I. State Information

State Information

Plan Year

Federal Fiscal Year	2020

State Identification Numbers

DUNS Number	805346798
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	Divison of Grants Administration
Mailing Address	701 East Jefferson MD1900
City	Phoenix
Zip Code	85034

II. Authorized Representative for the PATH Grant

First Name	Karen D.
Last Name	MacLean
Agency Name	Arizona Health Care Cost Containment System
Mailing Address	701 East Jefferson
City	Phoenix
Zip Code	85034
Telephone	602-417-4293
Fax	
Email Address	karenmaclean@azahcccs.gov

III. Expenditure Period

From	7/1/2020
To	6/30/2021

IV. Date Submitted

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

Submission Date	5/21/2020 2:48:36 PM
Revision Date	5/21/2020 2:48:49 PM

V. Contact Person Responsible for Application Submission

First Name	Danelle
Last Name	Valenzuela
Telephone	602-364-4644
Fax	
Email Address	danelle.valenzuela@azahcccs.gov

Footnotes:

I. State Information

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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As the duly authorized representative of the applicant I certify that the applicant:

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 drug abuse; (f) the Comprehensive 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.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C.

§470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§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

Karen D. MacLean

Title

Finance Administrator

Organization

Arizona Health Care Cost Containment System

Signature: Date:

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

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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).
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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.

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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

Karen D. MacLean

Title

Finance Administrator

Organization

Arizona Health Care Cost Containment System

Signature: Karen Morton Date: 5-8-2020

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

I. State Information

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

Signature: Date:

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

I. State Information

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

Signature: Karen D MacLean Date: 5-8-2020

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

I. State Information

Funding Agreement

FISCAL YEAR 2020
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;
  - 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, 2021, 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 2018 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.

Section 529. Payments may not be made unless the State agreements are made through certification from the chief executive officer of the State.

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	Kristen Challacombe
Title	Deputy Director
Organization	Arizona Health Care Cost Containment System

Signature: Date:

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

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FISCAL YEAR 2020

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- 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.

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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.

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Governor/Designee Name	Kristen Challacombe
Title	Deputy Director
Organization	Arizona Health Care Cost Containment System

Signature: K. Colin Challacombe Date: 5/15/2020

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

I. State Information

Disclosure of Lobbying Activities

Are there lobbying activities pursuant to 31 U.S.C. 1352 to be disclosed? Yes ○ No ◉

To View Standard Form 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 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

I. State Information

Disclosure of Lobbying Activities

Are there lobbying activities pursuant to 31 U.S.C. 1352 to be disclosed? Yes ○ No ◉

To View Standard Form 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: Karen D MacLean

Date Signed: 5-8-2020

mm/dd/yyyy

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

I. State Information

State PATH Regions

Name	Description	Actions

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

Arizona is in the process of soliciting new contracts for PATH Services through a competitive Request for Proposal. . The awards will be made after the Arizona PATH Application is submitted. Arizona will provided updated information via a revision request.

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 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

Arizona Health Care Cost Containment System
Project for Assistance to Transition from Homelessness
FY 2020-2021 SM-20-F2

The Arizona Health Care Cost Containment System (AHCCCS) is the single state Medicaid agency for the State of Arizona. In that capacity AHCCCS is responsible for operating the Title XIX and Title XXI programs through the State's 1115 Research and Demonstration Waiver, which was granted by the Centers for Medicare and Medicaid Services (CMS), U.S. Department of Health and Human Services (HHS). As of June 1, 2019, AHCCCS provides coverage to approximately 1.9 million members in Arizona. As of July 1, 2016, AHCCCS now administers several Non-TXIX programs through federal grant funds received from the Substance Abuse and Mental Health Services Administration (SAMHSA) under HHS.

