State Information

Plan Year

Federal Fiscal Year 2024

State Identification Numbers

Unique Entity ID LJGVPF5ULHJ3

EIN/TIN 86-6004791

I. State Agency to be the Grantee for the PATH Grant

Agency Name Arizona Health Care Cost Containment System

Organizational Unit Division of Grants Administration

Mailing Address 801 East Jefferson

City Phoenix

Zip Code 85034

II. Authorized Representative for the PATH Grant

First Name Andrea

Last Name Lustfield

Agency Name Arizona Healthcare Cost Containment System

Mailing Address 801 E Jefferson Street MD 1900

City Phoenix

Zip Code 85039

Telephone (602) 417-4706

Fax

Email Address andrea.lustfield@azahcccs.gov

III. Expenditure Period

From 7/1/2024

To 6/30/2025

IV. Date Submitted

NOTE: this field will be automatically populated when the application is submitted.

Submission Date

Revision Date

V. Contact Person Responsible for Application Submission

First Name Ali

Last Name De La Trinidad
Telephone (602) 417-4706

Fax

Email Address ali.delatrinidad@azahcccs.gov

Footnotes:



Assurances - Non-Construction Programs

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

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- 1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
- 2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
- 3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- 4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- 5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standard for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
- 6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §§794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to non-discrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
- 7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
- 8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally assisted construction subagreements.
- 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 the Costal 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.

- §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. §§4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
- 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

HHS Assurances of Compliance (HHS 690)

ASSURANCE OF COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE DISCRIMINATION ACT OF 1975, AND SECTION 1557 OF THE AFFORDABLE CARE ACT The Applicant provides this assurance in consideration of and for the purpose of obtaining Federal grants, loans, contracts, property, discounts or other Federal financial assistance from the U.S. Department of Health and Human Services.

THE APPLICANT HEREBY AGREES THAT IT WILL COMPLY WITH:

- 1. Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80), to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
- 2. Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified individual with a disability in the United States shall, solely by reason of her or his disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
- 3. Title IX of the Education Amendments of 1972 (Pub. L. 92-318), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 86), to the end that, in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives Federal financial assistance from the Department.
- 4. The Age Discrimination Act of 1975 (Pub. L. 94-135), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91), to the end that, in accordance with the Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
- 5. Section 1557 of the Affordable Care Act (Pub. L. 111-148), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 92), to the end that, in accordance with Section 1557 and the Regulation, no person in the United States shall, on the ground of race, color, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any health program or activity for which the Applicant receives Federal financial assistance from the Department.

The Applicant agrees that compliance with this assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the Applicant, its successors, transferees and assignees for the period during which such assistance is provided. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. The Applicant further recognizes and agrees that the United States shall have the right to seek judicial enforcement of this assurance.

The grantee, as the awardee organization, is legally and financially responsible for all aspects of this award including funds provided to sub-recipients in accordance with 45 CFR ? 75.351-75.352, Subrecipient monitoring and management.

Name

Title		
Finance Administrator		
Organization		
Arizona Health Care Cost Containment System		
	Date:	
ire:		
re: PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2		



Assurances - Non-Construction Programs

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- 2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
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- 5. Section 1557 of the Affordable Care Act (Pub. L. 111-148), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 92), to the end that, in accordance with Section 1557 and the Regulation, no person in the United States shall, on the ground of race, color, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any health program or activity for which the Applicant receives Federal financial assistance from the Department.

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Printed: 3/15/2024 3:23 PM - Arizona - FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Title	Finance Administrator		
Organiz	Arizona Health Care Cost Containm	ent System	
Signature:	Karen D. Mac Leon	Date: 3/14/2024	
FY 2024 PATH F	OA Catalog No.: 93.150 FOA No.: SM-24-F2		
Footnotes:			



Certifications

1. Certification Regarding Debarment and Suspension

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 2 CFR part 180, and its principals:

- a. Agrees to comply with 2 CFR Part 180, Subpart C by administering each lower tier subaward or contract that exceeds \$25,000 as a "covered transaction" and verify each lower tier participant of a "covered transaction" under the award is not presently debarred or otherwise disqualified from participation in this federally assisted project by:
 - a. Checking the Exclusion Extract located on the System for Award Management (SAM) at http://sam.gov
 - b. Collecting a certification statement similar to paragraph (a)
 - c. Inserting a clause or condition in the covered transaction with the lower tier contract

2. Certification Regarding Drug-Free Workplace Requirements

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free work-place in accordance with 2 CFR Part 182by:

- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's work-place and specifying the actions that will be taken against employees for violation of such prohibition;
- b. Establishing an ongoing drug-free awareness program to inform employees about--
 - 1. The dangers of drug abuse in the workplace;
 - 2. The grantee&apso;s policy of maintaining a drug-free workplace;
 - 3. Any available drug counseling, rehabilitation, and employee assistance programs; and
 - 4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- d. Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will-
 - 1. Abide by the terms of the statement; and
 - 2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- e. Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- f. Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted?
 - 1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - 2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

3. Certifications Regarding Lobbying

Per 45 CFR ?75.215, Recipients are subject to the restrictions on lobbying as set forth in 45 CFR part 93. Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs. The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering

into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

- 2. If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
- 3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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, U.S. Code. 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) (31 U.S.C ? 3801- 3812)

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 Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

5. Certification Regarding Environmental Tobacco Smoke

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, daycare, 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 residence, 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 \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant 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 applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services 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.

Name		
Karen D. MacLean		
Title		
Finance Administrator		
Organization		
Arizona Health Care Cost Containment System		
ature:	Date:	
24 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2		
otnotes:		

Certifications

1. Certification Regarding Debarment and Suspension

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 2 CFR part 180, and its principals:

- a. Agrees to comply with 2 CFR Part 180, Subpart C by administering each lower tier subaward or contract that exceeds \$25,000 as a "covered transaction" and verify each lower tier participant of a "covered transaction" under the award is not presently debarred or otherwise disqualified from participation in this federally assisted project by:
 - a. Checking the Exclusion Extract located on the System for Award Management (SAM) at http://sam.gov
 - b. Collecting a certification statement similar to paragraph (a)
 - c. Inserting a clause or condition in the covered transaction with the lower tier contract

2. Certification Regarding Drug-Free Workplace Requirements

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free work-place in accordance with 2 CFR Part 182by:

- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's work-place and specifying the actions that will be taken against employees for violation of such prohibition;
- b. Establishing an ongoing drug-free awareness program to inform employees about-
 - 1. The dangers of drug abuse in the workplace;
 - 2. The grantee&apso;s policy of maintaining a drug-free workplace;
 - 3. Any available drug counseling, rehabilitation, and employee assistance programs; and
 - 4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- d. Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will-
 - 1. Abide by the terms of the statement; and
 - 2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- e. Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- f. Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted?
 - 1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - 2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

3. Certifications Regarding Lobbying

Per 45 CFR ?75.215, Recipients are subject to the restrictions on lobbying as set forth in 45 CFR part 93. Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs. The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering

into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

- 2. If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
- 3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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, U.S. Code. 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) (31 U.S.C ? 3801- 3812)

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 Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

5. Certification Regarding Environmental Tobacco Smoke

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, daycare, 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 residence, 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 \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant 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 applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services 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.

Nan	Karen D. MacLean	
Title	Finance Administrator	
Org	ganization	
	Arizona Health Care Cost Containment System	
Signature:	Haven D. Mac Leon Date: 3	7/14/2024
FY 2024 PA	ATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2	
Footnote	tes:	

Funding Agreement

FISCAL YEAR 2024

PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS (PATH) AGREEMENT

I hereby certify that the State/Territory of Arizona agrees to the following:

Section 522(a). Amounts received under the PATH Formula Grant Program will be expended solely for making grants to political subdivisions of the State, and to nonprofit private entities (including community-based veterans organizations and other community organizations) for the purpose of providing the services specified in Section 522(b) to individuals who:

- · Are suffering from serious mental illness; or
- · Are suffering from serious mental illness and from a substance use disorder; and
- · Are homeless or at imminent risk of becoming homeless.

Section 522(b). Entities receiving grants under the PATH Formula Grant Program will expend funds for the following services:

- · Outreach;
- · Screening and diagnostic treatment;
- · Habilitation and rehabilitation;
- · Community mental health;
- · Alcohol or drug treatment;
- Staff training, including the training of individuals who work in shelters, mental health clinics, substance abuse programs, and other sites where homeless individuals require services;
- · Case management services, including:
 - Preparing a plan for the provision of community mental health services to the eligible homeless individual involved, and reviewing such plan not less than once every 3 months;
 - Providing assistance in obtaining and coordinating social and maintenance services for the eligible homeless individuals, including services relating to daily living activities, personal financial planning, transportation services, and habilitation and rehabilitation services, prevocational and vocational services, and housing;
 - Providing assistance to the eligible homeless individual in obtaining income support services, including housing
 assistance, food stamps, and supplemental security income benefits;
 - · Referring the eligible homeless individual for such other services as may be appropriate; and
 - Providing representative payee services in accordance with Section 1631(a) (2) of the Social Security Act if the eligible homeless individual is receiving aid under Title XVI of such act and if the applicant is designated by the Secretary to provide such services.
- · Supportive and supervisory services in residential settings;
- · Referrals for primary health services, job training, education services and relevant housing services;
- Housing services [subject to Section 522(h)(1)] including:
 - Minor renovation, expansion, and repair of housing;
 - Planning of housing;
 - · Technical assistance in applying for housing assistance;
 - · Improving the coordination of housing services;
 - Security deposits;
 - · The costs associated with matching eligible homeless individuals with appropriate housing situations;
 - $\circ~$ One-time rental payments to prevent eviction; and
- Other appropriate services, as determined by the Secretary.

Section 522(c). The State will make grants pursuant to Section 522(a) only to entities that have the capacity to provide, directly through arrangements, the services specified in Section 522(b), including coordinating the provision of services in order to meet the needs of eligible homeless individuals who are both mentally ill and suffering from a substance abuse disorder.

Section 522(d). In making grants to entities pursuant to Section 522(a), the State will give special consideration to entities with a demonstrated effectiveness in serving homeless veterans.

Section 522(e). The state agrees that grants pursuant to Section 522(a) will not be made to any entity that:

- · Has a policy of excluding individuals from mental health services due to the existence or suspicion of a substance use disorder; or
- · Has a policy of excluding individuals from substance use services due to the existence or suspicion of mental illness.

Section 522(f). Not more than four (4) percent of the payments received under the PATH Formula Grant Program will be expended for administrative expenses regarding the payments.

Section 522(h). The State agrees that not more than 20 percent of the payments will be expended for housing services under section 522(b)(10); and the payments will not be expended for the following:

- · To support emergency shelters or construction of housing facilities;
- · For inpatient psychiatric treatment costs or inpatient substance use treatment costs; or
- · To make cash payments to intended recipients of mental health or substance use services.

Section 523(a). The State will make available, directly or through donations from public or private entities, non-Federal contributions toward such costs in an amount that is not less than \$1 for each \$3 of funds provided in such payments. The amount of non-Federal contributions shall be determined in accordance with Section 523(b).

Section 523(c). The State will not require the entities to which grants are provided pursuant to Section 522(a) to provide non-Federal contributions in excess of the non-Federal contributions described in Section 523(a).

Section 526. The State has attached hereto a Statement that does the following:

- Identifies existing programs providing services and housing to eligible homeless individuals and gaps in the delivery systems of such programs;
- · Includes a plan for providing services and housing to eligible homeless individuals, which:
 - · Describes the coordinated and comprehensive means of providing services and housing to homeless individuals; and
 - Includes documentation that suitable housing for eligible homeless individuals will accompany the provision of services to such individuals;
- Describes the source of the non-Federal contributions described in Section 523;
- · Contains assurances that the non-Federal contributions described in Section 523 will be available at the beginning of the grant period;
- · Describes any voucher system that may be used to carry out this part; and
- · Contains such other information or assurances as the Secretary may reasonably require.

Section 527(a)(1), (2), and (3). The State has attached hereto a description of the intended use of PATH Formula grant amounts for which the State is applying. This description shall:

- Identify the geographic areas within the State in which the greatest numbers of homeless individuals with a need for mental health, substance use, and housing services are located; and
- Provide information relating to the program and activities to be supported and services to be provided, including information relating to coordinating such programs and activities with any similar programs and activities of public and private entities.

Section 527(a)(4). The description of intended use for the fiscal year of the amounts for which the State is applying will be revised throughout the year as may be necessary to reflect substantial changes in the programs and activities assisted by the State pursuant to the PATH Formula Grant Program.

Section 527(b). In developing and carrying out the description required in Section 527(a), the State will provide public notice with respect to the description (including any revisions) and such opportunities as may be necessary to provide interested clients, such as family members, consumers and mental health, substance use, and housing agencies, an opportunity to present comments and recommendations with respect to the description.

Section 527(c)(1)(2). The services to be provided pursuant to the description of the intended use required in Section 527(a), have been considered in the preparation of, have been included in, and are consistent with the State Plan for Comprehensive Community Mental Health Services under P.L. 102-321.

Section 528(a). The State will, by January 31, 2025, prepare and submit a report providing such information as is necessary for the following:

- To secure a record and description of the purposes for which amounts received under the PATH Formula Grant Program were expended during fiscal year 2024 and of the recipients of such amounts; and
- To determine whether such amounts were expended in accordance with the provisions of Part C PATH.

Section 528(b). The State further agrees that it will make copies of the reports described in Section 528(a) available for public inspection.

Charitable Choice Provisions:

The State will comply, as applicable, with the Substance Abuse and Mental Health Services Administration's (SAMHSA) Charitable Choice statutes codified at sections 581-584 and 1955 of the Public Health Service Act (42 U.S.C. §§290kk, et seq., and 300x-65) and their governing regulations at 42 C.F.R. part 54 and 54a respectively.



	Governor/Designee Name		
	Title		
	Organization		
Signatu	re:	Date:	
Y 2024	PATH FOA Catalog No.: 93.150 F	DA No.: SM-24-F2	
Footn	otos:		
rootii	otes.		



Funding Agreement

FISCAL YEAR 2024

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Governor/Designee Name	S. Su-
Title	Chief Medical Officer
Organization	Arizona Health Care Cost Containment System

Signature: Date:

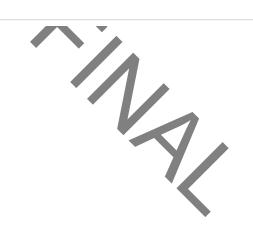
FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:



Disclosure of Lobbying Activities

Are there lobbying	activities pursuant to 31 U.S.C. 1352 to be disclosed? Yes	€ No €		
To View Standard F	orm LLL, Click the link below (This form is OPTIONAL).			
Standard Form LLL	(click here)			
Name:	Karen D. MacLean	_		
Title:	Finance Administrator	_		
Organization:	Arizona Health Care Cost Containment System	_		
Signature:		Date Signed:		
			mm/dd/yyyy	
FY 2024 PATH FOA	Catalog No.: 93.150 FOA No.: SM-24-F2			
Footnotes:				

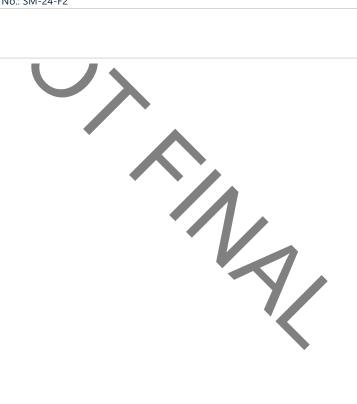


State PATH Regions

Name	Description	Actions
Cochise County	Cochise County (vendor Good Neighbor Alliance - GNA).	
Coconino County, Mohave County and Yavapai County	Coconino, Mohave and Yavapai County (vendor Catholic Charities)	
Maricopa County	Maricopa County (vendor Community Bridges Inc - CBI).	
Pima County	Pima County (vendor La Frontera).	

FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:



II. Executive Summary

1. State Summary Narrative

Narrative Question:

Provide an overview of the state's PATH program with key points that are expanded upon in the State Level Sections of WebBGAS.

FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:



Arizona Health Care Cost Containment System Project for Assistance to Transition from Homelessness FY 2022-2023 SM-21-F2

The Arizona Health Care Cost Containment System (AHCCCS) serves as both the SSA and state Medicaid system for Arizona. AHCCCS provides comprehensive integrated health care services for individuals with co-occurring mental and substance use disorders through Managed Care Organizations (MCOs). The majority of AHCCCS members receive integrated health services through their chosen acute care program, one of seven AHCCCS Complete Care (ACC) plans throughout the state. Services include, but are not limited to, primary health care, mental health individual and group counseling, case management, psychiatric and psychologist services, peer support services, family support services, individual and group skills training, vocational training, substance use disorder treatment, medication for opioid use disorder (MOUD), and medication for the treatment of alcohol use disorder. The ACC Contractors with a Regional Behavioral Health Agreement (ACC-RBHAs) specifically serve individuals with a Serious Mental Illness (SMI) designation, Serious Emotional Disturbance (SED) and Early Serious Mental Illness (ESMI) including First Episode Psychosis (FEP) while also providing crisis, other grant-funded, and state-only funded services. Additionally, the Arizona Long Term Care System (ALTCS) program provides health insurance for individuals who are age 65 or older or who have a disability. American Indians and Alaska Natives (AI/AN) enrolled in AHCCCS or CHIP (KidsCare) may choose to receive their coverage through the American Indian Health Program (AIHP), Tribal ALTCS, or Tribal RBHAs (TRBHAs enter into Intergovernmental Agreements with AHCCCS for behavioral health care management) or one of the AHCCCS-contracted managed health plans.

There are four contracted PATH providers in Arizona serving both urban and rural areas of the state: Good Neighbor Alliance, Community Bridges Inc., La Frontera, and Catholic Charities. The PATH contractors utilize best or promising practices to target individuals experiencing or at imminent risk for homelessness through street outreach, in-reach activities, and case management to serve our most vulnerable adults. Once an individual is enrolled into the PATH program, the PATH contractor will assist with applying for mainstream services such as SSI/SSDI, Housing, Temporary Assistance for Needy Families, Food Stamps, Medicaid, an SMI determination, medical resources, as assessed to best meet the holistic needs of the individual. Referrals and services for behavioral health and/or substance use recovery services are additionally coordinated by PATH providers. Services are documented within the individual's case plan and the case plan will be updated as needed or at least every three (3) months. The PATH providers offer a variety of efforts to establish a therapeutic alliance with individuals experiencing or at imminent risk for homelessness including emergency homeless shelters, a shower program, hotel vouchers, basic need / health and hygiene items, transportation, eviction prevention, advocacy, completion of the VI SPDAT and evaluation of each person's Social Determinants of Health. PATH providers consistently provide information and assist to connect members to community resources including heating/cooling stations, medical services, behavioral health/substance use services, harm reduction resources, thrift store partnerships for clothing items, domestic violence advocacy resources, veterans' services programs, and food pantries. Arizona's PATH providers are actively engaged in their communities and collaborate with local community resources to assist each person to successfully transition out of homelessness.

Page 1

Arizona Health Care Cost Containment System Project for Assistance to Transition from Homelessness FY 2022-2023 SM-21-F2

For Fiscal Year (FY) 2024, Arizona was allotted \$1,385,704 with a minimum match of \$461,901.

Name of Organizatio	Organization al Type	Federal Funds	State Funds	County Served	Number of	Number of
n	ат туре	Tunus			persons	persons
					to be	to be
					contacted	enrolled
AHCCCS	State Agency	\$55,428				
Community	Local PATH	\$648,832	\$225,290	Maricopa	4,640	1,064
Bridges, Inc	Subrecipient					
(CBI)						
La Frontera	Local PATH	\$287,278	\$99,749	Pima	1,500	120
	Subrecipient	ノン				
Catholic	Local PATH	\$324,043	\$112,515		2,400	200
Charities	Subrecipient			*Coconin		
				o Mohave		
				Yavapai		
Good	Local PATH	\$70,123	\$61,877	*Cochise	240	30
Neighbor	Subrecipient					
Alliance						
(GNA)				Y		
TOTAL		\$1,385,704	\$499,431	~	8,780	1,414

^{*}Balance of State consists of 13 counties.

II. Executive Summary

2. State Budget

Planning Period From **7/1/2024** to **6/30/2025**

A budget and budget narrative that includes the state's use of PATH funds are required. The budget can be entered directly into WebBGAS, or you can upload the budget as an attachment. The Budget Narrative is a separate document that must be uploaded as an Attachment. It must provide a justification for the basis of each proposed cost in the budget and how that cost was calculated. The proposed costs must be reasonable, allowable, allocable, and necessary for the supported activity.

ndicates a required field									
Category				Federal	Dollars	Matched D	ollars	Total Dollars	Comments
ersonnel				\$:	36,301 \$	ş.	0	\$ 36,301	
Position *	Annual Salary *	% of time spent on PATH *	PATH- Funded FTE		Funded ary *	Matched D	ollars *	Total Dollars	Comments
PATH Administrator Other (Describe in Comments)	66,000.00 66,000.00	0.00 % 0.00 %	0.45 0.10		701.00 600.00		0.00	29,701.00 6,600.00	Fiscal Staff
Category		Pe	rcentage	Federal	Dollars *	Matched D	ollars *	Total Dollars	Comments
ringe Benefits			40.00 %	\$ 14,	520.00 \$	5 (0.00	\$ 14,520.00	
Category				Federal	Dollars	Matched D	ollars	Total Dollars	Comments
Fravel				\$ 4,0	607.00 \$	5 (0.00	\$ 4,607.00	
Line Item Detail *				Federal	Dollars *	Matched D	ollars *	Total Dollars	Comments
Annual PATH Conference				\$ 2,	072.00 \$	\$ 1	0.00	\$ 2,072.00	Out of State Travel - Grantee Meeting - Washington D.C. (Airfare, Per Diem & Lodging)
Per Diem				\$ 1,	035.00 \$	\$ (0.00	\$ 1,035.00	In State Travel - Per Diem
Other (Describe in Comments)				\$ 1,	500.00 \$		0.00	\$ 1,500.00	In State Travel - Lodging
quipment				\$	0.00 \$	j (0.00	\$ 0.00	
					No Data Av	vailable			
Supplies				\$	0.00 \$	ş (0.00	\$ 0.00	
					No Data Av	vailable			
Contractual (IUPs)				\$ 1,330,2	276.00 \$	\$ 499,431	.00	\$ 1,829,707.00	
Contractual (State)				\$	0.00 \$	ş (0.00	\$ 0.00	
					No Data Av	vailable			
Category		Pe	rcentage	Federal	Dollars	Matched D	ollars	Total Dollars	Comments
	only be PATH allow								ne Personnel line item. For questions, call your Program Officer.
. Housing (IUPs)			0.13 %	\$ 1,	856.00 \$	64	1.00	\$ 2,500.00	
. Housing (State)				\$	0.00 \$	ş (0.00	\$ 0.00	
					No Data Av	vailable			
Category				Federal	Dollars	Matched D	ollars	Total Dollars	Comments
Construction (non-allowable)									
Other				\$	0.00 \$		0.00	\$ 0.00	
					No Data Av	vailable			
otal Direct Charges (Sum of a-i minus g1))			\$ 1,385,	704.00 \$	\$ 499,43	.00	\$ 1,885,135.00	

k. Indirect Costs (Administrative Costs)	\$ 0.00	\$ 0.00	\$ 0.00	
l. Grand Total (Sum of j and k)	\$ 1,385,704.00	\$ 499,431.00	\$ 1,885,135.00	
Allocation of Federal PATH Funds	\$ 1,385,704	\$ 461,901	\$ 1,847,605	

Source(s) of Match Dollars for State Funds:



Projects for Assistance in Transition from Homelessness (PATH) FY2024 Application Budget Narrative & Justification

Budget Narrative & Justification July 1, 2024 through June 30, 2025

A. Personnel:

Position Title (1)	Staff Name (2)	Key Staff (3)	Annual Salary/Rate (4)	Level of Effort (5)	Total Salary Charge to Award (6)	State Match (7)
Project Administrator	Ali De La Trinidad		\$66,000	0.45	\$29,701	
Fiscal Staff	Varied		\$66,000	0.10	\$6,600	
	Tota	\$36,301	\$0			

JUSTIFICATION: This is the cost of staff salaries to provide oversight and monitoring of the PATH grant. The Project Administrator provides oversight, monitoring, and implementation of the PATH grant. The Project Administrator monitors contractors' compliance with grant obligations and adherence to policies and requirements. This position provides technical assistance to contractors and facilitates regular meetings with contractors to ensure they are providing the services as required by the PATH grant. The fiscal staff will provide support to the Project Administrator by assisting in the federal grants' management and administration of the grant. AHCCCS has a positive time tracking module within its Human Resource Information System (HRIS) that allows personnel to charge a grant for activities during each pay cycle, as part of its Employee Time Record (ETE). This will be utilized for any fiscal staff efforts charged to the grant.

