REQUEST FOR APPLICATIONS
Project for Assistance in Transition from Homelessness (PATH) – RFA

<table>
<thead>
<tr>
<th>Category</th>
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<tr>
<td>RFA Posted</td>
<td>December 14, 2020</td>
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<tr>
<td>Questions Due</td>
<td>December 21, 2020</td>
</tr>
<tr>
<td>Applications Due</td>
<td>January 20, 2021</td>
</tr>
<tr>
<td>Anticipated Notice of Award</td>
<td>February 5, 2021</td>
</tr>
<tr>
<td>Anticipated Performance Period</td>
<td>July 1, 2021 – June 30, 2022</td>
</tr>
<tr>
<td>Service</td>
<td>Street outreach and case management services</td>
</tr>
<tr>
<td>Issuing Agency</td>
<td>Division of Mental Health, Developmental Disabilities and Substance Abuse Services</td>
</tr>
<tr>
<td>E-mail Applications and Questions</td>
<td>Christopher Drew</td>
</tr>
<tr>
<td></td>
<td>Email <a href="mailto:christopher.drew@dhhs.nc.gov">christopher.drew@dhhs.nc.gov</a></td>
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THIS REQUEST FOR APPLICATIONS (RFA) advertises the Division’s need for the services described herein and solicits applications offering to provide those services pursuant to the specifications, terms and conditions specified herein. All applications received shall be treated as offers to contract. If the Division decides to accept an application, an authorized representative of the Department will sign in the space provided below. Acceptance shall create a contract that is effective as specified below.

THE UNDERSIGNED HEREBY SUBMITS THE FOLLOWING APPLICATION AND CERTIFIES THAT: (1) he or she is authorized to bind the named Contractor to the terms of this RFA and Application; (2) the Contractor hereby offers and agrees to provide services in the manner and at the costs described in this RFA and Application; (3) this Application shall be valid for 60 days after the end of the application period in which it is submitted.

To Be Completed By Contractor:

<table>
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<tr>
<th>Contractor Name:</th>
<th>Catchment Area # (see p.5):</th>
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<tbody>
<tr>
<td>Contractor's Street Address:</td>
<td>E-Mail Address:</td>
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<tr>
<td>City, State &amp; Street Address Zip:</td>
<td>Telephone Number:</td>
</tr>
<tr>
<td>Name &amp; Title of Authorized Representative:</td>
<td>DUNS Number:</td>
</tr>
<tr>
<td>Signature of Authorized Representative:</td>
<td>Date:</td>
</tr>
</tbody>
</table>

Unsigned or Incomplete Applications Shall Be Returned Without Being Reviewed

NOTICE OF AWARD/ FOR NC DHHS USE ONLY: Application accepted and Contract # ____________ awarded on ______________. The Contract shall begin on ______________, and shall terminate on ______________.

By: ____________________________________________________________
Signature of Authorized Representative   Printed Name of Authorized Representative   Title of Authorized Representative
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C. Staff Positions Definitions  
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1. **INTRODUCTION**

The NC PATH Program is authorized by the Stewart B. McKinney Homeless Assistance Amendments Act of 1990, subject to Public Health Service Act Part C, Section 521 and administered by Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services, Homeless Programs Branch. The North Carolina NC PATH Program is administered by the Division of Mental Health, Developmental Disabilities and Substance Abuse Services (Division), Adult Mental Health Section. The PATH Legislation allows states to implement the NC PATH Program to fit the needs of the state in identifying, engaging, enrolling and transition to community mental health services those individuals meeting PATH eligibility.

**PURPOSE**

The PATH Legislation goal of the NC PATH Program is to reduce or eliminate homelessness for individuals with a serious mental illness, or co-occurring mental illness and substance use disorders, who are homeless or at risk of homelessness.

The goal of the NC PATH Program is to provide services to individuals enrolled in PATH, to connect the individual to community mental health services and assist with obtaining permanent housing. The NC PATH Program focus is providing outreach to adults living in outside locations such as street, camps, wooded areas, abandoned buildings or under bridges. Once the individual is determined to meet eligibility criteria, PATH services are provided to assist the individual with obtaining housing and community mental health and referrals for primary health and dental care; income assistance; medical assistance; employment assistances; temporary housing; and substance use treatment.

**BACKGROUND**

DHHS manages the delivery of health- and human-related services for all North Carolinians, especially our most vulnerable citizens – children, elderly, disabled and low-income families. DHHS works closely with health care professionals, community leaders and advocacy groups; local, state and federal entities; and many other stakeholders to make this happen. In collaboration with our partners, DHHS provides essential services to improve the health, safety and well-being of all North Carolinians by advancing innovative solutions that foster independence, improve health and promote well-being for all North Carolinians.

DMHDDSAS provides quality support to achieve self-determination for individuals with intellectual and/or developmental disabilities and quality services to promote treatment and recovery for individuals with mental illness and substance use disorders.

The NC PATH Program is a formula grant authorized by the Stewart B. McKinney Homeless Assistance Amendments Act of 1990. PATH, the first major federal legislative response to homelessness, is administered by the SAMHSA, CMHS. PATH grants are distributed annually to all 50 states, the District of Columbia, Puerto Rico, the Northern Mariana Islands, Guam, American Samoa, and the U.S. Virgin Islands. Each state or territory solicits proposals and awards funds to local public or nonprofit organizations, known as PATH providers.

North Carolina has received PATH funding since 1993. The Point-In-Time count of individuals who are homeless for January 2019 identified 9,314 adults and children who were homeless. It was estimated 27,900 adults and children would experience homelessness in 2019. Out of the PIT total, 6,427 individuals were adults over age 18 and 1,304 individuals meet the definition for chronically homeless. It is difficult to count individuals who are living outdoors as they tend to be transient moving from place to place. January weather is the coldest month in NC. Temperatures across the state tend to be below freezing and many individuals usually living outside move indoors temporarily. Therefore, the number of individuals living outdoors is higher than the PIT indicates. The number of individuals who are homeless and have a mental health or co-occurring mental health and substance use disorder is estimated to be between 28% and 35%.

The NC PATH Program serves those individuals who historically were perceived as unreachable and “un-houseable.” These are individuals who have lived on the streets for years, who have the most debilitating mental and physical health conditions, and/or who have suffered significant adversity such as childhood abuse or neglect, long-term foster care placement and traumatic military combat that contributed to their homelessness. Despite being the primary consumers of substantial public resources, these special need groups have been consistently marginalized or ignored by conventional outreach, shelter and housing systems. These individuals are the most vulnerable and most in need of housing, supports and behavioral health treatment services and are considered to experience chronic homelessness. These individuals rarely receive mental health or substance use treatment.
They may have received treatment in the past on more than one occasion but have not completed their treatment. These individuals are concerned with meeting basic needs in order to surviving living outside.

The NC PATH Program is the only service in NC that provides outreach and case management to these individuals (the target population) therefore, the NC PATH Program prioritizes these individuals meeting PATH eligibility and encourages prioritizing those individuals meeting PATH eligibility who are Veterans. The NC PATH Program enrollment does not include those individuals receiving mental health or substance use treatment services to include medication management or therapy. Individuals with a sole substance use disorder are not eligible for PATH services.

The NC PATH Program targets the most vulnerable individuals living outside that are not in contact with homeless service providers. The NC PATH Program Team Leader, Qualified Professionals, Benefit Specialists and Peer Support Specialist works directly with the individuals enrolled in PATH. The eligibility requirements are very specific and serves a small subset of the total individuals who are experiencing homelessness.

SAMHSA’s PATH Funding Opportunity Announcement states “SAMHSA encourages all recipients to address the behavioral health and housing needs of those living with serious mental illness and who are incarcerated.” NC PATH will prioritize those persons released from incarceration who were homeless prior to incarceration and homeless at time released from incarceration.

DMHDDSAS will contract directly with private, non-profit agencies or political subdivision of the state to implement a NC PATH Program in Greensboro and a NC PATH Program in Charlotte.

2. ELIGIBILITY

Eligible applicants must be a private-non-profit community agency or a political subdivision of the state and located in Charlotte, Fayetteville, Wilmington or Durham. Agencies located outside of these cities may apply under the following conditions:
- Agency provides another service in the city and demonstrates collaboration and partnerships with community mental health providers and/or homeless service providers
- Agency has the infrastructure to implement PATH in the city applying for and provides documentation to demonstrate ability to implement a successful PATH Program.

The agency must have experience providing services, such as street outreach and connecting individuals to community mental health, who are living outdoors with a serious mental illness.

The agency shall provide clinical oversite of the NC PATH Program by a licensed mental health professional holding any of the following licenses: licensed psychologist, licensed psychological associate, licensed clinical social worker, licensed professional counselor, licensed marriage and family therapist, licensed psychiatric nurse practitioner, clinical nurse specialist certified as an advanced practice psychiatric clinical nurse specialist.

3. AWARD INFORMATION

PATH funds are determined yearly by Congress which is allocated to the 50 states and territories using a formula based on urban populations. Two awards are available – one in Fayetteville and one in Raleigh. The NC PATH Program funding award is as follows:

<table>
<thead>
<tr>
<th>PATH Site</th>
<th>PATH Funds</th>
<th>Match Required</th>
<th>Minimum # Positions</th>
<th>MHBG Funds Veteran Position</th>
<th>Minimum # Positions</th>
<th>Total NC PATH Program Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charlotte</td>
<td>$261,468</td>
<td>$68,652 (in-kind or cash)</td>
<td>4 position 1 Team Leader, 1 QMHP, 1 CPS, 1 Benefit Specialist</td>
<td>N/A</td>
<td>N/A</td>
<td>$261,468</td>
</tr>
<tr>
<td>Location</td>
<td>Total Funding</td>
<td>In-Kind or Cash</td>
<td>Positions</td>
<td>Team Leader, QMHP, CPS, Benefit Specialist</td>
<td>1 QMHP and/or 1 CPS</td>
<td>Total Funding Adjusted</td>
</tr>
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<tr>
<td>Fayetteville</td>
<td>$326,825</td>
<td>$85,812 (in-kind or cash)</td>
<td>5 positions</td>
<td>1 Team Leader, 2 QMHP, 1 CPS, 1 Benefit Specialist</td>
<td>$100,000</td>
<td>$426,825</td>
</tr>
<tr>
<td>Wilmington</td>
<td>$261,460</td>
<td>$68,652 (in-kind or cash)</td>
<td>4 positions</td>
<td>1 Team Leader, 1 QMHP, 1 CPS, 1 Benefit Specialist</td>
<td>$100,000</td>
<td>$361,460</td>
</tr>
<tr>
<td>Durham</td>
<td>$196,095</td>
<td>$51,489 (in-kind or cash)</td>
<td>3 positions</td>
<td>1 Team Leader, 1 QMHP, 1 CPS</td>
<td>N/A</td>
<td>$392,658</td>
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Continued funding is contingent upon the federal award the State receives for the NC PATH Program and available MHBG funds. DMHDDSAS reserves the right to adjust the funding of a NC PATH Program due to:
- Increase or decrease in the federal PATH and/or MHBG award;
- Lack of successful implementation of the NC PATH Program; or
- The PATH Provider’s inability to meet the PATH goals.

