

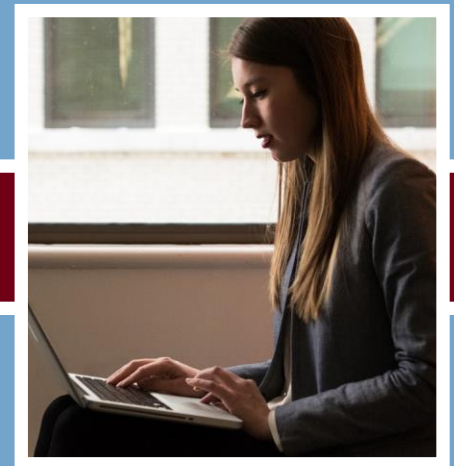
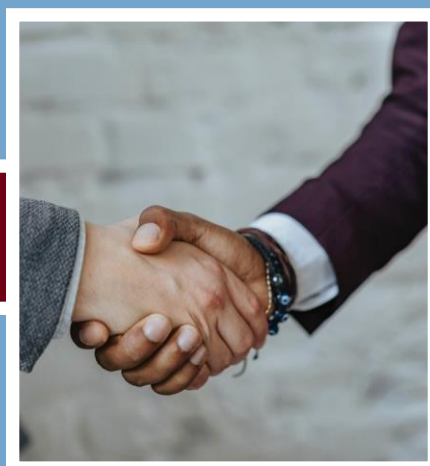
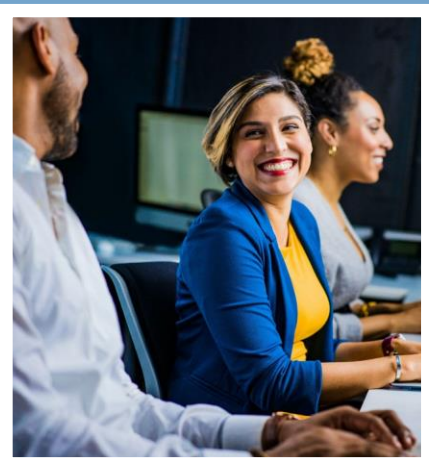


Mike DeWine, Governor
Lori Criss, Director

OHIO DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES

AGREEMENTS AND ASSURANCES

Signature Page - SFY 24



Ohio Department of Mental Health and Addiction Services
SFY2024 Agreements and Assurances



Original Release – May 30th, 2023

Directions for Completion of Agreement and Assurances by Applicant for Award or Sub-Award:

1. Type into or select the appropriate box that is highlighted blue and gray.
2. Please note that paragraphs 28-36 apply only to sub-awards funded in whole or part with federal funds, including federal block grant funds, paragraph 37 applies only to sub-awards funded in whole or part with Community Mental Health Block Grant (CMHBG) funds, paragraphs 38-46 apply only to sub-awards funded in whole or part with Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant funds, and paragraphs 47-50 apply only to sub-awards to programs serving women funded in whole or part with SUPTRS BG funds.
3. Sign the signature page.
4. Read and Sign Attachment 2: "Certifications," Attachment 3: "Non Construction Programs" for sub-awards funded in whole or part with federal funds and Attachment 4: "Standard Affirmation and Disclosure—Executive Order 2019-12D" for all sub-awards.

NOTE: Changes and/ or modifications to the Agreement and Assurance will not be accepted by OhioMHAS.

AGREEMENT and ASSURANCES (Attachment 1)

In accepting an award or sub-award from the Ohio Department of Mental Health and Addiction Services, hereinafter "DEPARTMENT",

("SUB-AWARDEE"),

located at: _____

Agrees and makes the following assurances:

1. SUB-AWARDEE has received an allocation or applied for an award or sub-award ("sub-award") from one or more of the following fund sources:
 - Community Mental Health Block Grant (CMHBG) (CFDA No.93.958)
 - Substance Use Prevention Treatment and Recovery Services Block Grant (SUPTRS) (CFDA No. 93.959)
 - Social Services Block Grant (Title XX) (CFDA No. 93.667)
 - 5AU0 Rotary; OhioMHAS Account for Receipt of federal funds (CFDA No. TBD)
 - Projects for Assistance in Transition from Homelessness (PATH) Grant (CFDA No. 93.150)
 - GRF Line Item (ALI) Grant
 - Probate Court reimbursement for costs, fees, and expenses pursuant to ORC5122.43
 - Title XX (CFDA No. 93.667)
 - Child Care Quality (CFDA No. 93.713)
 - Ohio Healthy Transitions Project (CFDA No. 93.243)
 - Ohio Promoting Integration of Primary and Behavioral Health Care (CFDA No. 93.243)
 - Zero Suicide (CFDA No. 93.243)
 - Supported Employment Program (CFDA No. 93.243)
 - Ohio Strategic Prevention Framework, Partnerships for Success (CFDA No. 93.243)
 - State Youth Treatment Implementation (CFDA No. 93.243)
 - Ohio ENGAGE (CFDA No. 93.104)
 - SPF-RX (CFDA No. 93.243)
 - State Opioid Response Grant (CFDA No. 93.788)
 - State Opioid Response Carryover Grant (CFDA No. 93.788)
 - Medication Assisted Treatment-Prescription Drug and Opioid Addiction Grant (CFDA No. 93.243)
 - Promoting Integration of Primary and Behavioral Health (CFDA No. 93.243)
 - 988 Quality Assurance (CFDA No. 93.243)
 - Project Aware (CFDA No. 93.243)
 - SERG Grant (CFDA No. 93.243)
 - Certified Community BH Clinic Planning Grant (CCBHC) Grant (CFDA No. 93.829)
 - Treatment for Individuals Experiencing Homelessness (CFDA No. 93.243)
 - State and Local Fiscal Recovery Funds (CFDA No. 21.027)
 - ESSER (CFDA No. 84.425)
 - Recovery Housing Support Act (CFDA No. 14.218)
 - Residential Substance Abuse Treatment (CFDA No. 16.593)
 - Comprehensive Opioid, Stimulant, and Substance Abuse Program (CFDA No. 16.838)
 - 1490 Line Item, OhioMHAS Rotary Account (CFDA No. TBD)
 - 4750 Line Item, OhioMHAS Rotary Account (CFDA No. TBD)
 - Other: [include CFDA # for federal funds]
 - Other: [include CFDA # for federal funds]
 - Other: [include CFDA # for federal funds]

- B. A for-profit organization.
4. "Severe forms of trafficking in persons," "commercial sex act," and "coercion" have the meanings given at section 103 of the TVPA, as amended (22 U.S.C. 7102).

36. SUB-AWARDEE assures DEPARTMENT that it or its parent organization holds permanent 501(c) non-profit status, or is a general or special purpose government entity. [CFDA 93.958; 42 USC 300x-5(a); OMB Guidance 0930-0168; 45 CFR 96.135] Check one:

Non-profit 501 (c) program Government entity

Paragraph 37 applies only to the Community Mental Health Block Grant

37. Use of Funds – Federal CMH Block Grant funds must be used for treatment and recovery supports for adults with serious mental illness and children with serious emotional disturbances, as well as the planning, administration, educational, and evaluation activities related to providing these services described in the combined Mental Health Block Grant Plan

Paragraphs 38-46 apply to the Substance Use Prevention Treatment and Recovery Services (SUPTRS) Block Grant

38. The purpose of these funds is to provide financial assistance to programs for the delivery of alcohol and other drug services/activities. Any use of funds for equipment, furniture or computer software, or for food purchases must be justified in terms of the relationship of the equipment, furniture or computer software, or the food purchases, to the program or activity. Justification to purchase equipment, furniture, computer software, or food must be submitted to DEPARTMENT for prior approval and include consideration of how the equipment, furniture or computer software, or the food, will be used, why the purchase is necessary, what alternatives were considered, how the cost was determined and why the program considers the cost reasonable. Funds cannot be expended for equipment, furniture or computer software, or food, until approved by OhioMHAS.

39. Treatment Alternatives to Street Crime (TASC) and drug court programs receiving funds from the DEPARTMENT may use only addiction treatment providers that hold current certification or license from the DEPARTMENT.

40. Charitable Choice Provisions and Regulations of SUPTRS Block Grant Funds [42 C.F.R. 54.8] require DEPARTMENT, along with DEPARTMENT SUB-AWARDEEs and providers to:

- a. Ensure that religious organizations that are certified treatment providers offer notice of a client's right to alternative services to all potential and actual program beneficiaries.
- b. Ensure that religious organizations that are certified treatment providers refer program beneficiaries to alternative services.
- c. Fund and provide alternative services.



- 52. The SUB-AWARDEE must use the designated reporting form or electronic reporting form to submit reports and must meet the requirements specified in the APPLICATION, NOSA, or Inter-Agency Agreement. Reporting time periods and due dates will be listed in the NOSA or Inter-Agency Agreement. Reports shall be submitted to the person(s) indicated on the NOSA or Inter-Agency Agreement. If reports are not submitted on time the DEPARTMENT may withhold current and future funds from the SUB-AWARDEE.

- 53. The term of this Agreement & Assurances shall be the longer of the applicable State Fiscal Biennium or the period of the sub-award. Notwithstanding anything in this Agreement to the contrary, SUB-AWARDEE acknowledges that the Ohio Legislature and the Controlling Board of Ohio (each a "Governing Authority") must approve the appropriation and release of funds in connection with DEPARTMENT spending authority for each state biennium. It is agreed that any and all obligations of funds under this Agreement extending beyond the current state biennium are contingent upon the continuing availability of lawful appropriations by the Ohio General Assembly. If the General Assembly fails at any time to continue funding authority for the obligations that may be due under this Agreement, then all of SUB-AWARDEE's and DEPARTMENT's obligations under this Agreement, except those that by their nature or by designation survive termination, are terminated as of the date that the funding expires.

Signature

The Executive Officer signing below is authorized to obligate the SUB-AWARDEE and he/she represents that he/she has reviewed and approved this AGREEMENT and ASSURANCES including all attachments on behalf of the SUB-AWARDEE.

For the SUB-AWARDEE:

Type in Sub Awardee Name:

Executive Officer or Authorized Signature	Date
--	------

Type in Executive Officer Name Below Title

ATTACHMENT INSTRUCTIONS

If applicable, please SIGN and insert the following Attachments:

State of Ohio agencies or instrumentalities that have executed and submitted to the DEPARTMENT a set of Certifications and Assurances current through this sub-award period do not need to execute or attach Attachments 2, 3 and 4.

Attachment 2 is the "Certifications" document - **Signature Required**

Attachment 3 is the "Assurances – Non-Construction Programs" – **Signature Required**

Attachment 4 is the "Standard Affirmation and Disclosure—Executive Order 2011-12K"
Information & Signature Required

Guidance in Completing Attachment 4

Per guidance from the Office of Legal Services at the Ohio Department of Administrative Services, this attachment should include contracts that are entered into for services purchased for the State.

Based on this guidance, Boards should include all entities contracted with, regardless of funding source, under ORC 340.03 (8)(a): "Enter into contracts with public and private facilities for the operation of facility services and enter into contracts with public and private community addiction and mental health service providers for the provision of community addiction and mental health services."

Attachment 5 is the "List of Additional Sub-awardee(s) Documents," if multiple documents are attached, designate as 5A, 5B, 5C, etc. – **Information Required as Appropriate**

Attachment 6 is the Notice of Sub-Award (NOSA) or the Intrastate Transfer Voucher (ISTV) - **to be provided by DEPARTMENT upon award**

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S.C. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

4. Certification Regarding Program Fraud Civil Remedies Act (PFCRA)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties.

The undersigned agrees that the applicant organization will comply with the terms and conditions of this award.

1. Certification Regarding Environmental Tobacco Services

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee.

The law also applies to children’s services that are provided in indoor facilities that are constructed, operated, or maintained with such federal funds. The law does not apply to children’s services provided in private residences; portions of facilities used for inpatient drug or alcohol treatment; service providers whose sole source of applicable Federal funds is Medicare or Medicaid; or facilities where WIC coupons are redeemed. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing this certification, the offeror/contractor (for acquisitions) or applicant/SUB-AWARDEE (for grants certifies that the submitting organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The submitting organization agrees that it will require that the language of this certification be included in any sub-awards which contain provisions for children’s services and that all sub-recipients shall certify accordingly.

The federal awarding agency strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE	
APPLICANT ORGANIZATION		DATE SUBMITTED

federally assisted construction sub-agreements.

10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetland pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under Coastal Zone Management Act of 1972 (16 U.S.C. §§ 1451 et. Seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §§ 7401 et. Seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§ 1271 et. Seq.) Related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. § 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§ 469a-1 et. seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§ 2131 et. seq.) Pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4831 (b) et. seq.) Which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will comply with the Single Audit Act of 1984, as amended, and 45 CFR, Part 75, Subpart F. SUB-AWARDEES must submit to DEPARTMENT the communications specified in 45 CFR §75.512(a) within the earlier of 30 days after receipt of the auditor's report(s) or nine months after the end of the audit period. DEPARTMENT reserves the right to require SUB-AWARDEE's submission of copies of the audit reporting package described in 45 CFR §75.512(c) and any management letters issued by the auditor, in accordance with 45 CFR §75.512(e).
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE	
APPLICANT ORGANIZATION		DATE SUBMITTED

Attachment 4

**DEPARTMENT OF ADMINISTRATIVE SERVICES/
OHIO DEPARTMENT OF MENTAL HEALTH & ADDICTION SERVICES
STANDARD AFFIRMATION AND DISCLOSURE FORM
EXECUTIVE ORDER 2019-12D
Governing the Expenditure of Public Funds for Offshore Services**

All of the following provisions must be included in all invitations to bid, requests for proposals, state term schedules, multiple award contracts, requests for quotations, informal quotations, and statements of work. This information is to be submitted as part of the response to any of the procurement methods listed.

CONTRACTOR/SUBCONTRACTOR AFFIRMATION AND DISCLOSURE:

By the signature affixed to this response, the Bidder/Offeree affirms, understands and will abide by the requirement of Executive Order 2019-12D. If awarded a contract, the Bidder/Offeree becomes the Contractor and affirms that both the Contractor and any of its subcontractors shall perform no services requested under this Contract outside of the United States. The Signee shall provide all the name(s) and location(s) where services under this Contract/Grant will be performed in the spaces provided below or by attachment. Failure to provide this information as part of the response will deem the signee not responsive and no further consideration will be given to the response. Signee's offering will not be considered. If the Signee will not be using subcontractors/subgrantees, indicate "Not Applicable" in the appropriate spaces.

1. Principle location of business of Contractor/Grantee:

(Address) (City, State, Zip)

Name/Principal location of business of Subcontractor(s)/Sub grantee(s):

(Name) (Address; City, State, Zip)

(Name) (Address; City, State, Zip)

2. Location where services will be performed by Contractor/Grantee:

(Address) (City, State, Zip)

Name/Principal location of business of Subcontractor(s)/Sub grantee(s):

(Name) (Address; City, State, Zip)

(Name) (Address; City, State, Zip)

3. Location where state data will be stored, accessed, tested, maintained or backed-up by Contractor/Grantee:

(Address)

(City, State, Zip)

Name/Location(s) where state data will be stored, accessed, tested, maintained or backed-up by Subcontractor(s)/Subgrantee(s):

(Name)

(Address; City, State, Zip)

(Name)

(Address; City, State, Zip)

(Name)

(Address; City, State, Zip)

(Name)

(Address; City, State, Zip)

(Name)

(Address; City, State, Zip)

Contractor also affirms, understands and agrees that Contractor and its subcontractors are under a duty to disclose to the State any change or shift in location of services performed by Contractor or its subcontractors before, during and after execution of any Contract with the State. Contractor agrees it shall so notify the State immediately of any such change or shift in location of its services. The State has the right to immediately terminate the contract, unless a duly signed waiver from the State has been attained by the Contractor to perform the services outside the United States. On behalf of the Contractor, I acknowledge that I am duly authorized to execute the Affirmation and Disclosure form and have read and understand that this form is a part of any Contract that Contractor may enter into with the State and is incorporated therein.

For the Contractor/Grantee:

Signature

Date

Entity Name

Address (Principal Place of Business)

Printed name of individual authorized to sign on behalf of entity

City, State, Zip

Attachment 6

DEPARTMENT OF ADMINISTRATIVE SERVICES
STANDARD AFFIRMATION AND DISCLOSURE FORM
EXECUTIVE ORDER 2022-02D

State of Ohio's Response to Russia's Unjust War on the Country of Ukraine
March 2022

Contractor affirms that Contractor has read and understands the applicable Executive Orders regarding the prohibitions of performance of offshore services, locating State data offshore in any way or purchasing from Russian institutions or companies.

The Contractor shall provide all the name(s) and location(s) where services under this Contract will be performed and where data is located in the spaces provided below or by attachment. Failure to provide this information may result in no award. If the Contractor will not be using subcontractors, indicate "Not Applicable" in the appropriate spaces.

1. Principal location of business of Contractor:

(Address)

(City, State, Zip)

Name/Principal location of business of subcontractor(s):

(Name)

(Address, City, State, Zip)

(Name)

(Address, City, State, Zip)

2. Location where services will be performed by Contractor:

(Address)

(City, State, Zip)

Name/Location where services will be performed by subcontractor(s):

(Name)

(Address, City, State, Zip)

(Name)

(Address, City, State, Zip)

3. Location where state data will be stored, accessed, tested, maintained or backed-up, by Contractor:

(Address)

(Address, City, State, Zip)

Name/Location(s) where state data will be stored, accessed, tested, maintained or backed-up by subcontractor(s):

(Name)

(Address, City, State, Zip)

(Name)

(Address, City, State, Zip)

Contractor also affirms, understands and agrees that Contractor and its subcontractors are under a duty to disclose to the State any change or shift in location of services performed by Contractor or its subcontractors before, during and after execution of any contract with the State. Contractor agrees it shall so notify the State immediately of any such change or shift in location of its services. The State has the right to immediately terminate the contract, unless a duly signed waiver from the State has been attained by the Contractor to perform the services outside the United States.

On behalf of the Contractor, I acknowledge that I am duly authorized to execute this Affirmation and Disclosure Form and have read and understand that this form is a part of any Contract that Contractor may enter into with the State and is incorporated therein.

By: _____
Contractor

Print Name: _____

Title: _____

Date: _____