AHCCCS contracts with Managed Care Organizations (MCOs) that are responsible for providing Acute, Long Term Care, and Behavioral Health Services. A list of contracted plans can be found here: https://azweb.statemedicaid.us/HealthPlanLinksNet/HPLinks.aspx

AHCCCS has over 70,000 active providers in Arizona, such as individual medical and behavioral health practitioners, therapy disciplines, institutions, durable medical equipment companies and transportation entities. Additional information may be found on the AHCCCS website reporting page: https://www.azahcccs.gov/Resources/Reports/federal.html

The Arizona Heath Care Cost Containment System (AHCCCS) is awarded the Project for Assistance to Transition from Homelessness (PATH) funding from SAMHSA. Arizona is currently soliciting bids through a Request for Proposal (RFP) PATH; contractors will be selected by June 30, 2020. The contract shall be for three (3) initial years with two (2) one-year options to extend, not to exceed a total contracting period of five (5) years.

The PATH contractors utilize best or promising practices to target street outreach and case management to serve the most vulnerable adults who are literally or chronically homeless. Once the individual is enrolled into the PATH program, the PATH Contractor will assist with applying for main stream services such as 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. For Fiscal Year (FY) 2020 Arizona was allotted $1,349,348 with a minimum match of $449,783.

Arizona Health Care Cost Containment System
Project for Assistance to Transition from Homelessness
FY 2020-2021 SM-20-F2

Name of Organization	Organizational Type	Federal Funds	State Funds	County Served	Number of persons to be contacted	Number of persons to be enrolled
AHCCCS	State Agency	$ 53,974				
To Be Awarded	TBD	$	$	Maricopa		
To Be Awarded	TBD	$	$	Pima		
To Be Awarded	TBD	$	$	Balance of State *		
Total to be awarded		$ 1,295,374				
TOTAL		**$1,349,348**	**$449,783**			

*Balance of State consists of 13 counties. Once the PATH RFP is awarded AHCCCS will have a better idea of which counties within the BOS will be receiving PATH funding and will be updated to reflect accurate information.

STATE OF ARIZONA
OFFICE OF THE GOVERNOR

DOUGLAS A. DUCEY
GOVERNOR

EXECUTIVE OFFICE

January 2, 2020

Grants Management Specialist
Division of Grants Management
Substance Abuse and Mental Health Services Administration
5600 Fisher Lane
Rockville, MD 20857

Dear Grants Management Specialist:

Arizona Health Care Cost Containment System (AHCCCS) is Arizona's Medicaid agency that offers health care programs to serve Arizona residents. The Single State Authority (SSA) role is to provide oversight of the Substance Abuse Prevention and Treatment Block Grant (SABG) and other funding for Substance Use Disorder (SUD) treatment and intervention programs in Arizona. These funds are utilized for SUD treatment and intervention services for Medicaid and Non-Medicaid enrolled members.

Please update your records to reflect that Ms. Kristen Challacombe, the Deputy Director of Business Operations is now serving as the SSA representative. This signature authority includes the signing of any standard federal forms such as Assurances, Certification and Disclosure of Lobbying Activities.

If you have any questions, please contact Michelle Skurka, Grants Administrator, at Michelle.Skurka@azahcccs.gov or (602) 364-2111.

Sincerely,

Douglas A. Ducey
Governor
State of Arizona

1700 WEST WASHINGTON STREET, PHOENIX, ARIZONA 85007
602-542-4331 • www.azgovernor.gov

II. Executive Summary

2. State Budget

Planning Period From **7/1/2020** to **6/30/2021**

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
a. Personnel	**35,686.00**	**0.00**	**35,686.00**	

Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
PATH Administrator	57,700.00	46.00 %	0.46	26,686.00	0.00	26,686.00	AHCCCS PATH Administrator
Other (Describe in Comments)	60,000.00	15.00 %	0.15	9,000.00	0.00	9,000.00	DGA Fiscal Personnel

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
b. Fringe Benefits	**40.00 %**	**$ 14,275.00**	**$ 0.00**	**$ 14,275.00**	

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
c. Travel	**$ 4,013.00**	**$ 0.00**	**$ 4,013.00**	