SAMHSA requires states to submit a PATH Application Bi-annually. PATH Providers are required to submit the PATH Intended Use Plan, Budget and Match Narrative bi-annually. PATH an updated Budget, Budget Narrative, Match Narrative. The MHBG Veterans budget Narrative is also due at this time.

**FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA)**

As a subrecipient of federal funds, each selected grant recipient will be required to provide certain information required by the Federal Funding Accountability and Transparency Act (FFATA), including the organization’s DUNS number. Please see [https://fedgov.dnb.com/webform](https://fedgov.dnb.com/webform) for free registration. Additional information about FFATA is available at [https://www.fsrs.gov/](https://www.fsrs.gov/).

4. **DEFINITIONS, ACRONYMS AND ABBREVIATIONS**

**Acronyms**

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<th>Definition</th>
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<tr>
<td>ACT</td>
<td>Assertive Community Treatment</td>
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<tr>
<td>CFR</td>
<td>Code of Federal Regulations</td>
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<tr>
<td>CMHS</td>
<td>Center for Mental Health Services</td>
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<tr>
<td>CoC</td>
<td>Continuum of Care</td>
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<tr>
<td>COD</td>
<td>Co-occurring Serious Mental Illness and Substance Use Disorder</td>
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<tr>
<td>CPS</td>
<td>Certified Peer Specialist</td>
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<td>CST</td>
<td>Community Support Team</td>
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<td>DHHS</td>
<td>Department of Health and Human Services</td>
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<td>DMHDDSAS</td>
<td>Division of Mental Health, Developmental Disabilities and Substance Abuse Services</td>
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<tr>
<td>EBP</td>
<td>Evidenced-Based Practice</td>
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<tr>
<td>FSR</td>
<td>Financial Status Report</td>
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<td>GPRA</td>
<td>Government Performance and Results Act Modernization Act</td>
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<td>HMIS</td>
<td>Homeless Management Information System</td>
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<td>HUD</td>
<td>U.S. Department of Housing and Urban Development</td>
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<td>MHBG</td>
<td>Mental Health Block Grant</td>
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<td>PATH</td>
<td>Projects for Assistance in Transition from Homelessness</td>
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<td>PDX</td>
<td>PATH Data Exchange</td>
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<tr>
<td>PIT</td>
<td>Point-In-Time</td>
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<td>PSP</td>
<td>Peer Support Program</td>
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<tr>
<td>PSR</td>
<td>Psychosocial Rehabilitation</td>
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<tr>
<td>QMHP</td>
<td>Qualified Mental Health Professional</td>
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<tr>
<td>SAMHSA</td>
<td>Substance Abuse and Mental Health Services Administration</td>
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<td>SMI</td>
<td>Serious Mental Illness</td>
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<tr>
<td>SOAR</td>
<td>SSI/SSDI Outreach, Access, Recovery</td>
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<tr>
<td>TL</td>
<td>Team Leader</td>
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</table>
Definitions

Serious Mental Illness: An individual is considered to have a serious mental illness if he/she has a DSM-V diagnosis of Schizophrenia, Schizoaffective Disorder, Major Depression, Psychotic Disorder, Bipolar Disorders and Posttraumatic Stress Disorder of such severity and duration as to result in functional impairment that substantially interferes with or limits major life activities.

Co-occurring Serious Mental Illness and Substance Use Disorder: The SAMHSA definition for co-occurring serious mental illness and substance use disorders refers to individuals who have at least one serious mental disorder and a substance use disorder, where the serious mental disorder and substance use disorder can be diagnosed independently of each other.

Homeless: An individual is considered homeless when his/her living situation is as follows:
- He/she lacks a fixed, regular and adequate nighttime residence, and
- He/she has a primary residence that is a supervised publicly or privately-operated shelter designed to provide temporary living accommodations (short-term shelter using a lottery system or first come/first served for admission), or
- He/she lives in a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings (i.e., someone who sleeps in doorways, parks, bus stations, etc.).

- A place not meant for human habitation, a safe haven, or in an emergency shelter, OR
- An institutional care facility if the individual has been living in the facility for fewer than 90 days and had been living in a place not meant for human habitation, a safe haven, or in an emergency shelter immediately before entering the institutional care facility.

In order to meet the “chronically homeless” definition, the individual also must have been living as described above continuously for at least 12 months, or on at least four separate occasions in the last 3 years, where the combined occasions total a length of time of at least 12 months. Each period separating the occasions must include at least 7 nights of living in a situation other than a place not meant for human habitation, in an emergency shelter, or in a safe haven.

Outreach: The process of identifying and engaging with individuals who are potentially PATH eligible.

Contact: An interaction between a NC PATH Program staff worker or workers and an individual who is potentially PATH eligible or enrolled in PATH.

Date of engagement: The date of engagement is defined as the date on which an interactive client relationship results in a deliberate client assessment or beginning of a case plan. For PATH projects, the date of engagement must occur on or before the date of enrollment. The date of engagement and the date of enrollment is often the same date.

PATH eligible: Per the authorizing legislation, PATH eligible means that an individual has a serious mental illness, or serious mental illness and substance use disorder, and is experiencing homelessness or is at imminent risk of becoming homeless.

PATH enrolled: A PATH-eligible individual and a PATH provider have mutually and formally agreed to engage in services and the provider has initiated an individual file or record for that individual.

Reengagement: The process of engaging with PATH-enrolled individuals who are disconnected from PATH services.

Screening: An in-person process during which a preliminary evaluation is made to determine a person’s needs and how they can be addressed through the NC PATH Program.

Clinical assessment: A clinical determination of psychosocial needs and concerns.

Habilitation/rehabilitation: Services that help a PATH client learn or improve the skills needed to function in a
variety of activities of daily living.

Community mental health: A range of mental health and/or co-occurring services and activities provided in non-institutional settings to facilitate an individual’s recovery. Note: This category does not include case management, alcohol or drug treatment, habilitation, or rehabilitation, as they have definitions elsewhere in this document.

Substance use treatment: Preventive, diagnostic, and other services and supports provided for people who have a psychological and/or physical dependence on one or more substances.

Case management: A collaboration between a service recipient and provider in which advocacy, communication, and resource management are used to design and implement a wellness plan specific to a PATH-enrolled individual’s recovery needs.

Residential supportive services: Services that help PATH-enrolled individuals practice the skills necessary to maintain residence in the least restrictive community-based setting possible.

Housing minor renovation: Services, resources, or small repairs that ensure a housing unit is physically accessible and/or that health or safety hazards have been mitigated or eliminated.

Housing moving assistance: Monies and other resources provided on behalf of a PATH-enrolled individual to help establish that individual’s household. Note: This excludes security deposits and one-time rental payments, which have specific definitions.

Housing eligibility determination: Determining whether an individual meets financial and other requirement to enter into public or subsidized housing.

Security deposits: Funds provided on behalf of a PATH-enrolled individual to pay up to two months’ rent or other security deposits in order to secure housing.

One-time rent for eviction prevention: One-time payment on behalf of PATH-enrolled individuals who are at risk of eviction without financial assistance.

Referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service.

Attained referral: A PATH-enrolled client begins receiving services as the result of PATH assistance.

Community mental health referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that stabilizes, supports, or treats people for mental health disorders or co-occurring mental health and substance use disorders.

Substance use treatment referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers preventive, diagnostic, and other services and supports for individuals who have psychological and/or physical problems with use of one or more substances.

Primary health/dental care referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers physical and/or dental health care services.

Job training referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that helps prepare an individual to gain and maintain the skills necessary for paid or volunteer work.

Employment assistance referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers assistance designed to lead to compensated work.

Educational services referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers academic instruction
Income assistance referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers benefits that provide financial support.

Medical insurance referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers coverage that provides payment for wellness or other services needed as a result of sickness, injury, or disability.

Housing services referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers assistance with attaining and sustaining living accommodations.

Temporary housing referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers shelter in a time-limited setting.

Permanent housing referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers residence in a stable setting where length of stay is determined by the individual or family without time limitations, as long as they meet the basic requirements of tenancy.

Homeless Management Information System: Local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Each Continuum of Care is responsible for selecting an HMIS software solution that complies with HUD’s data collection, management, and reporting standards.

5. SCOPE OF WORK

Target Population
The NC PATH Program eligibility is adults over the age of 18 with a serious mental illness (SMI) or co-occurring SMI and substance use disorder (COD) who are living outside and not in contact with behavioral health or homeless service providers.

The NC PATH Program target population is:

1. Individuals with SMI/COD diagnosis with symptoms of such severity and duration as to result in functional impairment that substantially interferes with or limits major life activities, AND

2. Individuals who have served in the military meeting PATH eligibility, OR.

3. Individuals residing in jails or prisons meeting the following eligibility:
   o Individual has a documented diagnosis of a SMI or cooccurring SMI/SUD
   o Individual was homeless minimally 30 days prior to incarceration
   o Individual continues to be homeless upon his/her released from incarceration
   o Upon release, person will live outside.
   o Individual does not have public or private health benefits.

