**EXHIBIT C3 – ME REQUIRED REPORTS, PLANS, AND FUNCTIONAL TASKS**

All Requirements in **Table 2** must be submitted to the Contract Manager electronically and be uploaded to the ME’s secure web-based document vault.

| **Table 2 – Required Submissions** |
| --- |
| **Section**  | **Requirement** | **Required by** | **Frequency** | **Due No Later Than:** |
|  | **Recurring Required Reports and Plans** |
| **Provider Tangible Property Inventory -** *Template 1* | Section B-7.2; Guidance 2 | Initial; Annual | Initial: within 30 days of execution; Annual: July 31 |
| **Regional planning documents** | Section C-1.1.2 | As Needed | As Needed |
| **Triennial Needs Assessment** | Section C-1.1.6 | Every 3 years | October 1, 2019, 2022 |
| **Coordinated Children’s System Plan** | Section C-1.1.14 | January 1, 2022, 2025 |
| **Managing Entity Annual Business Operations Plan***Template 4, including:* * *Updates to SMHTF Discharge Reintegration Plan*
* *Updates to Triennial Needs Assessment*
* *Updates to Care Coordination Plan*
* *Updates to Quality Assurance Plan*
* *Annual ALF-LMH Plan*
* *Annual Network Service Provider Monitoring Plan*
 | Section C-1.1.7 | Annually | Initial: May 15Addendum, if necessary: 30 days after receipt of initial Schedule of Funds for each fiscal year |
| **Enhancement Plan** | Section C-1.1.8 | Annually, beginning 2017 | September 1 |
| **Record Transition Plan -** *Guidance 3* | Section C-1.1.9 | Once | Within 90 days of execution |
| **Care Coordination Plan** | Section C-1.1.10 | Initial  | Within 60 days of execution |
| **Quality Assurance Plan** | Section C-1.1.11 |
| **Fraud and Abuse Prevention Protocol** | Section C-1.2.6 | Once |
| **Network Service Provider Monitoring Plan** | Section C-1.3.1 | Initial  | Within 30 days of execution |
| **Information Tec****hnology Plan** | Section C-1.4.6 | Once | Within 60 days of execution |
| **Procurement Policy** | Section C-2.2.5 | Within 90 days of execution |
| **National Voters Registration Act Quarterly Report** | Guidance 25 | Quarterly | January 10; April 10; July 10; October 10 |
|  | **Required Financial Forms and Documents** |
| **Managing Entity Operating and Capital Budget***Template: Form CF-MH 1042, per ch. 65E-14, F.A.C.* | Section C-2.4.3 | As Needed | 30 days after any amendment to Exhibit F1 |
| **Managing Entity Fixed Advance Payment Invoice -** *Template 10* | Sections F-2.2 and F-3.1.1 | Annually | July 1 |
| **Interest remittance and documentation of interest on advances** | Section F-2.3 | Quarterly | As Needed |
| **Managing Entity Monthly Fixed Payment Invoice -** *Template 10* | Section F-3.1.1 | Monthly; andFY Final: Annually | 20th of month following service delivery  FY Final: August 15 |
| **SAMH Managing Entity Monthly Progress Report -** *Template 11* | Sections F-3.1.2 and F-3.3 |
| **SAMH Managing Entity Monthly Expenditure Report –** *Template 12* | Section F-3.1.3 | Monthly | 20th of month following service delivery; FY Final: August 15 |
| **SAMH Managing Entity Monthly Carry Forward Expenditure Report -** *Template 13* | Section F-3.1.4 |
| **FY 2023-24 $126M Reporting Log** | Section F-3.1.5 |
| **Cost Allocation Plan -** *Template 14* | Section F-4 | Initial, Annual Update, and Revisions as needed  | Initial: Within 30 days of execution; Annual Update: August 31; Revisions: Within 20 days of notifying the Department |
| **Managing Entity Spending Plan for Carry Forward Report***Template 15* | Section F-5.2 | Annually | Within 30 days of confirmation of approved amount from the Department |
| **Financial and Compliance Audit**  | Attachment 1 | Annually, andAs needed | The earlier of 180 days after the end of the provider’s fiscal year or 30 days after the ME’s receipt of the audit report |
| **BNet Statement of Program Cost** | Guidance 12 | Annually | September 1 |
| **S. 394.9082(3)(m), F.S. Documentation:** * **Certification of Executive Compensation PCMT-08-202**
* **Executive Compensation Detail in excess of 150% of the Secretary’s Salary**
* **IRS Forms 990 and related documents**
* **Auditor reports**
* **Annual reports**
 | Section 8.2.1Section C-2.4.8 | May 1 |
| 1.
 | **Required Data Submission and Performance Reporting** |
| **Substance Abuse and Mental Health Block Grant Report -***Template 2* | Section B1-4.2 | Semi-annually | March 15September 1 |
| **Narrative Report for the SAMH Block Grant -** *Template 3* | Section B1-4.3 | Biennially | May 30 of odd-numbered years |
| **Monthly Data Submission to SAMH Data System** | Section C-1.4.4 | Monthly | 18th of each month  |
| **Submission of Corrected Records to SAMH Data System** | Section C-1.4.14 | As needed | Within 60 days after initial record submission |
| **Data required by Federal or State Grant Awards***Other than Sections C3-3.7 and C3-3.8, below* | Section C-1.4.15 | As needed | As established by Grantor timeframes |
| **Quarterly Report** | Section C-2.4.6 | Quarterly  | October 20; January 20; April 20; August 15 |
| **Family Intensive Treatment (FIT) Data** | Guidance 18 | Monthly | 18th of each month |
| **Care Coordination Report -** *Template 21* | Guidance 4 | Quarterly  | October 20; January 20; April 20; August 15 |
| **Transitional Voucher Incidental Report** *– Template 32* | Guidance 29 |
| **Catalog of Care Validation** | Section C-1.4.17 | Annual | Within 2 calendar weeks of receipt  |
| 1.
 | **Required Contract Forms and Documents** |
| **Proof of Insurance** | Section 4.5 andSection A-4.2 | Annually; and As needed | Initial: upon execution; Annual: March 31; andAs needed: Within 30 days of a modification of terms |
| **Employment Screening Affidavit** | Section 4.14.2 | Annually | Later of July 1 or Anniversary of Previous Annual |
| **Security Agreement Form**  | Section 5.5.3 | Annually | Upon execution; Updated annually |
| **Civil Rights Compliance Checklist -** *CF Form 946* | Section 7.13 & CFOP 60-1645 CFR, Part 80 | Initial, and Annually | Initial: Within 30 days of execution,Thereafter: July 15 |
| **Emergency Preparedness Plan** | Section 9.2 | Initial, andAnnual Update | Initial: Within 30 days of execution Update: every 12 months after acceptance of Initial  |
|  | **Functional Tasks and Deadlines** |
| **Notification of Network Service Provider performance that may interrupt service delivery or involve media coverage** | Section C-1.2.5 | As needed | Within 48 hours |
| **Incident Report Submission to IRAS- Management & Oversight** | Sections 4.13 and C-1.2.8 | Upon discovery of an incident |
| **Designate CCP Providers** | Section C-1.6.2.1 | Once, andAs needed | Initial: Within 60 days of execution As needed: Within 10 days of any change |
| **Staffing Changes – CEO, COO, CFO**  | Section C-2.1.2 | As needed | Within 5 business days of any change |
| **Staff Designations:** * **Responsible for providing immediate response**
* **Consumer Affairs Representative**
* **Facility Representative**
* **Network Service Provider Affairs Ombudsman**
* **Data Officer**

**Lead Housing Coordinator**  | Section C-2.1.4 | Initial | Initial: upon execution |
| **Establish & maintain internet-based electronic vault for access contract-related documents** | Sections C-2.2.6 and C-2.4.2 | Once; and As needed | Initial: Within 60 days of assignment As Needed: New documents within 10 business days |
| **Child Welfare Integration Working Agreement**  | Guidance 19 | Initial;Annually  | October 1, 2021 Reviewed Annually |
|  | **Network Service Provider Supplemental Reports** |
| **CAT Program Report –** *Appendix 1* | Guidance 32  | Quarterly | October 20; January 20; April 20; August 15 |
| **FACT Quarterly Report –** *Template 29* | Guidance 16 |
| **CAT Program Quarterly Supplemental Data Report –** *Appendix 2* | Guidance 32 |
| **CAT Program Return On Investment Report –** *Appendix 3* | Guidance 32 | 18th of month following each fiscal year quarter |
| **Mobile Response Team Report –** *Template 28* | Guidance 34 | October 20; January 20; April 20; August 15 |
| **Return on Investment Reports** *– Template 30* | Section C-2.2.2.2 and Exhibit C2 | 18th of month following each fiscal year quarter  |
| **LATTERS Reports** | Guidance 36 | October 20; January 20; April 20; August 15 |
| **CAT Tier 3 Persons Served Performance Report –** *Appendix 1* | Guidance 38  |
| **CAT Tier 3 Quarterly Supplemental Data Report –** *Appendix 2* |
| **Conditional Release Report -***Template 22* | Guidance 6 |
| **Forensic Diversion Report -** *Template 23* |
| **Community Forensic Beds Report –** *Template 33* |
| **Forensic Multidisciplinary Team Report -** *Template 25* | Guidance 28 |
| **CAT Tier 4 Persons Served and Performance Measure Report –** *Appendix 1* | Guidance 40  |
| **CAT Tier 4 Quarterly Supplemental Data Report –** *Appendix 2* | Guidance 40 |
| **SOR Reports** | Guidance 42 | Monthly | 18th of each month |