**Template 14**

**Managing Entity Cost Allocation Plan**

**Requirement:** *Sections A-1.2 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**

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# 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.*

**MHSCD – ME Care Coordination** – This cost pool captures the cost 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 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.*

**MHSHG – ME Housing Coordination** – This cost pool captures the cost of the Managing Entity's Housing Coordination function. The purpose of this function is to: Increase and improve collaboration and coordination between Managing Entities, Local Homeless Coalitions, Designated Lead Agencies of Continuum of Care Plans, Florida Housing Finance Corporation (FHFC), and other key state and local agencies as they relate to housing-related services; Find safe, affordable, stable housing for individuals with mental health and/or co-occurring diagnoses; Ensure that these individuals receive the necessary support services to be successful in the community; and Increase the number of discharges from state mental health treatment facilities to stable community housing in lieu of discharges to community crisis stabilization units, to addiction receiving facilities, or to placements increasing the risk of subsequent homelessness.

***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.*

**MH0SK – ME MH System of Care** – This cost pool represents the Managing Entity's (ME) partnership with the Florida Children's Mental Health System of Care Sustainability Project (FCMHSOC). Through this Project, SAMH-HQ is partnering with behavioral health MEs and stakeholders to expand outreach and access to SOCs and community based services and supports. The MEs will work with service providers in their region to be the "lead agency" for SOC implementation. The MEs will also be engaged to provide ongoing training of their contracted providers in their SOC and in implementing fidelity measures in their performance expectations.

***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.*

**MSSOA - ME State Opioid Response Disc Grant Admin** - This cost pool captures allowable administrative and general program costs in the Managing Entities incurred under the State Opioid Response (SOR) Grant. All funds expended under this OCA must be directly related to grant activities and the ME must maintain records to that effect. This discretionary grant program aims to address the opioid crisis by providing evidence-based prevention, medication-assisted treatment (MAT), and recovery support services. The populations of focus for this project are individuals that misuse opioids, individuals that experience an opioid overdose, and individuals with opioid use 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 $189,600.
* 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.*

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

This section describes expenditures related to general substance abuse and mental health 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.*

**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.*

**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.*

**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.*

**MH026 – ME Early Intervention Svc - Psychotic Disorders** – This cost pool captures the allowable costs of services provided to individuals in need of early intervention for psychotic disorders under the Community Mental Health Block 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. 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 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 eligible under this cost pool are 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.*

**Mental Health – Discretionary Grants Funding**

**MHESP – ME FL SOC Expansion and Sustainability Project** – This cost pool captures the allowable administrative and general program costs in the Managing Entities incurred under the Florida Children's Mental Health System of Care Expansion Sustainability (FCMHSOC) grant awarded by the Department of Health and Human Services' Substance Abuse and Mental Health Services Administration as a four year discretionary grant.

The FCMHSOC Project expands the System Of Care framework into the statewide mental health service delivery network for children and adolescents aged 0-21 who are diagnosed with serious emotional disturbances (SED) and their families. The Project period is from September 30, 2016 to September 29, 2020.

Costs include, but are not limited to the Substance Abuse and Mental Health Services-Projects of Regional and National Significance (PRNS).

***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.*

**MH0PG – ME 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 the 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 situations
	+ One-time rental payments to prevent eviction

The PATH Grant requires a 25% in-kind or cash match, in addition to being limited to a 4% administrative cap.

***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.*

**MHTA4 – ME MH Florida Youth Transition to Adulthood - Year 4** - This cost pool captures the allowable administrative and general program costs incurred under the Healthy Transitions grant awarded by the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration as a five year federal discretionary grant. This grant project, Florida Youth Transition to Adulthood, will improve access to treatment and support services for individuals between the ages of 16 and 25 who are at risk of developing a serious mental health condition, or who have already been identified as having a serious mental health condition. The project is funded annually and will be administered by the Central Florida Behavioral Health Network, the Managing Entity for the Department's SunCoast Region. In addition to addressing policy and procedural issues relating to the transition of youth with serious mental health conditions from child to adult systems of care, the project will pilot evidence-based services and supports for this population in Hillsborough, Lee, and Collier counties. The grant project period is from September 30, 2014 through September 30, 2019. The period of the year 4 OCA is September 30, 2017 to September 29, 2018.

***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.*

**MHTA5 – ME MH Florida Youth Transition to Adulthood** **- Year 5** - This cost pool captures the allowable administrative and general program costs incurred under the Healthy Transitions grant awarded by the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration as a five year federal discretionary grant. This grant project, Florida Youth Transition to Adulthood, will improve access to treatment and support services for individuals between the ages of 16 and 25 who are at risk of developing a serious mental health condition, or who have already been identified as having a serious mental health condition. The project is funded annually and will be administered by the Central Florida Behavioral Health Network, the Managing Entity for the Department's SunCoast Region. In addition to addressing policy and procedural issues relating to the transition of youth with serious mental health conditions from child to adult systems of care, the project will pilot evidence-based services and supports for this population in Hillsborough, Lee, and Collier counties. The grant project period is from September 30, 2014 through September 30, 2019. The period of the year 5 OCA is September 30, 2018 to September 29, 2019.

***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.*

**MH0PL – ME Project Launch** – This cost pool captures the administrative and general program costs in the Regions/Circuits associated with mental health counseling.

Costs include, but are not limited to the project to promote the wellness of young children from birth to 8 years by addressing the gaps in existing prevention and targeted intervention services and to strengthen the partnership between state and local agencies serving young children and their families. The Florida (FL) LAUNCH Project enhances the partnership between the Department of Children and Families (DCF), Department of Health (DOH), and service providers in Pinellas County, FL. The project is aimed at preventing youth substance use and mental, emotional, and behavioral disorders by improving family function and the quality of the parent-child relationship through parenting training and skill building and selective intervention for young children.

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

**MHFLH - ME MH Florida Hurricane SERG** - This cost pool captures the cost of contracted services to address unmet behavioral health needs resulting from 2017 hurricane declarations as detailed in the Departments SAMHSA Emergency Response Grant (SERG) application in two areas of the state.

In Monroe County, eligibility for client-specific services will also include a discernible connection to Hurricane Irma impact on the individual or family receiving grant-funded services. In Orange, Osceola, Seminole, and Brevard Counties, eligibility for client-specific services will include the individual or family's identification as an evacuee due to Hurricane Maria or a discernible connection to Hurricane Irma impact. A discernible link between the hurricane experience and the specific behavioral health service needs is not required.

Services will be provided at the frequency, level and intensity needed to address the individual or family's treatment needs, as determined by each provider's existing clinical intake eligibility and assessment protocols.

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

**Mental Health – Proviso Projects Funding**

**MH010 – ME Miami Dade Homeless Trust** – This cost pool captures the allowable costs of the Diversion First Mental Health Program for transitional housing and wrap-around behavioral health treatment services for homeless individuals with Serious Mental Illnesses (SMI) or co-occurring SMI and substance use disorders who have been involved in the criminal justice system or experienced psychiatric hospitalizations.

From the funds in Specific Appropriation 372, $250,000 of nonrecurring General Revenue funds is provided to Miami-Dade Homeless Trust. (HB 2841) (Senate Form 2351)

***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.*

**MH011 – ME Stewart-Marchman Behavioral Healthcare** – This cost pool captures the cost of the Florida Assertive Community Treatment (FACT) Team serving St. Johns and Putnam counties.

The operating costs for the team includes personnel costs, building occupancy, communications and administrative costs. Additional funds are allocated as enhancement funds, utilized for medication costs, housing subsidies, transportation and incidental services. FACT services are provided to approximately 100 individuals diagnosed with a severe and persistent mental illness who have a history of frequent hospitalization, legal involvement and homelessness. More than half have been treated in one of Florida's state psychiatric hospitals. FACT is responsible for ensuring that these individuals achieve their highest possible level of functioning, maintain stable housing, follow their prescribed medication and therapy regimens, abstain from the use of alcohol and illicit drugs, receive primary and specialty healthcare according to their needs and obtain either employment or volunteer in service to their community. FACT services must be provided in accordance with the most recent FACT Handbook as incorporated in the managing entity contract.

From the funds in Specific Appropriation 372, $1,500,000 of nonrecurring funds from the Alcohol, Drug Abuse, and Mental Health Trust Fund is provided to Stewart-Marchman Behavioral Healthcare – Florida Assertive Community Treatment team in the counties of Putnam and St. Johns. (HB 3859) (Senate Form 1083)

***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.*

**MH012 – ME MH Apalachee Center – Forensic Treatment Services** – This cost pool captures costs of services provided at the Apalachee Center Short Term Residential Forensic Facility. These services are provided to divert individuals in Leon County with mental illness and involvement in the criminal justice system from state hospital admission or incarceration.

From the funds in Specific Appropriation in 367, $500,000 of nonrecurring funds from the General Revenue Fund is provided to the Apalachee Center for forensic treatment services. (HB 2307) (Senate Form 1802)

***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.*

**MH016 – ME MH Personal Enrichment MH Crisis Stabilization Unit** – This cost pool captures costs for 4 beds in the adult Crisis Stabilization Unit operated by Personal Enrichment through Mental Health Services, Inc.

From the funds in Specific Appropriation 372, $500,000 of nonrecurring funds from the Alcohol, Drug Abuse and Mental Health Trust Fund is provided for Personal Enrichment through Mental Health Services – Crisis stabilization services. (Senate Form 1758)

***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.*

**MH021 – ME MH South Florida Behavioral Network - IOS Pilot Project** - This cost pool captures the allowable costs of a competitively procured subcontracted Involuntary Outpatient Services (IOS) Demonstration Project in the Southern Region for individuals with behavioral health conditions and histories of criminal justice involvement. Allowable costs include staffing, necessary treatments, medications, housing and ancillary needs that support recovery and successful community reintegration, subject to the requirements of Chapter 65E-14, F.A.C. Individuals served will have histories of repeated admissions to mental health treatment services in the criminal justice and acute care treatment systems, as well as histories of treatment noncompliance or refusal to engage in treatment.

From the funds in Specific Appropriation in 372, $300,000 of nonrecurring funds from the General Revenue Fund is provided to South Florida Behavioral Health Network. (HB 3493) (Senate Form 1037)

***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.*

**MH023 – ME Orange Park Medical Center** - This cost pool captures the allowable costs of inpatient crisis stabilization services provided at the Orange Park Medical Center in Clay County for individuals who are mentally ill and experiencing a mental health crisis, pursuant to Chapters 394 F.S. The goal of these services is to examine and stabilize the individual and to redirect them to the most appropriate and least restrictive treatment setting for their needs with the ultimate goal of further integration back in into their home communities.

From the funds in Specific Appropriation in 372, $1,775,332 of nonrecurring funds from the General Revenue Fund is provided to Orange Park Medical Center. (HB 3361) (Senate Form 2575)

***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.*

**MH028 – ME Osceola Mental Health-Park Place** - This cost pool captures the allowable costs of additional bi-lingual (Spanish and English) Psychiatrist staffing to provide psychiatric evaluation and ongoing medication management to individuals with mental health disorders receiving services from Osceola Mental Health, Inc., d/b/a Park Place Behavioral Health Care.

From the funds in Specific Appropriation in 372, $150,000 of nonrecurring funds from the General Revenue Fund is provided to Park Place Behavioral Health. (HB 3005) (Senate Form 2041)

***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.*

**MH029 – ME John Hopkins Children's Hospital-Postpartum Depression** - This cost pool captures the allowable staffing and related costs of a screening program for the early detection of maternal or paternal perinatal postpartum depression, coupled with an intervention program to treat these parents and facilitate better outcomes for the child.

From the funds in Specific Appropriation in 372, $250,000 of nonrecurring funds from the General Revenue Fund is provided to John Hopkins All Children’s Hospital. (HB 4445) (Senate Form 2215)

***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.*

**MH031 – ME David Lawrence Center-Behavioral Health Services** – This cost pool captures the cost of the Wraparound Collier Program. The Wraparound Collier Program provides specialty mental health services to high-risk uninsured children, ages 5 to 19, who are not eligible for services under the Title XXI Behavioral Health Network program and lack insurance coverage for these services. The program provides counseling and linkage to other individualized services and supports at home, school, and community-based settings, including acute care when deemed medically necessary.

From the funds in Specific Appropriation 372, $100,000 of nonrecurring funds from the General Revenue Fund is provided to the David Lawrence Center (base recurring project funded as nonrecurring).

***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.*

**MH032 – ME Baycare Behavioral Health - Veterans Intervention Program** – This cost pool captures expenditures for the Veteran’s Intervention Program (VIP). VIP is personalized and specialized outreach, information and referral services, peer navigation and behavioral health services for Veterans and their family members.

VIP offers direct services through solution-focused outpatient counseling, detoxification and residential co-occurring treatment. Peer Navigators coach, navigate and provide direct outpatient behavioral services to Veterans and their Families by outlining the resources available through VIP, community resources and the VA; introduce participants to the local community of other families to engage them in a social support network; help the Veteran and Family link/apply for financial assistance, employment, housing or other needs; and assist with accessing support funds for financial emergencies that could be barriers to treatment.

From the funds in Specific Appropriation 372, $485,000 of nonrecurring funds from the General Revenue Fund is provided to BayCare Behavioral Health. (HB 2345) (Senate Form 1842)

***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.*

**MH037 – ME Fort Myers Salvation Army** – This cost pool captures the cost of the Fort Myers Salvation Army Co-occurring Residential Treatment Program which provides mental health and substance abuse treatment for six felony probation beds funded by the Department of Corrections (DOC) serving 12 individuals. Staffing and services include:

1) A Psychiatrist to provide an initial assessment, diagnosis and ongoing medication management of the residents. The psychiatrist will see each client at least monthly or more if indicated.

2) A Masters Level Mental Health Clinician to provide direct mental health services weekly to include: 1.5 hr. of counseling per resident, one mental health group weekly, and liaison between the program, residents, and medication management with the psychiatrist.

3) Prescription medications for residents.

4) Lab work (medical services) for residents that includes all requirements/services of the provider's current DOC contract for non-secure substance abuse treatment and our DCF license to provide substance abuse treatment.

From the funds in Specific Appropriation 372, $165,000 of nonrecurring funds from the General Revenue Fund is provided to the Ft. Myers Salvation Army. (HB 2053) (Senate Form 1502)

***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.*

**MH046 – ME Centerstone Florida** – This cost pool captures the cost of Psychiatric Residency Expansion. The Behavioral Health Workforce Development program at Centerstone will, provide post graduate workforce development needed for licensure in behavioral health disciplines of all types to 100 professionals in behavioral health disciplines at $5,000 annually per enrollee.

From the funds in Specific Appropriation 372, $500,000 of nonrecurring funds from the General Revenue Fund is provided to Centerstone Psychiatric Residency Expansion. (HB 2173) (Senate Form 1493)

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

**MH060 – ME Veterans Alternative Retreat Program** – This cost pool captures the cost of the Veterans Alternative Retreat Program. Two hundred (200) retreat participants through the conduct of 33 retreats (approximately 3 per month). Each retreat will have 6 participants with the exception of 2 retreats that serve 7 participants to reach the target goal of 200 participants. Each retreat will span a period of 6 days.

From the funds in Specific Appropriation 372, $250,000 of nonrecurring funds from the General Revenue Fund is provided to Veterans Alternative Retreat Program. (HB 3873) (Senate Form 2070)

***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.*

**MH089 – ME Clay Behavioral Health Center – Crisis Prevention** – This cost pool captures the cost of funds provided to Clay Behavioral Health for Crisis Prevention Team services.

From the funds in Specific Appropriation 372, $800,000 of nonrecurring funds from the Alcohol, Drug Abuse and Mental Health Trust Fund is provided to Clay Behavioral Health Center. (HB 2127) (Senate Form 2020)

***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 cost of funds provided to Citrus Health Network for behavioral health services.

From the funds in Specific Appropriation 367, $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.*

**MH096 – ME Jerome Golden Center** – This cost pool captures the cost of funds provided to the Jerome Golden Center for behavioral health services.

From the funds in Specific Appropriation 372, $500,000 of nonrecurring funds from the General Revenue Fund is provided to the Jerome Golden Center. (HB 3389) (Senate Form 1062)

***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.*

**MHS50 – ME Lifestream Center** – This cost pool captures the cost of funds provided to Lifestream for crisis stabilization units.

From the funds in Specific Appropriation 372, $1,123,634 of nonrecurring funds from the General Revenue Fund is provided to Lifestream Behavioral Health Center. (HB 4095) (Senate Form 2044)

***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.*

**MHS52 – ME Circles of Care – Crisis Stabilization** – This cost pool captures the cost of funds provided to Circles of Care – Harbor Pines for crisis stabilization unit services.

From the funds in Specific Appropriation 372, $500,000 of nonrecurring funds from the General Revenue Fund is provided to Circles of Care Harbor Pines and Cedar Village. (HB 4411) (Senate Form 1322)

***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.*

**MHS55 – ME Circles of Care – Geropsychiatric Care** – This cost pool captures the expenditures for Circles of Care – Geropsychiatric Care Center Services.

From the funds in Specific Appropriation 372, $900,000 of nonrecurring General Revenue Funds is provided Circles of Care -Geropsychiatric Care Center. (HB 4413) (Senate Form 1321)

***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.*

**MHRM5 – ME Renaissance Manor** – This cost pool captures the cost 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 372, $600,000 of nonrecurring funds from the General Revenue Fund is provided to The Renaissance Manor. (HB 3481) (Senate Form 1108)

***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 – Targeted Services Funding**

**MH071 – ME MH Purchase of Residential Treatment Services (PRTS) for Emotionally Disturbed Children and Youth** - This cost pool captures 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.

***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.*

**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.

***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.*

**MH073 – ME MH Florida Assertive Community Treatment (FACT) Administration** – This cost pool captures the 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 cost in accordance with an Interagency Agreement between the Department and the Florida Agency for Health Care Administration (AHCA). The cost charged to AHCA is determined by the percentage of FACT clients that are Medicaid eligible.

***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.*

**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 that meet the Federal guidelines for 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 medications offered by pharmaceutical manufacturers.

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**MH0BN – ME MH Title XXI Children's Health Insurance Program (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 stable settings, 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.

***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.*

**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:

http:www.myflfamilies.com/service-programs/substance-abuse/managing-entities/2017-contract-docs

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

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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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**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.

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

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**MHCAT – ME MH Community Action Treatment (CAT) Teams** - This cost pool captures the 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 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. If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MHEMP – ME MH Supported Employment Services** - This cost pool captures the cost of Mental Health Clubhouse services and supported employment services provided to individuals with mental health disorders within existing Mental Health Clubhouse providers accredited by the International Center for Clubhouse Development (ICCD).

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**MHFMH – ME MH Forensic Transitional Beds** – This cost pool captures the 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.

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**MHMCT – ME MH Mobile Crisis 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 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.

***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.*

**MHSCR – ME Centralized Receiving Facilities** – This cost pool captures the cost of funds provided for a statewide initiative to fund centralized receiving facilities 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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**MHTMH – ME MH Transitional Beds for MH Institution** – This cost pool captures the 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.

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**MHTRV – ME Transition Vouchers Mental Health** – This cost pool captures expenditures for 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 expenditures 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 cost 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 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 cost 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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**MSSFP – ME SA State Funded Federal Excluded Services** –This cost pool captures the cost 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 eligible under this cost pool are 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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**MS0FH – ME FL Partnership for Success – Hospital Pilot** – This cost pool captures allowable costs through the Managing Entity under the five-year discretionary Partnerships for Success grant awarded by the Substance Abuse and Mental Health Services Administration. One hospital-based pilot program will be implemented to link individuals in hospital emergency departments who have experienced an opioid related overdose or other medical complications due to their opioid misuse to medication assisted treatment and/or other treatment and support services. The grant will fund one Managing Entity to conduct a single hospital pilot in their catchment area during the grant period. The funds are to be used to purchase care coordination from a community provider (i.e., peer organization, treatment provider, etc.) delivered by certified peer recovery specialists in emergency departments. Eligibility includes individuals who are indigent, uninsured, or underinsured and have an opioid use disorder.

Additionally, PFS funds may not be used for the following purposes:

* To provide services to incarcerated populations (defined as those persons in jail, prison, detention facilities, or in custody where they are not free to move about in the community).
* 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 housing, inpatient treatment, or detoxification.

The following covered services described in ch. 65E-14.021, F.A.C., are allowable uses of these funds when provided to individuals in conjunction with methadone, buprenorphine, or oral naltrexone maintenance. These funds may also be used to support individuals receiving VIVITROL through the Florida Alcohol and Drug Abuse Association.

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**MS0FS – ME FL Partnerships for Success** – This cost pool captures allowable costs of school-based prevention programs associated with the Partnerships for Success (PFS) Grant awarded by the Substance Abuse and Mental Health Services Administration (SAMHSA) as a five year discretionary grant. Costs include the implementation of Life Skills Training programs in PFS-funded counties. The PFS grant aims to reduce prescription drug misuse among Floridians aged 12-25 and nonmedical use of opioids among Floridians aged 26 and older. Five urban counties (Broward, Duval, Hillsborough, Manatee, and Palm Beach) and three rural counties (Franklin, Walton, and Washington) will be served by the activities in this 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. If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MS0WL – ME State Epidemiology Outcomes Workgroup Local** – This cost pool captures the general program costs through the Managing Entities under the Partnerships for Success (PFS) project to meet the $150,000 minimum set-aside requirement for the State Epidemiology Outcomes Workgroup (SEOW) as required by SAMHSA. Costs include supporting and managing local Drug Epidemiology Networks (DENs) in the five urban counties (Broward, Palm Beach, Hillsborough, Manatee, and Duval) and three rural counties (Franklin, Walton, and Washington) to analyze local drug abuse trends, conduct annual needs assessments, and develop ad-hoc research 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.*

**MSOPH – ME Florida Targeted Response Opioid Crisis-Hospital** – This cost pool captures allowable costs through the Managing Entity under the two-year discretionary State Targeted Response to the Opioid Crisis grant awarded by the Substance Abuse and Mental Health Services Administration. Six hospital-based pilot programs will be implemented to link individuals in hospital emergency departments who have experienced an opioid related overdose or other medical complications due to their opioid misuse to medication assisted treatment and/or other treatment and support services. The grant will fund six Managing Entities to conduct a single hospital pilot in their catchment area during the grant period. The funds are to be used to purchase care coordination from a community provider (i.e., peer organization, treatment provider, etc.) delivered by certified peer recovery specialists in emergency departments. Eligibility includes individuals who are indigent, uninsured, or underinsured and have an opioid use disorder.

Additionally, Opioid STR funds may not be used for the following purposes:

* To provide services to incarcerated populations (defined as those persons in jail, prison, detention facilities, or in custody where they are not free to move about in the community).
* 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 housing, inpatient detoxification, or residential service.
* To supplant (or replace) existing funds for services.

The following covered services described in ch. 65E-14.021, F.A.C., are allowable uses of these funds when provided to individuals in conjunction with methadone, buprenorphine, or oral naltrexone maintenance. These funds may also be used to support individuals receiving VIVITROL through the Florida Alcohol and Drug Abuse Association.

***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.*

**MSOPM – ME Florida Response to the Opioid Crisis MAT** – This cost pool captures allowable costs of medication-assisted treatment (MAT) services for the treatment of opioid use disorder associated with the State Targeted Response to the Opioid Crisis Grant awarded by the Substance Abuse and Mental Health Services Administration (SAMHSA) as a two-year discretionary grant.

Eligibility includes individuals who are indigent, uninsured, or underinsured and have an opioid use disorder, including use of illicit drugs, such as heroin, or prescription opioids. The following individuals who misuse opioids should be prioritized:

1. Pregnant women who are injecting opioids
2. Pregnant women
3. Caretakers involved with child welfare
4. Caretakers of children ages 0-5
5. Individuals re-entering the community from incarceration

The following covered services described in ch. 65E-14.021, F.A.C., are allowable uses of these funds when provided to individuals in conjunction with methadone maintenance or buprenorphine maintenance or oral naltrexone.

These funds may also be used to support individuals receiving VIVITROL, except for Assessment, Medical Services and Medication-Assisted Treatment, as this will be paid through the Florida Alcohol and Drug Abuse Association.

* Aftercare
* Assessment
* Case Management
* Crisis Support/Emergency
* Daycare
* Day Treatment
* Incidental Expenses (excluding housing/rental assistance and direct payments to participants)
* In-Home and On-Site
* Medical Services
* Medication-Assisted Treatment (methadone, buprenorphine or oral naltrexone maintenance)
* Outpatient
* Outreach (to identify and link individuals with opioid use disorders to medication-assisted treatment providers)
* Recovery Support
* Supported Employment
* Supportive Housing/Living
* Inpatient Detoxification
* Residential Level I and II

Funds may also be used to pay for Substance Abuse Outpatient Detoxification. Inpatient detoxification and residential services may 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 five days for inpatient detoxification placements and 14 days for residential treatment placements.

***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.*

**MSOPS – ME-Florida Response Opioid Crisis School** – This cost pool captures allowable costs of school-based prevention programs associated with the State Targeted Response to the Opioid Crisis (STR) Grant awarded by the Substance Abuse and Mental Health Services Administration (SAMHSA) as a two year discretionary grant. Costs include the implementation of Life Skills Training programs at middle or high schools in the following counties: Gilchrist, Hardee, Jackson, Jefferson, Okeechobee, and Taylor. Two Life Skills Training programs will be implemented per county. The STR grant aims to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment, and recovery activities for opioid use disorder (OUD) (including prescription opioids as well as illicit drugs such as heroin).

***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.*

**MSRCO - ME ST Opioid Response Disc SVCS-Rec Comm Org** - This cost pool captures allowable costs of implementing Recovery Community Organizations to be accredited by the Council on Accreditation of Peer Recovery Support Services within Rebel Recovery and South Florida Wellness Network. This includes start-up costs, staffing, training, and accreditation costs. Funds may also be utilized by Rebel Recovery and South Florida Wellness Network to provide the following services:

* Outreach
* Information and Referral
* Drop-in Center
* Recovery Support
* Rebel Recovery and South Florida Wellness Network will implement use of the recovery capital assessment scale as a component of the recovery planning process.

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 $189,600.
* 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.*

**MSSOP - ME State Opioid Response Disc Grant SVCS-Prevent** - This cost pool captures allowable costs of primary prevention programs associated with the State Opioid Response (SOR) Grant. Managing Entities may work with prevention providers to implement prevention programs and strategies with evidence of effectiveness at preventing opioid misuse, opioid dependence, or opioid deaths. These include media campaigns (based on the "Use Only as Directed"), Botvin LifeSkills Training, 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, or Teen Intervene. Managing Entities may also request to implement evidence-based programs not listed, to be reviewed and approved by the Department.

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 $189,600.
* 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.*

**MSSOR - ME State Opioid Response SVCS-MAT** – This cost pool captures the allowable costs of medication-assisted treatment (MAT) services for the treatment of opioid use disorder associated with the State Opioid Response (SOR) Grant, a two-year discretionary grant awarded by the Substance Abuse and Mental Health Services Administration.

Eligibility includes individuals who are indigent, uninsured, or underinsured and misuse opioids, have an opioid use disorder, or experience an opioid overdose. The following individuals should be given preference in admissions in the following order: Pregnant women; Injection drug users; Caretakers involved with child welfare; Caretakers of children ages 0-5; and Individuals re-entering the community from incarceration.

The following covered services described in ch. 65E-14.021, F.A.C., are allowable uses of these funds when provided to individuals in conjunction with methadone, buprenorphine, or oral naltrexone maintenance. These funds may also be used to support individuals receiving VIVITROL, except for Assessment, Medical Services and Medication-Assisted Treatment, as this will be paid through the Florida Alcohol and Drug Abuse Association. Aftercare; Assessment; Case Management; Crisis Support/Emergency; Day Care; Day Treatment; Incidental Expenses (excluding direct payments to participants); Outreach (to identify and link individuals with opioid use disorders to MAT providers); Medication-Assisted Treatment (only methadone, buprenorphine, or oral naltrexone maintenance); Medical Services; Outpatient; In-Home and On-Site; Recovery Support; Supported Employment; Supportive Housing/Living; Inpatient Detoxification; Residential Levels I and II; Outpatient Detoxification. Inpatient and outpatient detoxification must be accompanied by injectible 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 14 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 $189,600.
* 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.*

**Substance Abuse – Proviso Projects Funding**

**MS081 – ME Projects Expansion of Substance Abuse Services for Pregnant Women and their affected 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 the recommendations from the Statewide Task Force on Prescription Drug Abuse and Newborns.

From the funds in Specific Appropriation 369, the recurring sum of $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.

***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.*

**MS091 – ME SA Family Intensive Treatment (FIT)** – This cost pool captures the cost 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 369, the recurring sums of $9,960,000 from the General Revenue Fund and $2,100,000 from the Alcohol, Drug Abuse and Mental Health Trust Fund are provided to implement 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.

From the funds in Specific Appropriation 369, $840,000 from the General Revenue Fund shall be provided to Centerstone of Florida (recurring base appropriations project) for the operation of a Family Intensive Treatment (FIT) team.

***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.*

**MS095 – ME SA Drug Abuse Comprehensive Coordinating Treatment (DACCO)** – This cost pool captures the cost of funds provided to the Drug Abuse and Comprehensive Coordinating Office (DACCO).

From the funds in Specific Appropriation 3696, $100,000 of recurring funds from the General Revenue fund is provided to the Drug Abuse Comprehensive Coordinating Office (DACCO).

***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.*

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

From the funds in Specific Appropriation 3696, $200,000 of recurring funds from the General Revenue fund is provided to Here’s Help, Inc.

***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.*

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

From the funds in Specific Appropriation 3696, $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. If funding is not provided to the ME in their contract, include a statement to that effect here.*

**MS908 – ME SA New Hope C.O.R.P.S.** – This cost pool captures costs of the Residential Substance Abuse and Mental Health (SAMH) Treatment Project, operated by New Hope C.O.R.P.S. Inc. The program serves adult males in South Miami-Dade County.

From the funds in Specific Appropriation 372, $250,000 of nonrecurring funds from the General Revenue Fund is provided to the New Hope C.O.R.P.S Project. (HB 3085) (Senate Form 1117)

***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.*

**MS909 – SalusCare Wrap-Around Services-Opioid Crisis** – This cost pool captures the allowable costs of the Safe Station Project for Opioid Abuse Services in Lee County. Services will be provided to adults addicted to opiates and high utilizers of community care due to their addiction. Direct services include basic medical exam, transportation, detoxification treatment and wrap around community-based treatment services that include identifying a patient's goals and needs, individual therapy utilizing evidence-based practices, collaboration between primary care and behavioral health care and medication assistance and compliance.

From the funds in Specific Appropriation 372, $606,000 of nonrecurring funds from the General Revenue Fund is provided to the SalusCare Wrap-Around Services in Response to the Opioid Crisis. (HB 3073) (Senate Form 1413)

***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.*

**MS911 – ME Phoenix Affiliates -** This cost pool captures the allowable costs of a pilot project to deliver in-home Functional Family Therapy (FFT) programs. This project will pilot FFT with the families of parents or caretakers in substance abuse treatment who have been identified as being in high risk of children entering the child welfare or juvenile justice system.

From the funds in Specific Appropriation 372, $1,200,000 of nonrecurring funds from the General Revenue Fund is provided to Phoenix Affiliates. (Senate Form 2295)

***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.*

**MS912 – Memorial Healthcare System-MAT 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).

From the funds in Specific Appropriation 372, $500,000 of nonrecurring funds from the General Revenue Fund is provided to Memorial Healthcare – Medication Assisted Treatment Program. (HB 3411) (Senate Form 1327)

***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.*

**MS913 – Here's Help-Opioid Treatment and Training -** This cost pool captures the allowable costs of a Specialized Opioid Treatment and Residential Substance Abuse Training Program. The Training Program is designed to allow a minimum of 16 attendees to learn the comprehensive multi-disciplinary programming offered at Here’s Help, so they can replicate the successful approach in other areas of Florida. Participants will attend the on-site training and learn the successful procedures and principles of the Here’s Help program.

From the funds in Specific Appropriation 372, $100,000 of nonrecurring funds from the General Revenue Fund is provided to Here’s Help – Opioid Treatment and Training. (HB 4605) (Senate Form 2467)

***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.*

**MS914 – ME DACCO Behavioral Health** - This cost pool captures the allowable costs of the DACCO Behavioral Health Treatment Expansion. These funds are intended to provide community-based behavioral health treatment, including Medication-Assisted Treatment at DACCO's expanded Brandon location.

From the funds in Specific Appropriation 372, $200,000 of nonrecurring funds from the General Revenue Fund is provided to DACCO Behavioral Health. (HB 4089) (Senate Form 2327)

***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.*

**MS915 – ME Gulfcoast Veterans Behavioral Integrated Healthcare** - This cost pool captures the allowable costs of the WestCare Gulfcoast Florida, Inc. - Veterans Integrated Behavioral Healthcare Initiative. This initiative is designed to address gaps in the continuum of behavioral health treatment for Veterans with Co-Occurring behavioral health Disorders (COD) living in Pasco and Pinellas Counties. Direct services provided by a WestCare clinical team will include: integrated assessment for COD, mental health evaluations, individualized treatment planning, case management services, individual and group counseling for COD, specialized COD education and support groups, life skills training, COD-specific employment readiness, Veterans-specific groups, medication management and monitoring, spiritual wellness education and military family support groups.

From the funds in Specific Appropriation 372, $200,000 of nonrecurring funds from the General Revenue Fund is provided to WestCare Gulfcoast Florida. (HB 4377) (Senate Form 1571)

***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.*

**MS916 – St. Vincent's Healthcare-Saving Lives Project** - This cost pool captures the allowable costs of the St. Vincent's Healthcare Saving Lives Project. The project creates a stabilization and treatment collaboration between Saint Vincent's Hospital Emergency Department, Gateway Community Services, and Clay Behavioral Health to address opioid overdoses in Clay and Duval counties. The Saving Lives Project will fund intervention and assessment services in the Emergency Department, Outreach to family members, Short Term Residential services, Outpatient Services, Peer Specialists and Buprenorphine administration.

From the funds in Specific Appropriation 372, $624,105 of nonrecurring funds from the General Revenue Fund is provided to the St. Vincent’s Healthcare – Saving Lives Project. (HB 3843) (Senate Form 2238)

***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 – STEPS-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 postpartum women residing in Brevard County who are experiencing opiate addiction.

From the funds in Specific Appropriation 372, $150,000 of nonrecurring funds from the General Revenue Fund is provided to the STEPS Women’s Residential Treatment. (HB 3959) (Senate Form 2040)

***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.*

**MS0JG – ME Special Services for Jerome Golden Center** – This cost pool captures the cost of substance abuse detoxification and level 2 residential services provided by the Jerome Golden Center. All funding is non-grant related general revenue and is allocated through the regional Managing Entity. Costs associated with this cost pool can be used toward meeting the SAPT Block Grant MOE requirement.

***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.*

**Substance Abuse – Targeted Services Funding**

**MS0CN – ME SA Care Coordination Direct Client Services** – This cost pool captures allowable costs of care coordination as outlined in Guidance 4 - Care Coordination of the Managing Entity contracts, available at: http:www.myflfamilies.com/service-programs/substance-abuse/managing-entities/2017-contract-docs

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: a. Adults with three (3) or more acute care admissions within 180 days; or b. 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; Supportive Housing/Living.

***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.*

**MS0TB – ME Substance Abuse 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 cost 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.*

**MSCBS – ME SA Community Based Services** – This cost pool captures the allowable cost 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.*

**MSTRV – ME Transition Vouchers Substance Abuse** – This cost pool captures 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.*

# 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 - Funding Sources

|  |  |  |
| --- | --- | --- |
| **OCA** | **CFDA/ CSFA** | **Fund Description** |
| **Operational Cost** |   |   |
| MHS00 | 93.558 | BG - TEMPORARY ASSISTANCE FOR NEEDY FAMILIES(TANF) |
|   | 93.778 | FG - MEDICAID ADMINISTRATION - MATCH |
|   | 93.778 | FG - TRANSF AHCA MEDICAID ADMINISTRATION |
|   | 93.958 | BG - MENTAL HEALTH FEDERAL |
|   | 93.958 | ST CSFA - STATE FUNDED BG BMH ELIGIBLE EXPENDITURES |
|   | 93.959 | BG - SUBSTANCE ABUSE FEDERAL |
|   | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MHSCD | 93.958 | BG - MENTAL HEALTH FEDERAL |
|   | 93.958 | ST CSFA - STATE FUNDED BG BMH ELIGIBLE EXPENDITURES |
|   | 93.959 | BG - SUBSTANCE ABUSE FEDERAL |
|   | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MHSHG | 93.958 | ST CSFA - STATE FUNDED BG BMH ELIGIBLE EXPENDITURES |
|   | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MH0SK | 93.104 | FG - SYSTEM OF CARE EXPANSION & SUSTAIN PROG |
| MSSOA | 93.778 | FG-STATE OPIOID RESPONSE DISCRETIONARY GRANT |
| **Mental Health Core Services Funding** |   |   |
| MH001, MH009, MH018, MH025 | 93.958 | BG - MENTAL HEALTH FEDERAL |
|   | 93.958 | ST CSFA - STATE FUNDED BG BMH ELIGIBLE EXPENDITURES |
| MH026 | 93.958 | BG - MENTAL HEALTH FEDERAL |
| MHSFP | 60.184 | ST CSFA - MH SERVICES BY FOR PROFIT SUBRECIPIENTS |
| **Mental Health Discretionary Grants Funding**  |
| MHESP | 93.104 | FG - SYSTEM OF CARE EXPANSION & SUSTAIN PROG |
| MH0PG | 93.150 | FG - PROJ ASSIST IN TRANSITION FROM HOMELESSNESS |
| MHTA4 | 93.243 | FG - HEALTHY TRANSITIONS |
| MHTA5 | 93.243 | FG - HEALTHY TRANSITIONS |
| MH0PL | 93.243 | FG - FL PROJECT LAUNCH |
| MHFLH | 93.982 | FG - FLORIDA HURRICANE CRISIS COUNSELING SERG |
| **Mental Health Proviso Projects Funding** |   |   |
| MH010 | 60.114 | ST CSFA - COMMUNITY FORENSIC BEDS COMP REST TNG |
| MH011 | 93.958 | BG - MENTAL HEALTH FEDERAL |
| MH012 | 60.114 | ST CSFA - COMMUNITY FORENSIC BEDS COMP REST TNG |
| MH016 | 93.958 | BG - MENTAL HEALTH FEDERAL |
| MH021 | 60.153 | ST CSFA - SUBSTANCE ABUSE AND MENTAL HEALTH-COMMUNITY SERVICES |
| MH023 | 60.155 | ST CSFA - SUBSTANCE ABUSE AND MENTAL HEALTH - CRISIS PREVENTION AND STABILIZATION SERVICES |
| MH028 | 93.958 | ST - STATE BMH MOE EQUIVALENT EXPENDITURES |
| MH029 | 60.153 | ST CSFA - SUBSTANCE ABUSE AND MENTAL HEALTH-COMMUNITY SERVICES |
| MH031 | 93.958 | ST - STATE BMH MOE EQUIVALENT EXPENDITURES |
| MH032 | 93.958 | ST - STATE BMH MOE EQUIVALENT EXPENDITURES |
| MH037 | 60.153 | ST CSFA - SUBSTANCE ABUSE AND MENTAL HEALTH-COMMUNITY SERVICES |
| MH046 | 60.162 | ST CSFA - BEHAVIORAL HEALTH GRADUATION ED |
| MH060 | 60.153 | ST CSFA - SUBSTANCE ABUSE AND MENTAL HEALTH-COMMUNITY SERVICES |
| MH089 | 93.958 | BG - MENTAL HEALTH FEDERAL |
| MH094 | 60.155 | ST CSFA - SUBSTANCE ABUSE AND MENTAL HEALTH - CRISIS PREVENTION AND STABILIZATION SERVICES |
| MH096 | 93.958 | ST - STATE BMH MOE EQUIVALENT EXPENDITURES |
| MHS50 | 60.155 | ST CSFA - SUBSTANCE ABUSE AND MENTAL HEALTH - CRISIS PREVENTION AND STABILIZATION SERVICES |
| MHS52 | 60.155 | ST CSFA - SUBSTANCE ABUSE AND MENTAL HEALTH - CRISIS PREVENTION AND STABILIZATION SERVICES |
| MHS55 | 93.958 | ST - STATE BMH MOE EQUIVALENT EXPENDITURES |
| MHRM5 | 93.958 | ST - STATE BMH MOE EQUIVALENT EXPENDITURES |
| **Mental Health Targeted Services Funding**  |   |   |
| MH071 | 93.958 | BG - MENTAL HEALTH MOE |
| MH072 | 93.958 | BG - MENTAL HEALTH MOE |
| MH073 | 93.778 | FG - TRANSF AHCA MEDICAID ADMINISTRATION |
|   | 93.958 | BG - MENTAL HEALTH FEDERAL |
|   | 93.958 | BG - MENTAL HEALTH MOE |
|   | 93.958 | BG - MH MOE-MEDICAID MATCH |
| MH076 | 93.958 | BG - MENTAL HEALTH MOE |
| MH0BN | 93.767 | FG - BNET TRANSFER FROM AHCA-FEDERAL |
|   | 93.767 | FG - BNET TRANSFER FROM AHCA-MATCH |
| MH0CN | 93.958 | ST - STATE BMH MOE EQUIVALENT EXPENDITURES |
| MH0FH | 60.114 | ST CSFA - COMMUNITY FORENSIC BEDS COMP REST TNG |
| MH0TB | 93.558 | BG - TEMPORARY ASSISTANCE FOR NEEDY FAMILIES(TANF) |
| MHCAT | 93.104 | FG - SYSTEM OF CARE EXPANSION & SUSTAIN PROG-MATCH |
|   | 93.958 | BG - MENTAL HEALTH MOE |
|   | 93.958 | ST - STATE BMH MOE EQUIVALENT EXPENDITURES |
| MHDRF | 93.958 | BG - MENTAL HEALTH MOE |
| MHEMP | 93.958 | ST - STATE BMH MOE EQUIVALENT EXPENDITURES |
| MHFMH | 60.114 | ST CSFA - COMMUNITY FORENSIC BEDS COMP REST TNG |
| MHMCT | 93.958 | ST - STATE Funded BG BMH Eligible Expenditures |
| MHSCR | 60.163 | ST CSFA - CENTRALIZED RECEIVING SYSTEMS |
| MHTMH | 93.958 | BG - MENTAL HEALTH MOE |
| MHTRV | 93.958 | BG - MENTAL HEALTH MOE |
| **Substance Abuse Core Services** |   |   |
| MS003, MS011, MS021, MS027 | 93.959 | BG - SUBSTANCE ABUSE FEDERAL |
|   | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MS023 | 93.959 | BG - SUBSTANCE ABUSE FEDERAL |
| MS025 | 93.959 | BG - SUBSTANCE ABUSE FEDERAL |
| MSSFP | 93.959 | BG - SUBSTANCE ABUSE MOE |
| **Substance Abuse Discretionary Grants** |   |   |
| MS0PP | 93.959 | BG - SUBSTANCE ABUSE FEDERAL |
| MS0FH | 93.243 | FG - FL PARTNER FOR SUCCESS - DRUG PREVENTION |
| MS0FS | 93.243 | FG - FL PARTNER FOR SUCCESS - DRUG PREVENTION |
| MS0WL | 93.243 | FG - FL PARTNER FOR SUCCESS - DRUG PREVENTION |
| MSOPH | 93.788 | FG - STATE TARGETED RESPONSE TO OPIOID CRISIS |
| MSOPM | 93.788 | FG - STATE TARGETED RESPONSE TO OPIOID CRISIS |
| MSOPS | 93.788 | FG - STATE TARGETED RESPONSE TO OPIOID CRISIS |
| MSRCO | 93.788 | FG-STATE OPIOID RESPONSE DISCRETIONARY GRANT |
| MSSOP | 93.788 | FG-STATE OPIOID RESPONSE DISCRETIONARY GRANT |
| MSSOR | 93.788 | FG-STATE OPIOID RESPONSE DISCRETIONARY GRANT |
| **Substance Abuse Proviso Projects** |   |   |
| MS081 | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MS091 | 93.959 | BG - SUBSTANCE ABUSE FEDERAL |
|   | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MS095 | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MS903 | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MS907 | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MS908 | 93.959 | ST-STATE BSA MOE EQUIVALENT EXPENDITRUES |
| MS909 | 93.959 | ST-STATE BSA MOE EQUIVALENT EXPENDITRUES |
| MS911 | 93.959 | ST-STATE BSA MOE EQUIVALENT EXPENDITRUES |
| MS912 | 93.959 | ST-STATE BSA MOE EQUIVALENT EXPENDITRUES |
| MS913 | 93.959 | ST-STATE BSA MOE EQUIVALENT EXPENDITRUES |
| MS914 | 93.959 | ST-STATE BSA MOE EQUIVALENT EXPENDITRUES |
| MS915 | 93.959 | BG - SUBSTANCE ABUSE FEDERAL |
| MS916 | 93.959 | ST-STATE BSA MOE EQUIVALENT EXPENDITRUES |
| MS917 | 93.959 | ST-STATE BSA MOE EQUIVALENT EXPENDITRUES |
| MS0JG | 93.959 | BG - SUBSTANCE ABUSE MOE |
| **Substance Abuse Targeted Services** |   |   |
| MS0CN | 93.959 | BG - SUBSTANCE ABUSE FEDERAL |
|   | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MS0TB | 93.558 | BG - TEMPORARY ASSISTANCE FOR NEEDY FAMILIES(TANF) |
| MSCBS | 93.959 | BG - SUBSTANCE ABUSE MOE |
| MSTRV | 93.959 | BG - SUBSTANCE ABUSE MOE |

# Attachment II – Organizational Chart

**(Add ORG Chart)**

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

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

# Attachment IV – Name Other Attachments

**(Add Other Attachments as Needed)**