The NC PATH Program does not serve individuals having only a substance use disorders, housed, or receiving mental health or substance use services or housing services.

NC PATH Program Services
The NC PATH Program provides an array of services with primary focus on provided street outreach, case management and services which are not financially supported by mainstream behavioral health programs. PATH services cannot be provided to individuals with a sole diagnosis of a substance abuse disorder.

The NC PATH Program staff provides the following services:

• Outreach
• Case Management
• Screening
• Residential Support Services
• Housing Moving Assistance
• Housing Eligibility Determination
• Security Deposits

It is expected that the organization receiving PATH funds has the resources and community connections to refer individuals served by PATH in obtaining the following:
• Community Mental Health
• Substance Abuse Treatment
• Primary Health/Dental Care
• Temporary Housing
• Permanent housing
• Income Assistance
• Employment Assistance
• Medical Insurance

PATH Outreach
Services provided in the NC PATH Program begin with street outreach. Street outreach is planned, strategic, and organized. It is conducted in outside locations such as parks, under bridges, woods/camps, alongside railroad tracks, abandoned buildings, and cars. It is not an activity of driving or walking around aimlessly happening upon homeless individuals by chance. NC PATH does not provide in-reach which is conducted within an agency or program such as shelters, day programs, drop-in centers or other such locations with resources and/or services to the target population. This does not include locations such as libraries, laundry mats, or soup kitchens or other locations that provide free meals.

NC PATH staff do not provide clinical services. PATH staff are required to assist individuals receiving PATH services to transition to a mainstream community mental health service such as Assertive Community Treatment (ACT), Community Support Team (CST), Peer Support Programs (PSP), Psychosocial Rehab Services (PSR) and other mental health programs and to obtain permanent housing.

NC PATH providers are required to enter information about individuals outreached and enrolled in PATH into NC Management Information System (NCHMIS). NC PATH Providers must meet the data entry requirements outlined in U.S. Department of Housing and Urban Development (HUD) NC PATH Program HMIS Manual. Every outreach and service contact and the enrollment information are entered in NCHMIS meeting the NCHMIS requirements.

It is expected that 85% of the individuals enrolled in the NC PATH Program will have lived outside upon enrollment.

PATH Enrollment and Service Delivery
An individual may become enrolled in the NC PATH Program when the PATH-eligible individual and the NC PATH staff have mutually and formally agreed to engage in services and the PATH staff have initiated a PATH record for that individual. Prior to enrollment, documentation of a SMI or COD must be obtained prior to enrollment using a clinical assessment or treatment discharge summary from a prior SMI/COD provider or hospital. PATH providers are required to open a PATH record and enter specific information on the individual in PATH in NCHMIS.

The enrollment activities and required documents included in the PATH Record are as follows:

1. NCHMIS PATH Entry – SAMHSA requires all PATH data to be enter in each data elements as listed in the NC HMIS required activities. However, it may take numerous conversations to obtain all the required by SAMHSA and found in the HMIS Data Manual. It is expected for some of this information will be gathered during outreach and engagement contacts.

2. PATH Plan – The PATH staff and the individual enrolled in PATH develop the PATH Plan based on the individual’s long-term and short-term goals. The PATH Program is person-centered, and it is expected PATH staff
will receive this training and use the skills and techniques learned to ensure the plan is the individual’s plan. The specific activities and services PATH will provide are documented on the PATH Plan. The due date is short-term, i.e., the day of enrollment, within 1 week, 4 weeks. No due date is more than two to three months. The PATH Plan dictates the activities and services PATH staff provide. As the services/activities are provided and goals are met, the PATH Plan is revised and updated and at least every three months. Individuals may decide to have assistance with something new and not work on a documented goal. The new goal and activities are documented on the PATH Plan. It is expected a goal or activity related to obtaining mental health or substance use treatment is what the individual wants, agrees to, and is committed to attending appointments.

It is uncommon for individuals PATH serves to ask for a referral for a clinical assessment at the time of enrollment. Some individuals may perceive this as a condition for obtaining assistance with housing and other services. Other individuals may agree to this but do not attend appointments. It is imperative PATH staff have a clear understanding of the individual’s experiences with mental health and co-occurring services before discussing a referral. The referral is made when the individual demonstrates a commitment to working with the NC PATH Program and have met other goals such as medical, income, health insurance, food, or a place to live. NC PATH Program reports indicate individuals referred for an assessment, medication management or group therapy that do not attend appointment and can no longer be located.

3. PATH Eligibility Verification – PATH staff must document the necessary information demonstrating the individual meets PATH eligibility. A copy of the documentation of a SMI or COD must be obtained prior to enrollment using a clinical assessment or treatment discharge summary from a prior SMI/COD service provider or hospital. A copy of documentation is included in the PATH Record.

4. PATH Service Note – It is required for all contacts with and on the behalf of the individual to be documented on the PATH Service Note. The service note describes all services and activities as specified on the PATH Plan as well as any issues or events with the individual. Outreach contacts are not documented in the PATH Record.

5. PATH Discharge Summary – The PATH Discharge Summary documents the reason for the ending of PATH services and the specific outcomes for the individual. This serves as the final service note in the PATH record.

Transition to Community Mental Health Services
PATH staff are required to assist individuals receiving PATH services to transition to a mainstream community mental health service such as Assertive Community Treatment (ACT), Community Support Team (CST), Peer Support Programs (PSP), Psychosocial Rehab Services (PSR) and other mental health programs. PATH Providers begin the transition to Community Mental Health Services when the individual enrolled agrees and commits to participate in mental health services. At this time, the individual is assisted with a referral for mental health services. The transition steps are as follows:

- The PATH staff assists the individual in keeping the initial appointments to a mental health or substance use provider by providing transportation and attending the appointment if requested by the individual. The initial appointments usually include an appointment to complete the intake and the comprehensive clinical assessment. If the individual gives consent, the PATH staff may share observations and information to ensure appropriate services are provided.

- It is expected for the NC PATH Program Staff to transport and accompany individuals to appointments in order to provide a warm hand-off to in ACT, CST, PSP, PSR up to 60 days from admission date. At this point, PATH will transition the individual off the PATH case load. Once the warm hand-off is completed, the PATH staff shall not provide additional services to the individual.

6. PROGRAMMATIC REQUIREMENTS AND PRIORITIES
PATH Annual Application
SAMHSA requires each State to apply for PATH funds annually. The PATH Provider is required to apply for PATH funds for continuation of the NC PATH Program. The PATH Annual Application Packet includes:
- Intended Use Plan
- Budget Narrative
- Local Match Narrative
PATH Reporting and Monitoring
As recipients of the PATH and MHBG funds, the PATH Provider is required to manage and monitor the NC PATH Program. It is expected the PATH Provider shall:

- Ensure the PATH Team is implementing the NC PATH Program as outlined in all policies and requirements.
- Ensure all individuals enrolled in PATH meet the PATH eligibility criteria.
- Ensure all required reports are accurate and correct PRIOR to submission to DMHDDSAS.
- Ensure PATH Record contains the required documents and meet the documentation requirements.
- Ensure the NC PATH Program funds are:
  - Expended on individuals enrolled in PATH only;
  - Outlined in the SAMHSA and DMHDDSAS approved PATH and MHBG Veteran Budget Narratives;
  - Meet the criteria for allowable charges.
- Ensure the PATH Local Match is met per the PATH Local Match Requirements and outlined in the SAMHSA and DMHDDSAS approved PATH Match Narrative
- Ensure all messages sent from DMHDDSAS are read and responses are provide as indicated.
- Ensure all documents, reports, requests, etc. are submitted by the due date.

7. PERFORMANCE STANDARDS AND EXPECTATIONS
All SAMHSA grantees are required to collect and report certain data so that SAMHSA can meet its obligations under the Government Performance and Results Act Modernization Act of 2010 (GPRA) found at https://www.gpo.gov/fdsys/pkg/PLAW-111publ352/pdf/PLAW-111publ352.pdf. The current GPRA performance requirements for PATH are:

- Increase the percentage of enrolled homeless persons in the Projects for Assistance in Transition from Homelessness (PATH) program who receive community mental health services.
- Number of homeless persons contacted.
- Percentage of contacted homeless persons with serious mental illness who become enrolled in services.
- Increase the number of Projects for Assistance in Transition from Homelessness (PATH) providers trained on SSI/SSDI Outreach, Access, and Recovery (SOAR) to ensure eligible homeless clients are receiving benefits.

In addition, SAMHSA asks that states report the following three outcome measures:
- Number of persons referred to and attaining housing.
- Number of persons referred to and attaining mental health services.
- Number of persons referred to and attaining substance abuse treatment services.

In addition, SAMHSA ask that states report the following three outcome measures. The specific PATH target expectations are:

a. 58% of PATH-eligible individuals contacted through outreach is to be enrolled in the NC PATH Program.

b. 65% of the individuals who are enrolled in the NC PATH Program are to be transitioned to ACT, CST, PSP, PSR and other mental health programs.

The data related to referral outcomes that SAMHSA requires on the PATH annual report is:

a. Number of PATH enrolled individuals who were assisted in obtaining Community Mental Health Services, Substance Abuse Treatment, Primary Health/Dental Care, Temporary Housing, Permanent Housing, Income Assistance, Employment Assistance, and Medical Insurance.

b. Number of PATH enrolled individuals who received Community Mental Health Services, Substance Abuse Treatment, Primary Health/Dental Care, Temporary Housing, Permanent Housing, Income Assistance, Employment Assistance, and Medical Insurance.

8. REPORTING REQUIREMENTS
Required reports to be submitted:
A. The NC HMIS Report for each month submitted quarterly. – The PATH staff enters the data in NC HMIS and the PATH Supervisor/Team Leader shall run the report for each quarter and review for accuracy.
B. The Outreach Logs submitted monthly are used by PATH staff providing outreach and are reviewed by the PATH Supervisor/Team Leader for accuracy.
C. PATH Outcome Report submitted monthly is completed on all individuals enrolled in PATH to track CMH and Housing Outcomes.
D. The Benefit Specialist Report submitted quarterly is completed by the Benefit Specialist and reviewed by the PATH Supervisor/Team Leader for accuracy.

