

Substance Abuse Treatment Block Grant Compliance with Priority Populations Access to Services and Waitlist Requirements Monitoring Tool - Client 1

Provider Name:		Reviewer:
Contract Number:		Site Visit Date:
SAPTBG Score:		

Requirements	Authority	Yes	No	Partial	Comments
Client Name:					
Client ID:					

Time to Initiate Treatment for Individuals Requesting Treatment for IV Substance Abuse

Was the IV Drug Abuse client admitted for treatment within 14 days of making a request for treatment?	45 CFR 96.126(b)(1)				
IF PROGRAM WAS AT CAPACITY... Were interim services provided within 48 hours of request for treatment? N/A (X) if program was not at capacity when client made request.	45 CFR 96.126(b)(2)				
IF PROGRAM WAS AT CAPACITY... was client admitted for treatment within 120 days of making request? N/A (X) if program was not at capacity when client made request.	45 CFR 96.126(b)(2)				

Client Requirements Related to Treatment Services for Pregnant Women for all SABG Providers

IF PROGRAM WAS AT CAPACITY... Were interim services made available within 48 hours of request for treatment?	45 CFR 96.131(d)(2)				
Did Interim Services at Minimum Include Referral for HIV, TB, HEP C Services if Necessary? And,	45 CFR 96.131(d)(2)				
Counseling on the effects of Alcohol and Drug Use on the fetus? And,	45 CFR 96.131(d)(2)				
Referral for Prenatal Care	45 CFR 96.131(d)(2)				

Waiting List for Pregnant Women Seeking SA Treatment or IV Drug Abusers Seeking SA Treatment

If the pregnant client seeking substance abuse treatment or client requesting IV substance abuse treatment had to wait after face to face screening more than 4 days for a residential bed or a detox bed or more than 14 days for outpatient, intervention, or methadone services, was the client entered on the SAMHIS waiting list?	CFP 155-2, 12-1				
Did the provider remain in contact in some way with the client at least every 30 days, while the client waited? Contact is documented on the Waiting List Documentation Form.	CFP 155-2, 12-2				
Did the Assessing Provider document the information on interim services in the client's Waitlist Record?	SEFBHN Waitlist Policy and Procedures				
Did the Assessing Provider document all contacts to notify the client of an available treatment opening according to SEFBHN Policies and Procedures?	SEFBHN Waitlist Policy and Procedures				

Waiting List Data Validation - N/A if client was not entered on SAMHIS waiting list

Did the provider maintain the Substance Abuse Waiting List Documentation Form, either in the client's record or in a separate file?	CFP 155-2, 12-2				
Does the Client Name and Client SSN from the client record match the Wait List information in SAMHIS?	CFP 155-2, 12-2				
Does the Date of Initial Face-to-Face screening documented in the client file match the Wait List Contact Date field in SAMHIS?	CFP 155-2, 12-2				
the Wait List information entered in SAMHIS: Program Area (SA or MH), Program_Service (Adult or Child), Level of Care?	CFP 155-2, 12-2				
Does the client's pregnancy status match the Wait List SAMHIS field Reproductive?	CFP 155-2, 12-2				
If the client is IV Drug user seeking treatment, does the Wait List SAMHIS field DrugAbuse have matching information?	CFP 155-2, 12-2				

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Time to Initiate Treatment for Individuals Requesting Treatment for IV Substance Abuse

Was the IV Drug Abuse client admitted for treatment within 14 days of making a request for treatment?	45 CFR 96.126(b)(1)				
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Client Requirements Related to Tuberculosis for Substance Abuse Treatment Providers

Is there evidence that the client in a substance abuse treatment program was screened for TB consistent with the provider's infection control procedures?	45 CFR 96.127(a)(3)(i)				
Is there evidence that the client in a substance abuse treatment program was identified as at high risk of infection if this is the case, consistent with the provider's infection control procedures?	45 CFR 96.127(a)(3)(ii)				
Is there evidence case management services were provided to ensure clients received TB services, meaning counseling, testing, and medical evaluation and treatment?	45 CFR 96.127(a)(4)				