B. <u>Employee Related Expenditure:</u>

Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	State Match (6)
Project Administrator	Ali De La Trinidad	40%	\$29,701	\$11,880	
Fiscal Staff	Varied	40%	\$6,600	\$2,640	
	Total Re	equest		\$14,520	\$0

JUSTIFICATION: This is the ERE costs for those staff performing duties for PATH grant. Fringe benefits are part of the overall compensation and are proportionate to the level of effort that will devote to the project. The costs are incurred

Projects for Assistance in Transition from Homelessness (PATH) FY2024 Application Budget Narrative & Justification July 1, 2024 through June 30, 2025

under formally established and consistently applied policies of the organization. Items in this category include FICA, paid vacation or sick time, pensions, health, or life insurance coverage.

Fringe Category	Rate
Retirement	11.94%
FICA	1.45%
Insurance (i.e.,	Varies
Health, Dental,	
Vision, Life,	
Unemployment)	
Social Security	6.20%
Other (i.e., Long-	Varies
term Disability,	
Workers	
Compensation)	
Total	40%

C. <u>Professional & Outside Services</u>

Name	Service	Rate	Total	State Match
(1)	(2)	(3)	(4)	(5)
,				

JUSTIFICATION:

D. Travel:

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) https://gao.az.gov.publications/saam.

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	State Match (6)
Out of state	Washington	Airfare	1 @ \$800	\$800	
travel - Grantee	D.C.	Out of state per diem	\$68 x 4 days	\$272	
Meeting		Lodging	\$250 per day x 4 days	\$1,000	
In state travel	Statewide	Lodging	10 nights x \$150/night	\$1,500	
		Per Diem	15 days x \$69	\$1,035	

Projects for Assistance in Transition from Homelessness (PATH) FY2024 Application

Budget Narrative & Justification July 1, 2024 through June 30, 2025

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Travel Cost Charged to the Award (5)	State Match (6)
Total Request			\$4,607	\$0	

JUSTIFICATION: This represents out of state travel for PATH conference as well as in State travel for oversight and monitoring of PATH programs by the PATH Project Administrator.

E. Contractual:

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, the number of clients should be included in the costs.

Name (1)	Service (2)	Rate (3)	Oth er (4)	Cost (5)	State Match (6)
Community Bridges	PATH Outreach	See attached itemized budget		\$648,832	\$225,290
Catholic Charities	PATH Outreach	See attached itemized budget		\$324,043	\$112,515
Good Neighbor Alliance	PATH Outreach	See attached itemized budget		\$70,123	\$61,877
La Frontera	PATH Outreach	See attached itemized budget		\$287,278	\$99,749
	T Re		\$1,330,276	\$499,431	

JUSTIFICATION: This represents the budget allocation for each PATH provider to provide outreach services to those experiencing homelessness, serious mental illness, and/or a substance use disorder.

F. Indirect Cost Rate or Administration (See Footnote below):

Calculation (1)	Indirect Cost Charged to the Award (2)	State Match (3)
	\$0	

Projects for Assistance in Transition from Homelessness (PATH) FY2024 Application

Budget Narrative & Justification July 1, 2024 through June 30, 2025

Calculation (1)	Indirect Cost Charged to the Award (2)	State Match (3)
Total Request	\$0	\$0

JUSTIFICATION:

FOOTNOTE:

- (1) Please specify whether utilizing indirect or administrative overhead.
- (2) For administrative overhead, please provide a justification of costs included in administration.
- (3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.
- G. Total Project Costs (Do not include In-Kind):

TOTAL REQUEST – TOTAL PROJECT COSTS –	\$1,885,135
(Sum of Total Direct Costs and Indirect (Or Admin) Costs)	

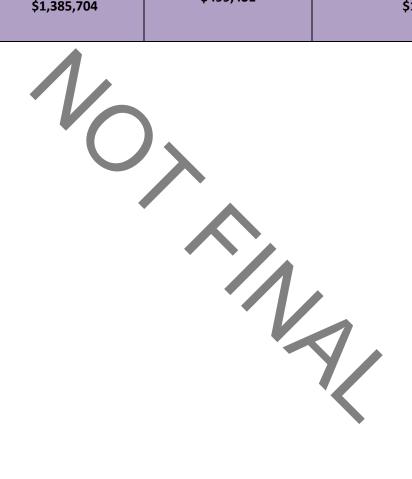
H. BUDGET SUMMARY (this document should match the Budget Outline document):

Category	Year 1	State Match Total Project Costs	Total Project Costs
Personnel	\$36,301	\$0	\$36,301
Employee Related Expenditures	\$14,520	\$0	\$14,520
Professional & Outside Services	\$0	\$0	\$0
Travel	\$4,607	\$0	\$4,607
Contractual	\$1,330,276	\$499,431	\$1,829,707

Projects for Assistance in Transition from Homelessness (PATH) FY2024 Application

Budget Narrative & Justification July 1, 2024 through June 30, 2025

Category	Year 1	State Match Total Project Costs	Total Project Costs
Indirect Costs or Administration	\$0	\$0	\$0
Total PATH Grant	\$1,385,704	\$499,431	\$1,885,135



Footnotes:



II. Executive Summary

3. Intended Use Plans

Expenditure Period Start Date: 07/01/2024

Expenditure Period End Date: 06/30/2025

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process

Primary IUP Provider	Provider Type	Geographic Service Area	Allocations	Matching Funds	Estimated # to Contact	Estimated # to Enroll	# Trained in SOAR	# Assisted through SOAR
Catholic Charities	Social service agency	Cochise County	\$324,043.00	\$112,515.00	2,400	160	4	0
Community Bridges Inc.	Social service agency	Maricopa County	\$648,832.00	\$225,290.00	2,800	900	1	35
Good Neighbor Alliance	Shelter or other temporary housing resource	Cochise County	\$70,123.00	\$61,877.00	260	31	1	0
La Frontera Center, Inc.	Community mental health center	Pima County	\$287,278.00	\$99,749.00	1,500	120	4	20
		Grand Total	\$1,330,276.00	\$499,431.00	6,960	1,211	10	55





II. Executive Summary

Intended Use Plans

Catholic Charities

4747 N. 7th Avenue Phoenix, AZ 85013

Contact: Sandi Flores
Email Address: sflores@cc-az.org

Provider Type: Social service agency

PDX ID: AZ-007

State Provider ID: AZ-007
Contact Phone #: (928) 774-9125



- Local Provider Description Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- Collaboration with HUD CoC Program HUD's Continuum of Care (CoC) Program is designed to promote communitywide commitment to the goal of ending homelessness by providing funding for efforts by nonprofit providers and State and local governments and promoting access to mainstream programs by homeless individuals and families. Describe the organization's participation with local HUD CoC recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- Collaboration with Local Community Organizations Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary care, mental health, substance use, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be
- · Service Provision Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
- How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with COD, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
- Any gaps that exist in the current service systems;
- A brief description of the current services available to clients who have a COD; and
- A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- Housing Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- Staff Information Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients. Describe the extent to which staff receive periodic training in cultural competence and health disparities
- Client Information Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are literally homeless.
- Consumer Involvement Describe how individuals who experience homelessness and have serious mental illness, and their family members, will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- Budget Narrative Provide a budget and budget narrative that includes the local-area provider's use of PATH funds.



The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category				Federal Dollars		ched Dollars	Tota		Comments
Personnel				\$ 153,511	\$	53,303	\$	206,814	
Position *	Annual Salary *	% of time spent on PATH *	PATH- Funded FTE	PATH-Funded Salary *	М	latched Dollars *		Total Dollars	Comments
Outreach worker	279,416.00	64.00 %	0.48	133,188.00		46,246.00		179,434.00	4.5 Outreach Workers
Other (Describe in Comments)	54,760.00	50.00 %	0.37	20,323.00		7,057.00		27,380.00	PATH Supervisor
Category		Percent	age	Federal Dollars *	Mat	ched Dollars *	Tot	al Dollars	Comments
Fringe Benefits			28.21 %	\$ 58,333.00	\$	20,255.00	\$	78,588.00	
Category				Federal Dollars	Mat	ched Dollars	Tota	al Dollars	Comments
Travel				\$ 0.00	\$	0.00	\$	0.00	
				No Da	ta Avail	lable			
Equipment				\$ 0.00	\$	0.00	\$	0.00	
				No Da	ta Avail	lable			
				110 20					
Supplies				\$ 1,114.00	\$	390.00	\$	1,504.00	
Line Item Detail *				Federal Dollars *	М	atched Dollars *		Total Dollars	Comments
Client: Outreach Supplies/Hygene kits,	Misc.			\$ 557.00	\$	195.00	\$	752.00	
Client: Other Supplies (Describe in Cor	nments)			\$ 557.00	\$	195.00	\$	752.00	Enrollee Assistance
Contractual				\$ 0.00	\$	0.00	\$	0.00	
,				No Da	ta Avail	lable			
*									
Housing				\$ 1,856.00	\$	644.00	\$	2,500.00	
Line Item Detail *				Federal Dollars *	М	atched Dollars *		Total Dollars	Comments
Other (Describe in Comments)				\$ 1,856.00	\$	644.00	\$	2,500.00	Housing Assistance for enrollees
Construction (non-allowable)									
Other				\$ 45,227.00	\$	15,704.00	\$	60,931.00	
Line Item Detail *				Federal Dollars *	М	atched Dollars *		Total Dollars	Comments
Office: Insurance (Property, Vehicle, Ma	alpractice, etc.)			\$ 27,085.00	\$	9,404.00	\$	36,489.00	Vehicle Insurance for 5 PATH Vehicles
Office: Insurance (Property, Vehicle, Ma	alpractice, etc.)			\$ 4,454.00	\$	1,546.00	\$	6,000.00	General Liability Insurance
Office: Other (Describe in Comments)				\$ 9,413.00	\$	3,269.00	\$	12,682.00	Vehicle Maintenance
Office: Other (Describe in Comments)				\$ 4,275.00	\$	1,485.00	\$	5,760.00	Cell Phone Monthly Usage
Total Direct Charges (Sum of a-i)				\$ 260,041.00	\$	90,296.00	\$	350,337.00	
Category				Federal Dollars *	Mat	ched Dollars *	Tota	al Dollars	Comments
Indirect Costs (Administrative Costs)				\$ 64,002.00	\$	22,219.00	\$	86,221.00	Federally approved rate is 30% of P/S & ERE
Grand Total (Sum of j and k)				\$ 324,043.00	\$	112,515.00	\$	436,558.00	
ource(s) of Match Dollars for State Funds:									
Required non-federal contributions are available from the State General Fund NTXIX SMI Services Appropriation. The State contribution will be available at the beginning of the grant period.									
Estimated Number of Persons to be Contacted: 2,400 Estimated Number of Persons to be Enrolled:									
annated Hamber of Fersons to be contacted									
stimated Number of Persons to be Contacted	who are Literal	y Homeless:		16	60				

PATH Budget Narrative & Justification

County Coverage: Coconino, Yavapai & Mohave Contract Period: July 1, 2024 through June 30, 2025

A. <u>Personnel:</u>

Position Title (1)	Staff Name (2)	Annual Salary/Rate (3)	Level of Effort (LOE) (4)	Federal PATH Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
PATH Supervisor	Richard Brust-C,Y,M	\$54,760	50%	\$20,323	\$7,057	\$27,380
Outreach Specialist	Sarah Annibal-C	\$39,733	50%	\$14,746	\$5,120	\$19,866
Outreach Specialist	Dwight Manuel-C	\$39,720	50%	\$14,741	\$5,119	\$19,860
Outreach Specialist	Daja Dorsey-Y	\$39,733	100%	\$29,493	\$10,240	\$39,733
Outreach Specialist	Brynn Merz-C	\$38,563	50%	\$14,312	\$4,969	\$19,281
Outreach Specialist	TBH-Y	\$39,720	100%	\$29,483	\$10,237	\$39,720
Outreach Specialist	Patricia Jacques-M	\$42,227	50%	\$15,672	\$5,442	\$21,114
Outreach Specialist	Christine Lee-M	\$39,720	50%	\$14,741	\$5,119	\$19,860
Total Request				\$153,511	\$53,303	\$206,814

Personnel Narrative: 7 outreach specialists for outreach, engagement, and case management and 1 FTE supervisor. All staff are providing 100% of their effort into the program however, 50% of 6 specialists and supervisor time is covered by agency in kind.

B. Fringe Benefits:

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
PATH Supervisor	Richard Brust	\$27,380	38%	\$7,724	\$2,682	\$10,406
Outreach Specialist	Sarah Annibal	\$19,866	38%	\$5,603	\$1,946	\$7,549

PATH Budget Narrative & Justification

County Coverage: Coconino, Yavapai & Mohave Contract Period: July 1, 2024 through June 30, 2025

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
Outreach Specialist	Dwight Manuel	\$19,860	38%	\$5,602	\$1,945	\$7,547
Outreach Specialist	Daja Dorsey	\$39,733	38%	\$11,207	\$3,891	\$15,098
Outreach Specialist	Brynn Merz	\$19,281	38%	\$5,438	\$1,888	\$7,326
Outreach Specialist	ТВН	\$39,720	38%	\$11,203	\$3,890	\$15,093
Outreach Specialist	Patricia Jacques	\$21,114	38%	\$5,954	\$2,068	\$8,022
Outreach Specialist	Christine Lee	\$19,860	38%	\$5,602	\$1,945	\$7,547
Total Request				\$58,333	\$20,255	\$78,588

Fringe Benefits Narrative: 38% of salary above for ERE broken out as shown below.

Fringe Category	Rate
Retirement	10%
FICA	7.65%
Insurance	20.35%
Social Security	Incl w/FICA
Total Fringe Rate	38%

PATH Budget Narrative & Justification

County Coverage: Coconino, Yavapai & Mohave Contract Period: July 1, 2024 through June 30, 2025

C. Travel:

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) https://gao.az.gov.publications/saam.

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
	equest	\$0	\$0	\$0		

Travel Narrative:

D. **Equipment**

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
Total Ro	equest	\$0	\$0	\$0

Equipment Narrative: N/A

E. Supplies

Item	Calculation	Federal PATH	Non-Federal	Total
(1)	(2)	Request	State Match	Federal/State

PATH Budget Narrative & Justification

County Coverage: Coconino, Yavapai & Mohave Contract Period: July 1, 2024 through June 30, 2025

		(3)	(4)	Cost (5)
Outreach Supplies	5% of expected total	\$557	\$195	\$752
Enrollee Assistance	5% of expected total	\$557	\$195	\$752
Total Rec	Total Request			\$1,504

Supplies Narrative:

- Outreach supplies including hygiene items, weather-related gear (gloves, socks, scarves, hats, etc.)
- Enrollee assistance approved by contract (ID, Birth Cert, petty cash for co-pays).
 Note: These amounts are only what is charged to the contract as this is primarily covered by agency in kind (actuals are approx. \$15,000 each category)

F. Contractual:

Name of Organization or Consultant (1)	Type of Agreement (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
	(
Total Request		\$0	\$0	\$0

Contractual Narrative:

G. Housing:

If requesting rent, please fill out & submit rent worksheet.

Housing Assistance (1)	Calculation (2)	Federal PATH Request (3)	Non- Federal State Match (4)	Total Federal/State Cost (5)
Housing Assist for enrollees	10 clients X \$250	\$1,856	\$644	\$2,500
Total Request		\$1,856	\$644	\$2,500

Housing Narrative: Assistance to prevent enrolled clients from becoming homeless including rent, utilities etc. These costs are primarily covered by agency in kind through additional housing programs. The maximum allowed to be charged to the grant is 20% of the total award and \$250 per client.

H. Other Operating:

PATH Budget Narrative & Justification

County Coverage: Coconino, Yavapai & Mohave Contract Period: July 1, 2024 through June 30, 2025

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, the number of clients should be included in the costs. Also, please break down PATH enrollee expenses here.

Item (1)	Calculation (2)	Federal PATH Request	Non-Federal State Match	Total Federal/State Cost
		(3)	(4)	(5)
Cell phones	8 X \$60/mo X 12 months	\$4,275	\$1,485	\$5,760
General Liability Insurance	Allocated at \$750 per staff person per year \$750 X 8	\$4,454	\$1,546	\$6,000
Vehicle Insurance	\$608.15 x 5 vehicles x 12 months	\$27,085	\$9,404	\$36,489
Vehicle Maintenance	Estimates based on prior year actuals for 5 PATH vehicles in service	\$9,413	\$3,269	\$12,682
Total Request		\$45,227	\$15,704	\$60,931

Other Narrative:

- A cell phone for each 8 staff members at \$60 per month.
- The general liability is allocated by number of employees so for PATH it's \$750 X 8 employees for the PATH portion of the insurance.
- Vehicle insurance for 4 owned and 1 leased vehicle, combined average is \$608.15 per month.
- Maintenance for the same 5 vehicles is requested based on previous fiscal year actuals.

I. Total Direct Charges

Total Direct Charges (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
(Sum of A-I)	\$260,041	\$90,296	\$350,337

PATH Budget Narrative & Justification

County Coverage: Coconino, Yavapai & Mohave Contract Period: July 1, 2024 through June 30, 2025

J. Indirect Cost Rate (See Footnote below):

Calculation (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
Fed approved indirect rate of 30% of Sal + ERE = \$151,689 (total salary + ERE = \$505,631) Balance is agency in kind	\$64,002	\$22,219	\$86,221
Total Request	\$64,002	\$22,219	\$86,221

Indirect Narrative: Fed approved indirect rate of 30% of Sal + ERE, agency in kind is applied. The current IDC will expire 6/30/24, and Catholic Charities will provide an updated copy to AHCCCS upon availability.

FOOTNOTE:

- (1) Please specify whether utilizing indirect or administrative overhead.
- (2) For administrative overhead, please provide a justification of costs included in administration.
- (3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.

K. Total Project Costs:

TOTAL REQUEST – TOTAL PROJECT COSTS	Federal PATH	Non-Federal State	Total
(1)	Request	Match	Federal/State Cost (4)
	(2)	(3)	. ,
(Sum of Total Direct Costs and Indirect Costs)	\$324,043	\$112,515	\$436,558

PATH Contractor Name: Contract Reporting Period:			Community Service July 1, 2024 - June]			
County Service Area	List				EDERAL IH GRANT		ON FEDERAL TATE MATCH	FED	TOTAL ERAL/STATE		IN-KIND		-CONTRACTOR(S IN-KIND, IF APPLICABLE
PERSONNEL													
Position	Name	Salary	Level Of Effort			_		•			60.10-	•	
PATH Administrator Outreach Specialist(s)	Camie Rasband 7 total	\$80,000 \$279,416	0.33 1.00	\$	133,188	\$	46,246	\$	179,434	\$	26,400 99,982	\$	
Data Specialist	Mary McCoy	\$58,240	0.10	Ъ	133,100	Ф	40,240	\$	179,434	\$	5,824	\$	
Program Supervisor	Richard Brust	\$54,760	1.00	\$	20,323	\$	7,057	\$	27,380	\$	27,380	\$	
Other	Tuoriara Brast	ψο 1,7 σσ	1.00	Ť	20,020	Ť	7,007	\$	-	\$	-	\$	_
TOTAL PERSONNEL	•	1	8.4	\$	153,511	\$	53,303	\$	206,814		159,586	\$	-
MPLOYEE RELATED EXP	ENSES (ERE)												
TOTAL ERE	38%	\$ 366,400		\$	58,333	\$	20,255	\$	78,588	\$	60,643	\$	-
PROFESSIONAL AND OUTS	SIDE SERVICES												
				\$	-	\$	-	\$	-	\$	-	\$	-
TOTAL PROF & OUTS	SIDE			\$ \$	-	\$ \$	-	\$ \$	-	\$	-	\$ \$	-
TOTAL FROM & COTS	DIDE			Ψ		Ψ		φ		φ	-	Ψ	
TRAVEL				†									
Mileage Reimbursement @.6	55/mile			\$	-	\$	-	\$	-	\$	9,432		
Gas (100% PATH dedicated)				\$	-	\$	-	\$	-	\$	14,400		
Out of State Travel - Airfare						匚				匚			
Out of State Travel - Lodging									-				
Out of State													
Out of State		V		<u> </u>		L				با			
TOTAL TRAVEL		7 /	_	\$	-	\$	-	\$	-	\$	23,832	\$	-
OCCUPANCY				1		┢				-			
Office Rent Expenses				\$		\$	_	\$		\$	48,000	\$	
Office Utilities				\$	-	\$	-	\$	-	\$	18,800	\$	
TOTAL OCCUPANCY				\$	-	\$	-	\$	-	\$	66,800	\$	-
OUSING (Limited to 20% a	o defined in DATH	Logiclation)			•								
	is delined in PATH	Legisiation)		1.		.						_	
Housing Assistance (1)				\$	1,856	\$	644	\$	2,500	\$	-	\$	
TOTAL HOUSING				\$	1,856	\$	644	\$	2,500	\$	-	\$	-
PATH ENROLLEE													
Petty Cash for Emergencies (Must submit recein	ots with CFRs)		\$	<u> </u>	\$		\$	_	\$	1,500	\$	
Outpatient		,				Ť		Ψ		\$	-	\$	-
Medication Supplies				\$	-	\$	-	\$	-	\$	100	\$	-
Prescription Co-pays				\$	-/	\$	-	\$	-	\$	400	\$	-
Jtility Turn-on's				\$	-	\$	-	\$	-	\$	-	\$	-
Emergency Items - sunscreer	n, thongs			\$	557	\$	195	\$	752	\$	13,000	\$	-
Medical Contract Services				\$		\$		\$	-	\$	-	\$	-
Hygene kits				\$		\$		\$	-	\$	3,000	\$	-
Client Supplies - Bus tokens				\$	557	\$	195	\$	752	\$	8,000	\$	-
Client Supplies - PATH Enrol TOTAL PATH ENROL				\$ \$	1,114	\$ \$	390	\$	1,504	\$	4,000 30,000	\$	-
TOTAL PATH ENROL	LEE			Þ	1,114	Þ	390	3	1,504	\$	30,000	\$	-
OTHER OPERATING				T				7					
/ehicle Licenses				\$	-	\$	-	\$	-	\$	2,000	\$	-
/ehicle GPS System				\$	-	\$	-	\$	-	\$	-,	\$	-
/ehicle Maintenance				\$	9,413	\$	3,269	\$	12,682	\$	-	\$	-
/ehicle Insurance				\$	27,085	\$	9,404		36,489		-	\$	
eased Vehicle				\$	-	\$	-	\$	-	\$	-		
raining and Conference Fee	s			\$	-	\$	-	\$	-	\$	4,500	\$	-
Copying				\$	-	\$	-	\$	<u> </u>	\$	600	\$	-
Office Supplies				\$	-	\$	-	\$	-	\$	1,500	\$	
Office Desk Telephones				\$	-	\$	-	\$	-	\$	-	\$	-
Security anitorial				\$	-	\$	-	\$		\$	-	\$	
andscaping				\$		\$	-	\$		\$	-	\$	
Desk/Laptop Computers				\$		\$	-	\$		\$	2,400	\$	
HMIS Licenses				\$		\$	-	\$	-	\$	5,000	\$	
iability Insurance				\$	4,454	\$	1,546	\$	6,000	\$	-	\$	
Postage				\$	-	\$	-	\$	-,,,,,,	\$	250	\$	-
PATH Staff Cell Phone Purch				\$	4,275	\$	1,485	\$	5,760	\$	-	\$	-
TOTAL OTHER OPER	ATING			\$	45,227	\$	15,704	\$	60,931	\$	16,250	\$	-
NDIRECT OR ADMINISTRA	TIVE OVERHEAD (2	2)(3)(4)		\$	64,002	\$	22,219	\$	86,221	\$	65,468	\$	
NDIRECT OR ADMINISTRA	TIVE OVERHEAD P	ERCENTAGE (2)(3	3)(4)	Ť	30%**	Ť	30%**	-	0.00%	Ť	0.00%		0.00%
		-		_								ZIA:=	
		GRAND TOTAL		\$	324,043	\$	112,515	\$	TOTAL 436,558	\$	422,579	KIND \$	_
					,		.,				-,		
GRANT AMOUNT REQ	UESTED			\$	436,558	PI	LUS IN-KIND	\$	422,579] =1	Total Budget	\$	859,1
						-				-			

Indirect is fed approved at 30% of Salary + ERE **FOOTNOTES:**

- $\ensuremath{^{(1)}}$ Please specify the types of housing assistance included in this line item.
- $\ensuremath{^{(2)}}$ Please specify whether utilizing indirect or administrative overhead.
- $^{(3)}$ For administrative overhead, please provide a justification of costs included in administration.
- (4) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Additional Requirements:

- A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: https://gao.az.gov/travel/welcome-gao-travel. AHCCCS requires detailed receipts for reimbursement of travel expenditures.
- B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.
- C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds.