The accumulated reports listed above provide the information required for the PATH Annual report. The PATH Supervisor is required to monitor the accuracy of the PATH Quarterly Reports. The PATH Provider submits the PATH Annual Report via the PATH Data Exchange (PDX) (www.pathpdx.org). The PATH Provider will be notified when the reporting period is open and the due date for data entry to be completed. The Contract Administrator reviews all data entries for accuracy, approves and submits the report to SAMHSA via PDX.

9. CONTRACTOR QUALIFICATIONS AND CAPACITY

DMHDDSAS will contract with nonprofit private entities (including community-based veterans’ organizations and other community organizations) meeting the following qualifications to implement the NC PATH Program:

1. History of providing services to individuals who have a serious mental illness or co-occurring substance use disorders meeting the SMI definition.
2. Have experience connecting permanent housing and supports as well as the ability to provide individuals newly enrolled into the NC PATH Program a safe place to stay while permanent housing is obtained. This may be provided by the PATH Provider or by another agency in which the PATH Provider has an agreement to use space.
3. Have experience working with individuals meeting PATH eligibility and have experience and comfort conducting outreach in outside locations such as the streets, woods, parks, under bridges, or abandoned buildings.

PATH Staff
All NC PATH Program positions are full-time dedicated position except the Certified Peer Specialist position which may be filled by no more than 2 people. NC PATH Program staff provide only PATH services and shall not provide any other service or activity. All NC PATH Program positions are 40-hours per week. It is expected for all team members to collaborate and develop relationships with local landlords, mental health and substance abuse service providers, and other agencies/organizations providing services/support to individuals enrolled in PATH.

The PATH positions are as follows:

Qualified Mental Health Professional (QMHP) Team Leader must meet the QMHP status identified in 10A NCAC 27G .0104. QMHP must have prior supervisory experience and is responsible for ensuring the PATH staff is providing PATH services as required. The Team Leader caseload is between 7-9 individuals at any given time.

The Team Leader must meet the following requirements:
- Have at least 2 years’ experience working with individuals with serious mental illness and co-occurring disorders who have experienced street homelessness;
- Have mental health case management skills as described under PATH Services
- Knowledge of symptoms associated with individuals who have schizophrenia and other psychotic disorders, bipolar disorder, depressive disorders, anxiety disorders

Supervisory experience.
- Has the skills to engage with individuals potentially meeting PATH eligibility in outside locations

The Team Leader oversees the implementation of the NC PATH Program and supervision of the PATH staff. The Team Leader’s administrative responsibilities should be limited to provide PATH services. It is expected no more than 60% of the total PATH Team Leader work time to be used for administrative tasks. The expected Team Leader’s administrative tasks include:

Supervision with PATH Team. This may best be conducted in a group with individual supervision with those needing extra guidance in meeting PATH requirements.
- Complete Division reports and submit to the Contractor Supervisor/Director for review.
- Maintain system to track costs using PATH, MHBG or Match funds identified in the PATH, MHBG and Match narratives under the “Other” category.
- Ensure collaboration with local Continuum of Care.
• Monitor data entry in NCHMIS such as accessing reports, compare outreach log to outreach contacts entered and number of individuals enrolled in PATH for accuracy.
• Review selected PATH records monthly

**Qualified Mental Health Professional** must meet the QMHP status identified in 10A NCAC 27G .0104. The QMHP shall meet the following requirements:
• Have at least 1-year experience working with individuals with serious mental illness and co-occurring disorders who have experienced street homelessness;
• Have mental health case management skills as described under PATH Services;
• Has the skills to engage with individuals potentially meeting PATH eligibility in outside locations

**Certified Peer Specialist** is an individual meeting the following requirements:
• Has previously experience homelessness, preferably by living outdoors;
• Living in recovery from a mental illness;
• Ability to share their lived experience with mental illness and homelessness to encourage, motivate, and support the individual moving forward in their recovery.
• Completed the NC Peer Specialist certification process within 6 months from the date hired.
• Has the skills to engage with individuals potentially meeting PATH eligibility in outside locations.
• Maintain certification by meeting additional required certification trainings, meetings or other as established by the NC Certified Peer Specialist Program.

**Benefit Specialists** is an individual meeting the following requirements:
• Has knowledge of symptoms of mental illness and co-occurring disorders and the individual's functional limitations that will prevent the individual from obtaining gainful employment.
• Experience in assisting individuals in applying for benefits such as SSI/SSDI, Medicaid, Veteran
• Experience collecting, organizing and writing a medical summary of individual's personal, psychiatric and functional information.
• Must meet Certified NC SOAR Caseworker Certification status within 2 years of date of hire.

Benefit Specialist assist individuals enrolled in PATH with obtaining benefits by using the SSI/SSDI Outreach, Access, Recovery (SOAR) model. The Benefit Specialist requirements include:
• Participate in NC SOAR Caseworker Dialogue Group, conferences and training
• Maintain a Benefit Specialist record with service notes
• Complete Benefit Specialist Report and Tracking Log
• Submit Medical Summary to NCCEH SOAR
• Submit NC SOAR Outcome Form to NCCEH found at https://www.ncceh.org/soar/caseworkers/
• Meet individuals assigned to them wherever the individuals choose to meet such as the park, shelter, library, etc.

Benefit Specialist activities do not include the following:
• Accompaniment and assistances to other PATH staff in conducting outreach activities documented in PATH
• Assist other PATH staff in completing activities documented in PATH Plan unless the activity directly impacts obtaining benefits such as transportation to psychiatric exams, obtain SNAP benefits
• Assists individuals not enrolled in PATH.
• Assist Contractor in completing non-PATH activities

**PATH Veteran Positions** are funded through Mental Health Block Grant to selected Contractors with identified needs. The Veteran PATH Position is filled by either an individual meeting QMHP status or CPS having a Veteran Service Member or Military Service Member designation meeting the following requirements:
• Must have document verifying military service by providing a copy of DD 214 form or Military ID
• Must have experienced homelessness preferably, living outside
• Individuals designated as QP must provide documentation demonstrating having a minimum of one-year full-time accumulated experience with the individuals who have served in the military.

NC Certified Peer Specialist must meet Veteran Service Member or Military Service Member Designation (https://pss.unc.edu/certification)

PATH Veteran Positions only serve individuals meeting PATH eligibility who have served in the military. These individuals may receive benefits, other than psychiatric services, from Veteran Affairs. The PATH Veteran is
required to work closely with the Veterans Service Office, NC Serves, and any agency providing services or supports to individuals who have served in the military to coordinate services for individuals enrolled in PATH.

**The Team Leader, QMHP, CPS and Veteran Position** shall provide PATH services to include the following:
- Conduct outreach/engagement activities in locations such as wooded areas, homeless camps, downtown streets, abandoned buildings, or under bridges and are comfortable in doing so.
- Ability to recognize symptoms of mental illness and co-occurring disorders in order to identify individuals meeting PATH eligibility.
- Ability to approach individuals to engage in a conversation with the individual.
- Enroll individuals meeting PATH eligibility. The Team Leader assists the CPS in enrollment process.
- Complete data entry in NCHMIS and meet the PATH record requirements.
- Provide PATH Services as described previously.
- Document all activities as previously described.

**Staff Training**

It is expected that PATH staff receive training each fiscal year to allow for continued growth and skill development. The following training is required:

1. **Training provided by the Division PATH staff**
   - Introduction to the NC PATH Program
   - Data Entry and Reporting
   - Housing PATH Recipients

2. **Training Provided through PATH Funds, Local Match, or other funding source**
   - HMIS
   - Motivational Interviewing
   - Outreach and Engagement
   - Trauma-Informed Care
   - Cultural and Linguistic Competency
   - Recovery
   - Person-Centered Thinking
   - Crisis Response and Suicide Prevention such as Applied Suicide Intervention Skills Training (ASIST)
   - Housing First

The Benefit Specialists will use the SSI/SSDI Outreach, Access, Recovery (SOAR) model and shall receive training through the NC Coalition to End Homelessness SOAR Program and meet the requirements to become a Certified SOAR Case Worker within 3 months from the hire date. The Benefit Specialists shall participate in the SOAR Dialogue conference calls and all other SOAR Program trainings, calls or other expectations of a Certified SOAR Case Worker.

The CPS shall maintain their certification by meeting additional required certification trainings, meetings or other as established by the NC Certified Peer Specialist Program. Individuals hired in this position without Certified Peer Specialist status shall have 6 months from date of hire to become certified.

**PATH Provider Supervisors and PATH staff are required to participate in all Division Quarterly Conference Calls, Annual PATH Meeting and other meetings or trainings as requested.**

**10. BUDGET**

The contract identifies the total amount in PATH funds the Contractor will receive. Some Contractors may receive additional funding through MHBG to fund positions focused on Veterans or individuals who served living outside with SMI or cooccurring SMI/SUD. The Contractor is required to meet the required match using non-federal funds. The PATH Application requires a detailed Budget Narrative describing how PATH funds will be used and a detailed Match Narrative describing how the required match will be met which are approved by SAMHSA and the Division. MHBG funds also require a detailed Veteran Budget Narrative is approved by the Division.

PATH funds support the salaries and fringe benefits for the indicated number/positions of staff on the PATH staff, as well as other costs necessary to support the Program, i.e., training, cell phone costs. Funds may be identified
to be used as “Other Consumer Assistance” such as utility and rent deposits, psychiatric medications co-pay, vital records and bus passes. Expenditure of PATH and MHBG funds is submitted to the Contract Administrator who reviews and approves expenditures per the PATH and MHBG Budget Narrative. The PATH expenses paid and costs to be used toward match are documented on the Financial Status Report (FSR) and FSR Tracking Report monthly. Only those costs identified on the PATH Budget and Match Narratives and Veteran Budget Narrative are allowable costs. The full PATH allocation and MHBG funds, if applicable, must be expended by June 30, 2021 and the Contractor must meet the minimum required local match as specified in the allocation letter.

Public Health Service Act, Title V, SAMHSA, Part C, PATH does not specifically include many items NC PATH Programs have used for consumer assistance. The Office of Grants Management determine the allowable costs using PATH funds and to meet the Match.

Per 45 CFR Part 75.404 Reasonable Cost
A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost. The question of reasonableness is particularly important when the non-Federal entity is predominantly federally funded. In determining reasonableness of a given cost, consideration must be given to:
(a) Whether the cost is of a type generally recognized as ordinary and necessary for the operation of the non-Federal entity or the proper and efficient performance of the Federal award.
(b) The restraints or requirements imposed by such factors as: Sound business practices; arm’s-length bargaining; Federal, state, local, tribal, and other laws and regulations; and terms and conditions of the Federal award.
(c) Market prices for comparable goods or services for the geographic area.
(d) Whether the individuals concerned acted with prudence in the circumstances considering their responsibilities to the non-Federal entity, its employees, where applicable its students or membership, the public at large, and the Federal Government.
(e) Whether the non-Federal entity significantly deviates from its established practices and policies regarding the incurrence of costs, which may unjustifiably increase the Federal award’s cost.

The use of PATH funds and the Match requirements are governed by the following:

- Public Health Service Act, Title V, SAMHSA, Part C, PATH - https://www.law.cornell.edu/uscode/text/42/290cc-21
- 2 CFR Part 200 "Uniform Administrative Requirements, Cost Principles, and https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl
- G.S. 143C-6-23. State grant funds: administration; oversight and reporting requirements - https://www.ncleg.net/enactedlegislation/statutes/html/bychapter/chapter_143c.html
- MHBG - Title 42 - Public Health and Welfare Chapter 6A - Public Health Service Subchapter XVII - Block Grants Part B - https://uscode.house.gov/view.xhtml?req=granuleid%3AUSC-prelim-title42-chapter6A-subchapter17-partB&saved=%7CKHRpGxIQiVylHNY3Rpb246MzAwec0yMSBZG1oaW9uOnByZWhpbSkqT1lqKGdvYW51bGVpZDpVU0MtcHJlbGlXRpdxNDItc2VjdGljbMwMHgtMjEp%7Cf7HiJlZXCnQ%3D%7C7C0%7Cfalso%7Cpreamil&edition=prelim
- DHHS Travel Policy

Only costs identified in the PATH Budget, Veteran Budget and Match Narratives are approved costs. No other costs will be reimbursed or used to meet match.

A. Allowable Cost
PATH funds support the salaries and fringe benefits for the indicated number/positions of staff on the PATH staff, as well as other costs necessary to support the Program, i.e., training, cell phone costs. Funds may be identified to be used as “other” such as utility and rent security deposits, medications, bus passes and copies of medical records. The PATH Application requires a Budget Narrative describing how PATH funds will be used. Only those costs identified on the approved PATH Budget Narrative will be reimbursed. Use of PATH funds for individuals not enrolled in PATH is not allowed except for the use of conducting outreach to determine PATH eligibility.
The full NC PATH Program funds must be expended by June 30, 2021 and the PATH Provider must meet the minimum required local match as specified in the PATH Application.

**PATH Expenses** are documented per line item per month on the Section identifies as “Report of Monthly PATH Fund Expenditures (Federal Allocated Funds Only)”. The approved detailed PATH Budget Narrative details how the Contractor will expend the PATH funds.

PATH funds may be used to support individuals enrolled in PATH listed under “Other” for the following:

**Consumer Assistance**
- Bus tickets (No other transportation) – service habilitation/rehabilitation
- Copay cost to individual enrolled in PATH for psychiatric medications (SAMHSA Grants Management requires minimal amount)
- Vital Records (SAMHSA Grants Management requires minimal amount)
- Apartment application fees

**Housing**
- Rent and Utility Security Deposits

PATH funds cannot pay the cost of:
- Physical health treatments, medications or over the counter medications (adult diapers)
- Purchase of survival items such as tents, sleeping bags
- Food/groceries
- Clothing
- Cost for hotel, motel, or transitional housing for individuals enrolled in PATH
- Other items per SAMHSA Grants Management

**Local Match.** The Contractor is responsible to fulfill the Federal matching funds requirement minimally of $1 match for each $3 PATH Funds. The Local Match is met through non-federal contributions and may be cash or in-kind to support the NC PATH Program and/or the individuals enrolled in PATH. Amounts provided by the Federal Government or services assisted or subsidized to any significant extent by the Federal Government, shall not be included when determining the amount of such non-federal contributions. Cash donations may be used to supplement staff salaries, pay for housing/utility security deposits for individuals enrolled in PATH or other line items categories identified on the PATH Match Narrative.

The PATH Application requires a Match Narrative describing how the Contractor will meet the match requirement and uses the same line items categories as the PATH Budget Narrative. The items used as match must have clear, descriptive, supportive documentation which is submitted monthly. Only the items identified on the Match Narrative are allowable costs to meet the match. The in-kind match may be met through in-kind donations or cash specifically for individuals enrolled in the NC PATH Program. The Match Narrative describes which expenses are in-kind and which are cash. The donations are appropriate services or items for an individual experiencing homelessness.

The value of the donations is calculated by the fair-market cost of the donated item and the calculated cost of agency’s donations based on the percentage of the donation use by the PATH staff.

These items are documented on the Match Report.
- Office furniture - desk, chair
- Supplies such as paper, cell phone cost,
- Equipment such as a printer, copy machine, cell phones
- Office space – supportive documentation required at the time of PATH application:
  - Rental costs of comparable property
  - Total square footage of agency building or office space
  - Floor plan clearly indicating the PATH staff office
  - Total square footage of office space used by PATH staff
  - Documentation of total rent cost
  - Detail description how cost for match was determined
  - The office space of Non-PATH staff providing direct support to individuals enrolled in PATH may be used towards Match.
The following items are listed as “Other” - “Consumer Assistance” and “Housing” on the Match Narrative and must be documented on the Consumer Assistance log.

**Consumer Assistance**

Individual hygiene products (SAMHSA Grants Management requires minimal amount and hygiene kits are not allowable)
- Bus tickets for individuals enrolled in PATH
- Copay cost to individual enrolled in PATH for psychiatric medications
- Vital Records
- In-kind donations (e.g., merchandise from stores, volunteer time, food banks) for people enrolled in PATH
- Services (e.g., haircuts, medication management, resume assistance) for people enrolled in PATH
- Items to use for outreach and engagement to people who potentially meet PATH eligibility (e.g., bottled water, healthy snacks, mittens, hygiene kits, tents, blankets)
- Bags of groceries donated or purchased for people enrolled in PATH
- Necessary household items essential to move into permanent housing (e.g., dishes, cookware, bedding, furniture, utensils, drinking cups, bathroom supplies0 for people enrolled in PATH
- Survival supplies such as blankets, sleeping bags, or tarps for people enrolled in PATH
- Clothing such as pants, tops, jackets, and shoes for people enrolled in PATH
- Hygiene items such as soap, toothpaste, toothbrushes, and shampoo for people enrolled in PATH
- Non-perishable food items such canned meat, vegetables, fruit, or soup; bottled water; and Gatorade for people enrolled in PATH

**Housing**

- Essential Items to necessary to assist an individual enrolled in PATH to move into an apartment such as, kitchen - pots, pans, dishes; bedroom - mattress, bedding; bathroom – towels - Items are not listed separately on the Consumer Assistance Log. The required documentation is a receipt with the person's name, apartment address, company delivering the items, listing all the items delivered to the person,
- Utility security deposits, rent and rent security deposits, and rental application fees for people enrolled in PATH

**B Limitations and Restrictions**

- PATH funds must be used for purposes described in this document.
- No more than 20% of the federal PATH funds allocated to the state may be expended for eligible housing services as specified in Section 522(h)(1) of the PHS act.
- Security deposits may be made on behalf of an individual enrolled and actively participating in the NC PATH Program to secure permanent housing only. The NC PATH Program must assist the individual in securing the housing and ensure the housing meets all codes and inspections. A case note is written to describe the assistance with housing, location of housing and the individual’s PATH plan to pay the on-going rent. MHBG Veteran funds may not be used for housing costs.
- PATH assists individuals with obtaining housing. The total cost of rent to include utilities should not be over 40% of the individual's income. If the cost is over 40%, a detailed service note shall be completed explaining how housing will be maintained (i.e., interventions, anticipated date of rental subsidy approval and disbursement, etc.).
- PATH funds may not be used for utility assistance, to pay turn-off notices, to pay application fees or rental assistance other than to prevent eviction.

PATH funds may not be expended for the following:
- To support emergency shelters;
- To pay ongoing rent costs;
- For inpatient psychiatric treatment;
- For inpatient substance abuse treatment;
- To make cash payments to intended recipients of mental health or substance abuse services;
- To pay for the purchase or construction of any building or structure to house NC PATH Program staff;
- For lease arrangements in association with the proposed project utilizing PATH funds may not be funded by PATH beyond the project period nor may the portion of the space leased with PATH funds be used for purposes not supported by the grant;
• To purchase items for the NC PATH Program Offices such as paper plates, paper cups, coffee filters, water or plastic utensils.

MHBG Veteran Fund may not be expended for the following:
• MHBG funds may not be used to pay for housing supports such as Utility Deposits, Move-in costs or
• Items such as furniture, kitchen, bathroom or bedroom
• Bus passes
• Items for outreach such as bottled water, hygiene products.

SAMHSA requires each State to apply for PATH and MHBG Veteran funds annually. The PATH Provider is required to apply for PATH funds for continuation of the NC PATH Program. The PATH Annual Application includes:
• Intended Use Plan
• PATH Budget Narrative
• Local Match Narrative
• MHBG Veteran Budget Narrative

In addition, DHHS requires the following documents if the match is to include PATH Provider staff time.
• PATH Match Narrative – Personnel
• PATH Match Narrative – Fringe Benefits

The RFA line item budget shall constitute the total cost to the Division to complete performance in accordance with the requirements and specifications herein, including all applicable expenses such as administrative cost. Contractor shall not invoice for any amounts not specifically allowed for in the line item budget of this RFA.

The Contractor shall use the Budget found in ATTACHMENT F to document total costs. Each cost identified in the Budget must be described in the PATH, MHBG and Match Narratives which includes specific, detailed and clear descriptions for each cost listed in the Budget to create the Budget Narratives found in Attachments G, H, I, J, and K. The applicant shall not use any other tables or forms, nor modify any required document.

All costs provided in Line item budget must be firm and fixed for the duration of the contract. Revisions may be considered

11. Invoicing and Reimbursement

The Contractor is required to expend 100% of the PATH and MHBG (if applicable) funds and meet 100% of the required match by the end of the fiscal year. Failure to do so may result in a decrease in PATH funding. Upon execution of the contract, the Contractor shall submit to the Division Contract Administrator, a monthly reimbursement request for services rendered the previous month by the 25th of each month and, upon approval by the Division, receive payment within 30 days. Monthly payment shall be made based on actual expenditures made in accordance with the approved budget on file with both parties and reported on the monthly expenditure report submitted by the Contractor. If the contract is terminated, the Contractor shall complete a final accounting report and return any unearned funds to the Division within 30 days of the contract termination date. The Division shall have no obligation for payments based on expenditure reports submitted later than 30 days after termination or expiration of the contract period. All payments are contingent upon fund availability.

The required documents due monthly include:
• Financial Status Report (FSR)
• PATH FSR Tracking Report (Required to send as Excel document)
• Consumer Assistance Log (Required to send as Excel document)
• Supportive documentation for costs for reimbursement of PATH funds and to meet the Match as identified in the approved PATH and MHBG Veteran (if applicable) Budget and/or Match Narratives
• PATH Outreach Log (Required to send as Excel document)
• PATH Outcome Report (Required to send as Excel document)
• Bus Log (if applicable)
• Donated Items – Fair Market Value List
• Other documentation requested to support costs.
12. THE SOLICITATION PROCESS

The following is the description of the process by which agencies or organizations will be selected to complete the goal or objective.

1) RFA will be posted on the DMHDDSAS website.
2) Written questions concerning the RFA specifications will be received until the date specified on the cover sheet of this RFA. A summary of all questions and answers will be posted on the DMHDDSAS website.
3) Applications will be received from agency or organization. The original must be signed and dated by an official authorized to bind the agency or organization.
4) All applications must be received by 5:00 pm on January 20, 2021.
5) The complete Application Packet must be submitted electronically to Christopher Drew at christopher.drew@dhhs.nc.gov.

6) Indicate on the subject line “(Agency name, PATH location (Charlotte, Fayetteville, Wilmington or Durham) RFA 2021”.

7) Agencies in Charlotte, Fayetteville, Wilmington and Durham are eligible to apply for a NC PATH Program. The NC PATH Program provide services only in the Charlotte, Fayetteville, Wilmington and Durham.
8) Applications will be evaluated according to completeness, content, experience with similar projects using data to describe activities, ability of the agency's or organization's staff, cost, etc. The award of a grant to one agency and organization does not mean that the other applications lacked merit, but that, all facts considered, the selected application was deemed to provide the best service to the State.
9) Agencies and organizations are cautioned that this is a request for applications, and the funding agency reserves the unqualified right to reject any and all applications when such rejections are deemed to be in the best interest of the funding agency.

13. GENERAL INFORMATION ON SUBMITTING APPLICATIONS

1) Award or Rejection
   All qualified applications will be evaluated, and awards made to those agencies or organizations whose capabilities are deemed to be in the best interest of the funding agency. The funding agency reserves the unqualified right to reject any or all offers if determined to be in its best interest. Successful Contractors will be notified by November 30, 2020.

2) Decline to Offer
   Any agency or organization that receives a copy of the RFA but declines to make an offer is requested to send a written "Decline to Offer" to the funding agency. Failure to respond as requested may subject the agency or organization to removal from consideration of future RFAs.

3) Cost of Application Preparation
   Any cost incurred by an agency or organization in preparing or submitting an application is the agency's or organizations sole responsibility; the funding agency will not reimburse any agency or organization for any pre-award costs incurred.

4) Elaborate Applications
   Elaborate applications in the form of brochures or other presentations beyond that necessary to present a complete and effective application are not desired.

5) Oral Explanations
   The funding agency will not be bound by oral explanations or instructions given at any time during the competitive process or after awarding the grant.

6) Reference to Other Data
   Only information that is received in response to this RFA will be evaluated; reference to information previously submitted will not suffice.

7) Titles
   Titles and headings in this RFA and any subsequent RFA are for convenience only and shall have no binding force or effect.

8) Form of Application
   Each application must be submitted on the form provided by the funding agency, which will become the funding agency's Performance Agreement (contract).

9) Exceptions
   All applications are subject to the terms and conditions outlined herein. All responses will be controlled by
such terms and conditions. The attachment of other terms and condition by any agency and organization may be grounds for rejection of that agency or organization's application. Funded agencies and organizations specifically agree to the conditions set forth in the Performance Agreement (contract).

10) Advertising
In submitting its application, agencies and organizations agree not to use the results therefrom or as part of any news release or commercial advertising without prior written approval of the funding agency.

11) Right to Submitted Material
All responses, inquiries, or correspondence relating to or in reference to the RFA, and all other reports, charts, displays, schedules, exhibits, and other documentation submitted by the agency or organization will become the property of the funding agency when received.

12) Competitive Offer
Pursuant to the provision of G.S. 143-54, and under penalty of perjury, the signer of any application submitted in response to this RFA thereby certifies that this application has not been arrived at collusively or otherwise in violation of either Federal or North Carolina antitrust laws.

13) Agency and Organization's Representative
Each agency or organization shall submit with its application the name, address, and telephone number of the person(s) with authority to bind the agency or organization and answer questions or provide clarification concerning the application.

14) Subcontracting
Agencies and organizations may propose to subcontract portions of work provided that their applications clearly indicate the scope of the work to be subcontracted, and to whom. All information required about the prime grantee is also required for each proposed subcontractor.

15) Proprietary Information
Trade secrets or similar proprietary data which the agency or organization does not wish disclosed to other than personnel involved in the evaluation will be kept confidential to the extent permitted by NCAC TO1: 05B.1501 and G.S. 132-1.3 if identified as follows: Each page shall be identified in boldface at the top and bottom as "CONFIDENTIAL." Any section of the application that is to remain confidential shall also be so marked in boldface on the title page of that section.

16) Participation Encouraged
Pursuant to Article 3 and 3C, Chapter 143 of the North Carolina General Statutes and Executive Order No. 77, the funding agency invites and encourages participation in this RFA by businesses owned by minorities, women and the disabled including utilization as subcontractor(s) to perform functions under this Request for Applications.

17) Contract
The Division will issue a contract to the recipient of the grant that will include their application.

18) Federal Certifications
i) Agencies or organizations receiving Federal funds will be required to execute Federal Certifications regarding Non-discrimination, Drug-Free Workplace, Environmental Tobacco Smoke, Debarment, Lobbying, and Lobbying Activities. A copy of the Federal Certifications is included in this RFA for your reference (see Appendix B). Federal Certifications should NOT be signed or returned with the application.

Please be advised that successful Contractors may be required to have an audit in accordance with G. S. 143-6.2 as applicable to the agency or organization's status. Also, the contract may include assurances the successful Contractor would be required to execute when signing the contract. Agencies or organizations receiving Federal funds will be required to execute a Consolidated Federal Certification form (as applicable). Private not for profit agency contracts will also include a conflict of interest policy statement.
14. **APPLICATION CONTENT AND INSTRUCTIONS**  
*(Use Attachment A – Application to apply)*

**Project for Assistance in Transition from Homelessness (PATH) – RFA**

<table>
<thead>
<tr>
<th>Organization/Agency Name</th>
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<table>
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<tr>
<th>Agency CEO/Director</th>
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<tr>
<th>Name of Agency Contact Person</th>
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<tr>
<th>Telephone No. of Agency Contact Person</th>
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<table>
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<tr>
<th>E-Mail Address of Agency Contact Person</th>
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<table>
<thead>
<tr>
<th>Name of City Agency Proposes a NC PATH Program</th>
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**THE UNDERSIGNED HEREBY SUBMITS THE FOLLOWING APPLICATION AND CERTIFIES THAT:** (1) he or she is authorized to adhere to the terms of this RFA and Application; (2) agency agrees to provide services in the manner and at the costs described in this RFA and Application.

<table>
<thead>
<tr>
<th>Signature Agency CEO/Director or Authorized Representative</th>
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**Provide the following information. The information is required to be descriptive, detailed, specific and use data or other information to support response.**

1. Describe the agency’s mission, purpose, type of agency and services offered. (2 pts)

2. Describe the agency’s current and past experience serving individuals who are living outside with a serious mental illness or co-occurring disorders (Target Population). Response must provide information to support record of serving this population such as name of awarded grants, data submitted to SAMHSA, State or other funders. (16 pts)

3. Describe the organization’s participation with local HUD Continuum of Care (CoC) recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. (3 pts)

4. Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including: (16 pts)
   a. How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are living outside and chronically homeless, including those with serious mental illness who are veterans and experiencing homelessness, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing.
   b. Any gaps that exist in the current service systems.
c. A brief description of the current services available to the target population who have both a serious mental illness and a substance use disorder.

d. A brief description of how PATH eligibility will be determined, when enrollment will occur, and how eligibility will be documented for individuals enrolled in PATH.

5. Describe the agencies participation in HMIS and describe plans for training and support to PATH staff and process to ensure accurate data entry. (3pts.)

6. Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary health, mental health, substance use disorder, housing, employment) to target population, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved. (10 pts)

7. Provide a brief description of partnerships the agency has with organizations or agencies that provide mental health support and services to target population. Describe the coordination of activities and list any Memorandum of Agreements. (10 pts)

8. Describe the agency’s collaboration with Local Management Entity/Managed Care:
   - Charlotte – Cardinal Innovations Healthcare
   - Fayetteville and Durham – Alliance Health
   - Wilmington – Trillium Health Resources.
   Provide specific data demonstrating the number of individuals the agency has referred for community mental health services such as ACT, CST, Peer Services and PSR and the number of individuals that attained mental health treatment between October 1, 2019 and October 30, 2020. Describe process for referring individuals enrolled in PATH through LME-MCO or directly to agency providing services. (2 pts)

9. Indicate the strategies that will be used for making suitable housing available for individuals enrolled in PATH. Provide specific data demonstrating the number of individuals the agency has referred for permanent supported housing and the number of individuals that attained permanent supported housing (i.e., indicate the type of housing provided and the name of the agency) between October 1, 2019 and October 30, 2020. (5 pts)

10. Describe how the agency will use PATH funds to meet the PATH goal to provide street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless. (16 pts)

11. Describe the agency’s experience using the SSI/SSDI Outreach, Access, Recovery (SOAR) model. Indicate the number of staff who are trained and utilize the model with the target population. Describe the trained staff’s participation in the NC SOAR Program’s SOAR Case Worker Certification and SOAR Dialogue conference calls. (3 pts)

12. Describe how staff providing services to the target population will be sensitive to age, gender, disability, lesbian, gay, bisexual, and transgender, racial/ethnic, and differences of individuals served. Describe the extent to which staff receive initial and periodic training in cultural competence and health disparities. Describe experience with addressing health disparities. (3 pts)

13. Describe the demographics of the target population served by the agency, the projected number individuals to be outreached and enrolled, and the percentage of individuals enrolled who lived outside prior to enrollment. (3 pts)

14. Describe how individuals who experience homelessness and have serious mental illness, and their family members, will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards. (3 pts)
15. Agencies applying for the PATH Grant shall submit application packet which includes the following documents: (5 pts.)
1. PATH RFA Application Form (Attachment A)
2. PATH Budget (Attachment F)
3. Detailed PATH Fund Budget Narrative (Attachment G)
4. Detailed MHBG Fund Budget Narrative – Veteran Positions(s) (Attachment H)
5. Detailed Match Narrative (Attachment I)
6. Description of Personal Time Used to Meet Match (Attachment J)
7. Description of Fringe Benefits Used to Meet Match (Attachment K)
8. An organizational chart identifying the personnel who will be assigned to work on this project.
9. Letters supporting the development of a NC PATH Program in Charlotte, Fayetteville, Durham, or Wilmington:
   a. Community partners providing mental health and co-occurring mental health and substance use treatment and supports to target population.
   b. Local Management Entity/Managed Care:
      - Fayetteville and Durham – Alliance Health
      - Wilmington – Trillium Health Resources
   c. Local Continuum of Care
   d. Housing Providers that serves the target population
   e. Community partners providing other services and supports to the target population

Submit complete Application, including signature of authorized representative Christopher Drew at Christopher.Drew@dhhs.nc.gov no later than 5:00 p.m. on January 20, 2021.

15. EVALUATION CRITERIA AND SCORING

PHASE I: INITIAL QUALIFYING CRITERIA

INITIAL QUALIFYING CRITERIA

The applicant’s proposal must meet all of the following Phase I application acceptance criteria in order to be considered for further evaluation. Any proposal receiving a “no” response to any of the following qualifying criteria shall be disqualified from consideration.

<table>
<thead>
<tr>
<th>ITEM</th>
<th>APPLICATION ACCEPTANCE CRITERIA</th>
<th>RFA Section</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Was the contractor’s application received by the deadline specified in the RFA?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>Agency proposal is signed by agency CEO/Director or authorized representative.</td>
<td></td>
<td></td>
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<tr>
<td>4</td>
<td>Agency meets eligibility requirements as stated in Section 2.</td>
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<tr>
<td>5</td>
<td>Agency meets the minimum Qualification Requirements as described in Section 9.</td>
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PHASE II: CRITERIA FOR SCORING PROPOSAL/APPLICATIONS

Qualifying application proposals will be collectively scored by a review team comprised of three staff at DMHDDSAS, Transition Team, one staff from Contract Team, and one Mental Health Provider for a total of five reviewers. All qualified applications will be evaluated, and awards made based on the following criteria considered, to result in awards most advantageous to the State. Applications will be scored on the content, quality, and completeness of the responses to the items in the application and award providers who demonstrate the ability to meet the PATH requirements. Please note that Contractors not meeting the eligibility requirements or any of the minimum or mandatory requirements as stated in Phase I will not be scored.

The Application includes the maximum score for each item with the 100 total possible points.
16. GENERAL TERMS AND CONDITIONS

Relationships of the Parties

Independent Contractor: The Contractor is and shall be deemed to be an independent contractor in the performance of this contract and as such shall be wholly responsible for the work to be performed and for the supervision of its employees. The Contractor represents that it has, or shall secure at its own expense, all personnel required in performing the services under this agreement. Such employees shall not be employees of, or have any individual contractual relationship with, the Division.

Subcontracting: The Contractor shall not subcontract any of the work contemplated under this contract without prior written approval from the Division. Any approved subcontract shall be subject to all conditions of this contract. Only the subcontractors specified in the contract documents are to be considered approved upon award of the contract. The Division shall not be obligated to pay for any work performed by any unapproved subcontractor. The Contractor shall be responsible for the performance of all of its subcontractors.

Assignment: No assignment of the Contractor's obligations or the Contractor's right to receive payment hereunder shall be permitted. However, upon written request approved by the issuing purchasing authority, the State may: (a) Forward the Contractor's payment check directly to any person or entity designated by the Contractor; or (b) Include any person or entity designated by Contractor as a joint payee on the Contractor's payment check. In no event shall such approval and action obligate the State to anyone other than the Contractor and the Contractor shall remain responsible for fulfillment of all contract obligations.

Beneficiaries: Except as herein specifically provided otherwise, this contract shall inure to the benefit of and be binding upon the parties hereto and their respective successors. It is expressly understood and agreed that the enforcement of the terms and conditions of this contract, and all rights of action relating to such enforcement, shall be strictly reserved to the Division and the named Contractor. Nothing contained in this document shall give or allow any claim or right of action whatsoever by any other third person. It is the express intention of the Division and Contractor that any such person or entity, other than the Division or the Contractor, receiving services or benefits under this contract shall be deemed an incidental beneficiary only.

Indemnity and Insurance

<table>
<thead>
<tr>
<th>Evaluation Criteria</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Agency Mission/Goals</td>
<td>2 points</td>
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<tr>
<td>2. Agency Experience with Target Population</td>
<td>16 points</td>
</tr>
<tr>
<td>3. Coordination with HUD</td>
<td>3 points</td>
</tr>
<tr>
<td>4. Agency Plan to Serve Target Population</td>
<td>16 points</td>
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<tr>
<td>5. HMIS Participation</td>
<td>3 points</td>
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<tr>
<td>6. Community Partnerships</td>
<td>10 points</td>
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<tr>
<td>7. Mental Health Provider Partnerships</td>
<td>10 points</td>
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<tr>
<td>8. Alliance Behavioral Health LME-MCO Partnership</td>
<td>2 points</td>
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<tr>
<td>9. Housing Coordination</td>
<td>5 points</td>
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<tr>
<td>10. Plan Providing Street Outreach Activities</td>
<td>16 points</td>
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<tr>
<td>11. Experience with SOAR</td>
<td>3 points</td>
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<tr>
<td>12. Cultural Competency</td>
<td>3 points</td>
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<tr>
<td>13. Demographics Individuals Agency Serves</td>
<td>3 points</td>
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<tr>
<td>14. Consumer Involvement</td>
<td>3 points</td>
</tr>
<tr>
<td>15. Budget and Letters of Support</td>
<td>5 points</td>
</tr>
<tr>
<td>Total Score</td>
<td>100 points</td>
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</table>
**Indemnification:** The Contractor agrees to indemnify and hold harmless the Division, the State of North Carolina, and any of their officers, agents and employees, from any claims of third parties arising out of any act or omission of the Contractor in connection with the performance of this contract.

**Insurance:**

(a) During the term of the contract, the Contractor shall provide, at its sole cost and expense, commercial insurance of such types and with such terms and limits as may be reasonably associated with the contract. At a minimum, the Contractor shall provide and maintain the following coverage and limits:

(1) **Worker's Compensation Insurance:** The Contractor shall provide and maintain worker's compensation insurance, as required by the laws of the states in which its employees work, covering all of the Contractor's employees who are engaged in any work under the contract.

(2) **Employer's Liability Insurance:** The Contractor shall provide employer's liability insurance, with minimum limits of $500,000.00, covering all of the Contractor's employees who are engaged in any work under the contract.

(3) **Commercial General Liability Insurance:** The Contractor shall provide commercial general liability insurance on a comprehensive broad form on an occurrence basis with a minimum combined single limit of $1,000,000.00 for each occurrence.

(4) **Automobile Liability Insurance:** The Contractor shall provide automobile liability insurance with a combined single limit of $500,000.00 for bodily injury and property damage; a limit of $500,000.00 for uninsured/under insured motorist coverage; and a limit of $2,000.00 for medical payment coverage. The Contractor shall provide this insurance for all automobiles that are:

(A) owned by the Contractor and used in the performance of this contract;

(B) hired by the Contractor and used in the performance of this contract; and

(C) owned by Contractor's employees and used in performance of this contract ("non-owned vehicle insurance"). Non-owned vehicle insurance protects employers when employees use their personal vehicles for work purposes. Non-owned vehicle insurance supplements, but does not replace, the car-owner's liability insurance.

The Contractor is not required to provide and maintain automobile liability insurance on any vehicle – owned, hired, or non-owned – unless the vehicle is used in the performance of this contract.

(b) The insurance coverage minimums specified in subparagraph (a) are exclusive of defense costs.

(c) The Contractor understands and agrees that the insurance coverage minimums specified in subparagraph (a) are not limits, or caps, on the Contractor's liability or obligations under this contract.

(d) The Contractor may obtain a waiver of any one or more of the requirements in subparagraph (a) by demonstrating that it has insurance that provides protection that is equal to or greater than the coverage and limits specified in subparagraph (a). The Division shall be the sole judge of whether such a waiver should be granted.

(e) The Contractor may obtain a waiver of any one or more of the requirements in paragraph (a) by demonstrating that it is self-insured and that its self-insurance provides protection that is equal to or greater than the coverage and limits specified in subparagraph (a). The Division shall be the sole judge of whether such a waiver should be granted.

(f) Providing and maintaining the types and amounts of insurance or self-insurance specified in this paragraph is a material obligation of the Contractor and is of the essence of this contract.

(g) The Contractor shall only obtain insurance from companies that are authorized to provide such coverage and that are authorized by the Commissioner of Insurance to do business in the State of North Carolina. All such insurance shall meet all laws of the State of North Carolina.

(h) The Contractor shall comply at all times with all lawful terms and conditions of its insurance policies and all lawful requirements of its insurer.

(i) The Contractor shall require its subcontractors to comply with the requirements of this paragraph.

(j) The Contractor shall demonstrate its compliance with the requirements of this paragraph by submitting certificates of insurance, if requested, to the Division before the Contractor begins work under this contract.

**Default and Termination**

**Termination Without Cause:** The Division may terminate this contract without cause by giving 30 days written notice to the Contractor.

**Termination for Cause:** If, through any cause, the Contractor shall fail to fulfill its obligations under this contract in a timely and proper manner, the Division shall have the right to terminate this contract by giving written notice to the Contractor and specifying the effective date thereof. In that event, all finished or unfinished deliverable items prepared by the Contractor under this contract shall, at the option of the Division, become its property and the Contractor shall be entitled to receive just and equitable compensation for any satisfactory work completed on such materials, minus any payment or compensation previously made. Notwithstanding the foregoing provision, the Contractor shall not be relieved of liability to the Division for damages sustained by the Division by virtue of the Contractor's breach of this agreement, and the Division may withhold any payment due the Contractor for the purpose of setoff until such time as the exact amount of damages due the Division from such breach can be determined. In case of default by the Contractor, without limiting any other remedies for breach available to it, the Division may procure the contract...
services from other sources and hold the Contractor responsible for any excess cost occasioned thereby. The filing of a petition for bankruptcy by the Contractor shall be an act of default under this contract.

**Waiver of Default:** Waiver by the Division of any default or breach in compliance with the terms of this contract by the Contractor shall not be deemed a waiver of any subsequent default or breach and shall not be construed to be modification of the terms of this contract unless stated to be such in writing, signed by an authorized representative of the Department and the Contractor and attached to the contract.

**Availability of Funds:** The parties to this contract agree and understand that the payment of the sums specified in this contract is dependent and contingent upon and subject to the appropriation, allocation, and availability of funds for this purpose to the Division.

**Force Majeure:** Neither party shall be deemed to be in default of its obligations hereunder if and so long as it is prevented from performing such obligations by any act of war, hostile foreign action, nuclear explosion, riot, strikes, civil insurrection, earthquake, hurricane, tornado, or other catastrophic natural event or act of God.

**Survival of Promises:** All promises, requirements, terms, conditions, provisions, representations, guarantees, and warranties contained herein shall survive the contract expiration or termination date unless specifically provided otherwise herein, or unless superseded by applicable Federal or State statutes of limitation.

**Intellectual Property Rights**

**Copyrights and Ownership of Deliverables:** All deliverable items produced pursuant to this contract are the exclusive property of the Division. The Contractor shall not assert a claim of copyright or other property interest in such deliverables.

**Federal Intellectual Property Bankruptcy Protection Act:** The Parties agree that the Division shall be entitled to all rights and benefits of the Federal Intellectual Property Bankruptcy Protection Act, Public Law 100-506, codified at 11 U.S.C. 365 (n) and any amendments thereto.

**Compliance with Applicable Laws**

**Compliance with Laws:** The Contractor shall comply with all laws, ordinances, codes, rules, regulations, and licensing requirements that are applicable to the conduct of its business, including those of federal, state, and local agencies having jurisdiction and/or authority.

**Equal Employment Opportunity:** The Contractor shall comply with all federal and State laws relating to equal employment opportunity.

**Health Insurance Portability and Accountability Act (HIPAA):** The Contractor agrees that, if the Division determines that some or all of the activities within the scope of this contract are subject to the Health Insurance Portability and Accountability Act of 1996, P.L. 104-91, as amended (“HIPAA”), or its implementing regulations, it will comply with the HIPAA requirements and will execute such agreements and practices as the Division may require to ensure compliance.

**Confidentiality**

**Confidentiality:** Any information, data, instruments, documents, studies or reports given to or prepared or assembled by the Contractor under this agreement shall be kept as confidential and not divulged or made available to any individual or organization without the prior written approval of the Division. The Contractor acknowledges that in receiving, storing, processing or otherwise dealing with any confidential information it will safeguard and not further disclose the information except as otherwise provided in this contract.

**Data Security:** The Contractor shall adopt and apply data security standards and procedures that comply with all applicable federal, state, and local laws, regulations, and rules.

**Duty to Report:** The Contractor shall report a suspected or confirmed security breach to the Division’s Contract Administrator within twenty-four (24) hours after the breach is first discovered, provided that the Contractor shall report a breach involving Social Security Administration data or Internal Revenue Service data within one (1) hour after the breach is first discovered. During the performance of this contract, the contractor is to notify the Division contract administrator of any contact by the federal Office for Civil Rights (OCR) received by the contractor.

**Cost Borne by Contractor:** If any applicable federal, state, or local law, regulation, or rule requires the Division or the Contractor to give affected persons written notice of a security breach arising out of the Contractor’s performance under this contract, the Contractor shall bear the cost of the notice.

**Oversight**

**Access to Persons and Records:** The State Auditor shall have access to persons and records as a result of all contracts or grants entered into by State agencies or political subdivisions in accordance with General Statute 147-64.7. Additionally, as the State funding authority, the Department of Health and Human Services shall have access to persons and records as a result of all contracts or grants entered into by State agencies or political subdivisions.
Record Retention: Records shall not be destroyed, purged or disposed of without the express written consent of the Division. State basic records retention policy requires all grant records to be retained for a minimum of five years or until all audit exceptions have been resolved, whichever is longer. If the contract is subject to federal policy and regulations, record retention may be longer than five years. Records must be retained for a period of three years following submission of the final Federal Financial Status Report, if applicable, or three years following the submission of a revised final Federal Financial Status Report. Also, if any litigation, claim, negotiation, audit, disallowance action, or other action involving this Contract has been started before expiration of the five-year retention period described above, the records must be retained until completion of the action and resolution of all issues which arise from it, or until the end of the regular five-year period described above, whichever is later. The record retention period for Temporary Assistance for Needy Families (TANF) and MEDICAID and Medical Assistance grants and programs must be retained for a minimum of ten years.

Warranties and Certifications

Date and Time Warranty: The Contractor warrants that the product(s) and service(s) furnished pursuant to this contract ("product" includes, without limitation, any piece of equipment, hardware, firmware, middleware, custom or commercial software, or internal components, subroutines, and interfaces therein) that perform any date and/or time data recognition function, calculation, or sequencing will support a four digit year format and will provide accurate date/time data and leap year calculations. This warranty shall survive the termination or expiration of this contract.

Certification Regarding Collection of Taxes: G.S. 143-59.1 bars the Secretary of Administration from entering into contracts with vendors that meet one of the conditions of G.S. 105-164.8(b) and yet refuse to collect use taxes on sales of tangible personal property to purchasers in North Carolina. The conditions include: (a) maintenance of a retail establishment or office; (b) presence of representatives in the State that solicit sales or transact business on behalf of the vendor; and (c) systematic exploitation of the market by media-assisted, media-facilitated, or media-solicited means. The Contractor certifies that it and all of its affiliates (if any) collect all required taxes.

Miscellaneous

Choice of Law: The validity of this contract and any of its terms or provisions, as well as the rights and duties of the parties to this contract, are governed by the laws of North Carolina. The Contractor, by signing this contract, agrees and submits, solely for matters concerning this Contract, to the exclusive jurisdiction of the courts of North Carolina and agrees, solely for such purpose, that the exclusive venue for any legal proceedings shall be Wake County, North Carolina. The place of this contract and all transactions and agreements relating to it, and their situs and forum, shall be Wake County, North Carolina, where all matters, whether sounding in contract or tort, relating to the validity, construction, interpretation, and enforcement shall be determined.

Amendment: This contract may not be amended orally or by performance. Any amendment must be made in written form and executed by duly authorized representatives of the Division and the Contractor. The Purchase and Contract Divisions of the NC Department of Administration and the NC Department of Health and Human Services shall give prior approval to any amendment to a contract awarded through those offices.

Severability: In the event that a court of competent jurisdiction holds that a provision or requirement of this contract violates any applicable law, each such provision or requirement shall continue to be enforced to the extent it is not in violation of law or is not otherwise unenforceable and all other provisions and requirements of this contract shall remain in full force and effect.

Headings: The Section and Paragraph headings in these General Terms and Conditions are not material parts of the agreement and should not be used to construe the meaning thereof.

Gender and Number: Masculine pronouns shall be read to include feminine pronouns and the singular of any word or phrase shall be read to include the plural and vice versa.

Time of the Essence: Time is of the essence in the performance of this contract.

Key Personnel: The Contractor shall not replace any of the key personnel assigned to the performance of this contract without the prior written approval of the Division. The term "key personnel" includes any and all persons identified by as such in the contract documents and any other persons subsequently identified as key personnel by the written agreement of the parties.

Care of Property: The Contractor agrees that it shall be responsible for the proper custody and care of any property furnished to it for use in connection with the performance of this contract and will reimburse the Division for loss of, or damage to, such property. At the termination of this contract, the Contractor shall contact the Division for instructions as to the disposition of such property and shall comply with these instructions.

Travel Expenses: Reimbursement to the Contractor for travel mileage, meals, lodging and other travel expenses incurred in the performance of this contract shall not exceed the rates published in the applicable State rules. International travel shall not be reimbursed under this contract.
Sales/Use Tax Refunds: If eligible, the Contractor and all subcontractors shall: (a) ask the North Carolina Department of Revenue for a refund of all sales and use taxes paid by them in the performance of this contract, pursuant to G.S. 105-164.14; and (b) exclude all refundable sales and use taxes from all reportable expenditures before the expenses are entered in their reimbursement reports.

Advertising: The Contractor shall not use the award of this contract as a part of any news release or commercial advertising.