

Urban/Rural Women's Alcohol and Other Drug Abuse (AODA) Treatment County

It is further understood and agreed by both parties through this attachment to the CY 2015 "State and County Contract Covering Social Services and Community Programs" that:

I. Additional Funds Provided/Period Covered:

Funds are provided through the federal Substance Abuse Prevention and Treatment Block Grant (SAPTBG) CFDA# 93.959). Balance of funding is state program revenue dollars (DAPIS). These funds are provided by the Department to the County for the period beginning January 1, 2015 through December 31, 2015.

See RFP DMHSAS –G203 for further details regarding this program.

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

Payments through 6/30/15 are limited to 6/12ths of the contract with the balance paid after 7/1/15 based on reported costs up to the contract level

- A. Scope of Services: These additional funds may be used by the County only for the following purposes and under the following service conditions: In accordance with your application submitted under Statewide Solicitation of Grant Applications for Urban/Rural Women's Alcohol and Other Drug Abuse Treatment Programs and Community-Based Alcohol and Other Drug Abuse Treatment Programs.

Required Services for Programs Receiving Block Grant Funds Set Aside for Pregnant Women and Women with Dependent Children, 45 CFR 96.124

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 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.

Treatment Services for Pregnant Women, 45 CFR 96.131

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:

- To pregnant injecting drug users first.
- To other pregnant substance abusers second.
- To other injecting drug users third.
- To all others individuals.

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, brochures and 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.

- 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.

- The program makes available interim services within 48 hours to pregnant women who cannot be admitted because of lack of capacity.

Priority of Treatment Service

The program gives preference in admission in the following order:

- To pregnant injecting drug users first.
- To other pregnant substance abusers second.
- To other injecting drug users third.
- To women with dependent children fourth.
- To homeless persons with co-occurring disorders fifth.
- To all others individuals.

Requirements Regarding Tuberculosis, 45 CFR 96.127

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.

Additional Requirements, 45 CFR 96.132

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 HIPAA, 42 CFR Part 2, and Wis. Stat. 51.30.
- (b) Includes provisions for employee education on the confidentiality requirements and the fact that disciplinary action may occur upon inappropriate disclosure.

Restrictions on the Expenditure of the Grant Vendor/Sub-Contractor Compliance, 45 CFR 96.135

When a sub-contract is issued by the County to purchase services utilizing Block Grant funds, conditions on prohibited expenditures and the condition of first priority of services to pregnant women must be adhered to and monitored by the County. Counties should develop a policy to ensure that all vendors/sub-contractors comply with all of the requirements.

1. The program does not expend SAPT Block Grant funds to provide inpatient hospital substance abuse services, except in cases when each of the following conditions is met [42 USC 300x-31(a) and (b), 45 CFR]:
 - (a) The individual cannot be effectively treated in a community-based, non-hospital, residential program.
 - (b) The daily rate of payment provided to the hospital for providing the services does not exceed the comparable daily rate provided by a community-based, non-hospital, residential treatment program.
 - (c) A physician makes a determination that the following conditions have been met:
 - i. The primary diagnosis of the individual is substance abuse and the physician certifies that fact.
 - ii. The individual cannot be safely treated in a community-based, non-hospital, residential treatment program.
 - iii. The service can reasonably be expected to improve the person's condition or level of functioning.
 - iv. The hospital-based substance abuse program follows national standards of substance abuse professional practice.
 - (d) The service is provided only to the extent that it is medically necessary (e.g., only for those days that the patient cannot be safely treated in a residential, community-based program).
2. The program does not expend SAPT Block Grant funds to make payments to intended recipients of health services [42 USC 300x-31(a), 45 CFR section 96.135(a)(2)].
3. The program does not expend SAPT Block Grant funds to purchase or improve land; purchase, construct, or permanently improve (other than minor remodeling) any building or other facility; or purchase major medical equipment [42 USC 300x-31(a), 45 CFR section 96.135(a)(3) and (d)].
4. The program does not expend SAPT Block Grant funds to purchase or improve land; purchase, construct, or permanently improve (other than

- minor remodeling) any building or other facility; or purchase major medical equipment [42 USC 300x-31(a), 45 CFR section 96.135(a)(3) and (d)].
5. The program does not expend SAPT Block Grant funds to provide financial assistance to any entity other than a public or nonprofit private entity [42 USC 300x-31(a), 45 CFR section 96.135(a)(5)].
 6. The program does not expend SAPT Block Grant funds to provide individuals with hypodermic needles or syringes [42 USC 300x-31(a), 45 CFR section 96.135(a)(2)].
 7. The program does not expend SAPT Block Grant funds to provide treatment services in penal or correctional institutions of the State (exceptions are based on statewide formulas).

Payment Schedule, 45 CFR 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.

National Outcome Measurement System (NOMS) Language

The County and/or vendors/sub-contractors receiving Substance Abuse Prevention and Treatment (SAPT) Block Grant funds, for the provision of providing substance abuse prevention, intervention or treatment services shall report and use data on federally required National Outcome Measurement System (NOMS) in accordance with guidelines provided through the Program Participant System (PPS) and/or the Substance Abuse Prevention-Services Information System (SAP-SIS). NOMS reporting is required in order to receive the full allocation of SAPT Block Grant funds. All agencies receiving Substance Abuse Prevention and Treatment Block Grant funds through this contract are required to have in place the mechanisms to report timely, accurate, and complete NOMS data. If the State should receive a reduction in the SAPT Block Grant allocation due to failure to report NOMS, contract agencies that have not met the NOMS reporting requirements may be subject to a funding reduction and required to refund part of payments already made.

§ 96.128 Requirements Regarding HIV

Wisconsin is not a designated State; therefore, Wisconsin may not use any Substance Abuse Prevention and Treatment (SAPT) block grant funds for HIV early intervention programs/services. As a non-designated state, users of illicit

substances may receive HIV services through Ryan White Comprehensive AIDS Resources Emergency (CARE) Act programs. A report, Investigation of the Adequacy of the Community Planning Process to Meet the HIV Care Needs of Active Substance Users, provides recommendations on how more effectively to use Title I funds to meet the needs of the substance-using population.

Any SAPT block grant funds used for HIV early intervention programs will be subject to repayment to the Substance Abuse and Mental Health Services Administration, which provides SAPT block grant funds to states. All Wisconsin programs and providers receiving SAPT Block Grant funds must ensure adherence to items (1) through (6).

1. Substance Abuse Prevention and Treatment Block Grant funds may not be used for any/or by any County and/or vendor/sub-contractor make appropriate pretest counseling for HIV and AIDS available at the sites at which the individuals are undergoing treatment for substance abuse.
2. Substance Abuse Prevention and Treatment Block Grant funds may not be used for any/or by any County and/or vendor/sub-contractor to make available, at the sites at which the individuals are undergoing treatment for substance abuse, appropriate HIV/AIDS testing, including tests to diagnose the extent of the deficiency in the immune system and tests to provide information on appropriate therapeutic measures for preventing and treating the deterioration of the immune system and for preventing and treating conditions arising from the disease available.
3. Substance Abuse Prevention and Treatment Block Grant funds may not be used for any/or by any County and/or vendor/sub-contractor to make available appropriate post-test counseling at the sites at which the individuals are undergoing treatment for substance abuse.
4. Substance Abuse Prevention and Treatment Block Grant funds may not be used for any/or by any County and/or vendor/sub-contractor to make available, at the sites at which individuals are undergoing treatment for substance abuse, therapeutic measures for preventing and treating the deterioration of the immune system and for preventing and treating conditions arising from the disease.
5. Substance Abuse Prevention and Treatment Block Grant funds may not be used for any/or by any County and/or vendor/sub-contractor that has established linkages with a comprehensive community resource network of related health and social services organizations to ensure a wide-based knowledge of the availability of these services and to facilitate referral.
6. Substance Abuse Prevention and Treatment Block Grant funds may not be used for any/or by any County and/or vendor/sub-contractor to ensure that HIV early intervention services provided with patients' informed consent, and are not

required as a condition of receiving substance abuse treatment or any other services.

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.

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 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. Use of these funds shall be reported to the Department on the DMT Form F-00642 Profile #547 and the F-20942 Forms according to the schedule outlined in the State/County Contract.
- D. Biannual program and progress reports on each program goal and objective including fiscal reports on budget line items shall be submitted to the Bureau of Prevention Treatment and Recovery by July 30 and January 31 of the following year in a format provided by the Bureau of Prevention Treatment and Recovery (Form #F-20389).
- F. An annual program report must be submitted to the Bureau of Prevention Treatment and Recovery within 30 days after the calendar year of program operations in a format provided by the Bureau of Prevention Treatment and Recovery.
- 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

These funds shall be paid in accordance with the State and County Contract.

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.