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	$ 2,365.00	$ 0.00	$ 2,365.00	Since there will not be a PATH Grantee meeting this year, the AHCCCS PATH Administrator could potentially attend an out of state conference as it relates to PATH, SMI or homelessness.
Other (Describe in Comments)	$ 1,648.00	$ 0.00	$ 1,648.00	In-State to provide technical assistance as needed to PATH Contractors and quarterly check-ins

d. Equipment	**$ 0.00**	**$ 0.00**	**$ 0.00**	

No Data Available

e. Supplies	**$ 0.00**	**$ 0.00**	**$ 0.00**	

No Data Available

f1. Contractual (IUPs)	**$ 0.00**	**$ 0.00**	**$ 0.00**	
f2. Contractual (State)	**$ 1,295,374.00**	**$ 449,783.00**	**$ 1,745,157.00**	

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	$ 1,295,374.00	$ 449,783.00	$ 1,745,157.00	Arizona is currently in a competitive request for proposal for PATH Services, contract awards will not be completed until after the submission of the 2020/2021 PATH Applications. Once contracts have been awarded, Arizona will submit Intended Use Plans and Budgets for awarded contractors via a Revision Request.

Category	Percentage	Federal Dollars	Matched Dollars	Total Dollars	Comments

PATH housing costs are limited to 20% and can only be PATH allowable costs. Personnel who are considered to be a housing cost should be entered here and not included in the Personnel line item. For questions, call your Program Officer.

g1. Housing (IUPs)	**0.00 %**	**$ 0.00**	**$ 0.00**	**$ 0.00**	
g2. Housing (State)		**$ 0.00**	**$ 0.00**	**$ 0.00**	

No Data Available

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
h. Construction (non-allowable)				
i. Other	**$ 0.00**	**$ 0.00**	**$ 0.00**	

No Data Available

j. Total Direct Charges (Sum of a-i minus g1)	$ 1,349,348.00	$ 449,783.00	$ 1,799,131.00

Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments

k. Indirect Costs (Administrative Costs)	**$ 0.00**	**$ 0.00**	**$ 0.00**	
l. Grand Total (Sum of j and k)	$ 1,349,348.00	$ 449,783.00	$ 1,799,131.00	
Allocation of Federal PATH Funds	**$ 1,349,348**	**$ 449,782**	**$ 1,799,130**	

Source(s) of Match Dollars for State Funds:

Required non-federal contributions are available from the State General Fund Non-Medicaid Seriously Mentally Ill Services appropriation. Funds will be available at the beginning of the grant period.

PATH FFY2020 BUDGET PERIOD
SFY 2021

OBJECT CLASS CATEGORIES

Personnel

Job Title	Name	Salary	Effort	Federal Requested	Non-Federal Match
Project Administrator	D. Valenzuela	$57,700	0.46	$26,686	$0
Fiscal Staff	Varied	$60,000	0.15	$9,000	$0
Total Personnel SubTotal				**$35,686**	**$0**
Fringe Benefits (40%)		$ 14,275			
Fringe Benefits SubTotal				**$14,275**	**$0**
TOTAL Personnel Services/Fringe Benefits				**$49,961**	**$0**

Travel

1 trip for out of state TBD for 1 person				
Airfare 1 @ $600	$600			
Out of state per diem @ $62 x 4 days	$248			
Hotel for out of state travel for 1 attendee ($200 per day x 4 days)	$800			
In state travel				
Lodging 12 nights x $84/night	$1,008			
Per Diem 23 days X $59	$1,357			
Total Travel			**$4,013**	**$0**

Supplies (No Supplies Requested)

Total Supplies	**$0**	**$0**

Equipment (No Equipment Requested)

Total Equipment	**$0**	**$0**

Contractual Costs

Program Implementation		
Contractual Split TBD after RFP is awarded	$1,295,374	$449,783
Total Contractual	**$1,295,374**	**$449,783**
Total PATH GRANT	$1,349,348	$449,783
	$1,349,348	$449,783

Footnotes:

Please note that the amount in Line L. Grand Total does not match the following line named Allocation of Federal Grant Funds. The amount reflected in Line L is correct and matches the Appendix A -FY2020 Path Formula Grant Final Allotment for Arizona Minimum Match of $449,783.