II. Executive Summary

Intended Use Plans

Community Bridges Inc.

1855 W Baseline Rd Ste. 101

Contact: Anne Johnston

Mesa, AZ 85202

Contact: Anne Johnston

Email Address: ajohnston@cbridges.com

Provider Type: Social service agency

PDX ID: AZ-011

State Provider ID: AZ-011

Contact Phone #: 4808317566

- Local Provider Description Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- Collaboration with HUD CoC Program HUD's Continuum of Care (CoC) Program is designed to promote communitywide commitment to the goal of ending homelessness by providing funding for efforts by nonprofit providers and State and local governments and promoting access to mainstream programs by homeless individuals and families. Describe the organization's participation with local HUD CoC recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- Collaboration with Local Community Organizations Provide a brief description of partnerships and activities with local community organizations that
 provide key services (e.g., outreach teams, primary care, mental health, substance use, housing, employment) to PATH-eligible clients, and describe the
 coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be
 achieved.
- Service Provision Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
- How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with COD, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
- Any gaps that exist in the current service systems;
- A brief description of the current services available to clients who have a COD; and
- A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- Housing Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- Staff Information Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients. Describe the extent to which staff receive periodic training in cultural competence and health disparities.
- Client Information Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the
 percentage of adult clients to be served using PATH funds who are literally homeless.
- Consumer Involvement Describe how individuals who experience homelessness and have serious mental illness, and their family members, will be
 meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate
 whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- Budget Narrative Provide a budget and budget narrative that includes the local-area provider's use of PATH funds.



The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

				Federal Dollars		tched Dollars	Total [Joliais	Comments
Personnel				\$ 421,239	\$	146,240	\$	567,479	
Position *	Annual Salary *	% of time spent on PATH *	PATH- Funded FTE	PATH-Funded Salary *	l M	Natched Dollars *	T	otal Dollars	Comments
Other (Describe in Comments)	192,578.00	100.00 %	0.74	142,950.00		49,628.00		192,578.00	5 Navigator II
Other (Describe in Comments)	120,488.00	100.00 %	0.74	89,438.00		31,050.00		120,488.00	3 Lead Navigators
Other (Describe in Comments)	59,087.00	100.00 %	0.74	43,860.00		15,227.00		59,087.00	PATH Manager
Other (Describe in Comments)	51,975.00	100.00 %	0.74	38,581.00		13,394.00		51,975.00	Behavioral Health Professionals
Other (Describe in Comments)	43,680.00	100.00 %	0.74	32,424.00		11,256.00		43,680.00	Program Supervisor
Other (Describe in Comments)	34,278.00	100.00 %	0.74	25,445.00		8,833.00		34,278.00	Navigator I
Other (Describe in Comments)	62,387.00	50.00 %	0.37	23,155.00		8,039.00		31,194.00	Program Senior Manager
Other (Describe in Comments)	47,819.00	50.00 %	0.37	17,748.00		6,161.00		23,909.00	Data Coordinator
Other (Describe in Comments)	68,600.00	15.00 %	0.11	7,638.00		2,652.00		10,290.00	Assoc Director
Category		Percent	age	Federal Dollars *	Mat	tched Dollars *	Total [Dollars	Comments
Fringe Benefits			17.07 %	\$ 96,883.00	\$	33,638.00	\$	130,521.00	
Category				Federal Dollars	Mat	tched Dollars	Total [Dollars	Comments
ravel				\$ 8,017.00	\$	2,783.00	\$	10,800.00	
Line Item Detail *				Federal Dollars	* N	/latched Dollars *	T	otal Dollars	Comments
Gas				\$ 8,017.00	\$	2,783.00	\$	10,800.00	Fuel for Outreach Vehicles
Equipment				\$ 0.00	\$	0.00	\$	0.00	
					Data Avai				
				INO I	Jata Avaii	liable			
Supplies				\$ 1,930.00	\$	670.00	\$	2,600.00	
Line Item Detail *				Federal Dollars	* M	Natched Dollars *	T	otal Dollars	Comments
Office: Supplies				\$ 1,930.00	\$	670.00	\$	2,600.00	2 Replacement Laptops for Staff
Contractual				\$ 0.00	\$	0.00	\$	0.00	
				No I	Data Avai	ilable			
Housing				\$ 0.00	\$	0.00	\$	0.00	
				No I	Data Avai	ilable			
Construction (non-allowable)	_								
				\$ 63,173.00	\$	21,966.00	\$	85,139.00	
Construction (non-allowable) Other Line Item Detail *				\$ 63,173.00 Federal Dollars		21,966.00 Matched Dollars *		85,139.00 otal Dollars	Comments
Other	5)								PATH Enrollee Funds (petty cash for emergencies, IDs,
Other Line Item Detail *				Federal Dollars	;* M	Natched Dollars *	T	otal Dollars	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes) Client Supplies for PATH Enrollee's (Trac phones, PPE,
Line Item Detail * Client: Other (Describe in Comments	is)			Federal Dollars \$ 5,541.00	s* M	Matched Dollars *	To	7,499.00	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes)
Line Item Detail * Client: Other (Describe in Comments Client: Other (Describe in Comments	is)			\$ 5,541.00 \$ 1,856.00	s* M	1,958.00 644.00	\$ \$	7,499.00 2,500.00	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes) Client Supplies for PATH Enrollee's (Trac phones, PPE, hygiene kits & basic clothing as needed)
Line Item Detail * Client: Other (Describe in Comment: Client: Other (Describe in Comment: Office: Insurance (Property, Vehicle,	ts) , Malpractice, etc.)			\$ 5,541.00 \$ 1,856.00 \$ 6,948.00 \$ 15,365.00	* M \$ \$ \$ \$	1,958.00 644.00 2,412.00 5,335.00	\$ \$ \$ \$ \$ \$	7,499.00 2,500.00 9,360.00 20,700.00	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes) Client Supplies for PATH Enrollee's (Trac phones, PPE, hygiene kits & basic clothing as needed) Vehicle Insurance for 6 Vehicles Office Space at Human Services Campus
Client: Other (Describe in Comments Client: Other (Describe in Comments Office: Insurance (Property, Vehicle, Office: Rent Expenses Office: Other (Describe in Comments	, Malpractice, etc.)			Federal Dollars \$ 5,541.00 \$ 1,856.00 \$ 6,948.00 \$ 15,365.00 \$ 23,338.00	* M \$ \$ \$ \$ \$ \$ \$	1,958.00 644.00 2,412.00 5,335.00 8,102.00	\$ \$ \$ \$ \$ \$ \$ \$	7,499.00 2,500.00 9,360.00 20,700.00 31,440.00	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes) Client Supplies for PATH Enrollee's (Trac phones, PPE, hygiene kits & basic clothing as needed) Vehicle Insurance for 6 Vehicles Office Space at Human Services Campus Vehicle Leases for 6 Vehicles
Client: Other (Describe in Comment: Office: Insurance (Property, Vehicle, Office: Rent Expenses Office: Other (Describe in Comment: Office: Other (Describe in Comment:	ts) , Malpractice, etc.) ts)			Federal Dollars \$ 5,541.00 \$ 1,856.00 \$ 6,948.00 \$ 15,365.00 \$ 23,338.00 \$ 6,859.00	* M \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,958.00 644.00 2,412.00 5,335.00 8,102.00 2,381.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	7,499.00 2,500.00 9,360.00 20,700.00 31,440.00 9,240.00	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes) Client Supplies for PATH Enrollee's (Trac phones, PPE, hygiene kits & basic clothing as needed) Vehicle Insurance for 6 Vehicles Office Space at Human Services Campus Vehicle Leases for 6 Vehicles 11 PATH Staff Cell Phone Purchase/Monthly Usage
Client: Other (Describe in Comments Client: Other (Describe in Comments Office: Insurance (Property, Vehicle, Office: Rent Expenses Office: Other (Describe in Comments	ts) , Malpractice, etc.) ts)			Federal Dollars \$ 5,541.00 \$ 1,856.00 \$ 6,948.00 \$ 15,365.00 \$ 23,338.00	* M \$ \$ \$ \$ \$ \$ \$	1,958.00 644.00 2,412.00 5,335.00 8,102.00	\$ \$ \$ \$ \$ \$ \$ \$	7,499.00 2,500.00 9,360.00 20,700.00 31,440.00	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes) Client Supplies for PATH Enrollee's (Trac phones, PPE, hygiene kits & basic clothing as needed) Vehicle Insurance for 6 Vehicles Office Space at Human Services Campus Vehicle Leases for 6 Vehicles
Client: Other (Describe in Comment: Client: Other (Describe in Comment: Office: Insurance (Property, Vehicle, Office: Rent Expenses Office: Other (Describe in Comment: Office: Other (Describe in Comment:	ts) , Malpractice, etc.) ts) ts)			Federal Dollars \$ 5,541.00 \$ 1,856.00 \$ 6,948.00 \$ 15,365.00 \$ 23,338.00 \$ 6,859.00	* M \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,958.00 644.00 2,412.00 5,335.00 8,102.00 2,381.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	7,499.00 2,500.00 9,360.00 20,700.00 31,440.00 9,240.00	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes) Client Supplies for PATH Enrollee's (Trac phones, PPE, hygiene kits & basic clothing as needed) Vehicle Insurance for 6 Vehicles Office Space at Human Services Campus Vehicle Leases for 6 Vehicles 11 PATH Staff Cell Phone Purchase/Monthly Usage
Client: Other (Describe in Comments Client: Other (Describe in Comments Office: Insurance (Property, Vehicle, Office: Rent Expenses Office: Other (Describe in Comments Office: Other (Describe in Comments Office: Other (Describe in Comments)	ts) , Malpractice, etc.) ts) ts)			\$ 5,541.00 \$ 1,856.00 \$ 6,948.00 \$ 15,365.00 \$ 23,338.00 \$ 6,859.00 \$ 1,930.00	* M	1,958.00 644.00 2,412.00 5,335.00 8,102.00 2,381.00 670.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	7,499.00 2,500.00 9,360.00 20,700.00 31,440.00 9,240.00 2,600.00	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes) Client Supplies for PATH Enrollee's (Trac phones, PPE, hygiene kits & basic clothing as needed) Vehicle Insurance for 6 Vehicles Office Space at Human Services Campus Vehicle Leases for 6 Vehicles 11 PATH Staff Cell Phone Purchase/Monthly Usage
Client: Other (Describe in Comments Client: Other (Describe in Comments Office: Insurance (Property, Vehicle, Office: Rent Expenses Office: Other (Describe in Comments Office: Other (Describe in Comments Office: Other (Describe in Comments Office: Other (Describe in Comments)	ts) , Malpractice, etc.) ts) ts)			\$ 5,541.00 \$ 1,856.00 \$ 6,948.00 \$ 15,365.00 \$ 23,338.00 \$ 6,859.00 \$ 1,930.00 \$ 1,336.00	* M \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,958.00 644.00 2,412.00 5,335.00 8,102.00 2,381.00 670.00 464.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	7,499.00 2,500.00 9,360.00 20,700.00 31,440.00 9,240.00 1,800.00	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes) Client Supplies for PATH Enrollee's (Trac phones, PPE, hygiene kits & basic clothing as needed) Vehicle Insurance for 6 Vehicles Office Space at Human Services Campus Vehicle Leases for 6 Vehicles 11 PATH Staff Cell Phone Purchase/Monthly Usage
Client: Other (Describe in Comments Client: Other (Describe in Comments Office: Insurance (Property, Vehicle, Office: Rent Expenses Office: Other (Describe in Comments	ts) , Malpractice, etc.) ts) ts)			Federal Dollars \$ 5,541.00 \$ 1,856.00 \$ 6,948.00 \$ 15,365.00 \$ 23,338.00 \$ 1,930.00 \$ 1,336.00 \$ 591,242.00	* M \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,958.00 644.00 2,412.00 5,335.00 8,102.00 2,381.00 670.00 464.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	7,499.00 2,500.00 9,360.00 20,700.00 31,440.00 9,240.00 1,800.00	PATH Enrollee Funds (petty cash for emergencies, IDs, Birth Certs, Bus Passes) Client Supplies for PATH Enrollee's (Trac phones, PPE, hygiene kits & basic clothing as needed) Vehicle Insurance for 6 Vehicles Office Space at Human Services Campus Vehicle Leases for 6 Vehicles 11 PATH Staff Cell Phone Purchase/Monthly Usage 13 Annual HMIS Licenses Vehicle GPS System for 6 Vehicles

Source(s) of Match Dollars for State Funds:

FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Required non-federal contributions are available from the State General Fund NTXIX SMI Services Appropriation. The State contribution will be available at the beginning of the grant period.

Estimated Number of Persons to be Contacted:

2,800 Estimated Number of Persons to be Enrolled:

Estimated Number of Persons to be Contacted who are Literally Homeless: Number staff trained in SOAR in grant year ending in 2023:

1 Number of PATH-funded consumers assisted through SOAR:

35

900



				July 1, 2024 - June 3	0, 2025			_		•		_	
County Service Area						AL PATH ANT	NON FEDERAL STATE MATCH	тс	OTAL FEDERAL/STATE	IAI	I-KIND	SUB	-CONTRACTOR(
PERSONNEL											-KIND	-	
Position	Name	Salary		Level Of Effort				+					
Associate Director	Ollie Nyman	\$	68,600	0.15	\$	7,638	\$ 2,652	\$	10,290	\$	-	\$	
BHP	Holly Hudson	\$	51,975	1.00	\$	38,581	\$ 13,394	\$	51,975	\$	-	\$	
Data Coordinator	Amber Morris	\$	47,818	0.50	\$	17,748	\$ 6,161	\$	23,909	\$	-	\$	
_ead Navigator	Vacant	\$	37,492	1.00	\$	27,830	\$ 9,662		37,492	\$	-	\$	
ead Navigator	Ashley Lehmer	\$	39,891	1.00	\$	29,611	\$ 10,280		39,891	\$	-	\$	
_ead Navigator	Christina Arispe	\$	43,105	1.00	\$	31,997	\$ 11,108		43,105	\$	-	\$	
Navigator I	Isabel Delgato	\$	34,278	1.00	\$	25,445	\$ 8,833	_	34,278	\$	-	\$	
Navigator II	Andrew Losey	\$	34,578	1.00	\$	25,667	\$ 8,911	\$	34,578	\$	-	\$	
Navigator II	Brittany Curdie	\$	39,934	1.00	\$	29,643	\$ 10,291	\$	39,934	\$	-	\$	
Navigator II	James Arnold	\$	37,877	1.00	\$	28,116	\$ 9,761	\$	37,877	\$	-	\$	
Navigator II	Lisa Cooper	\$	37,877	1.00	\$	28,116	\$ 9,761	\$	37,877	\$	-	\$	
lavigator II	Vanessa Stiller	\$	42,312	1.00	\$	31,408	\$ 10,904	\$	42,312	\$	-	\$	
PATH Manager	Darin Jahries	\$	59,087	1.00	\$	43,860	\$ 15,227	\$	59,087	\$	-	\$	
Sr. Program Manager	Tyler Babilonia	\$	62,387	0.50	\$	23,155	\$ 8,039	\$	31,194	\$	-	\$	
Program Supervisor	Vacant	\$	43,680	1.00	\$	32,424	\$ 11,256	\$	43,680	\$	-	\$	
-										\$	-	\$	
Other								\$	-	\$	-	\$	
TOTAL PERSONNEI	L			13.15	\$	421,239	\$ 146,240	\$	567,479	\$	-	\$	
	_				1	,	, , , , , , ,	Ť	201,110			Ť	
MPLOYEE RELATED EXP	ENSES (ERE)			23%	\$	96,883	\$ 33,638	\$	130,521				
TOTAL ERE			_		\$	96,883	\$ 33,638	\$	130,521			\$	
ROFESSIONAL AND OUTS	SIDE SERVICES												
										\$	-	\$	
			7		\$		\$ -	\$	=	\$	-	\$	
TOTAL PROF & OUT	TSIDE			_	\$		\$ -	\$		\$		\$	
					*		7	Ť		*		7	
RAVEL								i i					
fileage Reimbursement @.6	55/mile				\$	-	\$ -	\$	_	\$		\$	
Gas (100% PATH dedicated \					\$	8,017	\$ 2,783	_	10,800	\$		\$	
Out of State Travel - Airfare	veriloidaj				W	0,017	Ψ 2,700	Ψ	10,000	Ψ		Ψ	
Out of State Travel - Lodging								+				1	
Out of State Travel - Per Dien	m			_	<u> </u>			+					
Out of State Travel - Ground								1				1	
TOTAL TRAVEL	Transportation/wisc				\$	8,017	\$ 2,783	\$	10,800	•		\$	
TOTAL TRAVEL						0,017	2,703	۳	10,000	Ÿ		Ψ	
OCCUPANCY						_		+				+	
Office Rent Expenses					\$	15,365	\$ 5,335	\$	20,700	\$		\$	
					Ψ				20,700	Ψ		Ψ	
					¢					6		•	
Office Utilities TOTAL OCCUPANC	Υ				\$		\$ -	\$	- 20 700	\$	-	\$	
TOTAL OCCUPANC	Υ				\$	15,365		\$	20,700	\$ \$		\$ \$	
TOTAL OCCUPANC		ation)					\$ -	\$	20,700		-		
TOTAL OCCUPANC		ation)			\$		\$ - \$ 5,335	\$ \$		\$	-	\$	
HOUSING (Limited to 20% a Housing Assistance (1)		ation)			\$		\$ - \$ 5,335	\$ \$ \$	-	\$	-	\$	
TOTAL OCCUPANC		ation)			\$		\$ - \$ 5,335	\$ \$		\$	-	\$	
TOTAL OCCUPANC HOUSING (Limited to 20% a HOUSING Assistance (1) TOTAL HOUSING		ation)			\$		\$ - \$ 5,335	\$ \$ \$	-	\$	-	\$	
TOTAL OCCUPANC HOUSING (Limited to 20% a HOUSING Assistance (1) TOTAL HOUSING PATH ENROLLEE	s defined in PATH Legisl				\$ \$	15,365	\$ - \$ 5,335	\$ \$ \$ \$		\$	-	\$	
TOTAL OCCUPANC HOUSING (Limited to 20% a HOUSING Assistance (1) TOTAL HOUSING	s defined in PATH Legisl				\$		\$ - \$ 5,335	\$ \$ \$ \$	-	\$	-	\$	
TOTAL OCCUPANC HOUSING (Limited to 20% a tousing Assistance (1) TOTAL HOUSING PATH ENROLLEE Petty Cash for Emergencies (s defined in PATH Legisl				\$ \$ \$	15,365	\$ - \$ 5,335 \$ - \$ -	\$ \$ \$ \$		\$	-	\$ \$ \$	
TOTAL OCCUPANC IOUSING (Limited to 20% a lousing Assistance (1) TOTAL HOUSING PATH ENROLLEE retty Cash for Emergencies (Julypatient Services Medication Supplies	s defined in PATH Legisl				\$ \$ \$ \$	3,707	\$ 5,335 \$ 5,335 \$ -	\$ \$ \$ \$	4,994	\$ \$ \$	-	\$ \$ \$	
TOTAL OCCUPANC IOUSING (Limited to 20% a lousing Assistance (1) TOTAL HOUSING PATH ENROLLEE Petty Cash for Emergencies (putpatient Services Prescription Co-pays	s defined in PATH Legisl				\$ \$ \$	3,707	\$ 5,335 \$ 5,335 \$ -	\$ \$ \$ \$	4,994	\$ \$ \$		\$ \$ \$	
TOTAL OCCUPANC IOUSING (Limited to 20% a Iousing Assistance (1) TOTAL HOUSING PATH ENROLLEE Petty Cash for Emergencies (Jutpatient Services Redication Supplies Prescription Co-pays Jitlity Turn-on's	is defined in PATH Legisl.				\$ \$ \$ \$ \$	3,707	\$ 5,335 \$ 5,335 \$ - \$ - \$ 5,287 \$ 5,57 \$ 5,57 \$ 5,57 \$ 5,57	\$ \$ \$ \$ \$ \$	4,994	\$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$	
TOTAL OCCUPANC HOUSING (Limited to 20% a Housing Assistance (1) TOTAL HOUSING PATH ENROLLEE Petty Cash for Emergencies (Julpatient Services	is defined in PATH Legisl.				\$ \$ \$ \$ \$ \$ \$	3,707	\$ 5,335 \$ 5,335 \$ - 1,287 \$ - 2,5 \$ - 5,5 \$ - 5,5 \$ - 5,5	\$ \$ \$ \$ \$ \$ \$	4,994	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$	
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TOTAL OCCUPANC IOUSING (Limited to 20% a tousing Assistance (1) TOTAL HOUSING ATH ENROLLEE tetty Cash for Emergencies (utpatient Services tedication Supplies rescription Co-pays titility Turn-on's mergency Items - sunscreer tedical Contract Services yigene kits & Other Client Su tilient Supplies - Bus tokens tilient Supplies - PATH Enrol TOTAL PATH ENRO OTHER OPERATING chicle Licenses chicle Maintenance chicle Insurance eased Vehicle raining and Conference Fee topying office Supplies upplies - Desk/Laptop	Must submit receipts with h, thongs upplies lle trac phones LLEE				\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	3,707 - - - - 1,856 1,834 - 7,397 - 6,948 23,338 - -	\$ - 5,335 \$ - 1,287 \$ - 2,602 \$ - 2,602	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	4,994 	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
OUSING (Limited to 20% a ousing Assistance (1) TOTAL HOUSING ATH ENROLLEE etty Cash for Emergencies (utpatient Services ledication Supplies rescription Co-pays tillity Turn-on's mergency Items - sunscreer ledical Contract Services ygene kits & Other Client Schient Supplies - PATH Enrol TOTAL PATH Enrol TOTAL PATH Enrol TOTAL PATH Enrol TOTAL PATH Enrol CHICLE GPS System ehicle Maintenance ehicle Maintenance ehicle Insurance eased Vehicle raining and Conference Fee opying ffice Supplies - Desk/Laptop omputers	Must submit receipts with h, thongs upplies lle trac phones LLEE				\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	3,707 	\$ 5,335 \$ 5,335 \$ 1,287 \$ - \$ - \$ - \$ - \$ - \$ 644 \$ 671 \$ - \$ 2,602 \$ - \$ 464 \$ - \$ - \$ 2,412 \$ 8,102 \$ - \$ - \$ 670	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	4,994 	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
TOTAL OCCUPANC IOUSING (Limited to 20% a lousing Assistance (1) TOTAL HOUSING ATH ENROLLEE tetty Cash for Emergencies (outpatient Services tedication Supplies rescription Co-pays titlity Turn-on's mergency Items - sunscreer fedical Contract Services lygene kits & Other Client St client Supplies - Bus tokens tillient Supplies - PATH Enrol TOTAL PATH ENRO OTHER OPERATING chicle Licenses tehicle GPS System tehicle GPS System tehicle Maintenance tehicle Insurance eased Vehicle raining and Conference Fee topying office Supplies - Desk/Laptop tomputers office Desk Telephones	Must submit receipts with h, thongs upplies lle trac phones LLEE				\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	3,707 1,856 1,834 - 7,397 - 1,336 - 6,948 23,338 1,930 -	\$ 5,335 \$ 5,335 \$ - 1,287 \$ - 2,57 \$ - 3,57 \$ - 464 \$ 671 \$ - 2,602 \$ - 464 \$ - 5, 2,602 \$ - 5, 464 \$ - 5, 2,602 \$ - 5, 464 \$ - 5, 2,602	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	4,994 	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
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INDIRECT OR ADMINISTRATIVE OVERHEAD		\$	57,590	\$	19,993	\$	77,583	\$	-	\$	-
INDIRECT OR ADMINISTRATIVE OVERHEAD PERCENTAGE (2)(3)(4)			0.00%		0.00%		10.00%	0.0	0%		0.00%
			74.227%		25.773%						
			FEDERAL		STATE		TOTAL		IN-KIND		
	GRAND TOTAL	\$	648,832	\$	225,290	\$	874,122	\$	-	\$	-
								_			
GRANT AMOUNT REQUESTED		\$	874,122	Р	LUS IN-KIND	\$	-	=Total	Budget	\$	874,122

FOOTNOTES:

- $^{(1)}$ Please specify the types of housing assistance included in this line item.
- $\overset{(2)}{}$ Please specify whether utilizing indirect or administrative overhead.
- $^{(3)}$ For administrative overhead, please provide a justification of costs included in administration.
- (4) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414

Additional Requirements:

- A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: https://gao.az.gov/travel/welcome-gao-travel. AHCCCS requires detailed receipts for reimbursement of travel
- B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.
- C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds.



Community Bridges Budget Narrative & Justification County Coverage: Maricopa County

Contract Period: July 1, 2024 through June 30, 2025

A. Personnel:

Position Title (1)	Staff Name (2)	Annual Salary/Rate (3)	Level of Effort (LOE) (4)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
Associate Director	Ollie Nyman	\$68,600	0.15	\$7,638	\$2,652	\$10,290
ВНР	Hollie Hudson	\$51,975	1.00	\$38,581	\$13,394	\$51,975
Data Coordinator	Amber Morris	\$47,819	0.50	\$17,748	\$6,161	\$23,909
Lead Navigator	Vacant	\$37,492	1.00	\$27,830	\$9,662	\$37,492
Lead Navigator	Ashley Lehmer	\$39,891	1.00	\$29,611	\$10,280	\$39,891
Lead Navigator	Christina Arispe	\$43,105	1.00	\$31,997	\$11,108	\$43,105
Navigator I	Isabel Delgato	\$34,278	1.00	\$25,445	\$8,833	\$34,278
Navigator II	Andrew Losey	\$34,578	1.00	\$25,667	\$8,911	\$34,578
Navigator II	Brittany Curdie	\$39,934	1.00	\$29,643	\$10,291	\$39,934
Navigator II	James Arnold	\$37,877	1.00	\$28,116	\$9,761	\$37,877
Navigator II	Lisa Cooper	\$37,877	1.00	\$28,116	\$9,761	\$37,877
Navigator II	Vanessa Stiller	\$42,312	1.00	\$31,408	\$10,904	\$42,312

County Coverage: Maricopa County

Contract Period: July 1, 2024 through June 30, 2025

Position Title (1)	Staff Name (2)	Annual Salary/Rate (3)	Level of Effort (LOE) (4)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
PATH Manager	Darin Jahries	\$59,087	1.00	\$43,860	15,227	\$59,087
Sr Program Manager	Tyler Babilonia	\$62,387	0.50	\$23,155	\$8,039	\$31,194
Program Supervisor	Vacant	\$43,680	1.00	\$32,424	\$11,256	\$43,680
Total Request				\$421,239	\$146,240	\$567,479

Personnel Narrative: This is the cost of staff salaries to operate the PATH grant.

- 1. The Lead Navigators and the Navigator I and II positions provide the outreach and follow up services for the PATH program.
- 2. The PATH Program Manager (Team Lead) supervises the Navigator staff and daily operations.
- 3. *The PATH Senior Manager* manages day-to-day contract performance and builds relationships in the community to support the PATH Program.
- 4. The PATH Program Supervisor's role is to oversee the staff and operations for the programs assigned. The Supervisor will be responsible for the day-to-day operations of the program, providing guidance and direction for all staff including but not limited to training staff, scheduling staff, ensuring staff have the necessary skills and knowledge to perform their job, and ensuring staff adhere to agency policy and procedure.
- 5. *The Associate Director* is responsible for the contract compliance, direct funder interactions and day-to-day support and supervision of the team leadership (Manager, Sr. Manager, Supervisor).
- 6. The Behavioral Health Professionals (BHPs) conduct the SMI evaluations and complete the biopsychosocial assessments to refer clients to mental health services. The BHP also staff's cases with Navigators.
- 7. The Data Coordinator assists with compiling data for reporting, and reviews HMIS data for data quality and corrections when needed.

County Coverage: Maricopa County Contract Period: July 1, 2024 through June 30, 2025

B. Fringe Benefits:

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
Associate Director	Ollie Nyman	\$10,290	23%	\$1,757	\$610	\$2,367
ВНР	Hollie Hudson	\$51,975	23%	\$8,873	\$3,081	\$11,954
Data Coordinator	Amber Morris	\$23,909	23%	\$4,082	\$1,417	\$5,499
Lead Navigator	Vacant	\$37,492	23%	\$6,401	\$2,222	\$8,623
Lead Navigator	Ashley Lehmer	\$39,891	23%	\$6,810	\$2,365	\$9,175
Lead Navigator	Christina Arispe	\$43,105	23%	\$7,359	\$2,555	\$9,914
Navigator I	Isabel Delgato	\$34,278	23%	\$5,852	\$2,032	\$7,884
Navigator II	Andrew Losey	\$34,578	23%	\$5,903	\$2,050	\$7,953
Navigator II	Brittany Curdie	\$39,934	23%	\$6,818	\$2,367	\$9,185
Navigator II	James Arnold	\$37,878	23%	\$6,467	\$2,245	\$8,712
Navigator II	Lisa Cooper	\$37,878	23%	\$6,467	\$2,245	\$8,712
Navigator II	Vanessa Stiller	\$42,312	23%	\$7,224	\$2,508	\$9,732

County Coverage: Maricopa County
Contract Period: July 1, 2024 through June 30, 2025

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
PATH Manager	Darin Jahries	\$59,087	23%	\$10,087	\$3,503	\$13,590
Sr Program Manager	Tyler Babilonia	\$31,197	23%	\$5,326	\$1,849	\$7,175
Program Supervisor	Vacant	\$43,680	23%	\$7,457	\$2,589	\$10,046
Total Request				\$96,883	\$33,638	\$130,521

Fringe Benefits Narrative: The fringe benefits include the required state and federal tax guidelines. CBI also offers 401K and comprehensive medical and dental plans to employee salaries. The use of fringe benefits varies by individual employee. For example, the 401K match is available for up to 4% of the employee's salary. Across all ERE expenditures, ERE expenditures have been 23 % on average. This is used for the 24/25 budget year.

Fringe Category	Rate
Retirement	4%
FICA	6.2%
Insurance	10.47%
Social Security	1.45%
Workers Comp	0.77%
SUTA	.11%
Total Fringe Rate	23%

C. Travel:

Community Bridges Budget Narrative & Justification County Coverage: Maricopa County

Contract Period: July 1, 2024 through June 30, 2025

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) https://gao.az.gov.publications/saam.

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
Vehicle fuel	Local destinations in Maricopa County	Fuel for outreach vehicles	\$900 per month for 12 months	\$8,017	\$2,783	\$10,800
	Total R	equest		\$8,017	\$2,783	\$10,800

Travel Narrative: The vehicle fuel is for the navigator staff to do outreach throughout Maricopa County using the vehicles assigned to the PATH program. Navigators can provide transport to members, access services and connect to resources.

D. **Equipment**

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
		7/		
Total R	equest	\$0	\$0	\$0

Equipment Narrative: N/A

E. Supplies

County Coverage: Maricopa County Contract Period: July 1, 2024 through June 30, 2025

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
2 Replacement Laptops for staff	\$1,300 x 2	\$1,930	\$670	\$2,600
Total Rec	uest	\$1,930	\$670	\$2,600

Supplies Narrative:

FTE Supplies: Includes two replacement laptops for staff. Laptops face a three-year life span and often need to be replaced.

F. Contractual:

Name of Organization or Consultant (1)	Type of Agreement (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
Total Request	:	\$0	\$0	\$0

Contractual Narrative:

G. Housing:

If requesting rent, please fill out & submit rent worksheet.

Housing Assistance (1)	Calculation (2)	Federal PATH Request (3)	Non- Federal State Match (4)	Total Federal/State Cost (5)
Total Request		\$0	\$0	\$0

Housing Narrative: N/A

H. Other Operating:

Community Bridges Budget Narrative & Justification County Coverage: Maricopa County

Contract Period: July 1, 2024 through June 30, 2025

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, the number of clients should be included in the costs. Also, please break down PATH enrollee expenses here.

Item (1)	Calculation (2)	Federal PATH Request	Non-Federal State Match	Total Federal/State Cost
, ,		(3)	(4)	(5)
Vehicle Leases	5 vehicles @ 400 per month plus 1 vehicle @ \$620 per month x 12 months	\$23,338	\$8,102	\$31,440
Vehicle Insurance	6 vehicles @ \$130 per month x 12 months	\$6,948	\$2,412	\$9,360
GPS	6 vehicles @ \$25 per month x 12 months	\$1,336	\$464	\$1,800
Cell phones	11 phones @ \$70 per month x 12 months	\$6,859	\$2,381	\$9,240
HMIS Licenses	13 HMIS annual licenses x \$200	\$1,930	\$670	\$2,600
Client Supplies - Bus Tokens	Bus passes	\$1,834	\$671	\$2,478
Petty Cash for Client Emergencies	Birth certificates, ID's needed for establishing work/housing	\$3,707	\$1,287	\$4,994
Client Supplies – PATH Enrollee	Trac phones, PPE, hygiene kits and basic clothing as needed	\$1,856	\$644	\$2,500
Office space at Human Services Campus	\$1,725 per month x 12 months	\$15,365	\$5,335	\$20,700
Total Request		\$63,173	\$21,966	\$85,139

County Coverage: Maricopa County
Contract Period: July 1, 2024 through June 30, 2025

Other Narrative:

- 1. The operating costs include the vehicle expenses including GPS, insurance, and lease. Phones for the staff to complete their day-to-day tasks including coordination of care and accessing resources. HMIS licenses are needed for the Navigators to provide outreach services.
- 2. The PATH enrollee petty cash line and client supplies are for emergencies for client support including helping members to get documents ready and for purchasing PPE/hygiene kits and basic clothing. Budget is based on historical costs.
- 3. *Client Supplies*: Bus Tokens for clients to assist them with transportation to appointments and job searches/work
- 4. The office space charge represents the charges from the Human Services Campus lease for the PATH project.

I. Total Direct Charges

Total Direct Charges (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
(sum of A-I)	\$591,242	\$205,297	\$796,539

J. <u>Indirect Cost Rate (See Footnote below):</u>

Calculation (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
IDC rate at 10% on direct costs of \$796,539 less cost of Office Space \$20,700 = \$775,839	\$57,590	\$19,993	\$77,583
Total Request	\$57,590	\$19,993	\$77,583

Indirect/Administrative Narrative: CBI allocated 10% to cover expenses for administrative overhead such as Finance Department costs to generate invoices and track contract expenses, grant consultant costs to create program budgets and revisions, procurement costs to manage vehicle and phone leases, and Human Resources costs for new hires and other personnel related actions.

County Coverage: Maricopa County
Contract Period: July 1, 2024 through June 30, 2025

FOOTNOTE:

- (1) Please specify whether utilizing indirect or administrative overhead.
- (2) For administrative overhead, please provide a justification of costs included in administration.
- (3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.

K. Total Project Costs:

TOTAL REQUEST – TOTAL PROJECT COSTS (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Request (4)
(Sum of Total Direct Costs and Indirect (Or Admin) Costs)	\$648,832	\$225,290	\$874,122

Footnotes:	

II. Executive Summary

Intended Use Plans

420 N 7th St

Good Neighbor Alliance

Provider Type: Shelter or other temporary housing resource

PDX ID: AZ-009

Sierra Vista, AZ 85635

State Provider ID: AZ-009

Contact: Julie Wilson

e Wilson Contact Phone #: 5204390776

Email Address: jwilson@goodneighboralliance.com

- Local Provider Description Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- Collaboration with HUD CoC Program HUD's Continuum of Care (CoC) Program is designed to promote communitywide commitment to the goal of ending homelessness by providing funding for efforts by nonprofit providers and State and local governments and promoting access to mainstream programs by homeless individuals and families. Describe the organization's participation with local HUD CoC recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- Collaboration with Local Community Organizations Provide a brief description of partnerships and activities with local community organizations that
 provide key services (e.g., outreach teams, primary care, mental health, substance use, housing, employment) to PATH-eligible clients, and describe the
 coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be
 achieved.
- Service Provision Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
- How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with COD, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
- Any gaps that exist in the current service systems;
- A brief description of the current services available to clients who have a COD; and
- A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- Housing Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- Staff Information Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients. Describe the extent to which staff receive periodic training in cultural competence and health disparities.
- Client Information Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the
 percentage of adult clients to be served using PATH funds who are literally homeless.
- Consumer Involvement Describe how individuals who experience homelessness and have serious mental illness, and their family members, will be
 meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate
 whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- Budget Narrative Provide a budget and budget narrative that includes the local-area provider's use of PATH funds.



The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category				Fed	eral Dollars	Mate	ched Dollars	Tot	al Dollars	Comments
Personnel				\$	53,864	\$	47,536	\$	101,400	
Position *	Annual Salary *	% of time spent on PATH *	PATH- Funded FTE		PATH-Funded Salary *	M	atched Dollars *		Total Dollars	Comments
Outreach worker	27,300.00	100.00 %	0.53		14,502.00		12,798.00		27,300.00	Outreach Specialist
	27,300.00	100.00 %	0.53		14,502.00		12,798.00		27,300.00	Outreach Specialist
Other (Describe in Comments)	32,760.00	100.00 %	0.53		17,402.00		15,358.00		32,760.00	PATH Team Lead
Other (Describe in Comments)	7,020.00	100.00 %	0.53		3,729.00		3,291.00		7,020.00	Shower Attendant
Other (Describe in Comments)	7,020.00	100.00 %	0.53		3,729.00		3,291.00		7,020.00	Shower Attendant
Category		Percent	age	Fed	eral Dollars *	Mate	ched Dollars *	Tot	al Dollars	Comments
Fringe Benefits			4.07 %	\$	4,131.00	\$	3,646.00	\$	7,777.00	
Category				Fed	eral Dollars	Mate	ched Dollars	Tota	al Dollars	Comments
Travel				\$	1,700.00	\$	1,500.00	\$	3,200.00	
Line Item Detail *				F	ederal Dollars *	M	atched Dollars *		Total Dollars	Comments
Gas				\$	1,700.00	\$	1,500.00	\$	3,200.00	Fuel for outreach in Cochise County
Equipment				\$	0.00	\$	0.00	\$	0.00	
- Equipment				_				_	0.00	
					No Dat	a Avaii	able			
Supplies				\$	0.00	\$	0.00	\$	0.00	
					No Dat	a Avail	able			
Contractual				\$	0.00	\$	0.00	\$	0.00	
					No Dat	a Avail	able			
Housing				\$	0.00	\$	0.00	\$	0.00	
					No Dat	a Avail	able			
Construction (non-allowable)										
Other				\$	4,049.00	\$	3,574.00	\$	7,623.00	
Line Item Detail *				F	ederal Dollars *	M	atched Dollars *		Total Dollars	Comments
Client: Other (Describe in Comments)				\$	53.00	\$	47.00	\$	100.00	Professional Printing/Copying
Office: Utilities/Telephone/Internet				\$	685.00	\$	605.00	\$	1,290.00	Cell Phone
·										Vehicle Lease
Office: Other (Describe in Comments)				\$	2,296.00	\$	2,027.00	\$	4,323.00	
Office: Other (Describe in Comments)				\$	1,015.00	\$	895.00	\$	1,910.00	Vehicle Maintenance
Total Direct Charges (Sum of a-i)				\$	63,744.00	\$	56,256.00	\$	120,000.00	
Category				Fed	eral Dollars *	Mate	ched Dollars *	Tot	al Dollars	Comments
Indirect Costs (Administrative Costs)				\$	6,379.00	\$	5,621.00	\$	12,000.00	de minimis rate of 10% of the total direct costs
Grand Total (Sum of j and k)				\$	70,123.00	\$	61,877.00	\$	132,000.00	
purce(s) of Match Dollars for State Funds:										
equired non-federal contributions are availab	le from the Sta	ate General Fund	NTXIX SMI Se	rvices	Appropriation. T	he Stat	te contribution wi	ll be a	available at the be	eginning of the grant period.
					260) Estir	nated Number of	Perso	ons to be Enrolled	:
timated Number of Persons to be Contacted:										
		lly Homeless:			240					
itimated Number of Persons to be Contacted: timated Number of Persons to be Contacted umber staff trained in SOAR in grant year end	who are Litera	lly Homeless:			240)	nber of PATH-fund	ded c	onsumers assisted	l through SOAR:

Geographical Service A	rea		Good Neighbor Al	lliance			ts for Assis	tance	in Transition from	Home	elessness (P	ATH)	
					EDERAL H GRANT	NON	FEDERAL E MATCH	FE	TOTAL DERAL/STATE	II	N-KIND	CONTR IN-F	SUB- RACTOR(S) KIND, IF LICABLE
PERSONNEL													
Position	Name	Salary	Level Of Effort										
PATH Administrator	Kathleen Calabrese	\$1,250.00	0.10	\$	980	\$	270	\$	1,250	\$	2,000	\$	-
Team Leader	Brad Roland	\$24,500.00	1.00	\$	18,417	\$	6,083	\$	24,500	\$	-	\$	-
Outreach Specialist(s)	Sidney Potter	\$19,000.00	0.60	\$	14,292	\$	4,708	\$	19,000	\$	-	\$	-
GNA/PATH HMIS Admin	Sidney Potter	\$6,480.00	0.40	\$	4,903	\$	1,577	\$	6,480	\$	-	\$	-
Other-Shower Program Monitor	Sharelle Denison	\$5,285.00	1.00	\$	4,007	\$	1,278	\$	5,285	\$	-	\$	-
Other-Shower Program Monitor	Julie Wilson	\$5,285.00	1.00	\$	4,007	\$	1,278	\$	5,285	\$	_	\$	
Other-PATH Finance	Katie Calabrese	\$750.00	0.10	\$	606	\$	144	\$	750	Ψ		Ψ	
TOTAL PERSONN		ψ100.00	0.10	\$	47,212	\$	15,338	\$	62,550	\$	2,000	\$	-
									,		,		
EMPLOYEE RELATED E	EXPENSES (ERE)				\$3,897.00		\$903.00		\$4,800.00				
TOTAL ERE				\$	3,897	\$	903	\$	4,800			\$	-
PROFESSIONAL AND O	UTSIDE SERVICES	4											
TOTAL PROF & O	UTSIDE			\$ \$	-	\$ \$	- -	\$ \$	- - -	\$ \$	-	\$ \$ \$	-
TRAVEL													
Mileage Reimbursement (@.445/mile			\$	-	\$	-	\$	-	\$	-	\$	-
Gas (100% PATH dedical				\$	2,696	\$	504	\$	3,200	\$	-	\$	-
Out of State Travel - Airfa					,				-,	·			
Out of State Travel - Lodg													
Out of State Travel - Per													
Out of State Travel - Grou	und Transportation/Mis	С											
TOTAL TRAVEL				\$	2,696	\$	504	\$	3,200	\$	-	\$	-
OCCUPANCY					Λ								
Office Rent Expenses				\$	7 -7	\$	-	\$	-	\$	6,375	\$	-
Office Utilities	~			\$	- '	\$	-	\$	-	\$	1,875	\$	
TOTAL OCCUPAN	CY			3	-	\$	-	\$	-	\$	8,250	\$	-
HOUSING (Limited to 20	% as defined in PAT	H Legislation)											
Housing Assistance (1)				\$		\$	4 -	\$	_	\$	_	\$	_
TOTAL HOUSING				\$	<u> </u>	S	- A	\$		\$	-	\$	
												•	
PATH ENROLLEE													
Petty Cash for Emergence	ies (Must submit receip	ots with CERs)		\$	-	\$	7 -	\$	-	\$	100	\$	-
Outpatient Services				\$	-	\$		\$	-	\$	-	\$	-
Medication Supplies				\$	-	\$		\$	-	\$	200	\$	-
Prescription Co-pays				\$	-	\$	-	\$	-	\$	-	\$	-
Utility Turn-on's				\$	-	\$	-	\$	-	\$	-	\$	-
Emergency Items - sunsc	reen, thongs			\$	-	\$	-	\$	-	\$	150	\$	-
Medical Contract Services	S			\$	-	\$	- (\$	-	\$	-	\$	-
Hygene kits				\$	-	\$	-	\$	-	\$	450	\$	-
Client Supplies - Bus toke	ens			\$	-	\$	-	\$	-	\$	100	\$	-
Client Supplies - trac pho				\$	-	\$	-	\$	-	\$	-	\$	-
TOTAL PATH ENR	OLLEE			\$	-	\$	-	\$	-	\$	1,000	\$	-
OTHER OPERATING													
Vehicle Licenses				\$	68	\$	22	\$	90	\$	-	\$	-
Vehicle Maintenance				\$	1,756	\$	455	\$	2,211	_		_	
Vehicle Insurance				\$	1,492	\$	367	\$	1,859	\$	-	\$	-
Leased Vehicle	_			\$	-	\$	-	\$	-	\$	-		
Training and Conference	Fees			\$	-	\$	-	\$	-	\$	550	\$	-
Copying				\$	-	\$	-	\$	-	\$	440	\$	-
Office Supplies				\$	-	\$	-	\$	-	\$		\$	-
Office Desk Telephones				\$	-	\$	-	\$	-	\$	385	\$	-
Security				\$	-	\$	-	\$	-	\$	-	\$	-
Janitorial Landscaping				\$ \$	-	\$ \$	-	\$	-	\$ \$	-	\$ \$	-
Desk/Laptop Computers				\$		\$		\$		\$	_	\$	
Software				\$	-	\$	-	э \$	-	\$	- 1	Φ \$	-
Postage				\$	-	\$	-	\$	-	\$	- 82	\$ \$	-
Cell Phone Purchase/Mor	nthly I leane			\$	1,067	\$	223	\$	1,290	\$	02	\$ \$	-
TOTAL OTHER OP				\$	4,383	\$	1,067	\$ \$	5,450	\$ \$	1,457	\$	<u> </u>
				Ľ	7,000	Ľ	.,007	_	5,430	_	.,407		
INDIRECT OR ADMINIST	TRATIVE OVERHEAD	(2)(3)(4)		\$		\$		\$	_	\$	_	\$	_
						Ψ	-	Ψ		Ψ	-	Ψ	

INDIRECT OR ADMINISTRATIVE OVERHEAD PERCENTAGE (2)(3)(4)			0.00% 0.00%		0.00%	0.00%		0.00%		0	.00%
		FI	EDERAL		STATE		TOTAL		IN-I	KIND	
	GRAND TOTAL	\$	58,188	\$	17,812	\$	76,000	\$	12,707	\$	-
GRANT AMOUNT REQUESTED		\$	76,000	PLU	JS IN-KIND	\$	12,707	=Tc	otal Budget	\$	88,707

FOOTNOTES:

- $^{(1)}$ Please specify the types of housing assistance included in this line item.
- $^{(2)}$ Please specify whether utilizing indirect or administrative overhead.
- $^{(3)}$ For administrative overhead, please provide a justification of costs included in administration.
- (4) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Additional Requirements:

- A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: https://gao.az.gov/travel/welcome-gao-travel. AHCCCS requires detailed receipts for reimbursement of travel expenditures.
- B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.
- Agreements, . C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds.



PERSONNEL Position Na PATH Administrator Dr Feam Leader Ju Dutreach Specialist/HMIS Ja Dutreach Specialist Jo	SERVICES le lees)	\$alary \$1,170.00 \$24,960.00 \$19,344.00 \$14,976.00 \$3,270.00	Level Of Effort 0.01 1.00 1.00 1.00 4.0	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	17,472.00 13,540.00 10,484.00 2,289.00 43,785.00	\$ \$ \$ \$ \$	7,488.00 5,803.00 4,493.00 981.00 18,765.00	\$	- S	5 - 5 - 5 1,170.00 6 2,620.00 6 2,620.00	SUB-CONTRACTO IN-KIND, IF APPLICA \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
PERSONNEL Position Na PATH Administrator Dr Feam Leader Ju Dutreach Specialist/HMIS Ja Dutreach Specialist/HMIS Ja Dutreach Specialist Jo PATH Shower Attendent Ta Other TOTAL PERSONNEL EMPLOYEE RELATED EXPENSE TOTAL ERE PROFESSIONAL AND OUTSIDE ST TOTAL PROF & OUTSIDE ST TOTAL PROF & OUTSIDE ST TOTAL PROF & OUTSIDE ST TOTAL Travel - Airfare Dut of State Travel - Airfare Dut of State Travel - Per Diem Dut of State Travel - Per Diem Dut of State Travel - Ground Trans TOTAL TRAVEL DOCCUPANCY Diffice Rent Expenses Office Utilities	ame .DeLuca lie Wilson son Sampson hn Allen ammy Stone S (ERE) SERVICES	\$1,170.00 \$24,960.00 \$19,344.00 \$14,976.00	0.01 1.00 1.00 1.00 1.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	17,472.00 13,540.00 10,484.00 2,289.00 43,785.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	7,488.00 5,803.00 4,493.00 981.00 18,765.00	\$ \$ 62,550 \$ 4,800	- 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3	5 1,170.00 5 - 5 - 6 1,170.00 6 2,620.00 5 2,620.00	S S S S S S S S
Position Na PATH Administrator Dr Feam Leader Ju Dutreach Specialist/HMIS Ja Dutreach Specialist/HMIS Ja Dutreach Specialist Jo PATH Shower Attendent Ta Other TOTAL PERSONNEL EMPLOYEE RELATED EXPENSE TOTAL ERE PROFESSIONAL AND OUTSIDE ST TOTAL PROF & OUTSIDE ST TOTAL PROF & OUTSIDE ST TOTAL PROF & OUTSIDE ST TOTAL Travel - Airfare Dut of State Travel - Lodging Dut of State Travel - Per Diem Dut of State Travel - Ground Trans TOTAL TRAVEL DOLOTO TOTAL TRAVEL DOCUMENCY Diffice Rent Expenses Office Utilities	DeLuca lie Wilson son Sampson hn Allen ammy Stone S (ERE) SERVICES	\$1,170.00 \$24,960.00 \$19,344.00 \$14,976.00	0.01 1.00 1.00 1.00 1.00	\$ \$ \$ \$ \$ \$ \$ \$	13,540.00 10,484.00 2,289.00 43,785.00 3,360.00	\$ \$ \$ \$	5,803.00 4,493.00 981.00 18,765.00 1,440.00	\$ 4,800	- :	5 - 5 - 5 1,170.00 6 2,620.00 6 2,620.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
PATH Administrator Dr Feam Leader Ju Dutreach Specialist/HMIS Ja Dutreach Specialist/HMIS Ja Dutreach Specialist Jo PATH Shower Attendent Ta Dther TOTAL PERSONNEL EMPLOYEE RELATED EXPENSE TOTAL ERE PROFESSIONAL AND OUTSIDE ST TOTAL PROF & OUTSIDE ST DUT OF State Travel - Lodging Dut of State Travel - Lodging Dut of State Travel - Lodging Dut of State Travel - Per Diem Dut of State Travel - Ground Trans TOTAL TRAVEL DCCUPANCY DCCUPANCY DCGUPANCY DCGUPAN	DeLuca lie Wilson son Sampson hn Allen ammy Stone S (ERE) SERVICES	\$1,170.00 \$24,960.00 \$19,344.00 \$14,976.00	0.01 1.00 1.00 1.00 1.00	\$ \$ \$ \$ \$ \$ \$ \$	13,540.00 10,484.00 2,289.00 43,785.00 3,360.00	\$ \$ \$ \$	5,803.00 4,493.00 981.00 18,765.00 1,440.00	\$ 4,800	- :	5 - 5 - 5 1,170.00 6 2,620.00 6 2,620.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Team Leader Ju Dutreach Specialist/HMIS Ja Dutreach Specialist Jo PATH Shower Attendent Ta Other TOTAL PERSONNEL EMPLOYEE RELATED EXPENSE TOTAL ERE PROFESSIONAL AND OUTSIDE S TOTAL PROF & OUTSIDE S TOTAL TRAVEL S OUT of State Travel - Lodging Out of State Travel - Lodging Out of State Travel - Per Diem Out of State Travel - Ground Trans TOTAL TRAVEL OCCUPANCY Office Rent Expenses Office Utilities	lie Wilson son Sampson hn Allen immy Stone S (ERE) SERVICES	\$24,960.00 \$19,344.00 \$14,976.00	1.00 1.00 1.00 1.00	\$ \$ \$ \$ \$ \$ \$ \$	13,540.00 10,484.00 2,289.00 43,785.00 3,360.00	\$ \$ \$ \$	5,803.00 4,493.00 981.00 18,765.00 1,440.00	\$ 4,800	- :	5 - 5 - 5 1,170.00 6 2,620.00 6 2,620.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Dutreach Specialist/HMIS Dutreach Specialist / HMIS Dutreach Specialist	son Sampson hin Allen ammy Stone S (ERE) SERVICES	\$19,344.00 \$14,976.00	1.00 1.00 1.00	\$ \$ \$ \$ \$ \$ \$ \$	13,540.00 10,484.00 2,289.00 43,785.00 3,360.00	\$ \$ \$ \$	5,803.00 4,493.00 981.00 18,765.00 1,440.00	\$ 4,800	- :	\$\begin{array}{cccccccccccccccccccccccccccccccccccc	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
PATH Shower Attendent Other TOTAL PERSONNEL EMPLOYEE RELATED EXPENSE TOTAL ERE PROFESSIONAL AND OUTSIDE STOTAL PROF & OUTSIDE STO	S (ERE) SERVICES		1.00	\$ \$ \$ \$ \$	2,289.00 43,785.00 3,360.00	\$ \$ \$ \$	981.00 18,765.00 1,440.00	\$ 4,800	- 3 0.00 \$ 0.00 \$ - 3	5 - 5 1,170.00 6 2,620.00 6 2,620.00 5 - 5 -	\$ \$ \$
TOTAL PERSONNEL EMPLOYEE RELATED EXPENSE TOTAL ERE PROFESSIONAL AND OUTSIDE STOTAL PROF & OUTSIDE TOTAL PROF & OUTSIDE FRAVEL Willeage Reimbursement @ .445/mil Gas (100% PATH dedicated Vehicle) Out of State Travel - Airfare Out of State Travel - Per Diem Out of State Travel - Per Diem Out of State Travel - Ground Trans TOTAL TRAVEL OCCUPANCY Office Rent Expenses Office Utilities	S (ERE) SERVICES	\$3,270.00		\$ \$ \$ \$	43,785.00 3,360.00 - -	\$ \$ \$	1,440.00	\$ 4,800	- 3 0.00 \$ 0.00 \$ - 3	5 - 5 1,170.00 6 2,620.00 6 2,620.00 5 - 5 -	\$ \$ \$
TOTAL PERSONNEL EMPLOYEE RELATED EXPENSE TOTAL ERE PROFESSIONAL AND OUTSIDE STANDARD OUT	SERVICES le lees)		4.0	\$ \$	3,360.00	\$ \$ \$	1,440.00	\$ 4,800	0.00 \$	3 1,170.00 5 2,620.00 6 2,620.00 5 - 5 -	\$
TOTAL ERE PROFESSIONAL AND OUTSIDE STANDARD PROF & OU	SERVICES le lees)		4.0	\$ \$	3,360.00	\$ \$ \$	1,440.00	\$ 4,800	D.00 \$	3 2,620.00 3 2,620.00 5 -	\$
TOTAL ERE PROFESSIONAL AND OUTSIDE STATE OF TOTAL PROF & OUTSIDE TOTAL PROF & OUTSIDE TRAVEL Allileage Reimbursement @.445/mil Boas (100% PATH dedicated Vehicl Dut of State Travel - Airfare Dut of State Travel - Lodging Dut of State Travel - Per Diem Dut of State Travel - Ground Trans TOTAL TRAVEL DIFFICE OCCUPANCY Office Rent Expenses Office Utilities	SERVICES le lees)			\$ \$	- -	\$	-	\$	0.00	\$ 2,620.00 \$ - \$ -	\$
TOTAL PROF & OUTSIDE STANDS TOTAL TRAVEL STANDS TOTAL TRAVEL DOCUMENTS TOTAL TRAVEL TRAVEL TOTAL TRAVEL TRAVEL	le les)			\$ \$	- -	\$	-	\$	- ;	\$ - \$ -	\$
TOTAL PROF & OUTSIDE TRAVEL Mileage Reimbursement @.445/mil Gas (100% PATH dedicated Vehicl Out of State Travel - Airfare Out of State Travel - Lodging Out of State Travel - Per Diem Out of State Travel - Ground Trans TOTAL TRAVEL DIFFICE COCCUPANCY Office Rent Expenses Office Utilities	le les)			\$ \$	-	\$	-	\$	- ;	-	\$
IRAVEL Mileage Reimbursement @.445/mil Gas (100% PATH dedicated Vehicl Dut of State Travel - Airfare Dut of State Travel - Lodging Dut of State Travel - Per Diem Dut of State Travel - Ground Trans TOTAL TRAVEL DCCUPANCY Office Rent Expenses Office Utilities	les)			\$ \$	-	\$	-	\$	- ;	-	\$
IRAVEL Mileage Reimbursement @.445/mil Gas (100% PATH dedicated Vehicl Dut of State Travel - Airfare Dut of State Travel - Lodging Dut of State Travel - Per Diem Dut of State Travel - Ground Trans TOTAL TRAVEL DCCUPANCY Office Rent Expenses Office Utilities	les)			\$	-		-				
IRAVEL Mileage Reimbursement @.445/mil Gas (100% PATH dedicated Vehicl Dut of State Travel - Airfare Dut of State Travel - Lodging Dut of State Travel - Per Diem Dut of State Travel - Ground Trans TOTAL TRAVEL DCCUPANCY Office Rent Expenses Office Utilities	les)				-	Ą		a)	- -		
Mileage Reimbursement @.445/mil Gas (100% PATH dedicated Vehici) Out of State Travel - Lodging Out of State Travel - Lodging Out of State Travel - Per Diem Out of State Travel - Ground Trans TOTAL TRAVEL DOCCUPANCY Office Rent Expenses Office Utilities	les)	1								-	Ψ
Gas (100% PATH dedicated Vehicl Dut of State Travel - Airfare Dut of State Travel - Lodging Dut of State Travel - Per Diem Dut of State Travel - Ground Trans TOTAL TRAVEL DCCUPANCY Office Rent Expenses Office Utilities	les)	V,		_					t		
Out of State Travel - Airfare Out of State Travel - Lodging Out of State Travel - Per Diem Out of State Travel - Ground Trans TOTAL TRAVEL OCCUPANCY Office Rent Expenses Office Utilities		V		\$.	\$	-	\$	- ;		\$
Out of State Travel - Lodging Out of State Travel - Per Diem Out of State Travel - Ground Trans TOTAL TRAVEL OCCUPANCY Office Rent Expenses Office Utilities	sportation/Misc	1		\$	3,200.00	-		\$ 3,200	0.00	\$ -	\$
Out of State Travel - Per Diem Out of State Travel - Ground Trans TOTAL TRAVEL OCCUPANCY Office Rent Expenses Office Utilities	sportation/Misc	<i>V 1</i>		1-		-					
Out of State Travel - Ground Trans TOTAL TRAVEL OCCUPANCY Office Rent Expenses Office Utilities	portation/Misc			1							
OCCUPANCY Office Rent Expenses Office Utilities		V									
Office Rent Expenses Office Utilities				\$	3,200.00			\$ 3,200	0.00	-	\$
Office Rent Expenses Office Utilities											
Office Utilities				\$	-	\$	_	\$	- ;	\$ -	\$
TOTAL OCCUPANCY				\$	-	\$	-		- ;		\$
				\$	•	\$	ē	\$	- ;	\$ -	\$
IOUGING (Livelies des 000) det	in a dia DATILI										
HOUSING (Limited to 20% as def	ined in PATH I	Legislation)			-						
Housing Assistance (1)				\$	-	\$	-	\$	- 5		\$
TOTAL HOUSING				\$	<u> </u>	3	-	\$	- :	-	\$
PATH ENROLLEE											
Petty Cash for Emergencies (Must	submit receip	ts with CERs)		\$	-	\$			- ;		\$
Outpatient Services				\$	-	\$	-	\$	- 5		\$
Medication Supplies Prescription Co-pays				\$		\$		\$	- ;		\$
Jtility Turn-on's				\$		\$		_		-	\$
Emergency Items - sunscreen, thor	ngs			\$		\$		\$	- ;		\$
Medical Contract Services				\$	-	\$			- ;		\$
Hygene kits				\$	-	\$	-		- 3		\$
Client Supplies - Bus tokens Client Supplies - PATH Enrolle tra	c nhones			\$	-	\$	· ·	-	- :		\$
TOTAL PATH ENROLLEE	o p.101100			\$		\$	-			-	\$
OTHER OPERATING											
Vehicle Licenses				\$	63.00	\$	27.00	\$ 90	0.00	\$ -	\$
Vehicle GPS System				Ĕ	- 5.00	Ľ		\$		\$ -	\$
Vehicle Maintenance				\$	1,783.00			\$ 1,783			\$
/ehicle Insurance				\$	2,030.00		257.00	\$ 2,287			\$
eased Vehicle Fraining and Conference Fees				\$	5,000.00	\$	-	\$ 5,000 \$		5 - 5 -	\$
Copying				\$	<u> </u>	\$	-			-	\$
Office Supplies				\$	-	\$	-			\$ -	\$
Office Desk Telephones				\$	-	\$	-	\$	- ;	-	\$
Security				\$	-	\$	-	\$		-	\$
lanitorial .andscaping				\$	-	\$	-	•	- 5		\$
.andscaping Desk/Laptop Computers				\$		\$	-		- 3	} -	\$
HMIS Licenses				\$	-	\$	-	\$	- ;		\$
Software				\$	-	\$	-	\$	- ;	-	\$
Postage				\$	-	\$	-	\$	- ;		\$
PATH Staff Cell Phone Purchase/N TOTAL OTHER OPERATING				\$	903.00 9,779.00	\$ \$	387.00 671.00	\$ 1,290 \$ 10,450		-	\$ \$
		(2)(4)						,		•	
NDIRECT OR ADMINISTRATIVE			2)(3)(4)	\$	-	\$	-	\$	- :		\$
NDIRECT OR ADMINISTRATIVE	OVERHEAD PI	ERCENTAGE "	N.N.7	-	0.00%		0.00%	0.00%		0.00%	0.00%
		on = -:		_	EDERAL		STATE	TOTAL	00		-KIND
		GRAND TOTA	AL	\$ 6	50,124.00	\$ 2	20,876.00	\$ 81,000	.00	\$ 3,790.00	\$ -
GRANT AMOUNT REQUES	TED			\$	81,000.00	PLI	JS IN-KIND	\$ 3,790	0.00	Total Budget	\$ 84,790

FOOTNOTES:

- ⁽¹⁾ Please specify the types of housing assistance included in this line item.
- $^{(2)}$ Please specify whether utilizing indirect or administrative overhead.
- $^{(3)}$ For administrative overhead, please provide a justification of costs included in administration.
- (4) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Additional Requirements:

A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: https://gao.az.gov/travel/welcome-gao-travel. AHCCCS requires detailed receipts for reimbursement of travel expenditures.

- B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.
- C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds.



Contract Reporting Period:			GNA July 1, 2021 - June	30, 2	022						
County Service Area	List				EDERAL TH GRANT		N FEDERAL ATE MATCH	TOTAL FEDERAL/STATE	E	IN-KIND	SUB-CONTRACTOR
PERSONNEL											
Position	Name Dr.DeLuca	Salary	Level Of Effort	 		<u> </u>				\$ 1,170.00	¢
PATH Administrator Team Leader	Julie Wilson	\$1,170.00 \$24,960.00	0.01 1.00	\$	17,472.00	\$	7,488.00			\$ 1,170.00	\$ - \$ -
Outreach Specialist/HMIS	Jason Sampson	\$19,344.00	1.00	\$	13,540.00		5,803.00			\$ -	\$ -
Outreach Specialist	odoon odinpoon	\$14,976.00	1.00	\$	10,484.00	\$	4,493.00			Ψ	*
PATH Shower Attendent	Tammy Stone	\$3,270.00	1.00	\$	2,289.00	\$	981.00			\$ -	\$ -
Other								\$		\$ -	\$ -
TOTAL PERSONNEL			4.0	\$	43,785.00	\$	18,765.00	\$ 62,550	0.00	\$ 1,170.00	\$ -
MPLOYEE RELATED EXPEN	SES (ERE)			+	-					\$ 2,620.00	
TOTAL ERE		1 1		\$	3,360.00	\$	1,440.00	\$ 4,800	0.00	\$ 2,620.00	\$ -
	- 0-D\(\(\tau\)	.1		Ľ	0,000.00	Ľ	1,440.00	4,000	,.00	¥ 2,020.00	
PROFESSIONAL AND OUTSID	E SERVICES	1		\$	_	\$	-	\$	-	\$ -	\$ -
				\$	-	\$	-	\$		\$ -	\$ -
TOTAL PROF & OUTSID	E			\$	-	\$	-	\$	-	\$ -	\$ -
TRAVEL	/mila			•		_		r		•	•
Mileage Reimbursement @.445 Gas (100% PATH dedicated Ve				\$	2,240.00	\$	960.00	\$ 3,200		\$ - \$ -	\$ - \$ -
Out of State Travel - Airfare	iicics)	1 /		Ψ	۷,۷40.00	Ψ	900.00	ψ 3,200	.00	ψ -	Ψ -
Out of State Travel - Lodging		1//		t							<u> </u>
Out of State Travel - Per Diem											
Out of State Travel - Ground Tra	ansportation/Misc									-	
TOTAL TRAVEL				\$	2,240.00	\$	960.00	\$ 3,200	0.00	\$ -	\$ -
OCCUPANCY				\vdash							
OCCUPANCY Office Rent Expenses				\$	_	\$	_	\$	-	\$ -	\$ -
Office Utilities				\$	-	\$	-			\$ -	\$ -
TOTAL OCCUPANCY				\$	-	\$	-			\$ -	\$ -
HOUSING (Limited to 20% as	defined in PATH	Legislation)									
Housing Assistance (1)				\$		\$	_ 7	\$	-	\$ -	\$ -
TOTAL HOUSING				\$	A - `	\$	-			\$ -	\$ -
		-				_	_			-	
PATH ENROLLEE				Ţ.		-4					
Petty Cash for Emergencies (Mu Outpatient Services	ist submit receip	its with CERs)		\$	-	\$	-	•		\$ - \$ -	\$ - \$ -
Medication Supplies				\$		\$	-	-:		\$ -	\$ -
Prescription Co-pays				\$		\$				\$ -	\$ -
Utility Turn-on's				\$	-	\$	-	\$	-	\$ -	\$ -
Emergency Items - sunscreen, t	hongs			\$		\$		\$	-	\$ -	\$ -
Medical Contract Services				\$	-	\$				\$ -	\$ -
Hygene kits				\$	-	\$	-			\$ -	\$ -
Client Supplies - Bus tokens				\$	-	\$		7		\$ -	\$ -
Client Supplies - PATH Enrolle TOTAL PATH ENROLLE	trac phones			\$ \$	<u>-</u>	\$ \$	-			\$ - \$ -	\$ - \$ -
TOTAL FAITI ENRULLE				ĮΨ	-	Ψ		· 7	- 1	<u> </u>	
OTHER OPERATING											
Vehicle Licenses	·	- <u></u>	·	\$	63.00	\$	27.00			\$ -	\$ -
Vehicle GPS System				Ļ		L.		\$		\$ -	\$ -
Vehicle Maintenance				\$	1,248.00	\$	535.00	\$ 1,783		\$ -	\$ -
Vehicle Insurance Leased Vehicle				\$	1,600.00 5,000.00	\$	687.00	\$ 2,287 \$ 5,000		\$ - \$ -	\$ -
Training and Conference Fees				\$	5,000.00	\$	-			\$ -	\$ -
Copying				\$	-	\$	-			\$ -	\$ -
Office Supplies				\$	-	\$	-			\$ -	\$ -
Office Desk Telephones				\$	-	\$	-	\$		\$ -	\$ -
Security				\$	-	\$	-	•		\$ -	\$ -
Janitorial				\$	-	\$	-	•		\$ -	\$ -
_andscaping Desk/Laptop Computers				\$	-	\$	-			\$ - \$ -	\$ - \$ -
HMIS Licenses				\$		\$	-			\$ -	\$ -
Software				\$	-	\$	-			\$ -	\$ -
Postage				\$	-	\$	-	\$	-	\$ -	\$ -
PATH Staff Cell Phone Purchas				\$	903.00	\$	387.00	\$ 1,290		\$ -	\$ -
TOTAL OTHER OPERAT	ING			\$	8,814.00	\$	1,636.00	\$ 10,450	0.00	\$ -	\$ -
	/E OVERUEAR (2)(3)(4)		•	_			•	_	\$ -	¢.
NDIDECT OD ADMINISTRATI	/C UVEKHEAI)`		(0)/0)/ (1)	\$	-	\$	-	\$	-	Ψ	\$ -
INDIRECT OR ADMINISTRATION			2)(3)(4)		0.0001						
INDIRECT OR ADMINISTRATIV			(2)(3)(4)	-	0.00%		0.00%	0.00%		0.00%	0.00%
				FI	0.00% EDERAL		STATE	TOTAL			0.00% I-KIND
				_					.00		ul

FOOTNOTES:

- $^{(1)}$ Please specify the types of housing assistance included in this line item.
- $^{(2)}$ Please specify whether utilizing indirect or administrative overhead.
- $^{(3)}$ For administrative overhead, please provide a justification of costs included in administration.
- (4) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Additional Requirements:

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- B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.
- C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds.



PATH Contractor Name: Contract Reporting Period:			GNA July 1, 2024 - June 30, 2025							Į		
County Service Area	List		July 1, 2024 - Julie 30, 2023		EDERAL 'H GRANT		FEDERAL E MATCH	FE	TOTAL EDERAL/STATE	IN-KIND		-CONTRACTOR(IN-KIND, IF APPLICABLE
PERSONNEL		-			53.12%	4	6.88%					,
Position	Name	Salary	Level Of Effort								•	
Feam Leader	Kyle Allen	\$32,760	100%	\$	17,402	\$	15,358	\$	32,760	\$ -	\$	
Outreach Specialist	Matt Harris	\$27,300	100%	\$	14,502	\$			27,300	\$ -	\$	
Outreach Specialist	TJ Oretega	\$27,300	100%	\$	14,502	\$	12,798		27,300		Ť	
PATH Shower Attendent	Tammy Stone	\$7,020	9 hrs wk/468 yr @15.00	\$	3,729		3,291		7,020		\$	
Shower Attendent 2	Jeremy Clayton	\$7,020	9 hrs wk/468 yr @15.00	\$	3,729		3,291		7,020	\$ -	\$	-
TOTAL PERSONNEL		\$101,400		\$	53,864	\$	47,536	*	101,400	\$ -	\$	
MPLOYEE RELATED EXP	ENSES (ERE)											
TOTAL ERE	7.67%	\$ 101,400		\$	4,131	\$	3,646	\$	7,777	\$ -	\$	-
ROFESSIONAL AND OUTS	SIDE SERVICES	1		_				_				
	_			\$	-	\$	-	\$	-	\$ -	\$	
TOTAL PROF & OUT	SIDE	l l		\$		\$	-	\$	-	\$ - \$ -	\$	
TOTALTROP GOOT	OID L			Ť		_		_	_		Ť	
RAVEL												
/lileage Reimbursement @.6				\$	-			\$	-	\$ -	\$	
Gas (100% PATH dedicated)	Vehicles)			\$	1,700	\$	1,500	\$	3,200	\$ -	\$	
Out of State Travel - Airfare				├		<u> </u>					<u> </u>	
Out of State Travel - Lodging Out of State Travel - Per Dien			7	1		 					-	
Out of State Travel - Per Dier Out of State Travel - Ground				 							 	
TOTAL TRAVEL	anoportation/ivil50			\$	1,700	\$	1,500	\$	3,200	\$ -	\$	
				Ľ	-,	Ľ	.,000	Ľ	5,200		Ľ	
CCUPANCY		,										
Office Rent Expenses				\$	-	\$	-	\$	-	\$ -	\$	
Office Utilities	,			\$	-	\$	-	\$	-	\$ -	\$	
TOTAL OCCUPANCY				\$	-	\$	-	\$	-	\$ -	\$	
OUSING (Limited to 20% a	e defined in DATH	Logislation)		•								
	is defined in PATH	Legisiation						_		_	-	
Housing Assistance (1)				\$	-	\$	-	\$	-	\$ -	\$	
TOTAL HOUSING				\$	-	\$	-	\$	-	\$ -	\$	
PATH ENROLLEE												
Petty Cash for Emergencies (Must submit receip	ots with CERs)		\$	-	\$		\$	-	\$ -	\$	
Outpatient Services				\$		\$		\$	-	\$ -	\$	
Medication Supplies				\$	• •	\$	-	\$	-	\$ -	\$	
Prescription Co-pays				\$		\$	-	\$	-	\$ -	\$	
Jtility Turn-on's Emergency Items - sunscreer	thongo			\$		\$	-	\$	-	\$ - \$ -	\$	
Medical Contract Services	i, iriorigs			\$,		\$	-	\$		\$ -	\$	-
Hygene kits				\$	- 	\$		\$	-	\$ -	\$	
Client Supplies - Bus tokens				\$	-	\$		\$	-	\$ -	\$	
Client Supplies - PATH Enrol	le trac phones			\$	₹.	\$	-	\$	-	\$ -	\$	
TOTAL PATH ENROL	LEE			\$	-	\$	•	\$		\$ -	\$	
THER OPERATING												
/ehicle Licenses						•		\$		\$ -	\$	
/ehicle GPS System				_	,			\$	- 1010	\$ -	\$	
/ehicle Maintenance				\$	1,015	\$	895	\$	1,910	\$ -	\$	
/ehicle Insurance				\$	2,296	\$	2,027	\$ \$	4,323	\$ - \$ -	\$	
eased Vehicle raining and Conference Fee	e			Ą	2,290	Ф	Z,UZ/ \	\$	4,323	\$ -	\$	
raining and Conference Fee Copying	٥			\$	53	\$	47	\$	100	Ψ -	\$	
Office Supplies				Ť		Ť		\$	-	\$ -	\$	
Office Desk Telephones								\$	-	\$ -	\$	
ecurity				\$	-	\$	-	\$	-	\$ -	\$	
anitorial				\$	-	\$	-	\$	-	\$ -	\$	
andscaping				\$	-	\$	-	\$	-	\$ -	\$	
esk/Laptop Computers				\$	-	\$	-	\$	-	\$ -	\$	
MIS Licenses oftware				\$		\$	-	\$		\$ - \$ -	\$	
onware ostage				\$		\$		\$		\$ -	\$	
ATH Staff Cell Phone Purch	ase/Monthly Usage			\$	685	\$	605	\$	1,290	\$ -	\$	
TOTAL OTHER OPER				\$	4,049	\$	3,574	\$	7,623	\$ -	\$	
NDIRECT OR ADMINISTRA	TIVE OVERHEAD (2	2)(3)(4)		\$	6,379	\$	5,621	\$	12,000	\$ -	\$	
NDIRECT OR ADMINISTRA NDIRECT OR ADMINISTRA	TIVE OVERHEAD	PERCENTAGE (2)	3)(4)	, a	10%		10%	Þ	12,000	0.00%	Þ	0.00%
C. OK ADMINISTRA	OVERNEAD F	LITOLITIAGE		 								
				FE	EDERAL	S	TATE		TOTAL		-KINI)
		GRAND TOTAL		\$	70,123	\$	61,877	\$	132,000	\$ -	\$	-
									<u> </u>			
GRANT AMOUNT REQU	JESTED			\$	132,000	PLU	S IN-KIND	\$	-	=Total Budget	\$	132,0
								_		_	_	

FOOTNOTES:

(1) Please specify the types of housing assistance included in this line item.

⁽²⁾ Please specify whether utilizing indirect or administrative overhead.

Additional Requirements:

A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: https://gao.az.gov/travel/welcome-gao-travel. AHCCCS requires detailed receipts for reimbursement of travel expenditures.

B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.

C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds



 $^{^{(3)}}$ For administrative overhead, please provide a justification of costs included in administration.

⁽⁴⁾ For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Good Neighbor Alliance Budget Narrative & Justification County Coverage: Cochise

Contract Period: July 1, 2024 through June 30, 2025

A. Personnel:

Position Title (1)	Staff Name (2)	Annual Salary/Rate (3)	Level of Effort (LOE) (4)	Federal PATH Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
PATH Team Lead	Kyle Allen	\$32,760	1	\$17,402	\$15,358	\$32,760
Outreach	Matt James	\$27,300	1	\$14,502	\$12,798	\$27,300
Specialist						·
Outreach	TJ Ortéga	\$27,300	1	\$14,502	\$12,798	\$27,300
Specialist						
Shower	Tammi Stone	\$7,020	1	\$3,729	\$3,291	\$7,020
Attendant						
Shower	Jeremy Clayton	\$7,020	1	\$3,729	\$3,291	\$7,020
Attendant						
Total Request				\$53,864	\$47,536	\$101,400

Personnel Narrative:

GNA has 4 HMIS Licenses and does anywhere from 4 to 10 VI-SPDAT's a week. Due to the volume of work, and for safety reasons, there is a need to have two shower attendants, as well as two Outreach Specialists. The Outreach Specialists are responsible for entering all shower and outreach VI-SPDAT into HMIS, along with tracking all new contacts, and updating current contacts. Shower Attendant/HMIS enters all shower program's needs & services and updating interims. The Team Lead ensures accuracy and attends to contract requirements.

B. Fringe Benefits:

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
PATH Team Lead	Kyle Allen	\$32,760	7.67%	\$1,335	\$1,178	\$2,513
Outreach Specialist	Matt James	\$27,300	7.67%	\$1,112	\$982	\$2,094
Outreach Specialist	TJ Ortega	\$27,300	7.67%	\$1,112	\$982	\$2,094

Good Neighbor Alliance Budget Narrative & Justification County Coverage: Cochise

Contract Period: July 1, 2024 through June 30, 2025

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
Shower Attendant	Tammi Stone	\$7,020	7.67%	\$286	\$252	\$538
Shower Attendant	Jeremy Clayton	\$7,020	7.67%	\$286	\$252	\$538
Total Request				\$4,131	\$3,646	\$7,777

Fringe Benefits Narrative:

ıan sic. Good Neighbor Alliance does not offer any benefits other than sick/personal time. The ERE rate is 7.67% for FICA taxes.

Fringe Category	Rate
Retirement	
FICA	7.67%
Insurance	
Social Security	
Total Fringe Rate	7.67%

C. Travel:

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) https://gao.az.gov.publications/saam.

Good Neighbor Alliance Budget Narrative & Justification County Coverage: Cochise

Contract Period: July 1, 2024 through June 30, 2025

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
Outreach	Cochise County	Monthly Fuel	\$267 per month X 12 months	\$1,700	\$1,500	\$3,200
	Total R	equest	\$1,700	\$1,500	\$3,200	

Travel Narrative:

Fuel necessary for PATH Truck to outreach all of Cochise County per scope of work. PATH covers the entirety of Cochise County, with the average price of gas nearing \$4 per gallon currently.

D. Equipment

<u></u>	<u>Equipment</u>				
	Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
		•			
	·		\$0	\$0	\$0

Equipment Narrative:

E. Supplies

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)

Good Neighbor Alliance Budget Narrative & Justification County Coverage: Cochise

Contract Period: July 1, 2024 through June 30, 2025

Total Request	\$0	\$0	\$0	

Supplies Narrative:

F. Contractual:

Name of Organization or Consultant (1)	Type of Agreement (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
N/A				
Total Request		\$0	\$0	\$0

Contractual Narrative:

G. Housing:

If requesting rent, please fill out & submit rent worksheet.

Housing Assistance (1)	Calculation (2)	Federal PATH Request (3)	Non- Federal State Match (4)	Total Federal/State Cost (5)
N/A				
Total Request		\$0	\$0	\$0

Housing Narrative:

H. Other Operating:

Good Neighbor Alliance Budget Narrative & Justification County Coverage: Cochise

Contract Period: July 1, 2024 through June 30, 2025

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, the number of clients should be included in the costs. Also, please break down PATH enrollee expenses here.

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
Vehicle Maintenance	\$159.17 per month x 12 months	\$1,015	\$895	\$1,910
Vehicle Lease	\$360.25 per month x 12 months	\$2,296	\$2,027	\$4,323
Cell Phone	\$107.50 per month x 12 months	\$685	\$605	\$1,290
Professional Printing/Copying		\$53	\$47	\$100
Total Request		\$4,049	\$3,574	\$7,623

Other Narrative:

Equipment required to meet the specifications set forth regarding the scope of work. Vehicle costs are fixed. The Cell phone is necessary for outreach and safety purposes. The vehicle is leased and utilized 100% for PATH work. Maintenance costs include oil changes, parts, tires, and general maintenance. All maintenance is necessary to remain in compliance with the lease agreement. The GNA cell phone is utilized for outreach and safety purposes. The two outreach specialists share one cell phone. Professional printing/copy costs include the cost of having handouts printed to be used as an informational resource at weekly and monthly events and at shower program encounters.

I. <u>Total Direct Charges</u>

Total Direct Charges	Federal PATH Request	Non-Federal State Match (3)	Total Federal/State Cost
(1)	(2)		(4)
(sum of A-I)	\$63,744	\$56,256	\$120,000

J. <u>Indirect Cost Rate or Administration (See Footnote below):</u>

Good Neighbor Alliance Budget Narrative & Justification County Coverage: Cochise

Contract Period: July 1, 2024 through June 30, 2025

Calculation (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
De minimis rate of 10% x 120,00	\$6,379	\$5,621	\$12,000
Total Request	\$6,379	\$5,621	\$12,000

Indirect/Administrative Narrative:

Good Neighbor Alliance requests the de minimis rate of 10% to administer the entirety of this grant.

FOOTNOTE:

- (1) Please specify whether utilizing indirect or administrative overhead.
- (2) For administrative overhead, please provide a justification of costs included in administration.
- (3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.

K. <u>Total Project Costs:</u>

TOTAL REQUEST – TOTAL PROJECT COSTS (1)	Federal Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
(Sum of Total Direct Costs and Indirect (Or Admin) Costs)	\$70,123	\$61,877	\$132,000

Footnotes:	

II. Executive Summary

Intended Use Plans

La Frontera Center, Inc.

Provider Type: Community mental health center

502 W 29th St

PDX ID: AZ-002

Tucson, AZ 85713

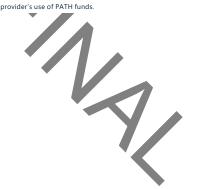
State Provider ID: AZ-002

Contact: Valerie Grothe

Contact Phone #: 5208828422

Email Address: Valerie.Grothe@lafrontera.org

- Local Provider Description Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- Collaboration with HUD CoC Program HUD's Continuum of Care (CoC) Program is designed to promote communitywide commitment to the goal of ending homelessness by providing funding for efforts by nonprofit providers and State and local governments and promoting access to mainstream programs by homeless individuals and families. Describe the organization's participation with local HUD CoC recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- Collaboration with Local Community Organizations Provide a brief description of partnerships and activities with local community organizations that
 provide key services (e.g., outreach teams, primary care, mental health, substance use, housing, employment) to PATH-eligible clients, and describe the
 coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be
 achieved
- Service Provision Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
- How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are literally and chronically homeless, including those with COD, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
- Any gaps that exist in the current service systems;
- A brief description of the current services available to clients who have a COD; and
- A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- Housing Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- Staff Information Describe how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of clients. Describe the extent to which staff receive periodic training in cultural competence and health disparities.
- Client Information Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the
 percentage of adult clients to be served using PATH funds who are literally homeless.
- Consumer Involvement Describe how individuals who experience homelessness and have serious mental illness, and their family members, will be
 meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate
 whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- Budget Narrative Provide a budget and budget narrative that includes the local-area provider's use of PATH funds.



The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category					leral Dollars		ched Dollars		tal Dollars	Comments
Personnel				\$	160,719	\$	55,797	\$	216,516	
Position *	Annual Salary *	% of time spent on PATH *	PATH- Funded FTE		PATH-Funded Salary *	М	latched Dollars *		Total Dollars	Comments
PATH Administrator	57,500.00	100.00 %	0.74		42,682.00		14,818.00		57,500.00	
Other (Describe in Comments)	39,520.00	100.00 %	0.74		29,336.00		10,184.00		39,520.00	PATH Team Coordinator
Other (Describe in Comments)	31,200.00	100.00 %	0.74		23,160.00		8,040.00		31,200.00	PATH Team Recovery Coach
Other (Describe in Comments)	29,432.00	100.00 %	0.74		21,847.00		7,585.00		29,432.00	PATH Team Recovery Aide
Other (Describe in Comments)	29,432.00	100.00 %	0.74		21,847.00		7,585.00		29,432.00	PATH Team Recovery Aide
Other (Describe in Comments)	29,432.00	100.00 %	0.74		21,847.00		7,585.00		29,432.00	PATH Team Recovery Aide
Category		Percent	tage	Fed	leral Dollars *	Mat	ched Dollars *	Tot	tal Dollars	Comments
Fringe Benefits			19.62 %	\$	42,470.00	\$	14,744.00	\$	57,214.00	
Category				Fed	leral Dollars	Mat	ched Dollars	Tot	tal Dollars	Comments
Travel				\$	1,485.00	\$	515.00	\$	2,000.00	
Line Item Detail *				ı	Federal Dollars *	М	latched Dollars *		Total Dollars	Comments
Gas				\$	1,485.00	\$	515.00	\$	2,000.00	Fuel for PATH Vehicles
Equipment				\$	0.00	\$	0.00	\$	0.00	
					No Dat	ta Avail	lable			
Supplies				\$	16,455.00	\$	5,712.00	\$	22,167.00	
Line Item Detail *					Federal Dollars *	м	latched Dollars *		Total Dollars	Comments
Client: Outreach Supplies/Hygene	kits/Misc.			\$	5,211.00	\$	1,809.00	\$	7,020.00	64 cases of hygiene kits
Client: Other Supplies (Describe in	Comments)			\$	11,244.00	\$	3,903.00	\$	15,147.00	Bus Tokens & other client Supplies
Contractual				\$	0.00	\$	0.00	\$	0.00	
					No Dat	ta Avail	lable			
Housing				\$	0.00	\$	0.00	\$	0.00	
					No Dat	ta Avail	lable			
Construction (non-allowable)										
Other				\$	25,260.00	\$	8,770.00	\$	34,030.00	
Line Item Detail *				I	Federal Dollars *	М	latched Dollars *		Total Dollars	Comments
Client: Other (Describe in Commer	nts)			\$	5,567.00	\$	1,933.00	\$	7,500.00	Drop-In Center Rent
Client: Other (Describe in Commer	nts)			\$	817.00	\$	283.00	\$	1,100.00	Drop-In Center Phones
Client: Other (Describe in Commer	nts)			\$	742.00	\$	258.00	\$	1,000.00	Drop-In Center Utilities
Client: Other (Describe in Commer	nts)			\$	148.00	\$	52.00	\$	200.00	Emergency Program Supplies (Birth Certificates and Other Items)
Office: Other (Describe in Comme	nts)			\$	9,093.00	\$	3,157.00	\$	12,250.00	Software
Office: Other (Describe in Comme	nts)			\$	3,712.00	\$	1,288.00	\$	5,000.00	Vehicle Insurance
Office: Other (Describe in Comme				\$	1,485.00	\$	515.00	\$	2,000.00	Vehicle Maintenance
Office: Other (Describe in Commer				\$	371.00	\$	129.00	\$	500.00	Vehicle Licenses
Staffing: Training/Education/Conf	erence			\$	371.00	\$	129.00	\$	500.00	Training and Conference Fees
				\$	2,954.00	\$	1,026.00	\$	3,980.00	PATH Staff Cell Phone Cost
Staffing: Other (Describe in Comm	ents)									
	ents)			\$	246,389.00	\$	85,538.00	\$	331,927.00	
Staffing: Other (Describe in Comm Total Direct Charges (Sum of a-i) Category	ents)				246,389.00 deral Dollars *		85,538.00 cched Dollars *		331,927.00 tal Dollars	Comments
Total Direct Charges (Sum of a-i)	ents)									Comments 16.6% Indirect
Total Direct Charges (Sum of a-i) Category Indirect Costs (Administrative Costs)	ents)			Fec	deral Dollars *	Mat	ched Dollars *	Tot	tal Dollars	
Total Direct Charges (Sum of a-i) Category				Fec	deral Dollars * 40,889.00	Mat	14,211.00	Tot	55,100.00	

Source(s) of Match Dollars for State Funds:

1,500 Estimated Number of Persons to be Enrolled:

Estimated Number of Persons to be Contacted who are Literally Homeless:

Number staff trained in SOAR in grant year ending in 2023:

FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Estimated Number of Persons to be Contacted:

800

4 Number of PATH-funded consumers assisted through SOAR:

20

120



PATH Budget Narrative & Justification County Coverage: Pima County

Contract Period: July 1, 2024 through June 30, 2025

A. Personnel:

Position Title (1)	Staff Name (2)	Annual Salary/Rate (3)	Level of Effort (LOE) (4)	Federal PATH Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
PATH Administrator/Clinical Supervisor	Valerie Grothe	\$57,500	100%	\$42,682	\$14,818	\$57,500
PATH Team Coordinator	Christopher Jordan	\$39,520	100%	\$29,336	\$10,184	\$39,520
PATH Team Recovery Coach	Nadia Keiser	\$31,200	100%	\$23,160	\$8,040	\$31,200
PATH Team Recovery Aide	Alyse Encinas	\$29,432	100%	\$21,847	\$7,585	\$29,432
PATH Team Recovery Aide	Stephanie Mazza	\$29,432	100%	\$21,847	\$7,585	\$29,432
PATH Team Recovery Aide	Guadalupe Hernandez	\$29,432	100%	\$21,847	\$7,585	\$29,432
	Total Request			\$160,719	\$55,797	\$216,516

Personnel Narrative: This is the cost of staff salaries to operate the PATH grant. A significant increase in the number of people presenting to the drop-in after being referred by other community agencies has impeded the PATH team's ability to engage PATH-eligible clients through outreach. The Recovery Aide position allows the team to increase outreach efforts, but also to triage the needs of those coming into the drop-in more efficiently, resulting in shorter wait times and a higher quality of service for both those being referred to mainstream resources and PATH- enrollees.

PATH Budget Narrative & Justification County Coverage: Pima County

Contract Period: July 1, 2024 through June 30, 2025

B. Fringe Benefits:

Position Title (1)	Staff Name (2)	Total Personnel Cost from above (3)	Total Fringe Rate (4)	Federal Request (5)	Non- Federal State Match (6)	Total Federal/State Cost (7)
PATH Administrator / Clinical Supervisor	Valerie Grothe	\$57,500	26.425%	\$11,279	\$3,916	\$15,195
PATH Team Coordinator	Christopher Jordan	\$39,520	26.425%	\$7,752	\$2,691	\$10,443
PATH Team Recovery Coach	Nadia Keiser	\$31,200	26.425%	\$6,120	\$2,125	\$8,245
PATH Team Recovery Aide	Alyse Encinas	\$29,432	26.425%	\$5,773	\$2,004	\$7,777
PATH Team Recovery Aide	Stephanie Mazza	\$29,432	26.425%	\$5,773	\$2,004	\$7,777
PATH Team Recovery Aide	Guadalupe Hernandez	\$29,432	26.425%	\$5,773	\$2,004	\$7,777
	Total Request			\$42,470	\$14,744	\$57,214

Fringe Benefits Narrative: This is the cost of PATH Team employee-related expenses.

Fringe Category	Rate
Retirement	6%
FICA	7.65%
Insurance	12.775%
Social Security	
Total Fringe Rate	26.425%

PATH Budget Narrative & Justification County Coverage: Pima County

Contract Period: July 1, 2024 through June 30, 2025

C. Travel:

Please note: All travel expenditures will require itemized receipts and will not exceed the State allowable rates which can be found in the State of Arizona Accounting Manual (SAAM) https://gao.az.gov.publications/saam.

Purpose (1)	Destination (2)	Item (3)	Calculation (4)	Federal PATH Request (5)	Non-Federal State Match (6)	Total Federal/State Cost (7)
Outreach & Other PATH Activities	Pima County	Fuel for PATH 2 vehicles @ \$83.33 per month x 12 months		\$1,485	\$515	\$2,000
Total Request				\$1,485	\$515	\$2,000

Travel Narrative: This is the cost of gasoline for the PATH program vehicles to perform PATH activities including outreach, picking up blankets and other items provided by TPCH (Tucson-Pima Collaboration to End Homelessness), transportation to staff trainings, and transporting PATH-enrolled individuals to appointments when necessary.

D. Equipment

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
Total R	\$0	\$0	\$0	

Equipment Narrative:

E. Supplies

Item	Calculation	Federal PATH	Non-Federal	Total
(1)	(2)	(3)	(4)	(5)
Hygiene Kits	1 case = 30 kits @\$84 plus \$25.69 shipping & tax This gives us approximately 64 cases of kits for clients	\$5,211	\$1,809	\$7,020

PATH Budget Narrative & Justification County Coverage: Pima County

Contract Period: July 1, 2024 through June 30, 2025

Bus Passes/Various client supplies	Trip and monthly bus passes, supplies i.e. scarves, beanies, socks, underwear, water, granola bars, backpacks, sunglasses, reading glasses	\$11,244	\$3,903	\$15,147
Total R	Request	\$16,455	\$5,712	\$22,167

PATH Budget Narrative & Justification County Coverage: Pima County Contract Period: July 1, 2024 through June 30, 2025

F. Housing:

If requesting rent, please fill out & submit rent worksheet.

Housing Assistance (1)	Calculation (2)	Federal PATH Request (3)	Non- Federal State Match (4)	Total Federal/State Cost (5)
Total Reque	est	\$0	\$0	\$0

Housing Narrative:

G. Other Operating:

In the case of a subcontract relationship, costs must be broken down in detail and a narrative justification provided. A separate itemized budget is required for each contractor. If applicable, the number of clients should be included in the costs. Also, please break down PATH enrollee expenses here.

Item (1)	Calculation (2)	Federal PATH Request (3)	Non-Federal State Match (4)	Total Federal/State Cost (5)
Drop-In Center Rent Expenses	\$1,250 per month x 12 months, 50% charged to the drop- in center	\$5,567	\$1,933	\$7,500
Drop-In Center Utilities	\$166.67 per month x 12 months, 50% charged to the drop- in center	\$742	\$258	\$1,000
Training and Conference Fees	5 staff @ \$100 each	\$371	\$129	\$500
Emergency program Supplies (Birth Certificates and others)	For emergency needs (receipts will be submitted)	\$148	\$52	\$200
Vehicle License	2 Vehicles x \$250 per year	\$371	\$129	\$500
Vehicle Maintenance	\$1,000 x 2 Vehicles	\$1,485	\$515	\$2,000

PATH Budget Narrative & Justification County Coverage: Pima County

Contract Period: July 1, 2024 through June 30, 2025

\$383 per month x 12 months -> rounded up to allow for possible increase of insurance policy	\$3,712	\$1,288	\$5,000
\$91.67 per month x 12 months	\$817	\$283	\$1,100
Total Software cost x 1.10%	\$9,093	\$3,157	\$12,250
6 staff x \$55.28 per month x 12 months	\$2,954	\$1,026	\$3,980
	\$25,260	\$8,770	\$34,030
		1,	
		1	
	months -> rounded up to allow for possible increase of insurance policy \$91.67 per month x 12 months Total Software cost x 1.10% 6 staff x \$55.28 per	months -> rounded up to allow for possible increase of insurance policy \$91.67 per month x 12 months Total Software cost x 1.10% 6 staff x \$55.28 per month x 12 months \$25,260	months -> rounded up to allow for possible increase of insurance policy \$91.67 per month x 12 months Total Software cost x 1.10% \$283 \$3,157 \$1,026

PATH Budget Narrative & Justification County Coverage: Pima County

Contract Period: July 1, 2024 through June 30, 2025

Other Narrative: These items include rent and utilities that will be billed for the drop-in center portion of the program space. Staff office rent and utilities costs and Central Alarm to provide security services to the PATH drop-in and offices are factored into the indirect rate. The vehicle license, maintenance, and insurance costs ensure that two PATH vehicles are available for PATH-related activities including outreach, picking up blankets and other items provided by TPCH (Tucson-Pima Collaboration to End Homelessness), transportation to staff trainings, and transporting PATH-enrolled individuals to appointments when necessary. Computer software and phones are used to conduct PATH activities such as maintaining PATH program data records, assisting PATH enrolled clients with housing assessments and finding up-to-date resource information both at the office and in the field. Funds for training and conferences will be used to equip staff with knowledge and skills that enrich the services being provided to PATH-enrolled clients and improve the quality of the HMIS data that represents those services. Emergency supplies are used for emergency needs- for example, urgently required birth certificates or IDs when other resources cannot be utilized in a timely manner.

H. Total Direct Charges

Total Direct Charges (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
(sum of A-I)	\$246,389	\$85,538	\$331,927

I. <u>Indirect Cost Rate (See Footnote below):</u>

Calculation (1)	Federal PATH Request (2)	Non-Federal State Match (3)	Total Federal/State Cost (4)
16.6% Indirect x \$331,926	\$40,889	\$14,211	\$55,100
Total Request	\$40,889	\$14,211	\$55,100

Indirect Narrative: The current IDC will expire 6/30/23, and La Frontera will provide an updated copy to AHCCCS upon availability.

FOOTNOTE:

- (1) Please specify whether utilizing indirect or administrative overhead.
- (2) For administrative overhead, please provide a justification of costs included in administration.
- (3) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-federal entities is subject to Uniform Guidance, 20 CFR 200.414.

PATH Budget Narrative & Justification

County Coverage: Pima County Contract Period: July 1, 2024 through June 30, 2025

J. Total Project Costs:

TOTAL REQUEST – TOTAL PROJECT COSTS (1)	Federal Request	Non-Federal Match	Total Cost
	(2)	(3)	(4)
(Sum of Total Direct Costs and Indirect (Or Admin) Costs)	\$287,278	\$99,749	\$387,027



Projects for Assistance in Transition From Homelessness (PATH) Budget Outline

PATH Contractor Name: Contract Reporting Period:		La Frontera	July 1, 2024 - June	30, 202	25								
County Service Area	List				ERAL PATH GRANT		EDERAL MATCH	FEI	TOTAL DERAL/STATE	II	N-KIND	IN-F	NTRACTOR KIND, IF LICABLE
PERSONNEL													
Position	Name	Salary	Level Of Effort		10.000		11.010	_	57.500				
PATH Administrator Feam Leader	Valerie Grothe Chris Jordan	\$57,500 \$39,520	1.00 1.00	\$	42,682 29,336	\$	14,818 10,184	\$	57,500 39,520	\$	-	\$	
Outreach Specialist(s)	Nadia Keiser	\$39,320	1.00	\$	23,160	\$	8,040		31,200	\$		\$	
out cust openius (s)	Monique Pina	\$29,432	1.00	\$	21,847	\$	7,585	\$	29,432	Ψ		Ψ	
	Vacant	\$29,432	1.00	\$	21,847	\$	7,585	\$	29,432				
Data Specialist	Lupita Hernandez	\$29,432	1.00	\$	21,847	\$	7,585	\$	29,432	\$	-	\$	
rogram Supervisor										\$	-	\$	
Other								\$		\$	-	\$	
TOTAL PERSONNEL			6.0	\$	160,719	\$	55,797	\$	216,516	\$	-	\$	
MPLOYEE RELATED EXPEN	SES (ERE)												
TOTAL ERE	26.425%			\$	42,470	\$	14,744	\$	57,214			\$	
					•				,				
ROFESSIONAL AND OUTSID	E SERVICES			\$		\$		\$		\$		\$	
				\$	-	\$	-	\$	-	\$	-	\$	
TOTAL PROF & OUTSID	E			\$	-	\$	-	\$	-	\$	-	\$	
RAVEL												_	
Mileage Reimbursement @.655/				Ф.	1 105	•	E1E	\$	- 2.000	\$	-	\$	
Sas (100% PATH dedicated Vel Out of State Travel - Airfare	nicies)			\$	1,485	\$	515	\$	2,000	Ф	-	\$	
out of State Travel - Lodging													
ut of State Travel - Per Diem		-											
ut of State Travel - Ground Tra	nsportation/Misc												
TOTAL TRAVEL				\$	1,485	\$	515	\$	2,000	\$	-	\$	
CCUPANCY													
rop-In Center Rent Expenses				\$	5,567	\$	1,933	\$	7,500	\$		\$	
rop-In Center Utilities				\$	742	\$	258	\$	1,000	\$		\$	
TOTAL OCCUPANCY				\$	6,309	\$	2,191	\$	8,500	\$	-	\$	
							, -		,,,,,,				
OUSING (Limited to 20% as o	defined in PATH L	egislation)											
lousing Assistance (1)				\$	A - `	\$	-	\$	-	\$	-	\$	
TOTAL HOUSING				\$		\$	-	\$	-	\$	-	\$	
ATH ENROLLEE	4 14 1												
etty Cash for Emergencies (Mu outpatient Services	ist submit receipt	is with CERS)		\$		\$	/ ·	\$		\$	<u> </u>	\$	
ledication Supplies				\$		\$	1	\$	-	\$	-	\$	
rescription Co-pays				\$	-	\$	- 4	\$	-	\$	-	\$	
tility Turn-on's				\$	-	\$		\$	-	\$	-	\$	
mergency Items - sunscreen, t	hongs			\$	11,244	\$	3,903	\$	15,147	\$	-	\$	
ledical Contract Services				\$	-	\$	-	\$	7,000	\$	-	\$	
ygene kits				\$	5,211	\$	1,809	\$	7,020	\$	-	\$	
lient Supplies - Bus tokens lient Supplies - PATH Enrolle	trac nhones			\$		\$		\$		\$	-	\$	
TOTAL PATH ENROLLE				\$	16,455	\$	5,712	\$	22,167	\$		\$	
	-			Ľ	10,400	Ľ	J,1 12		22,107	Ĭ		· · ·	
THER OPERATING					074		100	^	500				
ehicle Licenses ehicle GPS System				\$	371	\$	129	\$	500	\$		\$	
enicie GPS System ehicle Maintenance				\$	1,485	\$	- 515	\$	2,000	\$		\$	
ehicle Insurance				\$	3,712	\$	1,288	\$	5,000	\$		\$	
eased Vehicle				\$	-	\$	-	\$	-	\$	-	<u> </u>	
aining and Conference Fees				\$	371	\$	129	\$	500	\$	-	\$	
opying				\$	-	\$	-	\$	-	\$	-	\$	
mergency Program Supplies				\$	148	\$	52	\$	200	\$	-	\$	
rop-In Center Phones				\$	817	\$	283	\$	1,100	\$	-	\$	
ecurity initorial				\$	-	\$	-	\$	-	\$		\$	
andscaping				\$		\$		\$	-	\$		\$	
esk/Laptop Computers				\$	-	\$	-	\$	-	\$	-	\$	
MIS Licenses				\$	-	\$	-	\$	-	\$		\$	
oftware				\$	9,093	\$	3,157	\$	12,250	\$	-	\$	
ostage	- (5.4 41-1 1			\$		\$	4 000	\$	-	\$	-	\$	
ATH Staff Cell Phone Purchas TOTAL OTHER OPERAT				\$ \$	2,954 18,951	\$ \$	1,026 6,579	\$ \$	3,980 25,530	\$ \$		\$	
				Ť	10,301	*	3,013	*	20,000	Ľ		Ť	
IDIRECT OR ADMINISTRATIV	/E OVERHEAD ⁽²⁾	(3)(4)	01/01/41	\$	40,889	\$	14,211	\$	55,100	\$	-	\$	
DIRECT OR ADMINISTRATIV	/E OVERHEAD PE	ERCENTAGE (د)(3)(4)	1	16.60%		%		0.00%		0.00%	0	.00%
				FE	EDERAL	ST	ATE		TOTAL		IN	I-KIND	
		GRAND TOTA	\L	\$	287,278	\$	99,749	\$	387,027	\$	-	\$	

Projects for Assistance in Transition From Homelessness (PATH) Budget Outline

FOOTNOTES:

- ⁽¹⁾ Please specify the types of housing assistance included in this line item.
- $\ensuremath{^{(2)}}$ Please specify whether utilizing indirect or administrative overhead.
- $\overset{\cdot}{\text{(3)}}$ For administrative overhead, please provide a justification of costs included in administration.
- (4) For indirect costs, please specify if using the de minimis rate or provide a copy of the approved indirect cost agreement. The de minimis rate of 10 percent for non-Federal entities is subject to Uniform Guidance, 2 CFR 200.414.

Additional Requirements:

A. All travel costs must comply with Arizona State Travel Policy which can be found at the following link: https://gao.az.gov/travel/welcome-gao-travel. AHCCCS requires detailed receipts for reimbursement of travel expenditures.

- B. Contractor must submit monthly tracking logs & receipts for Trac phones, gift cards, bus tokens, petty cash, and other items as required by AHCCCS.
- C. Contractor budget is subject to 2 CFR Grants & Agreements, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements as codified by HHS 45 CFR Part 75 for federal funds



Footnotes:

FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2



III. State Level Information

A. Operational Definitions

Term	Definition
	AHCCCS defines an individual experiencing homelessness utilizing U.S. Department of Housing and Urban Development (HUD)'s Literally Homeless definition: Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: Has a primary nighttime residence that is a public or private place not meant for human habitation,
Individual Experiencing Homelessness:	Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs), and Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency
	shelter or place not meant for human habitation immediately before entering that institution.
	AHCCCS defines an individual experiencing homelessness utilizing U.S. Department of Housing and Urban Development (HUD)'s definition:
	Imminent Risk of Homelessness includes one or more of the following criteria:
	Doubled up living arrangements where the individual's name is not on the lease,
Imminent Risk of Becoming Homeless:	Living in a condemned building without a place to move,
	Arrears in rent/utility payments,
	Having received an eviction notice without a place to move,
	Living in temporary or transitional housing that carries time limits, and
	Being discharged from a health care or criminal justice institution without a place to live.
Serious Mental Illness (SMI):	"Seriously mentally ill" means persons who as a result of a mental disorder as defined in section A.R.S. §36-501 to exhibit emotional or behavioral functioning that is so impaired as to interfere substantially with their capacity to remain in the community without supportive treatment or services of a long-term or indefinite duration. In these persons, the mental disability is severe and persistent, resulting in a long-term limitation of their functional capacities for primary activities of daily living such as interpersonal relationships, homemaking, self-care, employment, and recreation.
	For additional information regarding Arizona's Serious Mental Illness (SMI) designation, refer to AHCCCS Medical Policy Manual (AMPM) Serious Mental Illness Eligibility Determination at: https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320P.pdf
	AHCCCS defines an individual with co-occurring with SMI and SUD as individual(s)s who have a qualifying SMI diagnosis and co-occurring substance use, for purposes of SMI Eligibility Determination, presumption of functional impairment is as follows:
	For psychotic diagnoses (bipolar I disorder with psychotic features, delusional disorder, major depression, recurrent, severe, with psychotic features, schizophrenia, schizoaffective disorder, and psychotic disorder not due to a substance or known psychological condition) functional impairment is

presumed to be due to the qualifying psychiatric diagnosis.

For other major mental disorders (bipolar disorders, major depression, and obsessive-compulsive disorder), functional impairment is presumed to be due to the psychiatric diagnosis, unless:

- a. The severity, frequency, duration, or characteristics of symptoms contributing to the functional impairment cannot be attributed to the qualifying mental health diagnosis, or
- b. The assessor can demonstrate, based on a historical or prospective period of treatment, that the functional impairment is present only when the individual is abusing substances or experiencing symptoms of withdrawal from substances.

For all other mental disorders not covered above, functional impairment is presumed to be due to the co-occurring substance use unless:

- a. The symptoms contributing to the functional impairment cannot be attributed to the substance use disorder, or
- b. The functional impairment is present during a period of cessation of the co-occurring substance use of at least 30 calendar days, or
- c. The functional impairment is present during a period of at least 90 calendar days of reduced use and is unlikely to cause the symptoms or level of dysfunction.

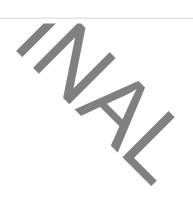
 For more information refer to AHCCCS Medical Policy Manual (AMPM) Section E at:

https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320P.pdf

FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:

Co-occurring Disorders (COD):



III. State Level Information

B. Collaboration

Narrative Question:

Describe how the state will implement a collaborative relationship with the department/office responsible for providing housing to qualifying residents. Describe how PATH funds supporting care and treatment for individuals experiencing homelessness or individuals with serious mental illness who are marginally housed will be served such that there is coordination of service provision to address needs impacted by SMI and provision of permanent housing for those being served with grant funds is prioritized and assured.

FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:



B. Collaboration

Describe how the state will implement a collaborative relationship with the department/office responsible for providing housing to qualifying residents. Describe how PATH funds supporting care and treatment for individuals experiencing homelessness or individuals with serious mental illness who are marginally housed will be served such that there is coordination of service provision to address needs impacted by SMI and provision of permanent housing for those being served with grant funds is prioritized and assured.

There are a number of programs at the state, county, and city levels responsible for providing housing for qualifying residents including persons experiencing homelessness and those determined SMI. There is no single office or department, therefore the PATH program administered by Arizona Health Care Cost Containment System (AHCCCS) and the contracted PATH providers implement collaborative relationships at multiple levels.

AHCCCS is Arizona's Medicaid program, a federal health care program jointly funded by the federal and state governments for individuals and families who qualify based on income level.

Built on a system of competition and choice, AHCCCS is a \$22 billion program that operates under an integrated managed care model, through a Research and Demonstration 1115 Waiver. Contracted health plans coordinate and pay for physical and behavioral health care services delivered by more than 93,000 health care providers for more than 2.2 million Arizonans.

- **Mission:** Reaching across Arizona to provide comprehensive, quality health care to those in need.
- Vision: Shaping tomorrow's managed care...from today's experience, quality, and innovation.
- Values: Passion, Community, Quality, Respect, Accountability, Innovation, Teamwork, Leadership
- Credo: Our first care is your health care.

In addition to the PATH program, AHCCCS provides several permanent supportive housing programs throughout Arizona alongside supportive health services to help members in need. Our housing programs are provided to members with a designation of Serious Mental Illness (SMI) and some services are provide for members with a General Mental Health and/or Substance Use Disorder (GMHSUD). Providing supportive housing services not only helps members gain and maintain housing, but it also helps lower utilization of emergency and crisis services. AHCCCS provides supportive housing services to approximately 3,000 members across the state. AHCCCS subcontracts with Arizona Complete Care - Regional Behavioral Health Agreements (ACC-RBHAs) for the delivery of treatment, rehabilitation, psychoeducational, employment, medical, support, peer and recovery support, and Permanent Supportive Housing Services statewide. The housing department and PATH are in the Division of Grants and Innovation at AHCCCS allowing the programs to seamlessly partner on strategies to identify, outreach, and engage the PATH population and ensure that referral pathways promote access to quality care and that providers are working together to meet the holistic needs of members.

Additional information related to the housing programs at AHCCCS can be found here: https://www.azahcccs.gov/AHCCCS/Initiatives/AHP/

Additional information related to the PATH program at AHCCCS can be found here: https://www.azahcccs.gov/Resources/Grants/PATH/PATH.html

Arizona Department of Housing (ADOH)

The ADOH was established in 2002 to administer programs that create, preserve, and invest in affordable housing statewide, fund housing and community revitalization, and aid in building stronger communities to benefit all Arizonans. The majority of the agency's programs are federally funded. The agency is also home to the Arizona Housing Finance Authority and the Arizona Home Foreclosure Prevention Funding Corporation. ADOH administers the State Housing Trust fund to develop affordable housing, including units targeted to persons experiencing homelessness and other special populations. Their Homeless/Special Needs division enables the agency to address the housing needs of populations that require a more comprehensive approach to housing stability beyond basic affordable housing opportunities including those living with HIV/AIDS, serious mental illness, chronic substance abuse, persons and families who are homeless, and victims of domestic violence.

ADOH serves as the Collaborative Applicant and Homeless Management Information System (HMIS) lead agency for the Continuum of Care for the 13 non-metro counites in the state. A Continuum of Care (CoC) is a community planning process to organize and deliver housing and services to meet the specific needs of people experiencing homelessness as they move to stable housing and maximum self-sufficiency. The Continuum of Care process was established by the U.S. Department of Housing and Urban Development (HUD) to enable localities to apply to the federal government for McKinney-Vento Homeless Assistance Act competitive grant programs. This process brings together local governments, community businesses, faith-based organizations, non-profits, and current and/or formerly homeless persons to develop local solutions to end homelessness. Annually, the agency applies for competitive funding to HUD for projects and programs identified as priority needs through the Continuum process. ADOH then acts as the administering agency for the grants that are passed through to the participating subrecipients. Over the years, ADOH has secured millions of dollars in funding for transitional and permanent housing programs.

AHCCCS and ADOH collaborate on a number of housing initiatives. The PATH Administrator attends the Balance of State (BOS) Continuum of Care (CoC) meetings to assist in coordination, and prioritization of SMI members for CoC Housing opportunities. AHCCCS also works closely with ADOH to identify needs and develop additional housing options for members throughout Arizona.

Arizona has three HUD Continuums of Care: Maricopa County, Pima County/Tucson, and Balance of State. The AHCCCS PATH Administrator participates in all three Continuums of Care leadership and governance. PATH providers are also required to participate in CoC housing coordination activities to identify, engage and house the qualifying population of homeless persons determined SMI or in need of assessment within their Geographic Service Areas

(GSAs). PATH providers also participate in the CoC HMIS systems and Coordinated Entry Systems to ensure that PATH identified members are prioritized and included for eligible housing in the CoC housing pool. Each of the CoCs has several designated units restricted for SMI members and by participating in CoC activities, PATH Administrator and PATH providers actively coordinate these housing opportunities for qualifying members. Through CoC coordination, the PATH providers are in communication with local Public Housing Authorities and locally managed federal pass-through housing programs including HUD, CDBG, and HCV programs, locally funded programs, and veterans' programs.

Through these multiple efforts, the PATH Administrator at AHCCCS and the statewide team of PATH providers coordinate all levels to ensure that qualifying members have access to adequate and appropriate housing opportunities.

For more information on the policy for housing, please visit: https://www.azahcccs.gov/shares/Downloads/ACOM/PolicyFiles/400/448.pdf

Describe how PATH funds supporting care and treatment for individuals experiencing homelessness or individuals with serious mental illness who are marginally housed will be served such that there is coordination of service provision to address needs impacted by SMI and provision of permanent housing for those being served with grant funds is prioritized and assured.

PATH funds are used for outreach, engagement, referral, and supported housing services for those individuals who meet the PATH eligibility criteria. Once the individual consents to being enrolled in the PATH program, the enrollee and the PATH outreach worker will create a case plan and make referrals for continuum of care services. The PATH contractor is expected to document a sustainability plan to ensure the PATH enrollee have the support necessary to maintain their housing.

AHCCCS contractually requires each PATH contractor to develop relationships with all housing agencies within their geographic service area. This is evident in each PATH contractor's intended use plan and monitored through monthly, quarterly, and annual reports.

Activities PATH contractors conduct includes but are not limited to:

- Coordinate SMI/Co-Occurring health care, benefits assistance, medical care, emergency, transitional, and permanent housing,
- Conduct and/or participate in community events,
- Attend Housing and Urban Development (HUD) Continuum of Cares meetings (Local Coalitions to End Homelessness),
- Develop a partnership with the respective geographic services area's County Association of Governments, HUD Continuum of Care Homeless Service Providers,

- Develop a working relationship with the respective awarded area's local police, County Sheriff's Departments, ACC/AIHP/ACC-RBHA/TRBHAs and homeless service providers at the homeless resource centers and shelters,
- Develop working relationships with various faith-based organization, homeless veteran groups, food bank, clothing banks and other non-profit providers who are operating housing and meal programs for homeless individuals,
- Referrals: All referrals must be tracked in the Homeless Management Information System (HMIS), These referrals include, Relevant Housing Services, Permanent Housing, and Temporary Housing, and
- Track in HMIS the number of persons referred to and attaining housing.



III. State Level Information

C. Veterans

Narrative Question:

Describe how the state gives consideration in awarding PATH funds to entities with demonstrated effectiveness in serving veterans experiencing homelessness.

FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:



C. Veterans

Describe how the state gives consideration in awarding PATH funds to entities with demonstrated effectiveness in serving veterans experiencing homelessness.

AHCCCS requires that all PATH contractors form working relationships with the veterans agencies in the Geographic Service Area (GSA) they serve. Partnerships are evident by memorandum of understanding, letters of commitments, or letters of support submitted yearly with their intended use plans. These partnerships include but are not limited to Veterans Administration Medical Centers, State Veterans' Services, and the veterans/veteran organizations in their communities to assist with the coordination of services for homeless veterans. This includes coordination of physical and behavioral health services, mainstream benefits assistance, emergency, transitional and permanent housing available specifically to homeless veterans as well as participation in Standdowns and/or other events in their respective communities. PATH providers consistently collaborate with each of their veteran agencies and hospitals in their respective area to increase the location and services to veterans who meet the PATH eligibility criteria.

This is monitored through quarterly and annual reporting by PATH contractors to AHCCCS in addition to review of documentation and interviews conducted during site visits.

III. State Level Information

D. Alignment with PATH Goals

Narrative Question:

Describe how the services to be provided using PATH funds will target outreach and case management as priority services; including serving the most vulnerable adults who are **literally** and **chronically** homeless, and to individuals with a history of incarceration.

FY 2024 PATH FOA Catalog No.: 93.150 FOA No.: SM-24-F2

Footnotes:



D. Alignment with PATH Goals

Describe how the services to be provided using PATH funds will target street outreach and case management as priority services including serving the most vulnerable adults who are literally and chronically homeless and to individuals with a history of incarceration.

PATH funding is available for the PATH providers and their staff to build their knowledge, awareness and skills around street outreach and case management for all Arizonans experiencing homelessness.

PATH provider outreach teams prioritize **street outreach** for vulnerable adults who are literally and chronically homeless. Focus is on those individuals who are hardest to serve regularly leading them to outreach in places they camp in order to engage them with the purpose of referring them for behavioral health treatment. PATH teams use a variety of methods for outreach; the majority of their time is spent outreaching in densely populated areas of homelessness such as river bottoms, parks, streets, bridges, and industrial zones and determine if outreach will be on foot or mobile. PATH outreach teams may provide other assistance during outreach such as bus passes or transportation assistance as a means to connect PATH enrolled individuals to resources or attend designated appointments or services.

It often takes multiple contacts and intensive **case management** to get individual(s) to apply for services. Once the individual is enrolled into the PATH program, the outreach team will conduct an initial assessment utilizing the Vulnerability Index and Service Prioritization Decision Tool (VI-SPDAT).

AHCCCS defines case management as a supportive service provided to enhance treatment goals and effectiveness. Activities may include:

Case Management (provider level) is a supportive service provided to improve treatment outcomes. Examples of case management activities to meet member's Service Plan goals include:

- Assistance in maintaining, monitoring, and modifying behavioral health services,
- Assistance in finding necessary resources other than behavioral health services,
- Coordination of care with the member's healthcare providers, Family, community resources, and other involved supports including educational, social, judicial, criminal justice system, community, and other State agencies,
- Coordination of care activities related to continuity of care between levels of care (e.g., inpatient to outpatient care) and across multiple services (e.g., personal assistant, nursing services, and family counseling),
- Assisting members in applying for Social Security benefits when using the SSI/SSDI Outreach, Access, and Recovery (SOAR) approach. SOAR activities may include:
 - o Face-to-face meetings with member,
 - o Phone contact with member, and

- Face-to-face and phone contact with records and data sources (e.g., jail staff, hospitals, treatment providers, schools, Disability Determination Services, Social Security Administration, physicians).
- For provider case management to facilitate a Child and Family Team (CFT), the modifier U1 is required,
- SOAR services shall only be provided by staff certified in SOAR through SAMHSA SOAR
 Technical Assistance Center. Additionally, when using the SOAR approach, billable
 activities do not include completion of SOAR paperwork with member present, copying of
 faxing paperwork, assisting members with applying for benefits without using the SOAR
 approach, and email.
- For provider case management utilized when assisting members in applying for Social Security benefits (using the SSI/SSDI Outreach, Access, and Recovery (SOAR) approach) the modifier HK is required. Billing T1016 with an HK modifier indicates the specific usage of the SOAR approach, and it cannot be used for any other service,
- Outreach and follow-up of crisis contacts and missed appointments, and
- Participation in staffing, case conferences, or other meetings with or without the member or their Family participating.

