

APPENDIX W TO 2008 STATE AND COUNTY CONTRACT
FOR SOCIAL SERVICES AND COMMUNITY PROGRAMS

Appendix Title: Alcohol and Other Drug Abuse (AODA) Block Grant

It is further understood and agreed by both parties through this attachment to the CY 2008 "State and County Contract Covering Social Services and Community Programs" that:

I. Funds Provided/Period Covered

Funds in the amount of \$9,735,700 is provided from the federal Substance Abuse Prevention Treatment Block Grant (SAPTBG - 100%, CFDA# 93.959) Contract period is January 1, 2008 through December 31, 2008.

II. Purpose and Service Conditions on the Use of the Additional Funds

A. Scope of Services: These additional SAPTBG funds are to be used by the County for AODA services as follows: Up to 70 percent must be expended to the target group of alcohol and/or drug abusers; at least 20 percent must be expended to prevention programs which discourage substance abuse; and at least 10 percent must be expended for programs and services designed for women and women with dependent children.

B. CRF 45, Part 96.131 - Treatment Services for Pregnant Women:

The program gives preference in admission to pregnant women who seek or are referred for and would benefit from Block Grant-funded treatment services. Further, all entities that serve women and who receive block grant funds must provide preference in the following order:

- (a) To pregnant injecting drug users first.
- (b) To other pregnant substance abusers second.
- (c) To other injecting drug users third.
- (d) To all others individuals fourth.
- (e) Women with dependent children.
- (f) Homeless persons with co-occurring disorders.

Wisconsin programs receiving Block Grant funds **must** publicize to women of services from the facilities and the fact that pregnant women receive such preference. This may be done in the following ways: street outreach programs, ongoing public service announcements (radio/television), regular advertisements in local/regional print media, posters placed in targeted areas, and frequent notification of availability of such treatment distributed to the network of community based organizations, health care providers and social service agencies.

1. The program refers pregnant women to the State when the program has insufficient capacity to provide services to any such pregnant women who seek the services of the program.
2. The program makes available interim services within 48 hours to pregnant women who cannot be admitted because of lack of capacity.

C. **CFR 45, Part 96.124 - Required Services for Programs Receiving Block Grant Funds Set Aside for Specialized Women's Treatment Services for Pregnant Women and Women with Dependent Children:**

The County and/or vendor/sub-contractor must offer priority admission, either through immediate admission or priority placement on a waiting list, to pregnant women. The County and/or vendor/subcontractor will provide interim services to pregnant women on a waiting list. If the County and/or vendor/subcontractor has insufficient capacity to provide interim services, the County and/or vendor/sub-contractor will immediately notify the Department's contract administrator to coordinate the provision of interim services. The amount set aside for women's services shall be expended on individuals who have no other financial means of obtaining such services as provided in §96.137.

If the program receives Block Grant funds set aside for Specialized Women's Treatment Services for pregnant women and women with dependent children (including women attempting to regain custody of their children):

1. The program treats the family as a unit and, therefore, admits both women and their children into treatment services, if appropriate.
2. The program provides or arranges for primary medical care for women who are receiving substance abuse services, including prenatal care.
3. The program provides or arranges for childcare while the women are receiving services.
4. The program provides or arranges for primary pediatric care for the women's children, including immunizations.
5. The program provides or arranges for gender-specific substance abuse treatment and other therapeutic interventions for women that may address issues of relationships, sexual abuse, physical abuse, and parenting, and childcare while the women are receiving these services.
6. The program provides or arranges for therapeutic interventions for children in custody of women in treatment, which may among other things, address the children's developmental needs, their issues of sexual and physical abuse, and neglect.
7. The program provides or arranges for sufficient case management and transportation services to ensure that the women and their children have access to the services provided by (2) through (6) above.

D. **CFR 45, Part 96.126 - Capacity of Treatment for Intravenous Drug Abusers:**

The county and/or vendor/sub-contractor must offer priority admission, either through immediate admission or priority placement on a waiting list, to individuals for intravenous substance abuse. The county and/or vendor/sub-contractor will provide interim services to individuals for intravenous substance abuse on the waiting list. The county and/or vendor/sub-contractor must report all services to individuals for intravenous substance abuse.

1. Within 7 days of reaching 90 percent of its treatment capacity, the program notifies the State that 90 percent of the capacity has been reached.

2. The program admits each individual who requests and is in need of treatment for intravenous drug abuse not later than:
 - (a) 14 days after making the request *or*
 - (b) 120 days if the program has no capacity to admit the individual on the date of the request and, within 48 hours after the request, the program makes interim services available until the individual is admitted to a substance abuse treatment program.
3. When applicable, the program offers interim services that include, at a minimum, the following:
 - (a) Counseling and education about HIV and tuberculosis (TB), about the risks of needle-sharing, the risks of transmission to sexual partners and infants, and about steps that can be taken to ensure that HIV and TB transmission does not occur.
 - (b) Referral for HIV or TB treatment services, if necessary.
 - (c) Counseling on the effects of alcohol and other drug use on the fetus for pregnant women, as well as referral for prenatal care.
4. The program has established a waiting list that includes a unique patient identifier for each injecting drug abuser seeking treatment, including patients receiving interim services while awaiting admission.
5. The program has a mechanism that enables it to:
 - (a) Maintain contact with individuals awaiting admission.
6. Admit or transfer waiting list clients at the earliest possible time to an appropriate treatment program within a reasonable geographic area. The program takes clients awaiting treatment for intravenous substance abuse off the waiting only when one of the following conditions exists:
 - (a) Such persons cannot be located for admission into treatment *or*
 - (b) Such persons refuse treatment.
7. The program carries out activities to encourage individuals in need of treatment services for intravenous drug abuse to undergo such treatment by using scientifically sound outreach models, if no such models are applicable to the local situation, another approach which can reasonably be expected to be an effective outreach method.
8. The program ensures that outreach efforts have procedures including the following:
 - (a) Selecting, training, and supervising outreach workers.
 - (b) Contacting, communicating, and following up with high-risk substance abusers, their associates, neighborhood residents within the constraints of Federal and State confidentiality requirements 45 CFR parts 160 & 164 Health Insurance Portability and Accountability Act, HIPAA, and 42 C.F.R. Part 2.
 - (c) Promoting awareness among injecting drug abusers about the relationship between injecting drug abuse and communicable diseases such as HIV.
 - (d) Recommending steps that can be taken to ensure that HIV transmission does not occur.
 - (e) Encouraging entry into treatment.

E. CFR 45, Part 96.127 - Requirements Regarding Tuberculosis:

1. The program directly, or through arrangements with other public or nonprofit private entities, routinely makes available the following TB services to each individual receiving treatment for substance abuse:
 - (a) Counseling the individual with respect to TB.
 - (b) Testing to determine whether the individual has been infected with mycobacterium TB to determine the appropriate form of treatment for the individual.
 - (c) Providing for or referring the individuals infected by mycobacterium TB appropriate medical evaluation and treatment.
2. For clients denied admission to the program on the basis of lack of capacity, the program refers such clients to other providers of TB services.
3. The program has implemented the infection control procedures that are consistent with those established by the Department to prevent the transmission of TB and that address the following:
 - (a) Screening patients and identification of those individuals who are at high risk of becoming infected.
 - (b) Meeting all State reporting requirements while adhering to Federal and State confidentiality requirements 45 CFR parts 160 & 164 Health Insurance Portability and Accountability Act, HIPAA, including 42 CFR part 2.
 - (c) Case management activities to ensure that individuals receive such services.
4. The program reports all individuals with active TB as required by State law and in accordance with Federal and State confidentiality requirements 45 CFR parts 160 & 164 Health Insurance Portability and Accountability Act, HIPAA, including 42 CFR part 2.

F. CFR 45, Part 96.132 - Additional Requirements:

1. The program makes continuing education in treatment services available to employees who provide the services.
2. The program has in effect a system to protect patient records from inappropriate disclosure, and the system:
 - (a) Is in compliance with all applicable State and Federal laws and regulations 45 CFR parts 160 & 164 Health Insurance Portability and Accountability Act, HIPAA, including 42 CFR part 2.
 - (b) Includes provisions for employee education on the confidentiality requirements and the fact that disciplinary action may occur upon inappropriate disclosure.

III. Fiscal Conditions on the Earnings of the Additional Funds

These additional funds are earned under the following conditions:

- A. In accordance with your application goals and objectives and budget.

- B. The Department shall apply these conditions in determining the close of the contract. The amount of a subsequent audit adjustment on the funds in this contract shall be based exclusively upon these conditions.
- C. Activities Allowed or Unallowed
1. Grant funds shall not be used to provide inpatient hospital services except when it is determined by a physician that: (a) the primary diagnosis of the individual is substance abuse and the physician certifies this fact; (b) the individual cannot be safely treated in a community based non-hospital, residential treatment program; (c) the service can reasonably be expected to improve an individual's condition or level of functioning; and (d) the hospital based substance abuse program follows national standards of professional substance abuse practice. Additionally, the daily rate of payment provided to the hospital for providing the services to the individual cannot exceed the comparable daily rate provided for community based non-hospital residential programs of treatment for substance abuse and the grant may be expended for such services only to the extent that it is medically necessary (i.e., only for those days that the patient cannot be safely treated in a residential community based program) (42 USC 300x-31 (a) and (b); 45 CFR sections 96.135(a)(1) and (c)).
 2. Grant funds may be used for loans from a revolving loan fund for provision of housing in which individuals recovering from alcohol and drug abuse may reside in groups. Individual loans may not exceed \$4000 (45 CFR section 96.129).
 3. Grant funds shall not be used to make cash payments to intended recipients of health services (42 USC 300x-31(a); 45 CFR section 96.135(a)(2)).
 4. Grant funds shall not be used to purchase or improve land, purchase, construct, or permanently improve (other than minor remodeling) any building or any other facility, or purchase major medical equipment. The Secretary may provide a waiver of the restriction for the construction of a new facility or rehabilitation of an existing facility, but not for land acquisition (42 USC 300x-31(a); 45 CFR sections 96.135(a)(3) and (d)).
 5. Grant funds shall not be used to satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funding (42 USC 300x-31(a); 45 CFR section 96.135(a)(4)).
 6. Grant funds may not be used to provide financial assistance (i.e., a subgrant) to any entity other than a public or non-profit entity. A State is not precluded from entering into a procurement contract for services, since payments under such a contract are not financial assistance to the contractor (42 USC 300x-31(a); 45 CFR section 96.135 (a)(5)).
 7. Grant funds shall not be used to provide individuals with hypodermic needles or syringes so that such individuals may use illegal drugs (42 USC 300ee-5; 45 CFR section 96.135 (a)(6) and Pub. L. No. 106-113, section 505).
 8. Grant funds may not be used to enforce State laws regarding sale of tobacco products to individuals under age of 18, except that grant funds may be expended from the primary prevention set-aside of Substance Abuse Prevention and Treatment Block Grant under 45 CFR section 96.124(b)(1) for carrying out the administrative aspects of the requirements such as the development of the sample design and the conducting of the inspections (45 CFR section 96.130 (j)).

9. No funds provided directly from Substance Abuse Mental Health Services Administration or the relevant State or local government to organizations participating in applicable programs may be expended for inherently religious activities, such as worship, religious instruction, or proselytization (42 USC 300x-65 and 42 USC 290kk; 42 CFR section 54.4).

IV. Fiscal and Client Reporting on the Use of the Additional Funds

- A. During the time period specified in I above and under the conditions outlined in II above.
- B. Accurate and complete client and expenditure data shall be reported to the Department on the Human Services Reporting System (fiscal and client utilization data) for clients served by the use of these funds.
- C. Agencies receiving Substance Abuse Prevention and Treatment (SAPT) Block Grant funds shall report and use data on federally required National Outcome Measures (NOMS) in accordance with guidelines provided through the Human Services Reporting System (HSRS). In calendar year 2008, NOMS Reporting will be required in order to receive the full allocation of SAPT Block Grant funds. In calendar year 2008, county agencies are required to have in place the mechanisms to report timely, accurate, and complete NOMS. If the State should receive a reduction in the 2008 SAPT Block Grant allocation due to failure to report NOMS, counties that have not met the NOMS reporting requirements may be subject to a funding reduction and required to refund part of payments already made.
- D. Use of these funds shall be reported to the Department on the DMT Form 600 (Profile #570) and the DDE 942 Form according to the schedule outlined in the State/County Contract.
- E. Quarterly program and progress reports on each program goal and objective including fiscal reports on budget line items shall be submitted to the Bureau of Mental Health and Substance Abuse Services by April 30, July 30 and October 30 in a format provided by the Bureau of Mental Health and Substance Abuse Services (Form DDE 389).
- F. An annual program report must be submitted to the Bureau of Mental Health and Substance Abuse Services within 30 days after the calendar year of program operations in a format provided by the Bureau of Mental Health and Substance Abuse Services.
- G. Failure to report these funds and the clients served by them as specified above may result in the loss of these funds by the County and their repayment by the County to the Department.

V. Payment Procedures

1. These funds shall be paid in accordance with the State and County Contract.
2. CFR 45, Part 96.137

The program uses the Block Grant as the "payment of last resort" for services for pregnant women and women with dependent children, TB services, and HIV services and, therefore, makes every reasonable effort to do the following:

- (a) Collect reimbursement for the costs of providing such services to persons entitled to insurance benefits under the Social Security Act, including programs under title XVIII and title XIX; any State compensation program, any other public assistance program for medical expenses, any grant program, any private health insurance, or any other benefit program.

- (b) Secure from patients or clients' payments for services in accordance with their ability to pay.

VI. Availability of Funds

The Department shall pay the County for the services it provides or purchases as set forth in this contract within the limits of funds appropriated.

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