II. Executive Summary

3. Intended Use Plans

Expenditure Period Start Date: **07/01/2020** Expenditure Period End Date: **06/30/2021**

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
		Grand Total	$0.00	$0.00	0	0	0	0

** IUP with sub-IUPs*

Footnotes:

Arizona is in the process of soliciting new contracts for PATH Services through a competitive Request for Proposal. The awards will be made after the Arizona PATH Application is submitted. Arizona will provided updated information via a revision request.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

III. State Level Information

A. Operational Definitions

Term	Definition
Individual Experiencing Homelessness:	The Arizona Health Care Cost Containment System defines an individual experiencing homelessness utilizing U.S. Department of Housing and Urban Development (HUD)'s Literally Homeless definition: • An 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; • 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); • 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
Imminent Risk of Becoming Homeless:	The Arizona Health Care Cost Containment System defines an individual experiencing homelessness utilizing U.S. Department of Housing and Urban Development (HUD)'s definition: • The term Imminent Risk of Homelessness is includes one or more of the following criteria: • Doubled up living arrangements where the individual's name is not on the lease, • 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, • Being discharged from a health care or criminal justice institution without a place to live.
Serious Mental Illness:	c. Individual with Serious Mental Illness- AHCCCS defines Seriously Mentally Ill (SMI) – A designation as defined in A.R.S. §36-550 and determined in an individual 18 years of age or older. Definition "Seriously mentally ill" means persons who as a result of a mental disorder as defined in section A.R.S. §36-550 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 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 refer to AHCCCS Medical Policy Manual (AMPM) Serious Mental Illness Eligibility Determination at https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320P.pdf
	d. Individual with Co-occurring Serious Mental Illness (SMI) and Substance Use Disorder (SUD)- The Arizona Health Care Cost Containment System 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:

Co-occurring Disorders:	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. https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320P.pdf

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

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 of the homeless or marginally housed seriously mentally ill population will be served such that there is coordination of service provision to address needs impacted by serious mental illness and provision of permanent housing for those being served with grant funds is prioritized and assured.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

B. Collaboration
Describe how the state will implement a collaborative relationship with the department/office responsible for providing housing to qualifying residents.

There are a number of programs at the State, County, and City offices 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 AHCCCS and the contracted PATH providers implement collaborative relationships at multiple levels as described here.

Arizona Health Care Cost Containment System (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 $14 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 80,000 health care providers to 1.9 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. AHCCCS receives approximately $28 million in State funds to provide almost 3,000 units of permanent supportive housing for persons determined SMI and a limited number of GMHSUD persons experiencing homelessness. AHCCCS contracts out for the delivery of housing services, the development, implementation and management of housing programs and related funds for the eligible populations to Regional Behavioral Health Authorities (RBHAs). AHCCCS Housing and AHCCCS administered PATH leadership coordinate closely on strategies to identify, engage the target PATH population. In addition to targeting housing to persons determined SMI and other high risk, high needs populations, AHCCCS Housing also prioritizes homelessness for its housing programs. AHCCCS Housing and PATH staff participate in each other's workgroups and planning activities and coordinate activities to ensure coordination of care and housing for qualifying members.

Arizona Department of Housing (ADOH)
The department established for the state government in Arizona to assist in addressing needs for home for working families. ADOH administers programs for Housing Partners who apply to the department for funding. The majority of the agencies programs are federally funded. The agency is also home to the Arizona Housing Finance Authority and the Arizona Home Foreclosure Prevention Funding Corporation. A

AHCCCS currently receives federal funding from the Department of Housing and Urban Development (HUD) Continuum of Care program for the Arizona Balance of State. ADOH also

administers the State Housing Trust fund to develop affordable housing, including units targeted to person experiencing homelessness and other special populations.

The Arizona Health Care Cost Containment System (AHCCCS) and the Arizona Department of Housing Administration (ADOH) currently work together on a number of housing initiatives'. While there is no formal Inter Governmental Agreement (IGA) in place there is a mutual understanding of the importance of working together collaboratively. AHCCCS PATH Administrator (APA) attends the Balance of State (BOS) Continuum of Care (CoC) meetings to assist in prioritization, coordination and prioritization of SMI members for CoC Housing opportunities. AHCCCS also work closely with ADOH to develop additional housing options for the qualifying population. The projects and coordination are documented in IGAs when necessary.