For more information, please visit

 $\underline{https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/310B.pdf.}$

Arizona PATH contractors have identified the Best Practices their agencies use to implement their programs within their individual Intended Use Plan (IUP) to achieve the programs goals. Each provider is responsible for participating in the necessary training for the Best Practices identified.

SSI/SSDI Outreach, Access and Recovery (SOAR) is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and is a national program designed to increase access to the disability income benefit programs administered by the Social Security Administration (SSA) for eligible adults who are experiencing or at risk of homelessness and have a serious mental illness, medical impairment, and/or a co-occurring substance use disorder.

Motivation Interviewing (MI) is a counseling method that helps people resolve ambivalent feelings and insecurities to find the internal motivation they need to change their behavior. It is a practical, empathetic, and short-term process that takes into consideration how difficult it is to make life changes. MI has evidence that it is effective with individuals who are homeless, experiencing addiction, participating in integrated health (physical and mental health), etc.

Critical Time Intervention (CTI) is a time-limited evidence-based practice that mobilizes support for society's most vulnerable individuals during periods of transition. It facilitates community integration and continuity of care by ensuring that a person has enduring ties to their community and support systems during these critical periods. CTI has been applied with veterans, people living with mental illness, people who have been homeless or in prison, and many other groups. The model has been widely used on four continents.

Harm Reduction is a set of strategies and ideas aimed to reduce the adverse health, social and economic consequences of the use of legal and illegal psychoactive drugs without necessarily reducing drug consumption.

Trauma Informed Care (TIC) according to SAMHSA is, "A program, organization, or system that is trauma-informed: (1) *Realizes* the widespread impact of trauma and understands potential paths for recovery; (2) Recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; (3) *Responds* by fully integrating knowledge about trauma into policies, procedures, and practices; and (4) Seeks to actively resist *re-traumatization*."

A trauma-informed approach can be implemented in any type of service setting or organization and is distinct from trauma-specific interventions or treatments that are designed specifically to address the consequences of trauma and to facilitate healing. SAMHSA also promotes trauma-informed care for people experiencing homelessness that have been exposed to physical and sexual abuse.

Housing First (HF) is a homeless assistance approach that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can pursue personal goals and improve their quality of life. This approach is guided by the belief that people need basic necessities like food and a place to live before attending to anything less critical, such as getting a job, budgeting properly, or attending to substance use issues. Additionally, Housing First is based on the theory that client choice is valuable in housing selection and supportive service participation, and that exercising that choice is likely to make a client more successful in remaining housed and improving their life.

Other task/services PATH Outreach teams perform:

- Being the point of contact for food, clothing, water, blankets, shelter and basic living skills.
- Linkages with the behavioral health system,
- Assistance in getting prescriptions filled,
- Assistance with the behavioral health system and/or substance use treatment enrollment,
- Referral for aftercare support including but not limited to case management, housing and transportation,
- Assistance in obtaining medical records, picture identification, social security cards and affordable housing,
- Field assessment and evaluations,
- Intake assistance/emergent and non-emergent triage,
- Transportation assistance (bus tokens and transporting),
- Assistance in meeting basic living skills,
- Move In assistance,
- Housing dollars for permanent placements,
- Transition into the AHCCCS Complete Care (ACC) Health Plan, the American Indian Health Program (AIHP), Regional Behavioral Health Authority (RBHA) and/or Tribal Regional Behavioral Health Authority (TRBHA) for physical and/or behavioral health treatment, and

• Assistance in locating cooling or heating and water stations during extreme heat and winter alerts.

For more information, please visit:

https://azahcccs.gov/PlansProviders/Downloads/GM/SMIPortalUserManual.pdf



III. State Level Information

E. Alignment with State Comprehensive Mental Health Services Plan

Narrative Question:

Describe how the services to be provided using PATH funds are consistent with the State Comprehensive Mental Health Services Plans.

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Footnotes:



E. Alignment with State Comprehensive Mental Health Services Plan

Describe how the services to be provided using PATH funds are consistent with the State Comprehensive Mental Health Services Plans.

AHCCCS is the single state Medicaid agency for the State of Arizona. In that capacity, it is responsible for operating the Title XIX and Title XXI programs through the State's 1115 Research and Demonstration Waiver granted by the Centers for Medicare and Medicaid Services (CMS), U.S. Department of Health and Human Services (HHS). Built on a system of competition and choice, AHCCCS is a \$22 billion program that operates under an integrated managed care model, serving 2.2 million Arizonans. On October 1, 2018, AHCCCS implemented a managed care product focused on offering fully integrated behavioral and physical health care services to the majority of the AHCCCS population. As of August 1, 2023, over 1.9 million members were served by an AHCCCS Complete Care-Regional Behavioral Health Agreements (ACC-RBHAs). The ACC-RBHAs coordinate and pay for physical and behavioral health care services delivered by more than 93,000 health care providers. AHCCCS administrates, monitors, and oversees several Non-Title XIX programs through federal grant funds received from the Substance Abuse and Mental Health Services Administration (SAMHSA) under The United States Department of Health and Human Services.

The AHCCCS Strategic Plan for 2023-2027 outlines the AHCCCS vision, mission, and core values in addition to an overview of the programs and populations served and a review of accomplishments during the past fiscal year, and a description of the strategic goals which drive AHCCCS operations.

The Plan identifies three strategic goals for AHCCCS:

- 1. Provide equitable access to high quality, whole person care,
- 2. Implement solutions that ensure optimal member and provider experience, and
- 3. Maintain core organizational capacity, infrastructure and workforce planning that effectively serves AHCCCS operations.

For more information about the AHCCCS Strategic Plan and successes, please visit: https://www.azahcccs.gov/AHCCCS/Downloads/Plans/STRATEGICPLANSTATEFISCALYE ARS20232027.pdf

AHCCCS offers a comprehensive array of behavioral health services to assist, support and encourage each PATH enrolled individual to achieve and maintain the highest possible level of health and self-sufficiency.

The PATH Grant can work in tandem with the AHCCCS strategic plan by working towards:

- 1. Increasing access to high-quality behavioral health services for persons living with a Serious Mental Illness (SMI) designation.
- 2. Decreasing the number of adults living with an SMI designation who are chronically and/or literally homeless or living in shelters.
- 3. Increasing the availability of housing supports and services and fostering referral pathways for individuals living with an SMI designation to obtain and sustain housing.



III. State Level Information

F. Process for Providing Public Notice

Narrative Question:

Describe the process for providing public notice to allow interested parties (e.g., family members; individuals who are PATH-eligible; mental health, substance use disorder, and housing agencies; the general public) to review the proposed use of PATH funds including any subsequent revisions to the application. Describe opportunities for these parties to present comments and recommendations prior to submission of the state PATH application to SAMHSA.

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Footnotes:



F. Process for Providing Public Notice

Describe the process for providing public notice to allow interested parties, (e.g., family members, individuals who are PATH-eligible and mental health, substance use disorder and housing agencies; and the general public) to review the proposed use of PATH fund (including any subsequent revisions to the application). Describe opportunities for these parties to present comments and recommendations prior to submission of the State PATH application to SAMHSA.

Upon completion of the PATH application, the AHCCCS Division of Grants & Innovation (DGI) will post the PATH application on its website for public comment: https://www.azahcccs.gov/Resources/Grants/

The AHCCCS PATH Administrator (APA) accepts public comments throughout the year as they relate to the posted application and assess recommendations for incorporation into the following year's application. The PATH Administrator actively collaborates with the AHCCCS Housing Program for integration and collaboration in services provided. The PATH program, Housing Program, Substance Use Block Grant, Mental Health Block Grant, and Integrated System of Care are all housed within the AHCCCS Division of Grants & Innovation, allowing for multidisciplinary and multisystemic collaboration and consultation regarding initiatives, operations, policy/procedures, and status of member needs and services.

Contact information for the APA is included on all posted PATH Applications and general communications for interested parties to provide feedback. AHCCCS will post the PATH application for public comment three to five business days prior to submission under the Behavioral Health tab located here: https://www.azaheccs.gov/AHCCCS/PublicNotices/

G. Programmatic and Financial Oversight

Narrative Question:

Describe how the state will provide necessary programmatic and financial oversight of PATH-supported providers, such as site visits, evaluation of performance goals, audits, etc. In cases where the state provides funds through intermediary organizations (i.e., county agencies, regional behavioral health authorities), describe how these organizations will monitor the use of PATH funds.

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G. Programmatic and Financial Oversight-

Describe how the state will provide necessary programmatic and financial oversight of the PATH-supported providers, such as site visits, evaluation of performance goals, audits, etc. In cases where the state provides funds through intermediary organization (i.e. County agencies or regional behavioral health authorities), describe how these organizations conduct monitoring of the use of PATH funds.

The AHCCCS PATH Administrator (APA) and each PATH contractor have individual monthly check-in meetings online at which time funding is an agenda item of discussion, this includes spending to date and spending barriers. The AHCCCS PATH Administrator also conducts regular communication, monthly tracking, monitoring, and meetings with the internal finance team to ensure each contractor is on track for spending down of all funds. If there is a contractor underspending or overspending, this is discussed with the provider during these monthly calls. Barriers to spend or reasons for overspending are problem-solved as needed.

PATH monitors grant related activities through the implementation of monthly, quarterly, and annual deliverables. PATH contractors are required to submit monthly reports utilizing the PATH Data Exchange (PDX) detailing the number of individuals receiving PATH services by census and demographic. These deliverables allow the AHCCCS PATH Administrator to track progress and ensure Intended Use Plan goals are on track to be achieved. An annual narrative and statistical report are due each January to SAMHSA and AHCCCS/DGI. Monthly and annual detailed expenditures reports and a copy of the contractor's audit report (2 CFR 200.501 – Audit Requirements) are also required.

In addition to reporting, PATH contractors are subject to a bi-annual program review per geographic service area. The review consists of an analysis of all aspects of the PATH program for compliance; including chart review, interviews with PATH enrolled individuals and PATH staff, and an outreach ride along for direct observation of outreach and engagement techniques used in enrollment.

AHCCCS/DGI communicates regularly throughout the year with PATH contractors to identify areas of strength and areas that require improvement to ensure the needs of homeless individuals living with a Serious Mental Illness (SMI) designation are addressed in each region. These program reviews allow AHCCCS to ensure implementation currently occurring is aligning with program goals and needs.

H. Selection of PATH Local-Area Providers

Narrative Question:

Describe the method(s) used to allocate PATH funds to areas and providers with the greatest number of individuals who experience homelessness with serious mental illnesses or co-occurring substance use disorders (i.e., through annual competitions, distribution by formula, data driven or other means).

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H. Selection of PATH Local-Area Providers

Describe the method(s) used to allocate PATH funds to areas and providers with the greatest number of individuals who experience homelessness with serious mental illness or co-occurring substance use disorders (i.e. through annual competitions, distribution by formula, data driven or other means.)

Allocation of PATH funds are determined annually through an internal AHCCCS Division of Grant & Innovation (DGI) program and finance department analysis of data including the annual Point-In-Time Homeless Count, population by census, PATH annual report data, previous five years of provider expenditures compared to their practices and outcomes, site visit information, and collaboration with providers regarding barriers and successes throughout the previous year. Arizona currently contracts with four non-profit organizations serving both the major metropolitan centers and frontier communities for the purpose of providing outreach services to people who are living with a Scrious Mental Illness (SMI) designation and/or are living with an SMI designation and a substance use disorder (co-occurring disorder) who are experiencing homelessness or at immigent risk of becoming homeless. Provider reports in PDX and Contractor Expense Reports are reviewed by the PATH Grant Coordinator and Administrator with monthly analysis of each provider's activities, spending, and projection to fully expend their allocation.

I. Location of Individuals with Serious Mental Illnesses or Co-Occurring Disorders who are Experiencing Homelessness

Narrative Question:

Indicate the number of individuals with SMI/COD experiencing homelessness by each region or geographic area of the entire state. Indicate how the numbers were derived and where the selected providers are located on a map.

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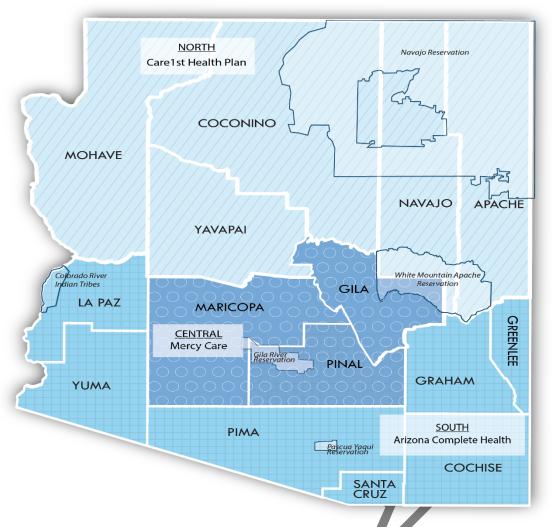
I. Location of Individuals with SMI or Co-Occurring Disorders who are Experiencing Homelessness.

Indicate the number of individuals with SMI/COD experiencing homelessness by each region or geographic area of the entire state. Indicate how the numbers were derived and where the selected providers are located on a map.

Arizona 2023 Point in Time Street & Shelter Count:

GSA	Adults Homeless Unsheltered	Homeless Unsheltered with Serious Mental Illness (data is self- reported)	Homeless Unsheltered with Substance Use Disorder (data is self-reported)
Balance of State (BOS), encompasses 13 counties	1,056	232	458
Maricopa County	9,642	1,333	1,220
Pima County	2,209	515	495

ACC-RBHA/TRBHA Map Effective October 1, 2022



Note: Zip codes 85542, 85192, 85550 representing San Carlos Tribal area are included in the South GSA.

J. Matching Funds

Narrative Question:

Describe the sources of the required PATH match contributions and provide assurances that these contributions will be available at the beginning of the grant period.

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Arizona's required PATH match contributions are made available via the State General Fund Non-Medicaid Seriously Mentally III Services appropriation. These funds are protected by state statute and the contribution is and will be available at the beginning of each grant period.



K. Other Designated Fundings

Narrative Question:

Indicate whether the mental health block grant, substance use prevention, treatment, and recovery services block grant, or general revenue funds are designated specifically for serving eligible individuals.

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K. Other Designated Funding

Indicate whether the mental health block grant, substance use prevention, treatment, and recovery services block grant, or general revenue funds are designated specifically for serving eligible individuals.

- 1. Mental Health Block Grant (MHBG) Funds provided by the MHBG are utilized to serve adults living with a Serious Mental Illness (SMI) designation, children living with Serious Emotional Disturbance (SED), and individuals determined to be experiencing symptomatology consistent with Early Serious Mental Illness (ESMI) including First Episode Psychosis (FEP). Services for individuals with an SMI designation who are also experiencing homelessness or at imminent risk of being homeless are included through use of MHBG dollars. With the member's consent, PATH providers must make referrals for these services as assessed necessary and coordinate services with these providers.
- 2. Substance Use Block Grant (SUBG)- Provisions are made through the SUBG for services to be delivered via street outreach/drop-in centers serving homeless individuals with substance use disorder in addition to other community settings such as probation offices, domestic violence facilities and homeless shelters. SUBG additionally covers treatment services, including MAT, for individuals who do not qualify for Medicaid. With the member's consent, PATH providers must make referrals for these services as assessed necessary and coordinate services with these providers.
- 3. State General Fund Revenue State general funds allocated as a match for PATH federal funds are specifically targeted for individual persons who are experiencing homelessness and have a SMI designation or co-occurring substance use disorder.
- 4. Beginning October 2024, Arizona will begin implementing the AHCCCS Housing and Health Opportunities (H2O) Demonstration. AHCCCS plans to begin implementation with the most acute member population, inclusive of members who are experiencing homelessness, are living with a SMI designation, and are living with an active chronic health condition or are currently in a correctional health facility. AHCCCS plans to leverage previous experiences and existing infrastructure as a starting place to implement the approved H2O services through a structured, phased-in approach.

While the focus of the PATH grant is to reduce or eliminate homelessness for individuals living with a Serious Mental Illness designation, co-occurring substance use disorders, and who are experiencing homelessness or at imminent risk of becoming homeless, AHCCCS braids multiple funding sources to ensure that a person's holistic needs are met, including behavioral health, substance use, and Social Determinants of Health to not only obtain, but also to sustain, permanent housing.

L. Data

Narrative Question:

Describe the state/territories' and providers' participation in HMIS and describe plans for continued training and how the state will support new local-area providers. For any providers not fully participating in HMIS, please include a transition plan with an accompanying timeline for collecting all PATH data in HMIS.

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L. Data

Describe the state/territories and providers' participation in HMIS and describe plans for continued training and how the state will support new local providers. For any providers not fully participating in HMIS, please include a transition plan with an accompanying timeline for collecting all PATH data in HMIS.

All Arizona PATH providers are fully utilizing HMIS for documenting all PATH services. AHCCCS continues to support HMIS training and activities for its contractors, which includes alerting them of SAMHSA Homeless and Housing Resource Network webinars, the Learning Community Webinars, or other beneficial technical assistance opportunities as they become available. Each PATH contractor has a budgeted line item for HMIS support, licenses, and training.

The State of Arizona has three different U.S. Department of Housing and Urban Development (HUD) Continuums of Care (CoC) and each is the HMIS Lead Agency for their respective region. These CoCs complete their own program coordination and planning to end homelessness. PATH contractors are contractually required to actively collaborate and participate on any committees or sub-committees as they relate to PATH. The AHCCCS PATH Administrator monitors this activity through receipt of quarterly and annual reports.

If any data quality issues arise, the HMIS Lead Agency will notify the AHCCCS PATH Administrator and issue(s) will be resolved with collaboration between the PATH contractor, HMIS Lead Agency and the AHCCCS PATH Administrator. The PATH Administrator at AHCCCS meets with the providers monthly to address any identified issues, review successes, and provide guidance/technical support if/as needed.

Arizona CoCs:

Maricopa Association of Governments is the HMIS Lead Agency for Maricopa County. Community Bridges, Inc. PATH program staff member(s) take part in various committees and/or sub-committees. More information regarding the various committees they participate in can be found in their respective Intended Use Plan (IUP).

Tucson Pima Collaboration to End Homelessness is the HMIS Lead Agency for Pima County. La Frontera PATH program staff member(s) take part in various committees and/or subcommittees. More information regarding the various committees they participate in can be found in their respective Intended Use Plan (IUP).

Arizona Department of Housing, Balance of State Continuum of Care is the HMIS Lead Agency for the remaining thirteen counties. Catholic Charities (Mohave, Coconino, and Yavapai Counties) and Good Neighbor Alliance (Cochise County) PATH program staff member(s) take part in various committees and/or sub-committees. More information regarding the various committees they participate in can be found in their respective Intended Use Plan (IUP).

M. Supplemental Security Income/Social Security Disability Insurance (SSI/SSDI) Outreach, Access, Recovery (SOAR)

Narrative Question:

Describe how the state encourages provider staff to be trained in SOAR. Indicate the number of PATH providers who have at least one trained SOAR staff. If the state does not use SOAR, describe state efforts to ensure client applications for mainstream benefits are completed, reviewed, and a determination made in a timely manner.

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M. SSI/SSDI Outreach, Access and Recovery (SOAR)

Describe how the state encourages provider staff to be trained in SOAR. Indicate the number of PATH providers who have at least one trained SOAR staff. If the state does not use SOAR, describe State efforts to ensure client applications for mainstream benefits are completed, reviewed and a determination made in a timely manner.

AHCCCS has made it a contractual requirement that every PATH funded staff be trained in SOAR. This is monitored by each contractor submitting their staff's certificate of completion of the online SOAR training. Any new staff hired after the annual application date will have 90 days to complete the online SOAR training and submit their certificate of completion to the AHCCCS PATH Administrator.

PATH Contractor	County	Number of Staff Trained
Community Bridges, Inc.	Maricopa County	12
La Frontera	Pima County	3
Good Neighbor Alliance	Cochise County	1
Catholic Charities Community	Mohave, Coconino, and	4
Services	Yavapai County	

By completing the 20 hours of online training, it allows the street outreach worker to have a better understanding of the process and can assist by prescreening and referring participants for SOAR. The PATH contractors have established positive collaborative relationships with the Social Security Administration (SSA) offices in their respective counties/Geographic Service Areas (GSAs).

N. PATH Eligibility and Enrollment

Narrative Question:

Describe how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented.

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N. PATH Eligibility and Enrollment

Describe how PATH eligibility is determined, when enrollment occurs and how eligibility is documented.

The purpose of the PATH Grant is to provide funds for eligible services to individuals who are living with a Serious Mental Illness (SMI) designation or have a co-occurring Substance Use Disorder (SUD) and are experiencing homelessness or are at imminent risk of becoming homeless.

PATH Contractors assess a potential PATH client by establishing rapport and relationships to observe and/or assess for behaviors consistent with an SMI diagnosis; this often occurs over multiple contacts. PATH contractors document the overview of the contact, observed signs, and contact location (assists with future contacts) with the individual experiencing homelessness.

Enrollment begins when the PATH-Eligible individual verbalizes an interest in participation in the PATH program, signs the Homeless Management Information System (HMIS) consent form, and an individual record is created in the HMIS system. The PATH contractor will also ensure the PATH enrollee applies for community physical and behavioral health services such as Medicaid/Medicare, SSI/SSDI, Housing, Temporary Assistance for Needy Families, Food Stamps, medical resources, etc. Services are documented within the individuals case plan and the case plan will be updated as needed or every three (3) months.

The PATH contractor will either complete, make a referral, and/or coordinate care for the individual to engage in the screening process to determine service eligibility. The PATH contractor ensures the screening process is completed and a SMI evaluation is completed within 90 days of enrollment. Those individuals who do not complete an SMI determination within 90 days can remain enrolled for up to six months with evidence of documentation from the PATH Contractor.

A critical component of the AHCCCS service delivery system is the effective and efficient identification of individuals who have special behavioral health service needs due to significant functional impairments resulting from a behavioral health disorder. One such population is individuals with an SMI designation. Without receipt of appropriate intervention, this population of individuals are at a high risk for further deterioration of their physical and mental condition, increased hospitalizations, crisis utilization, potential homelessness, and incarceration.

AHCCCS has developed a standardized process and criteria to determine SMI Eligibility Determination to ensure individuals designated as SMI are promptly identified and enrolled in services. AHCCCS provides statewide coverage for the initial evaluation regardless of the individual's ability to pay and a centralized third-party vendor is responsible for rendering the final SMI Eligibility Determination. For more information about the SMI Determination Process, please visit:

https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320P.pdf

PATH contractors are obligated to have a Memorandum of Understanding (MOU) with each of the Arizona Complete Care - Regional Behavioral Health Agreements (ACC-RBHA) in their respective Geographic Service Area (GSA). The MOU allows for a working relationship to be

understood and collaboration efforts for engaging and/or reengaging the PATH individual for the needed behavioral health and/or substance use services.



PATH Reported Activities

Charitable Choice for PATH

Does your state use PATH funds to fund religiously-affiliated providers to provide substance use treatment services? Yes No No If "Yes" is selected please list providers in text box below and complete the rest of the table
Expenditure Period Start Date: Expenditure Period End Date:
Notice to Program Beneficiaries - Check all that apply
\square Used model notice provided in final regulation.
\square Used notice developed by State (please attach a copy to the Report).
\square State has disseminated notice to religious organizations that are providers.
\square State requires these religious organizations to give notice to all potential beneficiaries.
Referrals to Alternative Services - Check all that apply
\square State has developed specific referral system for this requirement.
\square State has incorporated this requirement into existing referral system(s).
SAMHSA's Treatment Facility Locator is used to help identify providers.
\square Other networks and information systems are used to help identify providers.
\square State maintains record of referrals made by religious organizations that are providers.
Enter total number of referrals necessitated by religious objection to other substance abuse providers (\"alternative providers\"), as defined above, made in previous fiscal year. Provide total only; no information on specific referrals required.
Brief description (one paragraph) of any training for local governments and faith-based and community organizations on
these requirements.
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Footnotes: