun and Bradstreet website at <http://www.dnb.com> or call 1-866-705-5711. To expedite the process, let Dun and Bradstreet know that you are a public/private nonprofit organization getting ready to submit a federal grant application. In addition, you must be registered in the System for Award Management (SAM).

SAM information must be updated at least every 12 months to remain active (for both grantees and sub-recipients). Once you update your record in SAM, it will take 48 to 72 hours to complete the validation processes. **Grants.gov will reject submissions from applicants who are not registered in SAM or those with expired SAM registrations (Entity Registrations). The DUNS number you use on your application must be registered and active in the SAM. To create a user account, Register/Update an entity and/or Search Records, go to <https://www.sam.gov>.]**

- **Abstract** – Your total abstract must not be longer than 35 lines. It should include the project name, population(s) to be served (demographics and clinical characteristics), strategies/interventions, project goals and measurable objectives, including the number of people to be served annually and throughout the lifetime of the project, etc. In the first five lines or less of your abstract, write a summary of your project that can be used, if your project is funded, in publications, reports to Congress, or press releases.
- **Table of Contents** – Include page numbers for each of the major sections of your application and for each attachment.
- **Budget Information Form** – Use SF-424A. Fill out Sections B, C, and E of the SF-424A. A sample budget and justification is included in [Appendix E](#) of this document. **It is highly recommended that you use the sample budget format in [Appendix E](#). This will expedite review of your application.**
- **Project/Performance Site Location(s) Form** – The purpose of this form is to collect location information on the site(s) where work funded under this grant announcement will be performed. This form is available at <http://www.Grants.gov>.
- **Assurances** – Non-Construction Programs. You must read the list of assurances provided on the SAMHSA website and **check the box marked ‘I Agree’** before signing the first page (SF-424) of the application. **Applicants for programs offering substance abuse prevention or treatment services are also required to complete the Assurance of Compliance with SAMHSA Charitable Choice Statutes and Regulations Form SMA 170.** This form is posted on SAMHSA’s website at <http://www.samhsa.gov/grants/applying/forms-resources>. (See Request for Applications (RFA): PART I – Section IV-1, to determine if you are required to submit this form.)
- **Certifications** – You must read the list of certifications provided on the SAMHSA website and **check the box marked ‘I Agree’** before signing the first page (SF-424) of the application.

- **Disclosure of Lobbying Activities** – Federal law prohibits the use of appropriated funds for publicity or propaganda purposes or for the preparation, distribution, or use of the information designed to support or defeat legislation pending before Congress or state legislatures. This includes “grass roots” lobbying, which consists of appeals to members of the public suggesting that they contact their elected representatives to indicate their support for or opposition to pending legislation or to urge those representatives to vote in a particular way. You must sign and submit this form, if applicable.
- **HHS Checklist** – The HHS Checklist ensures that you have obtained the proper signatures, assurances and certifications. **You must complete the entire form**, including the top portion, “Type of Application”, indicating if this is a new, noncompeting continuation, competing continuation or supplemental application, as well as Parts A through D. All SAMHSA Notices of Award (NoAs) will be electronically mailed to the Business Official’s email address identified on the HHS Checklist form submitted with the application.
- **Documentation of nonprofit status** as required in the HHS Checklist.

4. APPLICATION FORMATTING REQUIREMENTS

Please refer to Appendix A, Checklist for Formatting Requirements and Screen-out Criteria for SAMHSA Grant Applications, for SAMHSA’s basic application formatting requirements. Applications that do not comply with these requirements will be screened out and will not be reviewed.

II. FUNDING LIMITATIONS/RESTRICTIONS

HHS has adopted the Office of Management and Budget (OMB) Guidance in 2 CFR Part 200 *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards*, and has codified the text, with HHS-specific amendments, in 45 CFR Part 75. The standards set forth in 45 CFR Part 75, became effective on December 26, 2014. Cost principles describing allowable and unallowable expenditures for HHS grantees are provided in 45 CFR Part 75, which is available at <http://www.samhsa.gov/grants/grants-management/policies-regulations/requirements-principles>.

SAMHSA grantees also must comply with SAMHSA’s standard funding restrictions, which are included in Appendix C of this document.

III. BUDGET SUBMISSION INFORMATION

Budget Justification, Existing Resources, Other Support (other federal and non-federal sources)

You must provide a narrative justification of the items included in your proposed budget, as well as a description of existing resources and other support you expect to receive for the proposed project. Other support is defined as funds or resources, whether federal, non-federal or institutional, in direct support of activities through fellowships, gifts, prizes, in-kind contributions or non-federal means. (This should correspond to Item #18 on your SF-424, Estimated Funding.) Other sources of funds may be used for unallowable costs, e.g., meals, sporting events, entertainment.

An illustration of a budget and narrative justification is included in [Appendix E](#) - Sample Budget and Justification, of this document. **It is highly recommended that you use the Sample Budget format in [Appendix E](#). This will expedite review of your application.**

Be sure that your proposed budget reflects the funding limitations/restrictions specified in the Request for Applications (RFA): PART I – Section IV-3, for which you are applying. **Specifically identify the items associated with these costs in your budget.**

The budget justification and narrative must be submitted as file BNF when you submit your application into Grants.gov. (See [Appendix B](#) – Guidance for Electronic Submission of Applications of this document.)

IV. SUPPORTING DOCUMENTATION

1. BIOGRAPHICAL SKETCHES AND JOB DESCRIPTIONS

- Include position descriptions for the Project Director and all key personnel. Position descriptions should be no longer than 1 page each.
- For staff who have been identified, include a biographical sketch for the Project Director and other key positions. Each sketch should be 2 pages or less. Reviewers will not consider information past page 2.
- Information on what you should include in your biographical sketches and job descriptions can be found in [Appendix E](#) of this document.

2. CONFIDENTIALITY AND SAMHSA PARTICIPANT PROTECTION/HUMAN SUBJECTS

See Request for Applications (RFA): PART I – Section V-1, to determine if you are required to describe procedures relating to confidentiality, participant protection and the protection of human subjects regulations.

V. REVIEW AND SELECTION PROCESS

SAMHSA applications are peer-reviewed according to the evaluation criteria listed in the Request for Applications (RFA): PART I – Section V-1.

Decisions to fund a grant are based on:

- the strengths and weaknesses of the application as identified by peer reviewers;
- when the individual award is over \$150,000, approval by the National Advisory Council(s) of the Center(s) funding the program;
- availability of funds; and
- equitable distribution of awards in terms of geography (including urban, rural and remote settings) and balance among populations of focus and program size.

VI. ADMINISTRATION INFORMATION

1. AWARD NOTICES

You will receive a letter from SAMHSA through postal mail that describes the general results of the review of your application, including the score that your application received.

If you are approved for funding, a Notice of Award (NoA) will be electronically mailed to the Business Official's email address identified on the HHS Checklist form submitted with the application. Hard copies of the NoA will no longer be mailed via postal service. The Notice of Award is the sole obligating document that allows you to receive federal funding for work on the grant project.

If you are not funded, you will receive notification from SAMHSA.

2. ADMINISTRATIVE AND NATIONAL POLICY REQUIREMENTS

- If your application is funded, you must comply with all terms and conditions of the grant award. SAMHSA's standard terms and conditions are available on the SAMHSA website at <http://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>.
- If your application is funded, you must also comply with the administrative requirements outlined in 45 CFR Part 75. For more information see the

SAMHSA website at <http://www.samhsa.gov/grants/grants-management/policies-regulations/requirements-principles>.

- Depending on the nature of the specific funding opportunity and/or your proposed project as identified during review, SAMHSA may negotiate additional terms and conditions with you prior to grant award. These may include, for example:
 - actions required to be in compliance with confidentiality and participant protection/human subjects requirements;
 - requirements relating to additional data collection and reporting;
 - requirements relating to participation in a cross-site evaluation;
 - requirements to address problems identified in review of the application; or
 - revised budget and narrative justification.
- If your application is funded, you will be held accountable for the information provided in the application relating to performance targets. SAMHSA program officials will consider your progress in meeting goals and objectives, as well as your failures and strategies for overcoming them, when making an annual recommendation to continue the grant and the amount of any continuation award. Failure to meet stated goals and objectives may result in suspension or termination of the grant award, or in reduction or withholding of continuation awards.
- If your application is funded, you must comply with Executive Order 13166, which requires that recipients of federal financial assistance provide meaningful access to limited English proficient (LEP) persons in their programs and activities. You may assess the extent to which language assistance services are necessary in your grant program by utilizing the HHS *Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons*, available at <http://www.hhs.gov/ocr/civilrights/resources/laws/revisedlep.html>.
- A special term of award may be included in the final Notice of Award (NoA) that states: “In any grant-related activity in which family, marital, or household considerations are, by statute or regulation, relevant for purposes of determining beneficiary eligibility or participation, grantees must treat same-sex spouses, marriages, and households on the same terms as opposite-sex spouses, marriages, and households, respectively. By “same-sex spouses,” HHS means individuals of the same sex who have entered into marriages that are valid in the jurisdiction where performed, including any of the 50 states, the

District of Columbia, or a U.S. territory or in a foreign country, regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. By “same-sex marriages,” HHS means marriages between two individuals validly entered into in the jurisdiction where performed, including any of the 50 states, the District of Columbia, or a U.S. territory or in a foreign country, regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. By “marriage,” HHS does not mean registered domestic partnerships, civil unions or similar formal relationships recognized under the law of the jurisdiction of celebration as something other than a marriage.

- Grant funds cannot be used to supplant current funding of existing activities. “Supplant” is defined as replacing funding of a recipient’s existing program with funds from a federal grant.

3. Publications

Grantees are required to notify the Government Project Officer (GPO) and SAMHSA’s Publications Clearance Officer (240-276-2130) of any materials based on the SAMHSA-funded grant project that are accepted for publication.

In addition, SAMHSA requests that grantees:

- Provide the GPO and SAMHSA Publications Clearance Officer with advance copies of publications.
- Include acknowledgment of the SAMHSA grant program as the source of funding for the project.
- Include a disclaimer stating that the views and opinions contained in the publication do not necessarily reflect those of SAMHSA or the U.S. Department of Health and Human Services, and should not be construed as such.

SAMHSA reserves the right to issue a press release about any publication deemed by SAMHSA to contain information of program or policy significance to the substance abuse treatment/substance abuse prevention/mental health services community.

Appendix A – Checklist for Formatting Requirements and Screen-out Criteria for SAMHSA Grant Applications

*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 SF-424 Application form and Budget Information form SF-424A.
- Applications must be received by the application due date and time, as detailed in Section IV-2 of the Request for Applications (RFA): PART I.
- You must be registered in the System Award Management (SAM) prior to submitting your application. The DUNS number used on your application must be registered and active in the SAM prior to submitting your application.
- Information provided must be sufficient for review.
- Text must be legible. Pages must be typed in black, single-spaced, using a font of Times New Roman 12, with all margins (left, right, top, bottom) at least one inch each. **You may use Times New Roman 10 only for charts or tables.** (See additional requirements in [Appendix B](#) – Guidance for Electronic Submission of Applications, in this document.)
- To ensure equity among applications, page limits for the Project Narrative cannot be exceeded.

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.

- Applications should comply with the following requirements:
 - If applicable, provisions relating to confidentiality and participant protection/human subjects specified in the Request for Applications (RFA): PART I – Section V-1.
 - Budgetary limitations as specified in Sections I, II, and IV-3 of the Request for Applications (RFA): PART I.

- Documentation of nonprofit status as required in the Checklist.
- Black print should be used throughout your application, including charts and graphs (no color). **Materials with printing on both sides will be excluded from the application and not sent to peer reviewers.**
- Pages should be numbered consecutively from beginning to end so that information can be located easily during review of the application. The abstract page should be page 1, the table of contents should be page 2, etc. The four pages of the SF-424 are not to be numbered. Attachments should be labeled and separated from the Project Narrative and budget section, and the pages should be numbered to continue the sequence.
- The page limits for Attachments stated in Section IV-1 of the Request for Applications (RFA): PART I, should not be exceeded.

Appendix B – Guidance for Electronic Submission of Applications

SAMHSA discretionary grant applications must be submitted electronically through Grants.gov. **SAMHSA will not accept paper applications**, except when a waiver of this requirement is approved by SAMHSA. The process for applying for a waiver is described later in this appendix.

You must review all information provided on Grants.gov before submitting your application. **The information on Grants.gov supersedes any guidance provided by SAMHSA in this appendix.**

If this is the first time you have submitted an application through Grants.gov, you must complete **three 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:

1. DUNS Number registration:

The DUNS number you use on your application must be registered and active in the SAM.

2. System for Award Management (SAM) registration:

The **System for Award Management (SAM)** is a federal government owned and operated free website.

SAM information must be updated at least every 12 months to remain active (for both grantees and sub-recipients). Once you update your record in SAM, it will take 48 to 72 hours to complete the validation processes. **Grants.gov will reject electronic submissions from applicants with expired registrations. To Create a user account, Register/Update entity and/or Search Records, go to <https://www.sam.gov>.**

You will find a ***Quick Start Guide for Entities Interested in Being Eligible for Grants through SAM*** at https://www.sam.gov/sam/transcript/Quick_Guide_for_Grants_Registrations.pdf.

3. Grants.gov Registration (get username and password):

Be sure the person submitting your application is properly registered with Grants.gov as the Authorized Organization Representative (AOR) for the specific DUNS number cited on the SF-424 (first page). See the Organization

Registration User Guide for details at the following Grants.gov link:
<http://www.grants.gov/web/grants/applicants/organization-registration.html>.

You can find additional information about the Grants.gov process at
<http://www.grants.gov/web/grants/outreach/grantsgov-training.html>.

To submit your application electronically, you may search <http://www.Grants.gov> for the downloadable application package by the funding announcement number (called the opportunity number) or by the Catalogue of Federal Domestic Assistance (CFDA) number. You can find the funding announcement number and CFDA number on the cover page of the Request for Applications (RFA): PART I.

You must follow the instructions in the User Guide available at the <http://www.Grants.gov> apply site, on the Help page. In addition to the User Guide, you may wish to use the following sources for technical (IT) help:

- By e-mail: support@Grants.gov
- By phone: 1-800-518-4726 (1-800-518-GRANTS). The Grants.gov Contact Center is available 24 hours a day, 7 days a week, excluding federal holidays.

Please allow sufficient time to enter your application into Grants.gov. When you submit your application, you will receive a notice that your application is being processed and that you will receive two e-mails from Grants.gov within the next 24-48 hours. One will confirm receipt of the application in Grants.gov, and the other will indicate that the application was either successfully validated by the system (with a tracking number) or rejected due to errors. It will also provide instructions that if you do not receive a receipt confirmation **and** a validation confirmation or a rejection e-mail within 48 hours, you must contact Grants.gov directly. It is important that you retain this tracking number. **Receipt of the tracking number is the only indication that Grants.gov has successfully received and validated your application. If you do not receive a Grants.gov tracking number, you may want to contact the Grants.gov help desk for assistance.** Please note that it is incumbent on the applicant to monitor your application to ensure that it is successfully received and validated by Grants.gov. **If your application is not successfully validated by Grants.gov, it will not be forwarded to SAMHSA as the receiving institution.**

If you experience issues/problems with electronic submission of your application through Grants.gov, contact the Grants.gov helpdesk by email at support@grants.gov or by phone at 1-800-518-4726 (1-800-518-GRANTS). **Make sure you get a case/ticket/reference number that documents the issues/problems with Grants.gov.** It is critical that you initiate electronic submission in sufficient time to resolve any issues/problems that may prevent the electronic submission of your

application. Grants.gov will reject applications submitted after **11:59 PM** on the application due date.

SAMHSA highly recommends that you submit your application 24-48 hours before the submission deadline. Many submission issues can be fixed within that time and you can attempt to re-submit. However, if you have not completed your Grants.gov, SAM, and DUNS registration at least 2 weeks prior to the submission deadline, it is highly unlikely that these issues will be resolved in time to successfully submit an electronic application.

It is strongly recommended that you prepare your Project Narrative and other attached documents in Adobe PDF format. If you do not have access to Adobe software, you may submit in Microsoft Office 2007/2010 products (e.g., Microsoft Word 2007/2010, Microsoft Excel 2007/2010, etc.). Directions for creating PDF files can be found on the Grants.gov website. Use of file formats other than Adobe PDF or Microsoft Office 2007/2010 may result in your file being unreadable by our staff.

The Abstract, Table of Contents, Project Narrative, Supporting Documentation, Budget Justification, and Attachments must be combined into 4 separate files in the electronic submission. **If the number of files exceeds 4, only the four files will be downloaded and considered in the peer review of applications.**

Formatting requirements for SAMHSA e-Grant application files are as follows:

- Project Narrative File (PNF): The PNF consists of the Abstract, Table of Contents, and all the sections of the Project Narrative in Section V-1 of the Request for Applications (RFA): Part I, in this order and numbered consecutively.
- Budget Narrative File (BNF): The BNF consists of only the budget justification narrative.
- Other Attachment File 1: The first Other Attachment file will consist of the Supporting Documentation in Section V-1 of Request for Applications (RFA): Part I, lettered consecutively.
- Other Attachment File 2: The second Other Attachment file will consist of the Attachments in Section IV-1 of the Request for Applications (RFA): Part I, numbered consecutively.

If you have documentation that does not pertain to any of the 4 listed attachment files, include that documentation in Other Attachment File 2.

Other Grants.gov Requirements

New for FY 2015 – Allowable characters

Characters	Special Characters		
Upper case A – Z	Parentheses ()	Curly braces { }	Square brackets []
Lower case a – z	Ampersand &	Tilde ~	Exclamation point !
Underscore _	Comma ,	Semicolon :	Apostrophe ‘
Hyphen –	At sign @	Number sign #	Dollar sign \$
Space	Percent sign %	Plus sign +	Equal sign =
Period .	Ampersand in XML must use the & format.		

If your application uses any other characters than those above when naming your attachment files, your application will be rejected by Grants.gov.

Do not use special characters in file names, such as parenthesis (), #, ©, etc.

Scanned images must be scanned at 150-200 dpi/ppi resolution and saved as a jpeg or pdf file. Using a higher resolution setting or different file type will result in a larger file size, which could result in rejection of your application.

Waiver Request Process

Applicants may request a waiver of the requirement for electronic submission if they are unable to submit electronically through the Grants.gov portal because their physical location does not have adequate access to the Internet. Inadequate Internet access is defined as persistent and unavoidable access problems/issues that would make compliance with the electronic submission requirement a hardship. The process for applying for a waiver is described below. Questions on applying for a waiver may be directed to SAMHSA’s Division of Grant Review, 240-276-1199.

All applicants must register in the System for Award Management (SAM) and Grants.gov, even those who intend to request a waiver. If you do not have an active SAM registration prior to submitting your paper application, it will be screened out and returned to you without review. Registration is necessary to ensure that information required for paper submission is available and that the applicant is ready to submit electronically if the waiver is denied. (See directions for registering in SAM and on Grants.gov above.)

A written waiver request must be received by SAMHSA at least 15 calendar days in advance of the application due date stated on the cover page of this RFA. The request must be either e-mailed to DGR.Waivers@samhsa.hhs.gov, or mailed to:

Diane Abbate, Director of Grant Review
Office of Financial Resources
Substance Abuse and Mental Health Services Administration
Room 3-1044
1 Choke Cherry Road
Rockville, MD 20857

Applicants are encouraged to request a waiver by e-mail, when possible. When requesting a waiver, the following information must be included:

- SAMHSA RFA title and announcement number;
- Name, address, and telephone number of the applicant organization as they will appear in the application;
- Applicant organization's DUNS number;
- Authorized Organization Representative (AOR) for the named applicant;
- Name, telephone number, and e-mail of the applicant organization's Contact Person for the waiver; and
- Details of why the organization is unable to submit electronically through the Grants.gov portal, explaining why their physical location does not have adequate access to the Internet.

The Office of Grant Review will either e-mail (if the waiver request was received by e-mail) or express mail/deliver (if the waiver request was received by mail) the waiver decision to the Contact Person no later than seven calendar days prior to the application due date. If the waiver is approved, a paper application must be submitted. (See instructions for submitting a paper application below.) SAMHSA will not accept any applications that are sent by e-mail or facsimile or hand carried. If the waiver is disapproved, the applicant organization must be prepared to submit through Grants.gov or forfeit the opportunity to apply. The written approval must be included as the cover page of the paper application and the application must be received by the due date.

A waiver approval is valid for the remainder of the fiscal year and may be used for other SAMHSA discretionary grant applications during that fiscal year. When submitting a subsequent paper application within the same fiscal year, this waiver approval must be included as the cover page of each paper application. The organization and DUNS number named in the waiver and any subsequent application must be identical.

A paper application will not be accepted without the waiver approval and will be returned to the applicant if it is not included. Paper applications received after the due date will not be accepted.

Instructions for Submitting a Paper Application with a Waiver

Paper submissions are due by **5:00 PM** on the application due date stated on the cover page of the Request for Applications (RFA): Part I. **Applications may be shipped using only Federal Express (FedEx), United Parcel Service (UPS), or the United States Postal Service (USPS).** You will be notified by postal mail that your application has been received.

Note: If you use the USPS, you must use Express Mail.

SAMHSA will not accept or consider any applications that are sent by e-mail or facsimile or hand carried.

If you are submitting a paper application, you must submit an original application and 2 copies (including attachments). The original and copies must not be bound and nothing should be attached, stapled, folded, or pasted. Do not use staples, paper clips, or fasteners. You may use rubber bands.

Send applications to the address below:

For United States Postal Service:

Diane Abbate, Director of Grant Review
Office of Financial Resources
Substance Abuse and Mental Health Services Administration
Room 3-1044
1 Choke Cherry Road
Rockville, MD **20857**

Change the zip code to **20850** if you are using FedEx or UPS.

Do not send applications to other agency contacts, as this could delay receipt. Be sure to include the **short title of the program and the RFA #** (available on the cover page of the Request for Applications (RFA): Part I) in item number 12 on the first page (SF-424) of your paper application. If you require a phone number for delivery, you may use (240) 276-1199.

Your application must be received by the application deadline or it will not be considered for review. Please remember that mail sent to federal facilities undergoes a security screening prior to delivery. You are responsible for ensuring that you submit your application so that it will arrive by the application due date and time.

If an application is mailed to a location or office (including room number) that is not designated for receipt of the application and, as a result, the designated office does not receive your application by the deadline, your application will be considered late and ineligible for review.

If you are submitting a paper application, the application components required for SAMHSA applications should be submitted in the following order:

- Application for Federal Assistance (SF-424)
- Abstract
- Table of Contents
- Budget Information Form (SF-424A)
- Project Narrative and Supporting Documentation
- Attachments
- Project/Performance Site Location(s) Form
- Disclosure of Lobbying Activities (Standard Form LLL, if applicable)
- HHS Checklist – the HHS Checklist should be the last page of your application.
- Documentation of nonprofit status as required in the HHS Checklist

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.

Black print should be used throughout your application, including charts and graphs (no color). Pages should be typed single-spaced with one column per page. Pages should not have printing on both sides. Pages with printing on both sides run the risk of an incomplete application going to peer reviewers, since scanning and copying may not duplicate the second side. **Materials with printing on both sides will be excluded from the application and not sent to peer reviewers.**

With the exception of standard forms in the application package, all pages in your application should be numbered consecutively. **Documents containing scanned images must also contain page numbers to continue the sequence.** Failure to comply with these requirements may affect the successful transmission and consideration of your application.

Appendix C – Funding Restrictions

SAMHSA grant funds must be used for purposes supported by the program and may not be used to:

- Pay for any lease beyond the project period.
- Provide services to incarcerated populations (defined as those persons in jail, prison, detention facilities, or in custody where they are not free to move about in the community).
- Pay for the purchase or construction of any building or structure to house any part of the program. (Applicants may request up to \$75,000 for renovations and alterations of existing facilities, if necessary and appropriate to the project.)
- Provide residential or outpatient treatment services when the facility has not yet been acquired, sited, approved, and met all requirements for human habitation and services provision. (Expansion or enhancement of existing residential services is permissible.)
- Pay for housing other than residential mental health and/or substance abuse treatment, subject to the requirement that short-term residential programs must be 90 days or less in duration and at a cost not to exceed 6.5 percent of the total sub-award annually for all recipients.
- Pay for furniture.
- Provide inpatient treatment or hospital-based detoxification services. Residential services are not considered to be inpatient or hospital-based services.
- Only allowable costs associated with the use of federal funds are permitted to fund evidence-based practices (EBPs). Other sources of funds may be used for unallowable costs (e.g., meals, sporting events, entertainment). Other support is defined as funds or resources, whether federal, non-federal or institutional, in direct support of activities through fellowships, gifts, prizes, or in-kind contributions.
- Make direct payments to individuals to induce them to enter prevention or treatment services. However, SAMHSA discretionary grant funds may be used for non-clinical support services (e.g., bus tokens, child care) designed to improve access to and retention in prevention and treatment programs.

- Make direct payments to individuals to encourage attendance and/or attainment of prevention or treatment goals. However, SAMHSA discretionary grant funds may be used for non-cash incentives of up to \$30 to encourage attendance and/or attainment of prevention or treatment goals when the incentives are built into the program design and when the incentives are the minimum amount that is deemed necessary to meet program goals. SAMHSA policy allows an individual participant to receive more than one incentive over the course of the program. However, non-cash incentives should be limited to the minimum number of times deemed necessary to achieve program outcomes. A grantee or treatment or prevention provider may also provide up to \$30 cash or equivalent (coupons, bus tokens, gifts, child care, and vouchers) to individuals as incentives to participate in required data collection follow up. This amount may be paid for participation in each required interview.
- Meals are generally unallowable unless they are an integral part of a conference grant or specifically stated as an allowable expense in the RFA. Grant funds may be used for light snacks, not to exceed \$2.50 per person.
- Funds may not be used to distribute sterile needles or syringes for the hypodermic injection of any illegal drug.
- Pay for pharmacologies for HIV antiretroviral therapy, sexually transmitted diseases (STD)/sexually transmitted illnesses (STI), TB, and hepatitis B and C, or for psychotropic drugs.
- Outside individuals or companies that prepare or participate in the preparation of grant applications may not be contractors on those grants per 45 CFR 75.328, which addresses full and open competition.

SAMHSA will not accept a “research” indirect cost rate. The grantee must use the “other sponsored program rate” or the lowest rate available.

Appendix D – Biographical Sketches and Job Descriptions

Biographical Sketch

Existing curricula vitae of project staff members may be used if they are updated and contain all items of information requested below. You may add any information items listed below to complete existing documents. For development of new curricula vitae include items below in the most suitable format:

1. Name of staff member
2. Educational background: school(s), location, dates attended, degrees earned (specify year), major field of study
3. Professional experience
4. Honors received and dates
5. Recent relevant publications
6. Other sources of support [Other support is defined as all funds or resources, whether federal, non-federal, or institutional, available to the Project Director/Program Director (and other key personnel named in the application) in direct support of their activities through grants, cooperative agreements, contracts, fellowships, gifts, prizes, and other means.]

Job Description

1. Title of position
2. Description of duties and responsibilities
3. Qualifications for position
4. Supervisory relationships
5. Skills and knowledge required
6. Personal qualities
7. Amount of travel and any other special conditions or requirements
8. Salary range
9. Hours per day or week

Appendix E – Sample Budget and Justification

THIS IS AN ILLUSTRATION OF A SAMPLE DETAILED BUDGET AND NARRATIVE JUSTIFICATION WITH GUIDANCE FOR COMPLETING SF-424A: SECTION B FOR THE BUDGET PERIOD.

In preparing your budget, be sure to reflect the following: a precise split of 49 percent CSAT funds and 51 percent CMHS funds.

A. Personnel: Provide employee(s) (including names for each identified position) of the applicant/recipient organization, including in-kind costs for those positions whose work is tied to the grant project.

FEDERAL REQUEST

Position	Name	Annual Salary/ Rate	Level of Effort	CSAT Costs	CMHS Costs	Grand Total
(1) Project Director	John Doe	\$64,890	10%	\$3,180	\$3,309	\$6,489
(2) Grant Coordinator	To be selected	\$46,276	100%	\$22,675	\$23,601	\$46,276
(3) Clinical Director	Jane Doe	In-kind cost	20%	\$0	\$0	\$0
			TOTAL	\$25,855	\$26,910	\$52,765

JUSTIFICATION: Describe the role and responsibilities of each position.

- (1) The Project Director will provide daily oversight of the grant and will be considered key staff.
- (2) The Coordinator will coordinate project services and project activities, including training, communication and information dissemination.
- (3) The Clinical Director will provide necessary medical direction and guidance to staff

for 540 clients served under this project.

Key staff positions require prior approval by SAMHSA after review of credentials of resume and job description.

FEDERAL REQUEST (enter in Section B column 1 line 6a of form S-424A) **\$52,765**

B. Fringe Benefits: List all components that make up the fringe benefits rate

FEDERAL REQUEST

Component	Rate	Wage	CSAT Costs	CMHS Costs	Grand Total
FICA	7.65%	\$52,765	\$1,978	\$2,059	\$4,037
Workers Compensation	2.5%	\$52,765	\$646	\$673	\$1,319
Insurance	10.5%	\$52,765	\$2,715	\$2,826	\$5,540
		TOTAL	\$5,339	\$5,557	\$10,896

JUSTIFICATION: Fringe reflects current rate for agency.

FEDERAL REQUEST (enter in Section B column 1 line 6b of form SF-424A) **\$10,896**

C. Travel: Explain need for all travel other than that required by this application. Local travel policies prevail.

FEDERAL REQUEST (Grantee Conference travel is budgeted for Year 2 in this RFA)

Purpose of Travel	Location	Item	Rate	CSAT Costs	CMHS Costs	Grand Total
(1) Grantee Conference	Washington, DC	Airfare	\$200/flight x 2 persons	\$0	\$0	\$0
		Hotel	\$180/night x 2 persons x	\$0	\$0	\$0

Purpose of Travel	Location	Item	Rate	CSAT Costs	CMHS Costs	Grand Total
		Per Diem (meals & incidentals)	\$46/day x 2 persons x 2 days	\$0	\$0	\$0
(2) Local travel		Mileage	1,500 miles @ \$0.575/mile	\$423	\$440	\$863
			TOTAL	\$423	\$440	\$863

JUSTIFICATION: Describe the purpose of travel and how costs were determined.

- (1) Two staff (Project Director and Evaluator) to attend mandatory grantee meeting in Washington, DC in Year 2 (therefore Year 1 shows no costs).
- (2) Local travel is needed to attend local meetings, project activities, and training events. Local travel rate is based on organization's policies/procedures for privately owned vehicle reimbursement rate. If policy does not have a rate use GSA rate.

FEDERAL REQUEST (enter in Section B column 1 line 6c of form SF-424A) **\$863**

D. Equipment: An article of tangible, nonexpendable, personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit (federal definition).

FEDERAL REQUEST – (enter in Section B column 1 line 6d of form SF-424A) **\$ 0**

E. Supplies: Materials costing less than \$5,000 per unit and often having one-time use

FEDERAL REQUEST

Item(s)	Rate	CSAT Costs	CMHS Costs	Grand Total
General office supplies	\$50/mo. x 12 mo.	\$294	\$306	\$600
Postage	\$37/mo. x 8 mo.	\$145	\$151	\$296
Laptop Computer	\$900	\$441	\$459	\$900
Printer	\$300	\$147	\$153	\$300

Item(s)	Rate	CSAT Costs	CMHS Costs	Grand Total
Projector	\$900	\$441	\$459	\$900
Copies	8000 copies x .10/copy	\$392	\$408	\$800
	TOTAL	\$1,860	\$1,936	\$3,796

JUSTIFICATION: Describe the need and include an adequate justification of how each cost was estimated.

- (1) Office supplies, copies and postage are needed for general operation of the project.
- (2) The laptop computer and printer are needed for both project work and presentations for Project Director.
- (3) The projector is needed for presentations and workshops. All costs were based on retail values at the time the application was written.

FEDERAL REQUEST – (enter in Section B column 1 line 6e of form SF-424A) \$ 3,796

F. Contract: A contractual arrangement to carry out a portion of the programmatic effort or for the acquisition of routine goods or services under the grant. Such arrangements may be in the form of consortium agreements or contracts. A consultant is an individual retained to provide professional advice or services for a fee. The applicant/grantee must establish written procurement policies and procedures that are consistently applied. All procurement transactions shall be conducted in a manner to provide to the maximum extent practical, open and free competition.

COSTS FOR CONTRACTS MUST BE BROKEN DOWN IN DETAIL AND A NARRATIVE JUSTIFICATION PROVIDED. IF APPLICABLE, NUMBERS OF CLIENTS SHOULD BE INCLUDED IN THE COSTS.

FEDERAL REQUEST

Name	Service	Rate	Other	CSAT Costs	CMHS Costs	Grand Total
(1) State Department of Human Services	Statewide Contract to Train Service Providers	\$82,500/year		\$40,425	\$42,075	\$82,500
(2) Treatment Services	1040 Clients	\$27/client per year		\$13,759	\$14,321	\$28,080
3) John Smith and Mary Jones (Case Managers)	Treatment/Client Services	1FTE @ \$27,000 + Fringe Benefits of \$6,750 = \$33,750 x 2 FTEs = \$67,500	*Travel at 3,124 miles @ .50 per mile = \$1,562 x 2 staff = \$3,124 *Training course \$175 x 2 = \$350 *Supplies @\$47.54 x 12 months or \$570 x 2 = \$1,140 *Telephone @\$60 x 12 months =	\$45,244	\$47,090	\$92,334

Name	Service	Rate	Other	CSAT Costs	CMHS Costs	Grand Total
(4) Jane Smith	Evaluator	\$40 per hour x 225 hours	12 month period	\$4,410	\$4,590	\$9,000
(5) To Be Announced	Marketing Coordinator	Annual salary of \$30,000 x 10% level of		\$1,470	\$1,530	\$3,000

Name	Service	Rate	Other	CSAT Costs	CMHS Costs	Grand Total
6) Provider ABC	Treatment Client Services	*Program Manager @ \$60,000 *1 EBP Provider, 1 SOAR Specialist, & 1 Supported Employment Specialist @ \$50,000/each *Total Personnel = \$210,000 *Fringe Benefits @ 20% = \$42,000	*In-State Travel for 4 FTEs @ 1000 miles x 57.5 cents/mile = \$2,300 *Supplies = \$3,500 *Cell Phones for 4 staff @ \$60/mo. = \$2,880 *Tablets for 4 staff @ \$850/ea. = \$3,400 *Internet service for 4 staff @ \$85/mo. = \$4,080 *Client Supports = \$3,000/yr.	\$142,747	\$148,573	\$291,320

Name	Service	Rate	Other	CSAT Costs	CMHS Costs	Grand Total
(7) Provider XYZ	Treatment Client Services	*Program Manager @ \$60,000 *1 EBP Provider, 1 SOAR Specialist, & 1 Supported Employment Specialist @ \$50,000/each *2 Peer Specialist @ \$27,500/ea. *Total Personnel = \$265,000 *Fringe Benefits @ 20% = \$53,000	*In-State Travel 6 FTE @ 1000 miles x 57.5 cents/mile = \$3,450 *Supplies = \$3,500 *Cell Phones for 6 staff @ \$60/mo = \$4,320 *Tablets for 6 staff @ \$850 = \$5,100 *Internet service for 6 staff @ \$85/mo = \$6,120 *Client Supports = \$3,000 *Indirect Costs (8%)	\$180,776	\$188,154	\$368,930
			TOTAL	\$428,830	\$446,334	\$875,164

JUSTIFICATION: Explain the need for each contractual agreement and how it relates to the overall project.

- (1) The State will contract with certified trainers to provide SOAR training, EBP training and to train service providers on state infrastructure systems developed by the grant to enhance behavioral health treatment for the population(s) of focus.
- (2) Treatment services for clients to be served based on organizational history of expenses.
- (3) Case manager is vital to client services related to the program and outcomes.
- (4) Evaluator is provided by an experienced individual (Ph.D. level) with expertise in behavioral health treatment, research and evaluation, is knowledgeable about the population (s) of focus, and will report GPRA data.
- (5) Marketing Coordinator will develop a plan to include public education and outreach efforts to engage clients of the community about grantee activities, and provision of presentations at public meetings and community events to stakeholders, community civic organizations, churches, agencies, family groups and schools.
- (6) Service Providers ABC and XYZ will deliver evidence-based, treatment, and other required client services across the State.

***Represents separate/distinct requested funds by cost category**

FEDERAL REQUEST – (enter in Section B column 1 line 6f of form SF-424A) **\$875,164**

G. Construction: NOT ALLOWED – Leave Section B columns 1& 2 line 6g on SF- 424A blank.

H. Other: Expenses not covered in any of the previous budget categories

FEDERAL REQUEST

Item	Rate	CSAT Costs	CMHS Costs	Grand Total
(1) Rent*	\$15/sq.ft x 700 sq. feet	\$5,142	\$5,335	\$10,500
(2) Telephone	\$100/mo. x 12 mo.	\$588	\$612	\$1,200

Item	Rate	CSAT Costs	CMHS Costs	Grand Total
(3) Client Incentives	\$10/client follow up x 450 clients	\$2,205	\$2,295	\$4,500
(4) Brochures	.89/brochure X 1500 brochures	\$654	\$681	\$1,335
	TOTAL	\$8,592	\$8,943	\$17,535

JUSTIFICATION: Break down costs into cost/unit (i.e., cost/square foot). Explain the use of each item requested.

(1) Office space is included in the indirect cost rate agreement. However, if other rental costs for service site(s) are necessary for the project, they may be requested as a direct charge. The rent is calculated by square footage or FTE and reflects SAMHSA's fair share of the space.

***If rent is requested (direct or indirect), provide the name of the owner(s) of the space/facility. If anyone related to the project owns the building which is less than an arms length arrangement, provide cost of ownership/use allowance calculations. Additionally, the lease and floor plan (including common areas) is required for all projects allocating rent costs.**

(2) The monthly telephone costs reflect the percent of effort for the personnel listed in this application for the SAMHSA project only.

(3) The \$10 incentive is provided to encourage attendance to meet program goals for 278 client follow-ups.

(4) Brochures will be used at various community functions (health fairs and exhibits).

FEDERAL REQUEST – (enter in Section B column 1 line 6h of form SF-424A) \$17,535

Indirect Cost Rate: Indirect costs can be claimed if your organization has a negotiated indirect cost rate agreement. It is applied only to direct costs to the agency as allowed in the agreement. For information on applying for the indirect rate go to: <https://rates.psc.gov/fms/dca/map1.html>.

FEDERAL REQUEST (enter in Section B column 1 line 6j of form SF-424A)

8% of personnel and fringe (.08 x \$63,661) \$5,093

=====

TOTAL DIRECT CHARGES:

FEDERAL REQUEST – (enter in Section B column 1 line 6i of form SF-424A) **\$961,018**
INDIRECT CHARGES:

FEDERAL REQUEST – (enter in Section B column 1 line 6j of form SF-424A) **\$5,093**

TOTAL: (sum of 6i and 6j)

FEDERAL REQUEST – (enter in Section B column 1 line 6k of form SF-424A) **\$966,111**

=====

Provide the total proposed project period and federal funding as follows:

Proposed Project Period

- a. Start Date: 09/30/2015
- b. End Date: 09/29/2018

BUDGET SUMMARY (should include future years and projected total)

Category	Year 1	Year 2	Year3*	Total Project Costs
Personnel	\$52,765	\$54,348	\$55,978	\$163,091
Fringe	\$10,896	\$11,223	\$11,560	\$33,678
Travel	\$863	\$2,167	\$863	\$3,893
Equipment	\$0	\$0	\$0	\$0

Category	Year 1	Year 2	Year3*	Total Project Costs
Supplies	\$600	\$600	\$600	\$1,800
Contractual	\$875,164	\$887,447	\$887,447	\$2,669,080
Other	\$3,196	\$1,096	\$1,096	\$5,388
Total Direct Charges	\$961,018	\$974,416	\$994,101	\$2,929,535
Indirect Charges	\$5,093	\$5,246	\$5,403	\$15,742
Total Project Costs	\$966,111	\$979,661	\$999,504	\$2,945,277

TOTAL PROJECT COSTS: Sum of Total Direct Costs and Indirect Costs

FEDERAL REQUEST (enter in Section B column 1 line 6k of form SF-424A) **\$2,945,277**

*FOR REQUESTED FUTURE YEARS:

1. Please justify and explain any changes to the budget that differs from the reflected amounts reported in the 01 Year Budget Summary.
2. If a cost of living adjustment (COLA) is included in future years, provide your organization's personnel policy and procedures that state all employees within the organization will receive a COLA.

IN THIS SECTION, REFLECT OTHER FEDERAL AND NON-FEDERAL SOURCES OF FUNDING BY DOLLAR AMOUNT AND NAME OF FUNDER e.g., Applicant, State, Local, Other, Program Income, etc.

Other support is defined as funds or resources, whether federal, non-federal or institutional, in direct support of activities through fellowships, gifts, prizes, in-kind contributions or non-federal means. [Note: Please see Appendix D, Funding Restrictions, regarding allowable costs.]

IN THIS SECTION, include a narrative and separate budget for each year of the grant that shows that no more than 25 percent of the total grant award may be used for infrastructure development/improvements at the state level. No more than 20 percent of this amount may be used for data collection, performance measurement and performance assessment, including incentives for participating in the required data collection follow-up.

Infrastructure Development	Year 1	Year 2	Year 3	Total Infrastructure Costs
Personnel	\$52,765	\$54,348	\$55,978	\$163,091
Fringe	\$10,896	\$11,223	\$11,560	\$33,679
Travel	\$863	\$2,167	\$863	\$3,893
Equipment	\$0	\$0	\$0	\$0
Supplies	\$600	\$600	\$600	\$476,250
Contractual	\$94,500	\$94,500	\$94,500	\$283,500
Other	\$16,211	\$14,111	\$14,111	\$44,433
Total Direct Charges	\$175,855	\$176,969	\$177,632	\$546,198
Indirect Charges	\$5,093	\$5,246	\$5,403	\$15,742
Total Infrastructure Costs	\$180,948	\$182,215	\$183,035	\$546,198

Data Collection & Performance Measurement	Year 1	Year 2	Year 3	Total Data Collection & Performance Measurement Costs
Personnel	\$26,383	\$27,174	\$27,989	\$81,546
Fringe	\$5,448	\$5,612	\$5,780	\$16,840
Travel	\$0	\$0	\$0	\$0
Equipment	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0
Contractual	\$550	\$550	\$550	\$1,650
Other	\$500	\$500	\$500	\$1,500
Total Direct Charges	\$32,881	\$33,835	\$34,819	\$101,535
Indirect Charges	\$2,546	\$2,623	\$2,701	\$7,871
Total Data Collection & Performance Measurement Costs	\$35,427	\$36,459	\$37,521	\$109,406

Appendix F – Addressing Behavioral Health Disparities

In April 2011, the Department of Health and Human Services (HHS) released its *Action Plan to Reduce Racial and Ethnic Health Disparities*. This plan outlines goals and actions HHS agencies, including SAMHSA, will take to reduce health disparities among racial and ethnic minorities. Agencies are required to continuously assess the impact of their policies and programs on health disparities. The Action Plan is available at: http://minorityhealth.hhs.gov/npa/files/Plans/HHS/HHS_Plan_complete.pdf.

The number one Secretarial priority in the Action Plan is to: “**Assess and heighten the impact of all HHS policies, programs, processes, and resource decisions to reduce health disparities.** HHS leadership will assure that: Program grantees, as applicable, will be required to submit health disparity impact statements as part of their grant applications. Such statements can inform future HHS investments and policy goals, and in some instances, could be used to score grant applications if underlying program authority permits.” (See disparity impact statement examples at: <http://www.samhsa.gov/grants/grants-management/disparity-impact-statement>.)

To accomplish this, SAMHSA expects grantees to utilize their data to: (1) identify subpopulations (i.e., racial, ethnic, sexual/gender minority groups) vulnerable to health disparities; and (2) implement strategies to decrease the differences in **access, service use, and outcomes** among those subpopulations. A strategy for addressing health disparities is use of the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care.

Definition of Health Disparities:

Healthy People 2020 defines a health disparity as a “particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

- **Behavioral health status disparity:** "A population is a health disparity population if there is a significant disparity in the overall rate of disease incidence, prevalence, morbidity, mortality or survival rates in the population as compared to the health status of the general population." (Minority Health and Health Disparities Research and Education Act, 2000)
- **Behavioral health care disparity:** "...Racial or ethnic differences in the quality of healthcare that are not due to access-related factors or clinical needs, preferences and appropriateness of interventions." (Institute of Medicine, 2002)

Subpopulations

SAMHSA grant applicants are routinely asked to define the population they intend to serve given the focus of a particular grant program (e.g., adults with serious mental illness [SMI] at risk for chronic health conditions; young adults engaged in underage drinking; populations at risk for contracting HIV/AIDS, etc.). Within these populations of focus are *subpopulations* that may have disparate access to, use of, or outcomes from provided services. These disparities may be the result of differences in language, beliefs, norms, values, and/or socioeconomic factors specific to that subpopulation. For instance, Latino adults with SMI may be at heightened risk for metabolic disorder due to lack of appropriate in-language primary care services; Native American youth may have an increased incidence of underage drinking due to coping patterns related to historical trauma within the Native American community; and African American women may be at greater risk for contracting HIV/AIDS due to lack of access to education on risky sexual behaviors in urban low-income communities. While these factors might not be pervasive among the general population served by a grantee, they may be predominant among subpopulations or groups vulnerable to disparities. It is imperative that grantees understand who is being served within their community in order to provide care that will yield positive outcomes, per the focus of that grant. In order for organizations to attend to the potentially disparate impact of their grant efforts, applicants are asked to address access, use and outcomes for subpopulations, which can be defined by the following factors:

- By race
- By ethnicity
- By gender (including transgender), as appropriate
- By sexual orientation (i.e., lesbian, gay, bisexual), as appropriate

HHS published final standards for data collection on race, ethnicity, sex, primary language and disability status, as required by Section 4302 of the Affordable Care Act in October 2011,

<http://www.minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlid=208>.

The ability to address the quality of care provided to subpopulations served within SAMHSA's grant programs is enhanced by programmatic alignment with the federal CLAS standards.

National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care

The National CLAS standards were initially published in the Federal Register on December 22, 2000. Culturally and linguistically appropriate health care and services, broadly defined as care and services that are respectful of and responsive to the cultural and linguistic needs of all individuals, is increasingly seen as essential to reducing disparities and improving health care quality. The National CLAS Standards

have served as catalyst and conduit for the evolution of the field of cultural and linguistic competency over the course of the last 12 years. In recognition of these changes in the field, the HHS Office of Minority Health undertook the National CLAS Standards Enhancement Initiative from 2010 to 2012.

The enhanced National CLAS Standards seek to set a new bar in improving the quality of health to our nation's ever diversifying communities. Enhancements to the National CLAS Standards include the broadening of the definitions of health and culture, as well as an increased focus on institutional governance and leadership. The enhanced National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care are comprised of 15 Standards that provide a blueprint for health and health care organizations to implement culturally and linguistically appropriate services that will advance health equity, improve quality, and help eliminate health care disparities.

You can learn more about the CLAS mandates, guidelines, and recommendations at: <http://www.ThinkCulturalHealth.hhs.gov>.

Examples of a Behavioral Health Disparity Impact Statement are available on the SAMHSA website at <http://www.samhsa.gov/grants/grants-management/disparity-impact-statement>.