Continuums of Care (CoC) – Arizona has three HUD Continuums of Care (Maricopa, Tucson/Pima and Balance of State). The AHCCCS PATH Administrator (APA) participates in all three Continuums of Care leadership and governance. PATH teams are also required to participate in CoC housing coordination activities to identify, engage and house the qualifying population of homeless persons determined SMI or needing assessment. PATH teams 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. All three CoC's have some number of designated units restricted for SMI members and by participating in CoC activities, PATH coordinates for these housing opportunities for qualifying members. Through CoC coordination, the PATH teams are also in communication and coordination 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 team coordinates all levels to ensure that qualifying members have access to adequate and appropriate housing efforts. Some other funding sources that PATH coordinates with include:

- Housing Acquisition and/or Renovation Programs
- HUD Housing Choice Voucher Program
- Independent Community Housing
- Public Housing Authority (PHA)

Types of housing:

- Rapid Rehousing
- Section 8/Housing Choice Vouchers
- Supportive Housing
- Tenant-Based Housing
- Transitional Housing

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

Describe how PATH funds supporting care and treatment of the homeless or marginally housed seriously mentally ill population will be served such that there is coordination and provision of permanent housing for those being served with grant funds is prioritized and assured.

AHCCS allows PATH funds to be used for housing 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. Each case plan often includes housing as a goal to be reached. We also have the PATH contractor provide AHCCCS with a sustainability plan to ensure the PATH enrollee is able to sustain their new 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 contractors intended use plan and monitored through monthly, quarterly and annual reports.

Activities PATH contractors conduct includes, but 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/RBHA/TRBHA's 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,
- 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 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

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

AHCCCS/Division of Grants Administration (DGA) has made it a contractual requirement that all PATH contractors form working relationships with the Veterans Agencies in the areas they serve. Partnerships are evident by memorandum of understanding, letters of commitments or letters of support submitted yearly along with their intended use plans.

Partnerships include but are not limited to Veterans Administration Medical Center, the State Veterans' Services and the U.S. Vets in their community to assist with the coordinator of services for homeless veterans.

This includes coordination of physical and behavioral health services, main stream benefits assistance, emergency, transitional and permanent housing to homeless vets as well as participation in StandDowns and other events in their respective community. PATH providers 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 reporting by PATH contractors to AHCCCS.

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, and maximize serving the most vulnerable adults who are literally and chronically homeless.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

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 and maximize serving the most vulnerable adults who are literally and chronically homeless.

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:

i. Assistance in maintaining, monitoring and modifying behavioral health services,
ii. Assistance in finding necessary resources other than behavioral health services,
iii. Coordination of care with the member's healthcare providers, Family, community resources, and other involved supports including educational, social, judicial, community and other State agencies,
iv. 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).
v. Assisting members in applying for Social Security benefits when using the SSI/SSDI Outreach, Access, and Recovery (SOAR) approach. SOAR activities may include:
    1) Face-to-face meetings with member,
    2) Phone contact with member, and
    3) 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).
vi. For provider case management used to facilitate a Child and Family Team (CFT), the modifier U1 is required,

vii. SOAR services shall only be provided by staff who have been certified in SOAR through SAMHSA SOAR Technical Assistance Center. Additionally, when using the SOAR approach, billable activities do not include:
   1) Completion of SOAR paperwork without member present,
   2) Copying or faxing paperwork,
   3) Assisting members with applying for benefits without using the SOAR approach, and
   4) Email.

viii. 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,

ix. Outreach and follow-up of crisis contacts and missed appointments, and

x. Participation in staffing, case conferences, or other meetings with or without the member or their Family participating.

For more information, please visit
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, addiction, 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 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 has 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 MH Services Plan

Narrative Question:

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

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

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, which was granted by the Centers for Medicare and Medicaid Services (CMS), U.S. Department of Health and Human Services (HHS). As of June 1, 2019, AHCCCS provides coverage to approximately 1.9 million members in Arizona. As of July 1, 2016, AHCCCS now administers several Non-TXIX programs through federal grant funds received from the Substance Abuse and Mental Health Services Administration (SAMHSA) under HHS.

The AHCCCS Strategic Plan for 2018-2023 begins with the AHCCCS vision, mission and core values. This is followed by 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 four strategic goals for AHCCCS. These are:

1. AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes.
2. AHCCCS must pursue continuous quality improvement.
3. AHCCCS must reduce fragmentation driving towards an integrated sustainable healthcare system.
4. AHCCCS must 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/StrategicPlan_18-23.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 is able to work in tandem with the AHCCCS strategic plan by working towards:

1.) Increasing access to behavioral health services for persons diagnosed with a serious mental illness;
2.) Decreasing the number of adults who are chronically and/or literally homeless or living in shelters.

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.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

F. 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 Administration posts the PATH application on its website.
(https://www.azahcccs.gov/Resources/Grants/)

The AHCCCS PATH Administrator (APA) will accept public comments throughout the year as they relate to the posted application and assess recommendations for incorporation into the following year's application.

Contact information for the APA is included on all posted PATH Applications as well as general communications, for any interested parties to provide feedback. AHCCCS will post the PATH application for public comment three to five business days prior to submission.
https://www.azahcccs.gov/AHCCCS/PublicNotices/

III. State Level Information

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.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

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.

AHCCCS PATH Administrator and each PATH contractor have individual monthly check-in calls. During these call funding is an item of discussion, this includes, spending to date and spending barriers. The AHCCCS PATH Administrator also will have meetings with the internal finance team to ensure each contractor is on track for spending down of all funds. If there is a contactor underspending, this is discussed during our monthly check-in call. Reviews of contractor spending with the internal finance team are at 3 months, 6 months, 9 months and monthly thereafter until the end of the fiscal year.

AHCCCS/DGA monitors PATH 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 track progress and ensure Intended Use Plan goals are on track to be achieved. An annual narrative and statistical report is due each January to SAMHSA and AHCCCS/DGA. 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/DGA 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 with a serious mental illness are addressed in each region. These program reviews allow AHCCCS to ensure implementation currently occurring is aligning with program goals and needs.

III. State Level Information

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).

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

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.)

Arizona's current contracts for PATH services will be expiring on June 30, 2020. AHCCCS is currently seeking to contract with one (1) or more qualified non-profit providers/organizations as required under the Projects for Assistance in Transition from Homelessness (PATH) Grant with a competitive Request for Proposal (RFP) for the purpose of providing outreach services to people who are suffering from a serious mental illness and/or are suffering from a SMI and a substance use disorder (co-occurring disorder) who are homeless or at imminent risk of becoming homeless in each county across the State. The current contract period is due to expire on June 30, 2020.

For this RFP AHCCCS solicited PATH services statewide in hopes to expand PATH funding to other counties throughout Arizona. The solicitation closed on May 11, 2020 and the evaluation period of bids will be completed after the PATH Application is submitted to SAMHSA.

Arizona will submit updated information once the RFP has been awarded via a request a revision request in WebBgas.

To determine areas of need, Arizona relies on annual street count data, PATH annual report data and population by census data.

III. State Level Information

I. Location of Individuals with Serious Mental Illnesses who are Experiencing Homelessness

Narrative Question:

Indicate the number of individuals with serious mental illnesses 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.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

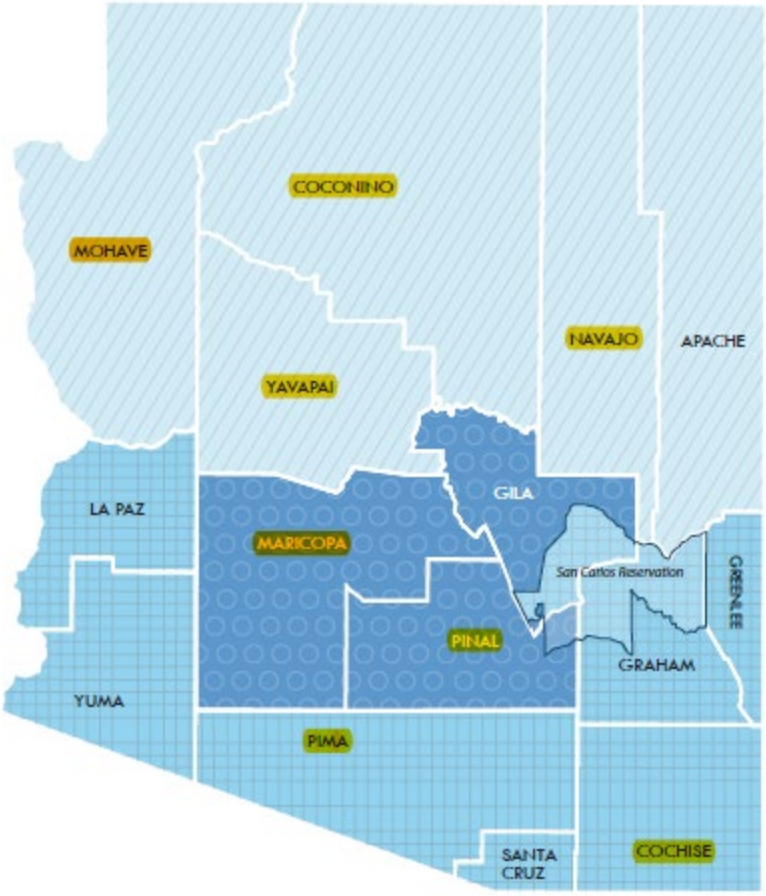
Footnotes:

I. Location of Individuals with Serious Mental Illnesses who are Experiencing Homelessness- Indicate the number of individuals with serious mental illnesses 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.

2019 Point in Time Street & Shelter Count*

GSA	Adults Homeless Unsheltered	Homeless Unsheltered with SMI (data is self-reported)	Homeless Unsheltered with Substance Use Disorder (data is self-reported)
Balance of State (BOS), encompasses 13 counties	893	194	265
Maricopa County	3188	966	1116
Pima County	361	157	95

*2020 Point in Time data was not provided at this time as each Continuum of Care was granted an extension to July 2020 to submit their final data to HUD due to the COVID19 pandemic.


COCONINO
MOHAVE
NAVAJO
APACHE
YAVAPAI
GILA
LA PAZ
MARICOPA
San Carlos Reservation
GREENLEE
PINAL
GRAHAM
YUMA
PIMA
SANTA CRUZ
COCHISE

III. State Level Information

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.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

J. Matching Funds

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.

Required non-federal contributions are available from the State General Fund Non-Medicaid Seriously Mentally Ill Services appropriation. Funds will be available at the beginning of the grant period.

III. State Level Information

K. Other Designated Fundings

Narrative Question:

Indicate whether the mental health block grant, substance abuse block grant, or general revenue funds are designated specifically for serving people who experience homelessness and have serious mental illnesses.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

K. Other Designated Funding

Indicate whether the mental health block grant, substance abuse block grant, or general revenue funds are designated specifically for serving people who experience homelessness and have serious mental illnesses.

a.) Mental Health Block Grant - Funds provided by the mental health block grant are utilized for services to individuals with serious mental illness and children with serious emotional disturbance, which can be used for those who are homeless or at imminent risk of being homeless.

b.) Substance Abuse Block Grant- Provisions are made through the substance abuse block grant for services to be delivered through street outreach/drop in centers serving homeless individuals with substance use disorder at high risk for HIV, in addition to other community settings such as probation offices, domestic violence facilities and homeless shelters.

c.) State General Fund Revenue- State general funds allocated as match for PATH federal funds are specifically targeted for individual persons who are homeless and have a serious mental illness or co-occurring substance use disorder.

While the focus of the PATH grant is to reduce or eliminate homelessness for individuals with serious mental illnesses (SMI), co-occurring substance use disorders (COD), and who are experiencing homelessness or at imminent risk of becoming homeless, AHCCCS has other grant funding sources that are able to assist the same population as the PATH Grant.

If the person outreached does not met eligibility criteria for PATH, the PATH contractor will refer or connect the individuals with the Regional Behavioral Health Authority (RBHA) in their respective service area who provides the oversight of the above mentioned grant funds.

III. State Level Information

L. Data

Narrative Question:

Describe the state's 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.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

L. Data- Describe the state's and providers' status on HMIS transition plan, with accompanying timelines for collecting all PATH data in HMIS. If the state is fully utilizing HMIS for PATH services, please describe plan for continued training and how the state will support new local-area providers.

All Arizona PATH providers are fully utilizing HMIS for documenting all PATH services. AHCCCS/DGA continues to support HMIS trainings and activities for its contractors, which will include alerting them of SAMHSA Homeless and Housing Resource Network webinars, and the Learning Community Webinars. Each PATH contractor has a line item budget for HMIS support, licenses and trainings.

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 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 to remedy.

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 various committees they participate on 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 sub-committees. More information regarding various committees they participate on 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 various committees they participate on can be found in their respective Intended Use Plan (IUP).

III. State Level Information

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.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

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 a 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.

Arizona is currently in a Request for Proposal (RFP) process to award PATH Services. Once the RFP is awarded, those staff not trained in SOAR, will have 90 days from award to submit their certificate of completion of the on-line SOAR training.

AHCCCS has made it contractual requirement every PATH funded staff be trained in SOAR. This is monitored by each contractor submitting their staff's certificate of completion of the on-line SOAR training. Any new staff hired after the annual application date will have 90 days to complete the on-line 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	8
La Frontera	Pima County	4
Good Neighbor Alliance	Cochise County	3
Catholic Charities Community Services	Mohave, Coconino & Yavapai County	2

***Numbers will be updated once RFP is awarded**

By completing the 20 hours of on-line 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 either have or are working on establishing good working relationship with the Social Security Administration (SSA) offices in their respective counties.

III. State Level Information

N. PATH Eligibility and Enrollment

Narrative Question:

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

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes:

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: (1) suffering from SMI and /or have a co-occurring Substance Use Disorder; and (2) homeless or at imminent risk of becoming homeless.

PATH Contractors conduct an initial assessment of a potential PATH client by exhibiting client behaviors that are consistent with a SMI diagnosis; this can be over multiple contacts. PATH contractors document the overview of the contact, observed signs and contact location (assists with future contacts) with the homeless individual.

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 main stream 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 (or refer out) for the individual to participate in the screening process to determine service eligibility and need for a SMI determination. The PATH contractor ensures the screening process is completed and a SMI determination is completed within ninety days of enrollment. Those individuals who do not complete an SMI determination within ninety days can remain enrolled 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 designated as having an SMI. Without receipt of appropriate care, these individuals are at a high risk for further deterioration of their physical and mental condition, increased hospitalizations and 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 for services. Community Information and Referral Network (CRN) is responsible for rendering the final SMI Eligibility Determination statewide, any applicable grievances and appeal requirements, and all administrative responsibilities related thereto.

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 Regional Behavioral Health Authorities (RBHA) in their respective geographic service area. The MOU allows for a working relationship to be built and collaboration efforts for engaging and/or reengaging the PATH individual for the needed behavioral health service(s). Dv5132020

PATH Reported Activities

Charitable Choice for PATH

Expenditure Period Start Date: 7/1/2020 Expenditure Period End Date: 6/30/2021

Notice to Program Beneficiaries - Check all that apply:

- ☐ Used model notice provided in final regulation.
- ☐ Used notice developed by State (please attach a copy to the Report).
- ☐ State has disseminated notice to religious organizations that are providers.
- ☐ State requires these religious organizations to give notice to all potential beneficiaries.

Referrals to Alternative Services - Check all that apply:

- ☐ State has developed specific referral system for this requirement.
- ☐ State has incorporated this requirement into existing referral system(s).
- ☐ SAMHSA's Treatment Facility Locator is used to help identify providers.
- ☐ Other networks and information systems are used to help identify providers.
- ☐ 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.

Arizona is currently in an competitive request for proposal process. Once a contractors have been chosen we will review this document and submit via a revision request.

FY 2020 PATH FOA Catalog No.: 93.150 FOA No.: SM-20-F2 Approved: 03/09/2020

Footnotes: