**Template 14**

**Managing Entity Cost Allocation Plan**

**Requirement:** *Sections A-1.1.3 and F-4*

**Frequency:** *Initial, Annual, and as needed Revisions*

**Due Date:** *Initial: Within 30 days of execution*

*Annual Update: August 31*

*Revisions: Within 20 days of notifying the Department*

**Instructions:**

*Copy and paste the template on the following pages of this guidance onto the ME’s letterhead. Complete all fields highlighted in yellow and submit to the Department’s Contract Manager as required by Section F-4.*

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**XYZ ME**

**Managing Entity Cost Allocation Plan**

***(Name)*, (Title)**

***(Street Address)***

***(City, Florida Zip Code*)**

**Effective Date: Date**

**XYZ ME**

**Managing Entity Cost Allocation Plan**

**Table of Contents**

[Section I - Certification 3](#_Toc203390722)

[Section II – Background and System of Care Description 4](#_Toc203390723)

[Section III – Description of Accounting, Contract Management and Data Systems 5](#_Toc203390724)

[Section IV – Purpose and General Statements 6](#_Toc203390725)

[Section V – General Approach 7](#_Toc203390726)

[Section VI – Allocation of Cost Overview 8](#_Toc203390727)

[Section VII – Managing Entity Operational Cost 9](#_Toc203390728)

[Section VIII – General Mental Health and Substance Abuse Services and Specific Federal and State Funded Projects 11](#_Toc203390729)

[Section IX – Non-Managing Entity Funded Activities, Contracts or Grants 49](#_Toc203390730)

[Attachment I – Organizational Chart 50](#_Toc203390731)

[Attachment II – Chart of Accounts for Accounting and Data Systems 50](#_Toc203390732)

[Attachment III – Name Other Attachments 50](#_Toc203390733)

# Section I - Certification

**XYZ ME**

**Certification by Responsible Individual**

I hereby certify, as the responsible official of *XYZ ME,* that the following is correct to the best of my knowledge and belief:

* This Cost Allocation Plan has been developed in accordance with the requirements of Title 2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (also known as the “OMB Super Circular”).
* The allocation methodologies contained in this Cost Allocation Plan have been developed on the basis of a beneficial or causal relationship between the expenses incurred and the receiving organizational units or programs.
* Costs related to each activity are based on the current reporting month. All costs have been screened for allowable costs in accordance with Title 2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (also known as the “OMB Super Circular”).
* An adequate accounting and statistical system exists to support claims that will be made under the Cost Allocation Plan.
* The same costs that have been treated as indirect costs have not been claimed as direct costs. Similar types of cost have been accounted for on a consistent basis.
* The information provided in support of the proposed Cost Allocation Plan is accurate.

Signature

Printed Name

Title

Date

# Section II – Background and System of Care Description

Background Description should include narrative on:

ME history, set-up, organizational structure, and any other pertinent details

System of Care Description should include narrative on:

Principles of the System of Care, Key Features, the Array of Services Offered, and any other pertinent details

Note: In lieu of the descriptions requested above, the ME may include specific reference to another document that contains the requested information as long as the document is up-to-date and is accessible by the DCF contract manager.

# Section III – Description of Accounting, Contract Management and Data Systems

Describe the ME’s accounting system and complete general ledger coding structure. Provide a summary of how operational costs are assigned and captured.

Explain in detail the invoice and payment process for sub providers including timeframes, due dates, and systems used outside of the accounting system. Include a description of the data validation process and provide any additional information on those subsystems utilized by the ME or sub providers.

Also provide a description of how equipment is treated for acquisition and disposition in the ME’s General Ledger.

# Section IV – Purpose and General Statements

The purpose of this cost allocation plan is to summarize, in writing, the methods and procedures that this organization will use to allocate costs to various programs, grants, contracts and agreements.

Title 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards establishes the principles for determining costs of grants, contracts and other agreements with the Federal Government. ME XYZ Cost Allocation Plan is based on the Direct Allocation method described in Title 2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (also known as the “OMB Super Circular”). The Direct Allocation Method treats all costs as direct costs except general administration and general expenses.

Direct costs are those that can be identified specifically with a particular final cost objective. General administrative costs are those that have been incurred for common or joint objectives and cannot be readily identified with a particular final cost objective.

Only costs that are allowable, in accordance with the cost principles, will be allocated to benefiting programs by ME XYZ.

# Section V – General Approach

The general approach of ME XYZ in allocating costs to particular grants and contracts is as follows:

1. All allowable direct costs are charged directly to program, grants, activities, or contracts.
2. Allowable direct costs that can be identified to more than one program or cost pool are prorated individually as direct costs using a base most appropriate to the particular cost being prorated.
3. All other allowable general and administrative costs (costs that benefit all programs and cannot be identified to a specific program) are allocated to programs, grants, contracts using a base that results in an equitable distribution.

Please describe any basis used for allocation of allowable direct or allowable general and administrative costs below.

***ME Cost Allocation Plan Requirement –*** *In this section, the ME should provide a description of how general costs such as rent or lease costs, telephone, supplies, insurance and legal fees are allocated to the various cost pools if applicable or between the ME contract and other grants or contracts if applicable.*

*If Managing Entity has a federally approved indirect cost rate, identification of the rate must be included as well as a copy of the approval letter included as an attachment to the Cost Allocation Plan.*

# Section VI – Allocation of Cost Overview

The Managing Entity (ME) Cost Allocation Plan is presented in three sections. The expenditures charged in Sections VII and VIII will be reported to the Department of Children and Families through the Monthly Expenditure Report.

**Section VII** includes expenditures that are associated with the Managing Entity’s operational cost. This includes any costs that are expended by the Managing Entity that are not directly related to providing substance abuse or mental health services. They are reported in Operational Cost section of the Monthly Expenditure Report as a total year to date amount.

**Section VIII** of the Cost Allocation Plan reflects the expenditures for substance abuse and mental health services. Costs recorded in this section include the services identified from the Substance Abuse and Mental Health Block Grants. In addition, this section also contains the cost related to specific services or projects. Activities described in this section include specialty federal grants, special state projects, and specific targeted programs including set-aside requirements. They are reported in eight sections of the Monthly Expenditure Report by program to the associated Other Cost Accumulator (OCA) as a total year to date amount.

**Section IX** of the Cost Allocation Plan describes those grants, programs, and contracts that are outside the purview of the substance abuse and mental health services covered in the Managing Entity contract. These cost pools are presented to give a complete overview of the services and activities conducted by the XYZ ME, and the other funding sources available.

# Section VII – Managing Entity Operational Cost

**MHS00 – Managing Entity Administrative Costs** – This cost pool captures the cost of allowable expenses incurred by a Managing Entity in performing its contracted functions and delivering its contracted services and includes administrative or indirect costs as defined in Title 2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (also known as the “OMB Super Circular”). Typical examples of costs included in this cost pool include general administrative and general expenses such as those for executive officers, personnel administration and accounting. These costs may also include items such as costs of facility maintenance and operation, and grounds maintenance.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should define what types of costs are included in this cost pool and a description of how the ME’s accounting system captures and allocates these costs. The ME should provide a description as to how these services are provided including an indication as to whether they are provided by ME staff or sub-contracted agencies (or both). Organizational charts should be provided and referenced in the narrative to the extent feasible. Any positions with allocated costs between this contract and other funders should be fully explained as to who is being allocated, where (what cost pools) they are being allocated and the basis of allocation. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool. Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MHCCD – ME MH Care Coordination** – This cost pool captures the allowable costs of the Managing Entity's Care Coordination function. The purpose of this function is to assist individuals with behavioral health conditions who are not yet effectively connected with needed services and supports to transition successfully from higher levels of care to effective community based care. This includes services and supports that affect a person's overall well-being, such as behavioral health services, primary care, housing, and social connectedness. Managing Entities identify high utilizers and individuals with complex, special needs who could benefit from care coordination and contract with qualified providers to provide direct care services. Managing Entities continue to track these individuals over time to ensure they are successfully connected to the services and supports they need and to measure outcomes. Managing Entities monitor for additional service needs and purchase services as necessary, ensuring network adequacy. Managing Entities develop cross-system partnerships and agreements to facilitate information sharing and referral processes.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should define what types of costs are included in this cost pool and a description of how the ME’s accounting system captures and allocates these costs. The ME should provide a description as to how these services are provided including an indication as to whether they are provided by ME staff or sub-contracted agencies (or both). Organizational charts should be provided and referenced in the narrative to the extent feasible. Any positions with allocated costs between this contract and other funders should be fully explained as to who is being allocated, where (what cost pools) they are being allocated and the basis of allocation. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MHSA4 – ME FL System of Care - Admin – Year 4** – This cost pool captures the allowable administrative costs including salary and travel if applicable for the Florida system of care expansion sustainability project for St. Lucie and Martin Counties grant awarded by the Department of Health and Human Services' Substance Abuse and Mental Health Services Administration as a four-year discretionary grant. Site coordinators engage and facilitate the collaboration of local key partners to expand the system of care framework into the service delivery system. Parent and youth coordinators promote peer support, engage or attempt to develop family run and youth run organizations to participate in expanding the system of care framework into the service delivery system. The budget period is from July 1, 2025 to August 30, 2025

Grantees are required to provide the statutory match requirements ($3 federal to $1 non-federal in years 1-3; $1 federal to $1 non-federal in year 4). Funds must be used to support infrastructure development and services not covered by Medicaid, private, or other types of insurance. No more than 20 percent of the grant award may be used for data collection, performance measurement, and performance assessment expenses. No more than 30 percent of the grant award may be used for infrastructure. Remaining grant funds must be used for services and supports.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should define what types of costs are included in this cost pool and a description of how the ME’s accounting system captures and allocates these costs. The ME should provide a description as to how these services are provided including an indication as to whether they are provided by ME staff or sub-contracted agencies (or both). Organizational charts should be provided and referenced in the narrative to the extent feasible. Any positions with allocated costs between this contract and other funders should be fully explained as to who is being allocated, where (what cost pools) they are being allocated and the basis of allocation. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MHSCD - ME Care Coordination** – This cost pool captures the allowable costs of the Managing Entity's Care Coordination function. The purpose of this function is to assist individuals with behavioral health conditions who are not yet effectively connected with needed services and supports to transition successfully from higher levels of care to effective community based care. This includes services and supports that affect a person's overall well-being, such as behavioral health services, primary care, housing, and social connectedness.  
  
Managing Entities identify high utilizers and individuals with complex, special needs who could benefit from care coordination and contract with qualified providers to provide direct care services. Managing Entities continue to track these individuals over time to ensure they are successfully connected to the services and supports they need and to measure outcomes. Managing Entities monitor for additional service needs and purchase services as necessary, ensuring network adequacy. Managing Entities develop cross-system partnerships and agreements to facilitate information sharing and referral processes.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool. If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool. Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MHSOS - ME Opioid Trust Fund Administration** – This cost pool captures the cost of allowable expenses incurred by a managing entity for managing and administering funds in a manner consistent with the guidelines established by the Department of Children and Families and Schedule B of the distributor settlement agreement dated March 25, 2022 for the following opioid abatement programs and initiatives: Coordinated Opioid Recovery (CORE); Hospital Bridge Program; Peer Support Services and Recovery Community Organizations; Recovery Housing; Treatment and Recovery Support Services, Non-qualified Counties Program, and funding authorized for local funding projects.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool. If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool. Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MSSA7 - ME State Opioid Response Disc Grant Admin** **– Year 7** – Federal Budget Period: 7/1/25-9/29/25 - This cost pool captures the allowable costs in the Managing Entities incurred under the State Opioid Response IV (SOR-4) Project Grant. All funds expended under this OCA must be directly related to SOR-4 grant activities and the ME must maintain records to that effect. The SOR-4 grant aims to increase access to evidence-based prevention, treatment, and recovery support services that address opioid or stimulant misuse, overdoses, or disorders.

Only 5 percent of the total grant award may be used for administration and infrastructure costs to administer the grant.

State Opioid Response funds may not be used for the following purposes:

* Make direct payments to individuals to enter treatment or continue to participate in prevention or treatment services;
* To pay for construction or purchase of structures;
* To pay the salary of an individual at a rate in excess of Level II of the Executive Schedule, published by the U.S. Office of Personnel Management at: <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/>. or
* To supplant (or replace) current funding of existing services.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description as to how these services are provided including an indication as to whether they are provided by ME staff or sub-contracted agencies (or both), an organizational chart, and a description of the types of costs that are charged to the cost pool. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool. Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

# Section VIII – General Mental Health and Substance Abuse Services and Specific Federal and State Funded Projects

This section describes expenditures related to general mental health and substance abuse services. Costs recorded in this section include the services identified from the Substance Abuse and Mental Health Block Grants as well as specific federal and state funded projects.

**Mental Health – Core Services Funding**

**MH001 – 24 Hour Care (Non-Hospitalization) Residential** – This cost pool captures the allowable expenditures for 24-hour residential care (non-hospitalization) of eligible mental health residential treatment.

The purpose is to enable individuals with symptoms or disabilities associated with mental illness to live, work, learn, and socialize in a community-based residential setting.

The authorized services assist individuals with acquiring / maintaining / monitoring needed housing, social support, vocational training, and treatment related to symptoms or disabilities associated with mental illnesses

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs, which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MH009 – Ambulatory/Community Non-24 Hour Care** – This cost pool captures the allowable non-residential care costs for eligible community mental health treatment (excluding Residential and Crisis Services).

The purpose is to enable individuals with symptoms or disabilities associated with mental illness to live, work, learn and socialize in a community-based setting.

Services that assist individuals with acquiring / maintaining / monitoring needed housing, social support, vocational training, and treatment related to symptoms or disabilities associated with mental illnesses.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MH018 – CSU, Baker Act, Inpatient Crisis Services** – This cost pool captures the allowable costs for eligible mental health crisis services, excluding Baker Act inpatient hospitals licensed Under Chapter 395.

The purpose is to provide immediate support to individuals with severe and persistent mental illness, individuals with acute episodes and individuals with forensic involvement in community programs designed to avert a more restrictive level of care, such as longer-term inpatient / incarceration.

Services include, but are not limited to, crisis assessment, crisis outreach, crisis intervention, including crisis stabilization units and Short-term Residential Treatment Centers (Baker Act), walk-in crisis centers, and mobile crisis.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs, which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MH025 – Prevention Services** – This cost pool captures the allowable costs for eligible mental health prevention services.

The purpose is to serve individuals at risk of more serious mental health problems and in need of brief counseling or supportive services on a short-term basis (e.g., up to three (3) sessions) to avert a crisis and a more restrictive level or care.

Prevention services include brief counseling, treatment planning, education, problem identification and referral services.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MH026 – ME Early Intervention Services - Psychotic Disorders** – This cost pool captures the allowable costs of treatment services provided to individuals with early serious mental illness, including first episode psychosis, regardless of the age of the individual at onset, through Coordinated Specialty Care (CSC) teams funded by the Community Mental Health Services (CMHS) Block Grant 10% set-aside for Early Serious Mental Illness. CSC teams provide evidence-based, comprehensive, coordinated, individualized, and integrated services, including but not limited to intensive case management, individual and group therapy, supported employment, family education and supports, and psychotropic medication.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MH094 – ME MH Citrus Health Network** – This cost pool captures the allowable cost of funds provided to Citrus Health Network for behavioral health services for crisis stabilization and crisis support/emergency services and related brief intensive services to individuals experiencing a mental health crisis.

From the funds in Specific Appropriation 357, $455,000 of recurring funds from the General Revenue Fund is provided to the Citrus Health Network.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MH0SP – ME MH Suicide Prevention**– This cost pool captures the allowable program costs incurred for Suicide Prevention through the Managing Entities to support ongoing suicide prevention efforts, including evidence-based suicide prevention media campaigns and projects, and support the implementation of the Zero Suicide framework. Projects should be guided by the Florida Suicide Prevention Interagency Action Plan. Costs included, but are not limited to, consultation and technical assistance for initial adoption or ongoing expansion of the Zero Suicide framework within Managing Entities.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MHFMH – ME MH Forensic Transitional Beds** – This cost pool captures the allowable cost of forensic mental transitional beds programs to diverse individuals sentenced under Chapter 916, F.S., from the county jail system and to move eligible individuals currently in forensic state mental health institutions to community settings as an alternative to more costly placement. This OCA is specific to providers under subcontract with a Managing Entity.  
  
The providers under subcontract with a Managing Entity are not-for-profit, comprehensive community mental health  
treatment facilities located in the northern, central and southern regions of the state that are currently under contract with the Department for these services and qualified to provide integrated healthcare, offer a full continuum of care including emergency, residential, and outpatient psychiatric services and have immediate capacity for placement.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MHSFP – ME MH State Funded Federal Excluded Services** – This cost pool captures the allowable cost of subcontracted community mental health services which are unallowable for federal funding pursuant to conditions specified in Managing Entity contracts. Unallowable services include, but are not limited to:

* Inpatient hospital services;
* Enforcement of alcohol, tobacco, or drug laws;
* Cash payments to intended recipients of health services;
* Purchase or improvement of land; purchase, construction or permanent improvement of (other than minor remodeling) any building or other facility; or purchase major medical equipment;
* Satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds;
* Financial assistance to any entity other than a public or nonprofit private entity;
* Any services within prisons or jails.

All covered services provided under this cost pool must be allowable pursuant to Chapter 65E-14.021, F.A.C.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MHTMH – ME MH Transitional Beds for MH Institution** – This cost pool captures the allowable cost of community substance abuse and mental health providers under subcontract with a Managing Entity implementing proviso project for mental health transitional beds to transition eligible individuals currently in the state mental health institutions to community type settings as an alternative to more costly institutional placement. This project provides services to adults who have been determined to be discharge ready by a State Civil Mental Health Treatment Facility and placed on a seeking Placement List for referral to a Community Mental Health Treatment Center for reintegration into the community.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**Mental Health – Discretionary Grants Funding**

**MH982 – ME MH 988 State and Territory Improvement Grant-Year 2**– Federal Budget Period: 7/1/25-9/29/25 - This cost pool captures the allowable program costs incurred for the implementation of the 988 Suicide and Crisis Lifeline, through the 988 State and Territory Cooperative Agreements Improvement Grant. Funds will be allocated via the managing entities to each of Florida's accredited 988 centers for the purpose of building and maintaining call center capacity to meet call volume. This is the second year of a three year grant.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MHSC4 – ME FL SOC Expansion & Sustain Project – Year 4** - Federal Budget Period: 7/1/25-8/30/25 - This cost pool captures the allowable costs of Behavioral Health Service as funded by the Florida System of Care Expansion Sustainability Project for St. Lucie and Martin Counties grant awarded by the Department of Health and Human Services' Substance Abuse and Mental Health Services Administration as a four-year discretionary grant. The project expands the system of care framework into previously unserved counties of St. Lucie and Martin for children and adolescents aged 5-21 with serious emotional disturbances (SED) and their families. The budget period is from August 31, 2024 to August 30, 2025.

Grantees are required to provide the statutory match requirements ($3 federal to $1 non-federal in years 1-3; $1 federal to $1 non-federal in year 5). Funds must be used to support infrastructure development and services not covered by Medicaid, private, or other types of insurance. No more than 20 percent of the grant award may be used for data collection, performance measurement, and performance assessment expenses. No more than 30 percent of the grant award may be used for infrastructure. Remaining grant funds must be used for services and supports.

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**Mental Health – Proviso Projects Funding**

**MH027 – ME Directions for Living** – This cost pool captures the allowable expenses of Directions for Living to implement a Baby Community Action Treatment (CAT) Team providing behavioral health services for parents of young children in Pasco and Pinellas counties. The purpose of the program is to assist parents to reunify and bond with children under the age of 5 who have been removed due to parental substance misuse or co-occurring substance use disorders and mental illness.

Specific outcomes to be measured include:

* Decrease in admissions of parents served to inpatient crisis stabilization settings, inpatient detoxification settings, and emergency departments;
* Increase in enrollment of children separated from their caregiver due to substance misuse in Trauma Informed/Quality Early Learning Child Care;
* Decrease in arrests of parents served;
* Increase in employment and/or access to benefits for parents served;
* Decreased subsequent removals of children served; and
* Successful completion of treatment as measured by achievement of treatment goals and negative drug screens.

From the funds in Specific Appropriation 363, $670,000 of nonrecurring funds from the General Revenue Fund is provided to Directions for Living – Community Action Team for Babies. (House Form 2158) (Senate Form 3523)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MH051 – ME MH Okaloosa/Walton MH & SA Pretrial Diversion Project** - This cost pool captures the allowable costs of the Okaloosa-Walton Mental Health/Substance Abuse Pilot Program. Allowable costs are contracted pre-offense services; pre-booking and post-booking diversion services for persons with misdemeanor and low-level felony charges; and post-release wraparound services to persons released from custody.

From the funds in Specific Appropriation 363, $325,000 of nonrecurring funds from the General Revenue fund is provided to the Okaloosa Walton Mental Health/Substance Abuse Pre-trial Diversion Project. (House Form 1568) (Senate Form 2676)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provide and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MH063 – ME MH Starting Point Behavioral Health Care Project Talks** – This cost pool captures the allowable costs of Project TALKS. The concept of Project TALKS (Talk, Act, Listen, Know, Support) is to create talkable communities. This is the first program of its kind in the state of Florida to leverage the power of 5 major behavioral health providers (Starting Point, Gateway, Child Guidance Center, Clay Behavioral and EPIC) across 6 counties (Nassau, Duval, St. Johns, Putnam and Flagler) to spread the message of attainable mental wellbeing to Northeast Florida. The project creates trauma informed communities that will encourage health conversations, activities and interventions that will spearhead a focus on mental well-being leading to happy, healthier lives. It seeks to expand care coordination activities in local hospitals by connecting with those experiencing a mental health crisis; develop a partnership with first responders that integrates a mental health professional into their response team and that offers trauma support to first responders; and provide trauma support to family and friends who have lost someone due to suicide and/or overdose.

From the funds in Specific Appropriation 363, $400,000 of nonrecurring funds from the General Revenue fund is provided to Starting Point Behavioral Healthcare. (House Form 3178) (Senate Form 1702)

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**MH066 – ME** **Peace River Center Sheriffs Outreach Program** – This cost pool captures the allowable costs of establishing a Sheriff's Outreach Mobile Crisis Response Team (MCRT) in Polk County. The program has allowed Peace River to provide a MCRT physical presence in the Polk County Sheriff's 911 Communications Center (SO911) and up to five (5) substations across Polk County. The Sheriff's Outreach program works closely with Deputies on the street and in the Call Center to assist in crisis intervention of individuals with mental health and/or substance use disorder issues they may encounter in the community with a goal of diverting individuals from unnecessary jail bookings as well as emergency room, crisis stabilization unit and hospital use. Placement of an MCRT Counselor in the Sheriff's Office 911 will enable the 911 call takers to divert behavioral health calls to our trained MCRT crisis counselors reducing the need for law enforcement.

From the funds in Specific Appropriation 363, $850,000 of nonrecurring funds from the General Revenue fund is provided to Peace River Center- Community Mobile Support Team. (House Form 1099) (Senate Form 1007)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MH069 – ME MH Marion County Law Enforcement Co-Responder Program** – This cost pool captures the allowable costs of using the Co-Responder model of criminal justice diversion which pairs law enforcement and behavioral health specialists who respond to behavioral health-related calls for law enforcement service. The teams will utilize the combined expertise of the officer and the behavioral health specialists to de-escalate situations and link individuals with mental health issues to appropriate services. The team will provide on-site de-escalation, assessment and identification of treatment needs; crisis intervention and brief counseling; linkage and referral; follow-up as needed to promote crisis resolution; evaluation and arrangement for inpatient hospitalization as needed; and on-going supervision by care coordinator and the peer support specialist to ensure individual is engaged in services.

From the funds in Specific Appropriation 363, $574,965 of nonrecurring funds from the General Revenue fund is provided to Marion Senior Services - Crisis Mobile Response Team. (House Form 1915) (Senate Form 1352)

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**MH070 – ME MH Faulk Center-Behind the Mask MH Services**– This cost pool captures the allowable costs of providing uninsured or low-income clients with free or reduced counseling services at the Faulk Center. Progress is measured based on improvements from baseline assessments of symptomatic and functional impacts identified during the initial intake and early sessions.

From the funds in Specific Appropriation 363, $235,500 of nonrecurring funds from the General Revenue fund is provided to Faulk Center for Counseling - Mental Health Services for Low-Income Families. (House Form 1122) (Senate Form 1002)

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**MH089 – ME Clay Behavioral Health-Crisis Prevention**– This cost pool captures the allowable costs of Clay Behavioral Health Crisis Prevention Team services.

From the funds in Specific Appropriation 363, $400,000 of nonrecurring funds from the General Revenue fund is provided to Clay Behavioral Health Center. (House Form 2219) (Senate Form 1179)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MH111 – ME MH El-Bethel Development Center Youth Crime** – This cost pool captures the allowable costs of the El-Bethel Development Center's "Youth Crime Prevention Program" to provide alternative activities, deter delinquency and provide a safe haven for youth in Duval County.

Allowable activities include Interpersonal Skills Training, Behavior Modification Training, Community Involvement and volunteering, Sports, and Cultural Education, and partnering with other agencies to provide jobs as an introduction into becoming a productive citizen.

From the funds in Specific Appropriation 363, $86,000 of nonrecurring funds from the General Revenue fund is provided to El-Bethel Development Center- Youth Upskill Academy. (House Form 1548) (Senate Form 1878)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MH114 – ME MH Joe DiMaggio Child Hospital At-Risk Youth** – This cost pool captures the allowable costs of Joe DiMaggio Children's Hospital's "New Solutions for Behavioral Health for at-risk-youth" project.

Allowable activities include a community outreach and awareness campaign for youth at-risk of behavioral health issues and their families; connecting inpatient and outpatient behavioral health services; care coordination with community partners to support youth and families. Services may include an Emergency Department-based initial assessment and mental health status examination; in-home individual or family counseling, intensive outpatient treatment for co-occurring disorders, care coordination, school and/or community-based services respite services, parenting education and ongoing recovery management.

Allowable costs include salaries, fringe benefits and related operational supply and travel expense costs associated with 3 part-time Licensed Clinical Social Workers, 1 FTE Team Leader, 2 FTE Behavioral Health Counselors, and 2 FTE Mobile Case Managers in the South Broward Hospital District, d/b/a Memorial Healthcare System.

From the funds in Specific Appropriation 363, $500,000 of nonrecurring funds from the General Revenue fund is provided to Joe DiMaggio Children’s Hospital- New Solutions Outpatient Program. (House Form 3156) (Senate Form 2536)

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**MH115 – ME MH LifeBuilders of Treasure Coast**– This cost pool captures the allowable costs of the LifeBuilders of the Treasure Coast project for low-income individuals and families affected by the 19th Judicial Circuit Criminal or Dependency Courts.  
  
Allowable activities include inpatient/residential placement for clients with mental health and/or substance use disorder needs, outpatient treatment/counseling, drug testing, traditional or transitional housing, utilities, and basic needs, which includes education assistance, transportation, obtaining ID, and work assistance.

From the funds in Specific Appropriation 363, $300,000 of nonrecurring funds from the General Revenue fund is provided to LifeBuilders of the Treasure Coast. (House Form 1046) (Senate Form 2404)

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**MH116 – ME MH Lifetime Counseling CTR Behavioral Health** – This cost pool captures the allowable costs of the Lifetime Counseling Center's "Behavioral Health Prevention and Intervention" project expanding access to mental health prevention and early intervention services and provide outpatient mental health and substance abuse counseling to the uninsured for children, adolescents, and adults in Brevard County.

Allowable activities include psychoeducation, mental health support, assistance with building skills such as coping skills, emotional regulation, healthy communication, problem-solving, and outpatient treatment services.

Allowable costs include master's and doctoral level mental health clinician services, supplies, and materials needed to support services, pre- and post-tests, treatment supplies, outreach materials, supplies for community education events, mileage reimbursement for providers, publishing educational materials, purchasing mental health support apps on behalf of community members, and renting space for community education events, etc.

From the funds in Specific Appropriation 363, $250,000 of nonrecurring funds from the General Revenue fund is provided to Lifetime Counseling Center- Thrive Within Program (House Form 2117) (Senate Form 2591)

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**MH117 – ME MH LJD Jewish Family Community Services** – This cost pool captures the allowable costs of a LJD Jewish Family & Community Services' mental health project expanding outpatient mental health and substance abuse counseling and psychiatric services, to uninsured and under-insured children, teens and adults in Duval County, Alachua, Baker, Bradford and Union counties.

Allowable activities include outpatient mental health counseling services by licensed and license-eligible therapists, and outpatient substance abuse services by MCAP Substance Abuse therapists.

Allowable costs include costs of bio-psychosocial evaluations, treatment plans, counseling sessions, discharge planning, psychiatric evaluation, medication management, and incidental expenses to access services, including bus passes or transportation to sessions, and necessary information technology equipment for telehealth sessions.

From the funds in Specific Appropriation 363, $700,000 of nonrecurring funds from the General Revenue fund is provided to LJD Jewish Family & Community Services Mental Health. (House Forms 3254/3253) (Senate Form 2584/2586)

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**MH119 – ME MH Miami Dade Homeless Trust Proj Lazarus** – This cost pool captures the allowable costs of the Miami-Dade County Homeless Trust's "Project Lazarus Specialized Outreach."

Allowable activities include coordinated street outreach activities designed to engage, assess, treat, and secure supportive housing placement for persons who are chronically homeless and mentally ill or have substance use disorders or co-occurring disorders, living on the streets in Miami-Dade County.

From the funds in Specific Appropriation 363, $97,081 of nonrecurring funds from the General Revenue fund is provided to Miami-Dade County Homeless Trust Project Lazarus Specialized Outreach. (House Form 1375) (Senate Form 1595)

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**MH122 – ME MH Nonie’s Place Child Therapy CTR Escambia** – This cost pool captures the allowable costs of the Covenant Care Foundation' pilot program at Nonie's Place Children's Therapy Center, providing evidence based, free-of-charge therapy for children experiencing grief and loss in Escambia, Santa Rosa, and Walton counties.

Allowable activities include children's individual grief therapy, family grief support groups, Camp Connect (grief and loss camp), school-based grief support, professional grief workshops, community resources and grief education, crisis response for local schools and sheriffs, grief support tools and resources, memory maker boxes, grief connect kits, peer support, and play therapy.

From the funds in Specific Appropriation 363, $375,000 of nonrecurring funds from the General Revenue fund is provided to Nonie’s Place Children’s Therapy Center Escambia. (House Form 1792) (Senate Form 2921)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MH124 – ME MH Project Lift Treatment and Workforce Dev** – This cost pool captures the allowable costs of Project LIFT's "Mental Health Treatment and Workforce Development" project.

Allowable activities include mental health therapy, vocational training, substance abuse treatment and workshops, life skills workshops, job training, high school diploma program for dropouts, transportation to and from the program, mental health clinicians, case managers, substance abuse experts, one-on-one tutoring, work readiness preparation and wrap around services.

From the funds in Specific Appropriation 363, $500,000 of nonrecurring funds from the General Revenue fund is provided to Project LIFT Mental Health Treatment and Workforce Development. (House Form 1104) (Senate Form 2078)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MH128 – ME MH Citrus Health Network ACS** – This cost pool captures the allowable costs of funds provided to the Citrus Health Network, Inc. for crisis stabilization and crisis support/emergency services and related brief intensive services to individuals experiencing a mental health crisis.

From the funds in Specific Appropriation 363, $2,000,000 of nonrecurring funds from the General Revenue fund is provided to Citrus Health Network Adult Crisis Stabilization Unit. (House Form 3074) (Senate Form 1586)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MH138 – ME MH Academy at Bradenton-Sup**– This cost pool captures the allowable costs to support two culinary arts trainers, recruitment of up to 20 local businesses/employer partners and on-site training Monday-Friday from 9am-5pm for up to 100 adult citizens diagnosed with serious mental illnesses living in Manatee County.

Allowable activities include: vocational skills training in food preparation, sanitation, nutrition, customer service, and operating point-of-sales systems and commercial equipment from food slicers to ovens, training in digital literacy skills required by today's employers.

From the funds in Specific Appropriation 363, $250,000 of nonrecurring funds from the General Revenue Fund is provided to Academy at Glengary - Workforce Training and Career Placement Supported Employment (House Form 1086) (Senate Form 1036)

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**MHAJF – ME MH Alpert Family Services MH First Aid Coalition**– This cost pool captures the allowable costs of Mental Health First Aid (MHFA) which is an international, evidence-based educational program that teaches ordinary citizens how to recognize and respond to a potential mental health or substance use crisis. Mental Health First Aid erases the stigma associated with mental illness and substance use and teaches a specific 5-step initial response that can be used to approach someone who might be in need of further help. Having a coordinated MHFA coalition, developed on a grassroots level, is a unique model that maximizes impact and minimizes duplication by creating a "centralized hub" with a wide reach; and highly replicable. This funding will allow continuation of the highly successful Mental Health First Aid Coalition of Palm Beach County; assuring that there is sustainability for a coordinator to manage class requests, outreach, and implementation of this lifesaving preventive program. The direct service will be teaching additional 8-hour Mental Health First Aid classes throughout the county. It is our intent to have MHFA become as "commonplace" as CPR and First Aid. By learning how to approach someone experiencing a Mental Health crisis, we can save lives.

From the funds in Specific Appropriation 363, $500,000 of nonrecurring funds from the General Revenue fund is provided to Alpert Jewish Family Service - Mental Health First Aid. (House Form 2965) (Senate Form 2850)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MHASP – ME MH Aspire Health Partners-Veterans National Guard MH Services**– This cost pool captures the allowable costs of Aspire Health Partners and Centerstone providing behavioral health services for National Guard and post 9/11 veterans and families regardless of discharge status; to include outreach, assessment, case management, outpatient and telehealth treatment to promote recovery, reduce relapse and increase functionality. Services provided will be evidenced based, culturally appropriate, person centered therapy for mental health issues including depression, anxiety, post-traumatic stress, adjustment issues, anger, grief and loss, family issues, transition challenges, relationship problems, and children's behavioral problems. Services will include assessment, case management, outpatient psychiatric, and telehealth treatment.

From the funds in Specific Appropriation 363, $1,500,000 of nonrecurring funds from the General Revenue fund is provided to Veterans and National Guard Mental Health. (House Form 1488) (Senate Form 2892)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MHBRV – ME MH Flagler Brave Program**– This cost pool captures the allowable costs of the Flagler Hospital BRAVE program for youth to ensure student and family access to mental health services. Using a hub model and a unified assessment, BRAVE serves as the HUB for behavioral health service referrals for all schools in St. Johns, Clay, Putnam and Nassau counties. Allowable services include providing a single point of access to behavioral health services, social health needs assessments, behavioral health provider eligibility screenings, and care navigation to support persons served during the process of establishing a relationship with behavioral health providers.

From the funds in Specific Appropriation 363, $1,500,000 of nonrecurring funds from the General Revenue fund is provided to Flagler Hospital - BRAVE (Be Resilient and Voice Emotions) Program. (House Form 3516) (Senate Form 2544)

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**MHEHW – ME MH Eagles Haven Wellness Center** – This cost pool captures the allowable costs of wellness services, case management, trauma education, clinical assessment crisis intervention, and linkage to services in the Wellness Center, 7 days a week.

From the funds in Specific Appropriation 363, $350,000 of nonrecurring funds from the General Revenue Fund is provided to Jewish Adoption and Family Care Options – Eagles’ Haven Wellness Center. (House Form 1004) (Senate Form1001)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MHFSL – ME MH Alpert Jewish Family Support Line** – This cost pool captures the allowable costs of publicly available information and referral, counseling, and related supports provided by the Alpert Jewish Family Service helpline as designated in the annual General Appropriations Act. Services include call center operations staffed by master level social workers, comprehensive bio-psycho-social telephone assessments, needs identification, providing access or referral to community resources, limited financial assistance, and individualized planning to address callers economic and emotional crises.

From the funds in Specific Appropriation 363, $600,000 of nonrecurring funds from the General Revenue Fund is provided to Alpert Jewish Family Service – Access Lifeline (House Form 1437) (Senate Form 1209)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MHHTO – ME MH Here Tomorrow Outpatient MH Services** – This cost pool captures the allowable costs for crisis support, mental health recovery peer support, and outpatient therapy provided by Here Tomorrow, for persons experiencing hopelessness or contemplating suicide and their family members.

From the funds in Specific Appropriation 363, $1,000,000 of nonrecurring funds from the General Revenue Fund is provided to Here Tomorrow – Suicide Prevention (House Form 1266) (Senate Form 1697)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MHLFH – ME MH LMC Forensic Multidisciplinary Team** – This cost pool captures the allowable costs of Forensic Multidisciplinary Team serving Northwest Florida to divert the commitment of individuals from state mental health treatment facilities by providing or coordinating treatment, rehabilitation, and support services for persons with serious and persistent mental illness. Services include crisis intervention, mental health screening and assessment, case management, psychiatric evaluation and medication management, substance use treatment, and in-home or on-site treatment services.

From the funds in Specific Appropriation 363, $750,000 of nonrecurring funds from the General Revenue Fund is provided to Life Management Center of Northwest Florida – Forensic Multidisciplinary Team. (House Form 1519) (Senate Form 2667)

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**MHLFT – ME MH Life Management Center Functional Family Therapy Team**– This cost pool captures the allowable costs of providing In-home therapy services using the Functional Family Therapy model for children and their families in consultation with schools, law enforcement, courts, child welfare providers, the juvenile detention facility, and juvenile justice personnel.

From the funds in Specific Appropriation 363, $750,000 of nonrecurring funds from the General Revenue fund is provided to Life Management Center of Northwest Florida - Functional Family Therapy Team. (House Form 1520) (Senate Form 2666)

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**MHRM5 – ME Renaissance Manor** – This cost pool captures the allowable costs of funds provided to the Community Assisted and Supported Living, Inc. dba Renaissance Manor, assisted living services for mental health clients.

From the funds in Specific Appropriation 363, $3,000,000 of nonrecurring funds from the General Revenue Fund is provided to CASL Renaissance- Permanent Supportive and Affordable Housing. (House Form 1887) (Senate Form 1215)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MHVHG – ME MH Valerie’s House Grief**– This cost pool captures the allowable costs of child grief support service programming including grief support groups, individual grief counseling, in-school grief support, mentoring, and financial crisis support.

From the funds in Specific Appropriation 363, $2,000,000 of nonrecurring funds from the General Revenue fund is provided to Valerie’s House - Grieving Children Support Services. (House Form 3223) (Senate Form 3110)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**Mental Health – Targeted Services Funding**

**MH071 – ME MH Purchase of Residential Treatment Services (PRTS) for Emotionally Disturbed Children and Youth** - This cost pool captures the allowable expenditures related to the purchase of residential mental health treatment services for children and youth with an emotional disturbance as defined in Section 394.492(5), F.S., or a serious emotional disturbance as defined in Section 394.492(6), F.S. Residential treatment services include Level I residential treatment centers and Level II therapeutic group homes services.

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**MH072 – ME MH Community Forensic Beds** – This cost pool captures the allowable costs for community forensic beds, which provide treatment and training services to those individuals who have been charged with a felony and have been found to be incompetent to proceed (ITP) or not guilty by reason of insanity (NGI) due to their mental illness and are committed to the Department of Children and Families under the provision of Chapter 916 of the Florida Statutes.

Services may also be provided to individuals who have been charged with a misdemeanor and are believed to be at risk of moving further into the criminal justice system due to their mental illness.

The goal is to provide community-based treatment aimed at diverting individuals from the forensic system to the mental health treatment system in order to reduce commitments to the Department of Children and Families under the provision of Chapter 916 of the Florida Statutes.

These services include, but are not limited to, residential services, mental health courts, and wraparound services/incidentals.

Community forensic beds (secure or non-secure) significantly improve timely access to court-ordered forensic treatment and thereby reduce the growing forensic waitlist. Community forensic treatment includes, but is not limited to, admission, assessment, evaluation, treatment and various individualized services including competency restoration training.

This excludes services for individuals who are served in an inpatient hospital licensed under Chapter 395 or state mental health treatment facility.

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**MH076 – ME MH Indigent Psychiatric Medication Program** – This cost pool captures the allowable costs of providing the Indigent Psychiatric Drug Program (IDP). This program is authorized to assist adults with serious mental illnesses and meets the Federal guidelines for an indigent person.

Identified contracted providers may use the IDP to order additional psychotropic medications from either the IDP warehouse or a pharmacy of their choice (for urgent needs). This funding can also be used to pay dispending fees for individuals who cannot afford them.

IDP providers are required by contract to actively participate in patient assistance programs (PAP) for medication offered by pharmaceutical manufacturers.

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**MH0BN – ME MH BNET (aka Behavioral Health Network)** – This cost pool captures the allowable Behavioral Health Network expenditures for the services provided under the Florida Statewide Child Health Insurance Program that will assist children and their families to live successfully in the community.

These services include, but are not limited to, supported housing, supported living, crisis support, and treatment provided in crisis stabilization units and inpatient facilities.

The purpose of these services is to provide immediate support to children with a serious emotional disturbance in acute emotional distress, enable children with serious emotional disturbance to live in a stable setting, function appropriately, attend school and stay out of the Juvenile Justice System.

In accordance with an interagency agreement with the Department of Health (DOH), the Department of Children and Families (DCF) is authorized to establish the scope of behavioral health services, clinical guidelines for referral service standards, performance-based measures and practice guidelines. To deliver the services, DCF will create a Behavioral Health Specialty Network comprised of member providers throughout the state.

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**MH0CN – ME MH Care Coordination Direct Client Services** – This cost pool captures the allowable costs of care coordination as outlined in Guidance 4 – Care Coordination of the Managing Entity contracts, available at:

<https://www.myflfamilies.com/sites/default/files/2023-07/Guidance%204%20Care%20Coord%20%202023%2007%2001.pdf>

Pursuant to s. 394.9082(3)(C), F.S., the Department has defined several priority populations to potentially benefit from Care Coordination. Network Service Providers are expected to minimally serve the following two populations:

1. Adults with a serious mental illness (SMI) or co-occurring disorders who demonstrate high utilization of acute care services, included crisis stabilization, inpatient, and inpatient detoxification services. For the purposes of this document, high utilization is defined as:
   1. Adults with three (3) or more acute care admissions within 180 days; or
   2. Adults with acute care admissions that last 16 days or longer.
2. Adults with a SMI awaiting placement in a state mental health treatment facility (SMHTF) or awaiting discharge from a SMHTF) back to the community

Populations identified to potentially benefit from Care Coordination that may be served in addition to the two required groups include:

1. Persons with SMI or co-occurring disorders who have a history of multiple arrests, involuntary placements, or violations of parole leading to institutionalization or incarceration.
2. Caretakers and parents with a SMI or co-occurring disorders involved with child welfare.
3. Individuals with a SMI identified by the Department, managing entities, or Network Service providers as potentially high risk due to concerns that warrant Care Coordination, as approved by the Department. The following covered services described in ch. 65E-14.021, F.A.C., are allowable uses of these funds:

* Outreach
* Assessment
* Case Management
* Intensive Case Management
* Crisis Support/Emergency
* Incidental Expenses
* Intervention
* In-Home and On-Site
* Recovery Support; and
* Supportive Housing/Living

Care Coordination funds may not be used for the following purposes:

* To make direct payments to individuals to induce them to enter prevention or treatment services.
* To make direct payments to individuals to encourage attendance and/or attainment of prevention or treatment goals.
* To pay for the purchase or construction of any building or structure to house any part of the program.
* To pay for inpatient, residential, and any other covered services that are not listed in this Chart 8.

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**MH0FH – ME Community Forensic Multidisciplinary Teams** – This cost pool captures allowable costs for Forensic Multidisciplinary Teams (FMTs). The FMTs provide a 24 hour a day, seven days per week, comprehensive approach to divert individuals from involvement in the criminal justice system as well as from commitment to State Forensic Mental Health Treatment Facilities (SFMHTFs) by providing community-based services and supports. FMT providers will divert individuals from the Court, SFMHTFs, and other residential forensic programs. FMTs will provide services to individuals determined by the Court to be Incompetent to Proceed (ITP) or Not Guilty by Reason of Insanity (NGI), pursuant to Chapter 916, F.S., who may, in the absence of these services, be subject to court-ordered involuntary commitment to a SFMHTF. Many of these individuals are charged with “lesser” felony offenses and do not have a significant history of violent offenses. The FMTs will serve individuals in the pre and post-adjudicatory phases.

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**MH0FT – ME FACT Medicaid Ineligible** – This cost pool captures allowable costs of salaries and expenses for the operation of the Florida Assertive Community Treatment (FACT) program. A portion of these costs are to be claimed from the Health Care Financing Administration (HCFA) as Medicaid administrative costs in accordance with the interagency agreement between the Department and the Florida Agency for Health Care Administration (AHCA). The costs charged to AHCA is determined by the percentage of FACT clients that are Medicaid eligible.

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**MH0PG – ME MH PATH Grant** – This cost pool captures the allowable administrative and general program costs in the Regions / Circuits that are incurred under the Projects for Assistance in Transition from Homelessness (PATH) Grant.  
Community-based services are for individuals that are homeless or at risk of being homeless due to mental illnesses / co-occurring mental health and substance use disorders. The services assist individuals in living successfully in environments of their choice and include:

* Outreach.
* Screening and diagnostic treatment.
* Habilitation and rehabilitation.
* Community mental health services.
* Alcohol or drug treatment.
* Staff training, including the training of individuals who work in shelters, mental health clinics, substance abuse programs, and other sites where homeless individuals require services.
* Case management services.
* Providing assistance to the eligible homeless individual in obtaining income support services, including housing assistance, food stamps, and supplemental security income benefits.
* Referring the eligible homeless individual for such other services as may be appropriate
* Providing representative payee services in accordance with Section 1631(a)(2) of the Social Security Act if the eligible homeless individual is receiving aid under Title XVI of such act and if the applicant is designated by the Secretary to provide such services.
* Supportive and supervisory services in residential settings.
* Referrals for primary health services, job training, education services and relevant housing services.
* Housing services (subject to Section 522(h)(1) including minor renovation, expansion, and repair of housing; Planning of housing; Technical assistance in applying for housing assistance; Improving the coordination of housing services.
* Security deposits.
* The costs associated with matching eligible homeless individuals with appropriate housing situation.
* One-time rental payments to prevent eviction.

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**MH0TB – ME MH Temporary Assistance for Needy Families (TANF)** – This cost pool captures the allowable costs of eligible mental health services for Temporary Assistance for Needy Families (TANF) eligible participants.

The purpose is to provide interim services for TANF eligible participants who would either be required to wait on a list for treatment or have no other method of payment. This is to be used to give priority to families with child welfare involvement.

These non-medical services must be in line with the Federal TANF Legislative Goals, TANF State Plan (in accordance with Florida Statute 414.1585) and must be for TANF eligible consumers. TANF is the last payer for services.

Eligible services include aftercare, assessment, case management, crisis support / emergency, day care, day-night, incidental expenses, in-home / on-site, intensive case management, intervention, outpatient, outreach, prevention, residential levels I through IV, room and board with supervision, supported employment, supported housing / living (non-rent) and Treatment Alternative for Safer Communities (TASC).

Community Support Services include, but are not limited to, income supports, social supports, housing supports and vocational supports.

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**MH211 – ME Expanding 211 Call Vol & Coordination Initiative** – This cost pool captures allowable activities funded in Specific Appropriation 362 of Chapter 2021-36, Laws of Florida. Managing Entities will contract with 211 providers to expand statewide capacity in all 211 providers engaged in the Florida 211 Network authorized under s. 408.918, F.S.

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**MHCAT – ME MH Community Action Treatment (CAT) Teams** - This cost pool captures the allowable cost of funds provided to network service providers under subcontract with a Managing Entity for the operation of the Community Action Treatment (CAT) teams that provide community-based services to children ages 11 to 21 with a mental health diagnosis or co-occurring substance abuse diagnosis with accompanying characteristics such as: being at-risk for out-of-home placement as demonstrated by repeated failures at less intensive levels of care; having two or more hospitalizations or repeated failures; involvement with the Department of Juvenile Justice or multiple episodes involving law enforcement; or, poor academic performance and/or suspensions. Children younger than 11 may be candidates if they meet two or more of the aforementioned characteristics.

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**MHDRF – ME Disability Rights Florida Mental Health** – This cost pool captures allowable expenditures for a time-limited, flexible, consumer-directed Transition Voucher to transition individuals who no longer require the intensity of Florida Assertive Community Treatment (FACT) services to community-based services of their choice. This funding provides a voucher system under which the person served is the primary decision maker as to the services and supports to be purchased and from what vendor with care coordination supports from a community SAMH provider. Any services may be purchased pursuant to Rule 65E-14.021, F.A.C.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MHEBP – ME MH HQ Evidence Based Practice Team**- This cost pool captures the allowable costs for multidisciplinary teams utilizing one of the following Evidence practices (EBPs) supported by the Families First Prevention Services Act (FFPSA) Clearinghouse: Homebuilders, Family Functional Therapy, Multi Systemic Therapy and Parent Child Interaction Therapy. These Clearinghouse-approved practice models all provide strength-based approaches as the foundation for clinical interventions to support families' needs.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MHEDT – ME MH Early Diversion of Forensic Individuals** - This cost pool captures the allowable costs for enhancing the effectiveness of the existing Forensic Multidisciplinary Teams by using additional contracted staff and services in county jails specifically for early diversionary efforts. This additional contracted staff include a Jail Clinical Liaison and Jail Peer Specialist in each identified county creating an Early Jail Diversion Team (EDT). The EDT will be located in the forensic judicial circuits with selected Forensic Multidisciplinary Teams and a high number of forensic commitments, Duval and Hillsborough. Services will be provided to individuals booked into county jails but prior to an evaluation for competency in an effort to stabilize and prevent an admission to a forensic facility.

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**M****HEMP – ME MH Supported Employment Services** - This cost pool captures the allowable cost of supported employment services within Mental Health Clubhouses provided to individuals with serious mental health illnesses.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MHMCT – ME MH Mobile Crisis Teams** – This cost pool captures the allowable costs of funds provided to network service providers under subcontract with a Managing Entity for the operation of Mobile Crisis Response Teams (MTRTs). MRTs provide on-demand crisis intervention services in any setting in which a behavioral health crisis is occurring, including homes, schools and emergency rooms. Services are available 24 hours per day, 7 days per week. Services are provided by a team of professionals and paraprofessionals trained in crisis intervention skills to ensure timely access to supports and services. In addition to helping resolve the crisis, MRTs work with the individual and their families to develop strategies for effectively dealing with potential future crises. MRTs interact with law enforcement, emergency response, education, businesses and on-emergency dispatch (i.e., 211 lines) to train for immediate response and de-escalation, and crisis and safety planning.

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**MHMDT – ME MH Other Multidisciplinary Team** – This cost pool captures the allowable costs for multidisciplinary teams providing intensive services for children, adults, and their families (or other natural support systems) who are high utilizers of out of home services, such as Crisis Stabilization Units, civil state hospitals, and foster care. The purpose of these teams is to support individuals and their families (or other natural support systems) in maintaining permanency and stability within their communities through teaming models such as Intermediate Level FACT, CAT, 0-10 CAT, FST, FFPSA, and FACT.

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**MHOCB – ME Mental Health Crisis Beds**– This cost pool the allowable costs of beds in a Crisis Stabilization Unit providing direct 24/7 access to mental health assessments, stabilization, and treatment.

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**MHSCL – ME MH 988 Suicide and Crisis Lifeline Sustainment** – This cost pool captures the allowable costs program costs incurred for implementation of the 988 suicide and crisis lifeline in Florida through community mental health services block grant and state general revenue funding. 988 provides crisis intervention services for individuals experiencing emotional distress, suicidal ideation, and substance use crises. Funds will be allocated via managing entities to each of the 988 Florida lifeline member centers, for the purpose of maintaining the 988 suicide and crisis lifeline in Florida.

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**MHSCR – ME Centralized Receiving Systems** – This cost pool captures the allowable costs of funds provided for a statewide initiative to fund centralized receiving systems designed for individuals needing evaluation or stabilization under section 394.463 or section 397.675, Florida Statutes, or crisis services as defined in subsections 394.67(17)-(18), Florida Statutes.

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**MHSUN – ME Sunrise / Sunset Beds Pilot** – This cost pool captures allowable costs of a pilot for community residential and behavioral health services provided to persons identified for discharge from a state mental health treatment facility. These funds may be used to support the following providers and covered services as defined in Ch. 65E-14.021, F.S.

1. DaySprings Village - Sunrise Beds Program Residential Level II, Sunset Beds Program Room and Board with Supervision Level III, and Incidental Expenses.
2. Starting Point Behavioral Health Care - Any combination of the following services when provided to an individual receiving the residential services specified in 1 above: Day Treatment, Intensive Care Management, Medical Services, Outpatient, and Incidental Expenses.

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**MHTLH – ME MH Telehealth Behavioral Health Services** – This cost pool covers the allowable Managing Entity subcontract costs for behavioral telehealth services pilot projects for children in public schools, with an emphasis towards serving rural counties. The goal of each county project is to create or expand an integrated telecommunications technology platform used by Network Services Providers for services provided to children and families engaged in the county school system.  
  
Allowable costs include:  
Covered services under Ch. 65E-14.021 when delivered by telehealth platforms to otherwise eligible students and their families referred by the school system, or  
  
Any technology and system implementation supports needed to address identified needs for behavioral telehealth services to students and their families engaged with the school system. This may include the purchase of equipment, software, licenses, training, hosting and maintenance, and technical support services needed for the selected telehealth platform.  
  
Any combination of behavioral telehealth services of technology and system implementation supports.

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**MHTRV – ME Transition Vouchers Mental Health** – This cost pool captures the allowable costs of a time-limited, flexible, consumer-directed Transition Voucher to bridge the gap for people with mental health conditions as they transition from acute or restrictive levels of care to lower level community-based care, prioritizing individuals who are homeless or at risk of homelessness. This funding provides a voucher system under which the person served is the primary decision maker as to the services and supports to be purchased and from what vendor with care coordination supports from a community SAMH provider. Any services may be purchased pursuant to Rule 65E-14.021, F.A.C.

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**Substance Abuse – Core Services Funding**

**MS003 – 24 Hour Care (Non-Hospitalization) Residential** – This cost pool captures the allowable costs for 24-hour residential care (non-hospitalization) of eligible substance abuse residential treatment.

This purpose is to provide services for substance abuse disorders.

The authorized services include, residential 24-hours, 7 days per week services to promote recovery.

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**MS011 – Ambulatory/Community Non-24 Hour Care A/C** – This cost pool captures the allowable non-residential care costs of eligible community substance abuse services (excluding Residential and Crisis Services).

The purpose is to provide services in all levels including counseling, treatment planning and various ancillary services, such as, formal school and education.

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**MS021 – Detoxification Services** – This cost pool captures the allowable eligible detoxification program costs. Detoxification programs utilize medical and clinical procedures to assist individuals in their efforts to withdraw from the physiological and psychological effects of substance abuse.

Detoxification programs utilize medical and clinical procedures to assist individuals in their efforts to withdraw from the physiological and psychological effects of substance abuse.

Services include screening, assessment, short-term stabilization, detoxification and counseling. These services include activities associated with case management, referral, coordination and monitoring of services; assisting in the application process for services; facilitating client access and outreach for services and program and policy development.

Detoxification services may occur in a non-secure, residential or outpatient setting.

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**MS027 – Federal Pregnant Women and Women with Dependent Children** – This cost pool captures the allowable federal substance abuse services to pregnant women and women with dependent children as defined in 45 C.F.R. Part 96.124(e) and 42 U.S.C. 300x-22(b).

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**MS023 – ME SA HIV Services** – This cost pool captures the allowable eligible costs for HIV early intervention services for adults and children in treatment for substance use disorders. HIV early intervention services include pre-test counseling, post-test counseling, tests to confirm the presence of the disease, tests to diagnose the extent of the deficiency in the immune system, tests to provide information on appropriate therapeutic measures for preventing and treating the deterioration of the immune system and for preventing and treating conditions arising from the disease, and therapeutic measures for preventing and treating the deterioration of the immune system and for preventing and treating conditions arising from the disease.

Per 45 Code of Federal Regulation 96.128, organizations who serve individuals in treatment of substance abuse must make available free test counseling and testing, and post-testing counseling and therapy for HIV and the Acquired Immune Deficiency Syndrome (AIDS).

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**MS025 – ME SA Prevention Services** – This cost pool captures the allowable costs of eligible primary prevention services for adults and children at risk of substance use disorders.

Prevention services include the six eligible CSAP strategies: information dissemination, education, alternative activities, problem identification and referral services, community-based processes and environmental strategies.

Prevention services are directed toward children who do not require treatment. Prevention services precludes, forestall or impede the development of substance abuse problems in children and youth.

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**MS095 – ME SA Cove Behavioral Health** – This cost pool captures the allowable costs of funds provided to the Cove Behavioral Health.

From the funds in Specific Appropriation 359, $100,000 of recurring funds from the General Revenue fund is provided to Cove Behavioral Health (formerly DACCO).

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**MS903 – ME Here’s Help** – This cost pool captures the allowable costs of funds provided to Here’s Help, Inc.

From the funds in Specific Appropriation 359, $200,000 of recurring funds from the General Revenue fund is provided to Here’s Help, Inc.

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**MS907 – ME SA St. Johns County Sheriff's Office-Detox Program**– This cost pool captures the allowable costs of the St. John's Sheriff's Office substance abuse detoxification program.

From the funds in Specific Appropriation 359, $1,300,000 of recurring funds from the General Revenue Fund is provided to St. Johns County Sheriff’s Office-Detoxification Program.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MSSFP – ME SA State Funded Federal Excluded Services** – This cost pool captures the allowable costs of subcontracted

community substance abuse services which are unallowable for federal funding pursuant to conditions specified in Managing

Entity contracts.

Unallowable services include, but are not limited to:

* inpatient hospital services;
* enforcement of alcohol, tobacco, or drug laws;
* cash payments to intended recipients of health services;
* purchase or improvement of land; purchase, construction or permanent improvement of (other than minor remodeling) any building or other facility; or purchase major medical equipment;
* satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds;
* financial assistance to any entity other than a public or nonprofit private entity;
* any services within prisons or jails.

All covered services provided under this cost pool must be allowable pursuant to Chapter 65E-14.021, F.A.C.

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**Substance Abuse – Discretionary Grants Funding**

**MS0PP – ME SA Prevention Partnership Program** – This cost pool captures the allowable, eligible costs of the Substance Abuse Prevention and Treatment Block Grant (SAPTBG) relating to the Prevention Partnership Program. The prevention services are based on a partnership between community service providers and schools and are directed toward child and youth who do not require treatment.

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**MSRC7 - ME ST Opioid Response Disc Rec Comm Org** **– Year 7** - Federal Budget Period: 7/1/25-9/29/25 - This cost pool captures the allowable costs of implementing Recovery Community Organizations (RCOs) under the State Opioid Response IV (SOR-4) Grant. Funds may be utilized for operational startup costs and ongoing services including outreach, information and referral, recovery support, and incidental expenses. These services can be flexibly staged and may be provided prior to, during, and after treatment. They are designed to support and coach an adult or child and family to regain or develop skills to live, work, and learn successfully in the community. Funds under this OCA may also be used for medical services and medication assisted treatment, however, this only applies to RCOs that use the hub and spoke model where RCOs are paying DATA waivered primary care that are providing medication.

Up to five percent of the total grant award may be used for data collection and reporting.

State Opioid Response funds may not be used for the following purposes:

* Make direct payments to individuals to enter treatment or continue to participate in prevention or treatment services.
* To pay for construction or purchase of structures.
* To pay the salary of an individual at a rate in excess of Level II of the Executive Schedule, published by the U.S. Office of Personnel Management at: <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/>.
* To supplant (or replace) current funding of existing services.

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**MSSM7 - ME State Opioid Response SVCS-MAT – Year 7** –Federal Budget Period: 7/1/25-9/29/25 - This cost pool captures the allowable costs of Medication-Assisted Treatment (MAT) and other treatment and recovery support services provided under the State Opioid Response IV(SOR-4) Grant. Services may only be provided to individuals that misuse opioids or stimulants, individuals that experience an opioid or stimulant overdose, and individuals with opioid or stimulant use disorders. When treating individuals with opioid use disorders or opioid misuse, the covered services described in ch. 65E-14.021, F.A.C., are allowable uses of these funds when provided in conjunction any FDA approved medication for opioid use disorders. This includes funds used to support individuals receiving injectable extended-released naltrexone (Vivitrol) provided through the Florida Alcohol and Drug Abuse Association.  
  
Allowable Covered Services: Aftercare; Assessment; Case Management; Crisis Support/Emergency; Day Care; Day Treatment Incidental Expenses, excluding direct payments to participants; Intervention; Outreach; Medical Services; Medication-Assisted Treatment using methadone, buprenorphine, or naltrexone; Outpatient; Information and Referral; In-Home and On-Site ; Recovery Support; Respite; Supported Employment; Supportive Housing/Living; Inpatient Detoxification; Residential Levels I and II; Outpatient Detoxification. Inpatient and outpatient detoxification must be accompanied by injectable extended-release naltrexone (Vivitrol).

Residential services may only be used to stabilize and treat eligible individuals during transition to medication assisted treatment. When determining level of care, individuals must be assessed using the ASAM dimension spectrum criteria to determine appropriate care level followed by documentation justifying placement. Level of care should be reevaluated at  
least every 5 days for inpatient detoxification placements and every 30 days for residential treatment placements.

Funds may not be used by any provider that denies any eligible individual access to their program because of their use of FDA-approved medications for the treatment of substance use disorders, namely methadone and buprenorphine. In all cases, MAT must be permitted to be continued for as long as the prescriber determines that the medication is clinically beneficial. Providers must assure that individuals will not be compelled to no longer use MAT as part of the conditions of any programming if stopping is inconsistent with a licensed prescriber's recommendation or valid prescription.

In addition, State Opioid Response funds may not be used for the following purposes:

* Make direct payments to individuals to enter treatment or continue to participate in prevention or treatment services.
* To pay for construction or purchase of structures.
* To pay the salary of an individual at a rate in excess of Level II of the Executive Schedule, published by the U.S. Office of Personnel Management at: <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/>.
* To supplant (or replace) current funding of existing services.

No funding may be used to procure DATA waiver training.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MSSP7 - ME State Opioid Response Disc Grant SVCS-Prevention - Year 7**-Federal Budget Period: 7/1/25-9/29/25 - This cost pool captures the allowable costs of primary prevention programs associated with the State Opioid Response IV(SOR-4) Project Grant. The primary prevention services funded under this project must have evidence of effectiveness at preventing opioid misuse, stimulant misuse, or other illicit drug use. Evidence of effectiveness refers to statistically significant reductions in opioid misuse, stimulant misuse, or use of other illicit drugs, relative to comparison or control groups, as documented in peer-reviewed publications reporting on experimental or quasi-experimental program evaluation designs.

The list of approved, evidence-based programs that providers can choose from include:

* Botvin LifeSkills Training
* Strengthening Families Program (for Parents and Youth 10-14)
* Caring School Community
* Guiding Good Choices
* InShape Prevention Plus Wellness
* PAX Good Behavior Game
* Positive Action
* Project SUCCESS
* Project Towards No Drug Abuse
* SPORT Prevention Plus Wellness
* Media campaigns targeting prescription opioid or stimulant misuse (based on Utah’s Use Only as Directed with modifications to add prescription stimulant-specific content as needed) involving safe use, safe storage, and safe disposal messages that may be coupled with prescription drug take-back activities and the use of drug deactivation pouches.

Managing Entities may also request to implement evidence-based programs not listed here, for review and approval by the Department, according to the standards for evidence mentioned above.

State Opioid Response funds may not be used for the following purposes:

* Make direct payments to individuals to enter treatment or continue to participate in prevention or treatment services.
* To pay for construction or purchase of structures.
* To pay the salary of an individual at a rate in excess of Level II of the Executive Schedule, published by the U.S. Office of Personnel Management at: <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/>.
* To supplant (or replace) current funding of existing services.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**Substance Abuse – Proviso Projects Funding**

**MS108 – ME SA Disc Village - Opioid Residential Treatment Expansion (Operations)** – This cost pool captures allowable costs to provide treatment in the currently available additional capacity of Residential Level II & IV licensed beds for the treatment of severe Opioid Use Disorder and Substance Use Disorder for individuals residing in, but not limited to, the Second Judicial Circuit.

Allowable activities include: 24/7, 365 Residential treatment services for individuals with severe Opioid Use Disorder(OUD) and/or Substance Use Disorder (SUD) and Residential treatment services levels II & IV licensed beds for the treatment of severe Opioid Use Disorder and Substance Use Disorder for individuals residing in service area Leon, Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor.

From the funds in Specific Appropriation 363, $1,000,000 of nonrecurring funds from the General Revenue Fund is provided to DISC Village - Using Available Capacity for Opioid Residential Treatment in Rural North Florida. (House Form 3478) (Senate Form 2218)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MS912 – ME Memorial Healthcare-Medication Assisted Treatment Program** – This cost pool captures the allowable costs of an expanded Medication Assisted Treatment (MAT) program and an outreach program by the South Broward Hospital District. The goals of the program are to increase the number of persons with opioid use disorders who are enrolled in  
substance use treatment and to decrease the number of opioid-related deaths. By improving access to effective medication assisted treatment, this program will 1) provide outreach for 350 at-risk women and men; 2) provide substance use treatment for 150 with a comprehensive, multidisciplinary approach to medication assisted treatment; and 3) reduce the number of infants born with Neonatal Abstinence Syndrome (NAS).

Up to 2 percent of the total grant award may be used for data collection and reporting. State Opioid Response funds may not be used for the following purposes:

* Make direct payments to individuals to enter treatment or continue to participate in prevention or treatment services.
* To pay for construction or purchase of structures.
* To pay the salary of an individual at a rate in excess of Level II of the Executive Schedule, published by the U.S. Office of Personnel Management at: <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/>.
* To supplant (or replace) current funding of existing services.

From the funds in Specific Appropriation 363, $1,000,000 of nonrecurring funds from the General Revenue Fund is provided to South Broward Hospital District - Medication Assisted Treatment. (House Form 1425) (Senate Form 2534)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MS917 – ME Specialized Treatment, Education and Prevention Services-Women’s Residential Treatment** – This cost pool captures the allowable costs of the Women's Residential Treatment with Medication Assistance Program. The program provides ten (10) Residential Treatment Level II beds, plus Medication Assisted Treatment (MAT) to women, women and children, pregnant and post-partum women residing in Brevard County who are experiencing opiate addiction.

From the funds in Specific Appropriation 363, $500,000 of nonrecurring funds from the General Revenue Fund is provided to STEPS- Women’s Residential Treatment. (House Form 1330) (Senate Form 1877)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MS918 – ME SA St. Johns Epic Recovery Center-Women’s Residential Bed** – This cost pool captures the allowable costs of up to 6 additional residential treatment beds for women with significant substance use disorders at the St. Johns EPIC Recovery Center. Allowable activities for this project include gender-specific Residential Treatment for women addressing trauma, grief and loss, self-esteem/body image, co-occurring mental health concerns or anxiety, depression and eating disorders, anger, and familial relationships. Residential services will include care coordination, peer support, life-skills coaching, parenting and recreation/art/music therapies.

From the funds in Specific Appropriation 363, $750,000 of nonrecurring funds from the General Revenue Fund is provided to EPIC Behavioral Healthcare - Women’s Substance Abuse Residential Treatment. (House Form 2098) (Senate Form 2841)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MS921 – ME SA Here’s Help-Juvenile Resident Treatment Expansion** – This cost pool captures the allowable costs of up to 4 additional residential substance use treatment beds for high-risk, criminal justice involved adolescent males ages 13 through 17 at the Here's Help facility in Miami-Dade County. Residential Level II services include individual, group and family therapy, educational programming, medical, dental and psychological services, social and recreational activities, and alternative therapies including art, music, photography, and computer graphics.

From the funds in Specific Appropriation 363, $250,000 of nonrecurring funds from the General Revenue Fund is provided to Here’s Help - Residential Substance Abuse Treatment Services. (House Form 3315) (Senate Form 1198)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MS922 – ME MS Broward Health-Integrated Medication Assisted Treatment** – This cost pool captures the allowable costs of the Broward Health project providing comprehensive drug psychosocial/behavioral therapy and pharmacotherapy to address underlying issues of substance abuse and/or co-occurring conditions, and expand services for labor/delivery endorphins, and babies born with neonatal abstinence syndrome. Allowable services include multidisciplinary diagnostic assessments, screening and treatment orientation; medication treatment; individual and group therapy; drug breathalyzer tests; individual and group peer recovery supports; family psychoeducation; aftercare; and case management and treatment planning.

State Opioid Response funds may not be used for the following purposes:

* Make direct payments to individuals to enter treatment or continue to participate in prevention or treatment services.
* To pay for construction or purchase of structures.
* To pay the salary of an individual at a rate in excess of Level II of the Executive Schedule, published by the U.S. Office of Personnel Management at: <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/>.
* To supplant (or replace) current funding of existing services.

From the funds in Specific Appropriation 363, $500,000 of nonrecurring funds from the General Revenue Fund is provided to Broward Health – Integrated Medication Assisted Treatment Response (iMATR). (House Form 3155) (Senate Form 2541)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MSCS0 – ME SA Seminole County Sheriff Opioid ARC Partnership** – This cost pool captures the allowable costs of  
the Seminole County Sheriff's Office Hope for Healing Center, a Level II residential treatment facility and an Intensive Outpatient Program (IOP) for persons with substance use disorders. IOP services are offered to all residents being discharged from the Residential Level II program to ensure they are receiving all of the services needed to assist in the recovery process.

From the funds in Specific Appropriation 363, $1,000,000 of nonrecurring funds from the General Revenue Fund is provided to Seminole County Sheriff’s Office - Hope and Healing Center for Opioid/Addiction Recovery. (House Form 2150) (Senate Form 1471)

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**Substance Abuse – Targeted Services Funding**

**MS081 – ME Expanded SA Services for Pregnant Women, Mothers and Their Families**– This cost pool captures the allowable costs associated with the expansion of substance abuse services for pregnant women, mothers and their affected families.

These services shall include the expansion of residential treatment, outpatient treatment with housing support, and post-partum case management supporting both the mother and child consistent with recommendations from the Statewide Task Force on Prescription Drug Abuse and Newborns.

From the funds in Specific Appropriation 359, $10,000,000 from the General Revenue Fund shall continue to be provided for the expansion of substance abuse services for pregnant women, mothers, and their affected families. These services shall include the expansion of residential treatment, outpatient treatment with housing support, outreach, detoxification, childcare and post-partum case management supporting both the mother and child consistent with recommendations from the Statewide Task Force on Prescription Drug Abuse and Newborns. Priority for services shall be given to counties with the greatest need and available treatment capacity.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MS091 – ME SA Family Intensive Treatment (FIT)** – This cost pool captures the allowable costs of funds provided to the Family Intensive Treatment (FIT) team model that is designed to provide intensive team-based, family-focused, comprehensive services to families in the child welfare system with parental substance abuse. Treatment shall be available and provided in accordance with the indicated level of care required and providers shall meet program specifications. Funds shall be targeted to select communities with high rates of child abuse cases located in the Department of Children and Families' Central, Northeast, Southern, and SunCoast regions.

From the funds in Specific Appropriation 359, $12,060,000 from the General Revenue Fund is provided to implement the Family Intensive Treatment (FIT) team model designed to provide intensive team-based, family-focused, comprehensive services to families in the child welfare system with parental substance abuse. Treatment shall be available and provided in accordance with the indicated level of care required and providers shall meet program specifications. Funds shall be targeted to select communities with high rates of child abuse cases.

From the funds in Specific Appropriation 359, $840,000 from the General Revenue Fund shall be provided to Centerstone of Florida for the operation of a Family Intensive Treatment (FIT) team (recurring base appropriations project).

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MS0CN – ME SA Care Coordination Direct Client Services** – This cost pool captures the allowable costs of care coordination as outlined in Guidance 4 - Care Coordination of the Managing Entity contracts, available at:

<https://www.myflfamilies.com/sites/default/files/2023-07/Guidance%204%20Care%20Coord%20%202023%2007%2001.pdf>

Pursuant to s. 394.9082(3)(c), F.S., the Department has defined several priority populations to potentially benefit from Care Coordination. Network Service Providers are expected to minimally serve the following population:

1. Adults with a substance use disorder (SUD) or co-occurring disorders who demonstrate high utilization of acute care services, including crisis stabilization, inpatient, and inpatient detoxification services. For the purposes of this document, high utilization is defined as:
   1. Adults with three (3) or more acute care admissions within 180 days; or
   2. Adults with acute care admissions that last 16 days or longer.

Adults with a SMI awaiting placement in a state mental health treatment facility (SMHTF) or awaiting discharge from a SMHTF back to the community. Populations identified to potentially benefit from Care Coordination that may be served in addition to the required group include:

1. Persons with a SUD or co-occurring disorders who have a history of multiple arrests, involuntary placements, or violations of parole leading to institutionalization or incarceration.
2. Caretakers and parents with a SUD or co-occurring disorders involved with child welfare.
3. Individuals with a SUD identified by the Department, managing entities, or Network Service Providers as potentially high risk due to concerns that warrant Care Coordination, as approved by the Department.

The following covered services described in ch. 65E-14.021, F.A.C, are allowable uses of these funds: Outreach; Assessment; Case Management; Crisis Support/Emergency; Incidental Expenses; Intervention; In-Home and On-Site; Recovery Support; and Supportive Housing/Living.

Care Coordination funds may not be used for the following purposes:

* To make direct payments to individuals to induce them to enter prevention or treatment services.
* To make direct payments to individuals to encourage attendance and/or attainment of prevention or treatment   
  goals.
* To pay for the purchase or construction of any building or structure to house any part of the program.
* To pay for inpatient, residential, and any other covered services that are not listed in this Chart 8.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MS0TB – ME SA Temporary Assistance for Needy Families (TANF)** – This cost pool captures the allowable costs of eligible substance abuse services for Temporary Assistance for Needy Families (TANF) eligible participants.

The purpose is to provide interim services for TANF eligible participants who would either be required to wait on a list for treatment or have no other method of payment. This is to be used to give priority to families with child welfare involvement.

These non-medical services must be in line with the Federal TANF Legislative Goals, TANF State Plan (in accordance with Florida Statute 414.1585) and must be for TANF eligible consumers. TANF is the last payer for services.

Eligible services include aftercare, assessment, case management, crisis support / emergency, daycare, day-night, incidental expenses, in-home / on-site, intensive case management, intervention, outpatient, outreach, prevention, residential levels I through IV, room and board with supervision, supported employment, supported housing / living (non-rent) and Treatment Alternative for Safer Communities (TASC).

Community Support Services include, but are not limited to, income supports, social supports, housing supports and vocational supports.

Per Social Security Act Title IV-A Section 408(a)(6), medical services are not an allowable cost to TANF.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MSCBS – ME SA Community Based Services** – This cost pool captures the allowable costs of funds provided to network service providers under subcontract with a Managing Entity for community-based services to address the opioid crisis, including, but not limited to, outreach, addiction treatment, and recovery support services. Funding under this subsection shall be used to expand capacity to increase access to and reduce waitlists for treatment; increase efforts to effectively engage and retain in treatment youth, pregnant women, high-risk populations, and high utilizers of acute care services; and further develop a recovery-based model of care. Funding for specific services may include, but are not limited to, case management, residential services, outpatient services, aftercare services, and medication-assisted treatment. Medication-assisted treatment may include, but is not limited to, methadone, buprenorphine, and naltrexone extended release injectable.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MSOCB - ME SA Crisis Beds** – This cost pool captures the allowable costs of beds in a Detoxification Unit or Addictions Receiving Facility providing direct 24/7 access to substance use disorder assessments, stabilization, and treatment.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MSOCR - ME Opioid TF Coord Opioid Recovery Core** – This cost pool captures allowable costs for Coordinated Opioid Recovery (CORE) Network pilot projects in the following counties: Brevard, Citrus, Clay, Duval, Escambia, Flagler, Gulf, Manatee, Marion, Pasco, Pinellas, Volusia, Bay, Okaloosa, Lee, Hernando, Lake, Indian River, Sarasota, Monroe, Broward, Miami-Dade, Orange, Seminole, St. Lucie, Collier, Hillsborough, Polk, Leon. Allowable costs includes Rescue Response, Stabilization/Assessment, Long-Term Treatment.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MSOHB - ME Opioid TF Hospital Bridge Programs** – This cost pool captures the allowable costs for Hospital Bridge Program to engage counties not currently operating a CORE program. Allowable cost include: initiation of buprenorphine before discharge, engagement with peer support, prescribing and dispensing the opioid overdose antidote (naloxone nasal spray), actively linking patients to ongoing medication-assisted treatment through network service providers, and introduce recovery services to participants.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

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**MSONQ - ME Opioid TF Non-Qualified Counties** – This cost pool captures the allowable costs for the agreement for services in 48 non-qualified counties funded through the Department's contracted Managing Entities ME). MEs are required to expend the funding on approved purposes to ensure services in every county prioritizing CORE, Medication-Assisted Treatment, and Mobile/On Demand Buprenorphine.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MSOPR - ME Opioid TF Peer Supports and Recovery Comm Org** – This cost pool captures the allowable costs for the initiative to increase the number of peer's workforce certification as Recovery Peer Specialist. In addition, funding support adding 4 Recovery Community Organizations (RCOs) to maximize recovery support throughout the state. Peers and RCOs will work closely with hospitals and long-term community-based providers participating in the CORE and Hospital Bridge Programs.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MSOTR - ME Opioid TF Treatment and Recovery** – This cost pool captures the allowable costs for treatment and recovery support services. Allowable costs include ancillary health and social services treatment such as therapy, Medication-Assisted Treatment, Residential, Programs for mothers and babies, Intervention, Recovery Support Services (aftercare, respite care), Supportive housing, Supportive employment, Case management/Care Coordination.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MSSCL - ME SA 988 Suicide and Crisis Lifeline Sustainment** – This cost pool captures the allowable program costs incurred for implementation of the 988 suicide and crisis lifeline in Florida through substance use prevention, treatment, and recovery services block grant funding. 988 provides crisis intervention services for individuals experiencing emotional distress, suicidal ideation, and substance use crises. Funds will be allocated via managing entities to each of the 988 Florida lifeline member centers, for the purpose of maintaining the 988 suicide and crisis lifeline in Florida.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MSTRV – ME Transition Vouchers Substance Abuse** – This cost pool captures the allowable expenditures for a time-limited, flexible, consumer-directed Transition Voucher to bridge the gap for people with substance use disorders as they transition from acute or restrictive levels of care to lower level community-based care, prioritizing individuals who are homeless or at risk of homelessness. This funding provides a voucher system under which the person served is the primary decision maker as to the services and supports to be purchased and from what vendor with care coordination supports from a community SAMH provider. Any services may be purchased pursuant to Rule 65E-14.021, F.A.C.

***ME Cost Allocation Plan Requirement*** *– In this section, the ME should provide a description of the services provided and billed for under this cost pool, which could include a list of the subcontractors and the amount they are subcontracted for. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to this cost pool and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in this cost pool.  If the account/sub-account codes are not unique for this cost pool, explain how the costs are identified for this cost pool.  Attachments may be used to simplify the explanation of allocated costs.*

*If funding is not provided to the ME in their contract, include a statement to that effect here.*

# Section IX – Non-Managing Entity Funded Activities, Contracts or Grants

***ME Cost Allocation Plan Requirement –*** *In this section, the ME should provide a description of other contracts or grants including the name of grantor or contract payer and the types of programs or services provided in the grant or contract. In addition, the ME should provide a description as to how the ME ensures that only eligible costs are charged to the other contracts and grants and how their accounting system captures these costs which could include cost center detail and descriptions. The ME should provide the general ledger account and sub-account codes as listed in the Chart of Accounts that are used to capture the costs included in the other contracts and grants.  If the account/sub-account codes are not unique for the other contracts and grants, explain how the costs are identified for the other contracts and grants.  Attachments may be used to simplify the explanation of allocated costs.*

# Attachment I – Organizational Chart

**(Add ORG Chart)**

# Attachment II – Chart of Accounts for Accounting and Data Systems

**(Add Chart of Accounts All Levels)**

# Attachment III – Name Other Attachments

**(Add Other Attachments as Needed)**