Client Requirements Related to Early Intervention Services for HIV Disease for all SABG Providers of Substance Abuse Treatment

Is there evidence that the client has provided voluntary informed consent for early intervention HIV services?	45 CFR 96.128(e)				
As part of the informed consent process, is it clear that undergoing early intervention services for HIV is not a required condition for receiving substance abuse treatment or other services?	45 CFR 96.128(e)				

Client Requirements Related to Women's Special Funding - Substance Abuse Services for Pregnant Women and Mothers

Was the client admitted to treatment services with her child/children?	45 CFR 96.128(e)				
Is the client a mother with child welfare involvement trying to regain custody?	45 CFR 96.128(e)				
Is the client a pregnant women with child welfare involvement?	45 CFR 96.128(e)				
Does the women's treatment plan reference the child welfare case plan and have specific goals related to her child welfare case?	45 CFR 96.128(e)				
Is primary medical care being provided or aranged for the client?	45 CFR 96.128(e)				
Is primary pediatric care being being arranged, including immunization for the children?	45 CFR 96.128(e)				
Are geneder specific therapies being provided to the client?	45 CFR 96.128(e)				
Are therapeutic interventions being provided to the children in the custody of the woman in treatment?	45 CFR 96.128(e)				
Is child/children being provided with day care services while their mother receives traetment?	45 CFR 96.128(e)				
Are case mangement and transportation services being provided to ensure that women and their children have access to the minimum service array?	45 CFR 96.128(e)				

Substance Abuse Treatment Block Grant Compliance with Priority Populations Access to Services and Waitlist Requirements Monitoring Tool - Client 2

Provider Name:		Reviewer:
Contract Number:		Site Visit Date:
SAPTBG Score:		

Requirements	Authority	Yes	No	Partial	Comments
Client Name:					
Client ID:					

Time to Initiate Treatment for Individuals Requesting Treatment for IV Substance Abuse

Was the IV Drug Abuse client admitted for treatment within 14 days of making a request for treatment?	45 CFR 96.126(b)(1)				
IF PROGRAM WAS AT CAPACITY... Were interim services provided within 48 hours of request for treatment? N/A (X) if program was not at capacity when client made request.	45 CFR 96.126(b)(2)				
IF PROGRAM WAS AT CAPACITY... was client admitted for treatment within 120 days of making request? N/A (X) if program was not at capacity when client made request.	45 CFR 96.126(b)(2)				

Client Requirements Related to Treatment Services for Pregnant Women for all SABG Providers

IF PROGRAM WAS AT CAPACITY... Were interim services made available within 48 hours of request for treatment?	45 CFR 96.131(d)(2)				
Did Interim Services at Minimum Include Referral for HIV, TB, HEP C Services if Necessary? And,	45 CFR 96.131(d)(2)				
Counseling on the effects of Alcohol and Drug Use on the fetus? And,	45 CFR 96.131(d)(2)				
Referral for Prenatal Care	45 CFR 96.131(d)(2)				

Waiting List for Pregnant Women Seeking SA Treatment or IV Drug Abusers Seeking SA Treatment

If the pregnant client seeking substance abuse treatment or client requesting IV substance abuse treatment had to wait after face to face screening more than 4 days for a residential bed or a detox bed or more than 14 days for outpatient, intervention, or methadone services, was the client entered on the SAMHIS waiting list?	CFP 155-2, 12-1				
Did the provider remain in contact in some way with the client at least every 30 days, while the client waited? Contact is documented on the Waiting List Documentation Form.	CFP 155-2, 12-2				
Did the Assessing Provider document the information on interim services in the client's Waitlist Record?	SEFBHN Waitlist Policy and Procedures				
Did the Assessing Provider document all contacts to notify the client of an available treatment opening according to SEFBHN Policies and Procedures?	SEFBHN Waitlist Policy and Procedures				

Waiting List Data Validation - N/A if client was not entered on SAMHIS waiting list

Did the provider maintain the Substance Abuse Waiting List Documentation Form, either in the client's record or in a separate file?	CFP 155-2, 12-2				
Does the Client Name and Client SSN from the client record match the Wait List information in SAMHIS?	CFP 155-2, 12-2				
Does the Date of Initial Face-to-Face screening documented in the client file match the Wait List Contact Date field in SAMHIS?	CFP 155-2, 12-2				
the Wait List information entered in SAMHIS: Program Area (SA or MH), Program_Service (Adult or Child), Level of Care?	CFP 155-2, 12-2				
Does the client's pregnancy status match the Wait List SAMHIS field Reproductive?	CFP 155-2, 12-2				
If the client is IV Drug user seeking treatment, does the Wait List SAMHIS field DrugAbuse have matching information?	CFP 155-2, 12-2				

Substance Abuse Treatment Block Grant Compliance with Priority Populations Access to Services and Waitlist Requirements Monitoring Tool - Client 2

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Requirements	Authority	Yes	No	Partial	Comments
Client Name:					
Client ID:					

Client Requirements Related to Tuberculosis for Substance Abuse Treatment Providers

Is there evidence that the client in a substance abuse treatment program was screened for TB consistent with the provider's infection control procedures?	45 CFR 96.127(a)(3)(i)				
Is there evidence that the client in a substance abuse treatment program was identified as at high risk of infection if this is the case, consistent with the provider's infection control procedures?	45 CFR 96.127(a)(3)(ii)				
received TB services, meaning counseling, testing, and medical evaluation and treatment?	45 CFR 96.127(a)(4)				

Client Requirements Related to Early Intervention Services for HIV Disease for all SABG Providers of Substance Abuse Treatment

Is there evidence that the client has provided voluntary informed consent for early intervention HIV services?	45 CFR 96.128(e)				
As part of the informed consent process, is it clear that undergoing early intervention services for HIV is not a required condition for receiving substance abuse treatment or other services?	45 CFR 96.128(e)				

Client Requirements Related to Women's Special Funding - Substance Abuse Services for Pregnant Women and Mothers

Was the client admitted to treatment services with her child/children?	45 CFR 96.128(e)				
Is the client a mother with child welfare involvement trying to regain custody?	45 CFR 96.128(e)				
Is the client a pregnant women with child welfare involvement?	45 CFR 96.128(e)				
Does the women's treatment plan reference the child welfare case plan and have specific goals related to her child welfare case?	45 CFR 96.128(e)				
Is primary medical care being provided or aranged for the client?	45 CFR 96.128(e)				
Is primary pediatric care being being arranged, including immunization for the children?	45 CFR 96.128(e)				
Are geneder specific therapies being provided to the client?	45 CFR 96.128(e)				
Are therapeutic interventions being provided to the children in the custody of the woman in treatment?	45 CFR 96.128(e)				
Is child/children being provided with day care services while their mother receives traetment?	45 CFR 96.128(e)				
Are case mangement and transportation services being provided to ensure that women and their children have access to the minimum service array?	45 CFR 96.128(e)				

Substance Abuse Treatment Block Grant Compliance with Priority Populations Access to Services and Waitlist Requirements Monitoring Tool - Client 3

Provider Name:		Reviewer:
Contract Number:		Site Visit Date:
SAPTBG Score:		

Requirements	Authority	Yes	No	Partial	Comments
Client Name:					
Client ID:					

Time to Initiate Treatment for Individuals Requesting Treatment for IV Substance Abuse

Was the IV Drug Abuse client admitted for treatment within 14 days of making a request for treatment?	45 CFR 96.126(b)(1)				
IF PROGRAM WAS AT CAPACITY... Were interim services provided within 48 hours of request for treatment? N/A (X) if program was not at capacity when client made request.	45 CFR 96.126(b)(2)				
IF PROGRAM WAS AT CAPACITY... was client admitted for treatment within 120 days of making request? N/A (X) if program was not at capacity when client made request.	45 CFR 96.126(b)(2)				

Client Requirements Related to Treatment Services for Pregnant Women for all SABG Providers

IF PROGRAM WAS AT CAPACITY... Were interim services made available within 48 hours of request for treatment?	45 CFR 96.131(d)(2)				
Did Interim Services at Minimum Include Referral for HIV, TB, HEP C Services if Necessary? And,	45 CFR 96.131(d)(2)				
Counseling on the effects of Alcohol and Drug Use on the fetus? And,	45 CFR 96.131(d)(2)				
Referral for Prenatal Care	45 CFR 96.131(d)(2)				

Waiting List for Pregnant Women Seeking SA Treatment or IV Drug Abusers Seeking SA Treatment

If the pregnant client seeking substance abuse treatment or client requesting IV substance abuse treatment had to wait after face to face screening more than 4 days for a residential bed or a detox bed or more than 14 days for outpatient, intervention, or methadone services, was the client entered on the SAMHIS waiting list?	CFP 155-2, 12-1				
Did the provider remain in contact in some way with the client at least every 30 days, while the client waited? Contact is documented on the Waiting List Documentation Form.	CFP 155-2, 12-2				
Did the Assessing Provider document the information on interim services in the client's Waitlist Record?	SEFBHN Waitlist Policy and Procedures				
Did the Assessing Provider document all contacts to notify the client of an available treatment opening according to SEFBHN Policies and Procedures?	SEFBHN Waitlist Policy and Procedures				

Waiting List Data Validation - N/A if client was not entered on SAMHIS waiting list

Did the provider maintain the Substance Abuse Waiting List Documentation Form, either in the client's record or in a separate file?	CFP 155-2, 12-2				
Does the Client Name and Client SSN from the client record match the Wait List information in SAMHIS?	CFP 155-2, 12-2				
Does the Date of Initial Face-to-Face screening documented in the client file match the Wait List Contact Date field in SAMHIS?	CFP 155-2, 12-2				
the Wait List information entered in SAMHIS: Program Area (SA or MH), Program_Service (Adult or Child), Level of Care?	CFP 155-2, 12-2				
Does the client's pregnancy status match the Wait List SAMHIS field Reproductive?	CFP 155-2, 12-2				
If the client is IV Drug user seeking treatment, does the Wait List SAMHIS field DrugAbuse have matching information?	CFP 155-2, 12-2				

Substance Abuse Treatment Block Grant Compliance with Priority Populations Access to Services and Waitlist Requirements Monitoring Tool - Client 3

Provider Name:		Reviewer:
Contract Number:		Site Visit Date:
SAPTBG Score:		

Requirements	Authority	Yes	No	Partial	Comments
Client Name:					
Client ID:					

Time to Initiate Treatment for Individuals Requesting Treatment for IV Substance Abuse

Was the IV Drug Abuse client admitted for treatment within 14 days of making a request for treatment?	45 CFR 96.126(b)(1)				
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Client Requirements Related to Tuberculosis for Substance Abuse Treatment Providers

Is there evidence that the client in a substance abuse treatment program was screened for TB consistent with the provider's infection control procedures?	45 CFR 96.127(a)(3)(i)				
Is there evidence that the client in a substance abuse treatment program was identified as at high risk of infection if this is the case, consistent with the provider's infection control procedures?	45 CFR 96.127(a)(3)(ii)				
Is there evidence case management services were provided to ensure clients received TB services, meaning counseling, testing, and medical evaluation and treatment?	45 CFR 96.127(a)(4)				


Client Requirements Related to Early Intervention Services for HIV Disease for all SABG Providers of Substance Abuse Treatment

Is there evidence that the client has provided voluntary informed consent for early intervention HIV services?	45 CFR 96.128(e)				
As part of the informed consent process, is it clear that undergoing early intervention services for HIV is not a required condition for receiving substance abuse treatment or other services?	45 CFR 96.128(e)				

Client Requirements Related to Women's Special Funding - Substance Abuse Services for Pregnant Women and Mothers

Was the client admitted to treatment services with her child/children?	45 CFR 96.128(e)				
Is the client a mother with child welfare involvement trying to regain custody?	45 CFR 96.128(e)				
Is the client a pregnant women with child welfare involvement?	45 CFR 96.128(e)				
Does the women's treatment plan reference the child welfare case plan and have specific goals related to her child welfare case?	45 CFR 96.128(e)				
Is primary medical care being provided or aranged for the client?	45 CFR 96.128(e)				
Is primary pediatric care being being arranged, including immunization for the children?	45 CFR 96.128(e)				
Are geneder specific therapies being provided to the client?	45 CFR 96.128(e)				
Are therapeutic interventions being provided to the children in the custody of the woman in treatment?	45 CFR 96.128(e)				
Is child/children being provided with day care services while their mother receives traetment?	45 CFR 96.128(e)				
Are case mangement and transportation services being provided to ensure that women and their children have access to the minimum service array?	45 CFR 96.128(e)				

Substance Abuse Treatment Block Grant Monitoring Tool Provider Agency Compliance with Priority Poluations Access to Services, Waitlist Requirements

Provider Name:					Reviewer:
Contract Number:					Site Visit Date:
Review Period:					
SAPTBG Score:					
Requirements	Authority	Yes	No	Partial	Comments
Capacity of Treatment for Intravenous Substance Abusers: Notification of Reaching 90% Capacity					
What is the provider's capacity to admit individuals to its treatment program for IV drug abusers? Document in Comments Column	45 CFR 96.126(a)				
Multiply provider's IV drug abuser program capacity by 0.9 to calculate 90% capacity. Document in Comments Column	45 CFR 96.126(a)				
If the provider reached 90% capacity to admit IV drug abusers during a month, did the provider notify the Circuit/Region SAMH program office by the 30th of the month via email? See CFP 155-2 Chapter 12. N/A if provider was below 90% capacity during your review period.	45 CFR 96.126(a) CFP 155-2,12-2				
Requirements for all SABG Providers					
Does the provider make continuing education available in treatment services or prevention activities or both? Education is to be made available to employees providing such services and activities.	45 CFR 96.132(b)				
Does the provider educate personnel in patient records confidentiality requirements?	45 CFR 96.132(e)				
Does the provider communicate to personnel that disciplinary actions may occur for inappropriate disclosures?	45 CFR 96.132(e)				
Time to Initiate Treatment for Individuals Requesting Treatment for IV Drug Abuse: Policy Questions					
Does the provider have written procedures to maintain a substance abuse waiting list for the agency?	CFP 155-2 Chpt 12, 12-1				
Does the provider have an approach or plan to provide interim services to individuals seeking treatment for IV drug abuse if the individuals cannot be admitted within 14 days of request?	45 CFR 96.126(c)				
Does the provider have a mechanism for maintaining contact with the individuals awaiting admission?	45 CFR 96.126(c)				
The provider's policy or approach for defining the waiting list includes individuals who wait longer than 4 days for a SAMH residential bed, longer than 4 days for a detox bed, or longer than 14 days for outpatient, intervention, or methadone service.	CFP 155-2 Chpt 12, 12-1				
The provider's policy or approach for defining the waiting list, counts individuals who are in treatment, but who are awaiting the appropriate level of service. For example, a person receiving outpatient service while waiting for a residential bed is on the waiting list.	CFP 155-2 Chpt 12, 12-2				
Incarcerated clients are not counted as waiting for treatment unless the only condition for release is admission to a substance abuse treatment program. Does the provider state this in their policy?	CFP 155-2 Chpt 12, 12-2				
Does the provider remove individuals from the waiting list if they cannot be located for admission into treatment, or if they refuse treatment?	45 CFR 96.126(d)				
Does the provider remove individuals from the waiting list if they have not been able to be contacted for more than 30 days?	CFP 155-2 Chpt 12, 12-2				
Outreach Requirements for Providers Funded for IV Drug Abuse Treatment Services					
The provider has a policy for Outreach efforts that includes selecting, training, and supervising outreach workers.	45 CFR 96.126(e)(1)				
The provider's policy and procedures for Outreach include efforts include contacting, communicating with, and following up with high risk substance abusers.	45 CFR 96.126(e)(2)				
Outreach efforts include contacting, communicating with, and following up with the associates of high risk substance abusers, within the constraints of maintaining patient confidentiality.	45 CFR 96.126(e)(2)				
The provider's policy and procedures for Outreach efforts include contacting, communicating with, and following up with the neighborhood residents of high risk substance abusers, within the constraints of maintaining patient confidentiality.	45 CFR 96.126(e)(2)				
The provider's policy and procedures for Outreach include the promotion and facilitation of awareness among IV drug abusers about relationship between injecting drugs and communicable diseases such as HIV.	45 CFR 96.126(e)(3)				
The provider's policy and procedures for Outreach includes facilitation and education on recommended steps to take to ensure HIV transmission does not occur.	45 CFR 96.126(e)(4)				
The provider's policy and procedures on Outreach encourage entry into treatment.	45 CFR 96.126(e)(5)				

Substance Abuse Treatment Block Grant Monitoring Tool Provider Agency Compliance with Priority Poluations Access to Services, Waitlist Requirements

Provider Name:		Reviewer:
Contract Number:		Site Visit Date:
Review Period:		
SAPTBG Score:		

Requirements	Authority	Yes	No	Partial	Comments
Requirements for SA Treatment Providers Related to Tuberculosis					
Does the provider have a method for routinely making available TB services - meaning TB counseling, testing to determine appropriate treatment, and medical evaluation and treatment - to each individual receiving treatment for substance abuse?	45 CFR 96.127(a)(1)				
Does the provider have a method for referring individuals to another provider of TB services if an individual is denied admission to the program for lack of capacity?	45 CFR 96.127(a)(2)				
Has the provider implemented TB infection control procedures for screening of patients?	45 CFR 96.127(a)(3)(i)				
Has the provider implemented TB infection control procedures for identification of individuals at risk of becoming infected with TB?	45 CFR 96.127(a)(3)(ii)				
Has the provider implemented TB infection control procedures for meeting state reporting requirements while adhering to client confidentiality requirements?	45 CFR 96.127(a)(3)(iii)				
Does the provider conduct case management activities to ensure individuals receive TB services of counseling, testing, medical evaluation and treatment?	45 CFR 96.127(a)(4)				
Requirement for Special HIV Project Provider					
Has the provider established linkages with a comprehensive community resource network of related health and social services organizations, to ensure wide-based knowledge of the availability of its services?	45 CFR 96.128(a)(4)				
HIV-Related Requirements for all SABG Providers of Substance Abuse Treatment					
Does the provider ensure that early intervention services for HIV are provided only with the voluntary, informed consent of patients?	45 CFR 96.128(e)				
Does the provider ensure that undergoing early intervention services for HIV is not a requirement or condition for receiving treatment services for substance abuse or any other services.	45 CFR 96.128(e)				
With respect to providing early intervention HIV services to an individual, does the provider ensure that the grant funds are the "payment of last resort"?	45 CFR 96.137(a)(1)				
With respect to providing early intervention HIV services to an individual, does the provider secure payments from patients or clients for services in accordance with their ability to pay?	45 CFR 96.137(a)(2)				
With respect to providing early intervention HIV services to an individual, does the provider expend block grant funds for inpatient hospital services only when all requirements are met?	45 CFR 96.135(a)(1) and 45 CFR 96.135(c)(1)				
With respect to providing early intervention HIV services to an individual, does the provider expend block grant funds for inpatient hospital services consistent with requirements for allowable expenditures?	45 CFR 96.135(a)(1) and 45 CFR 96.135(c)(2)				
With respect to providing early intervention HIV services to an individual, does the provider comply with the restriction that block grant funds may not be used to make cash payments to intended recipients of health services?	45 CFR 96.135(a)(2)				
With respect to providing early intervention HIV services to an individual, does the provider comply with the restriction that block grant funds may not be used to purchase or improve land, construct buildings, improve buildings other than minor remodeling, or purchase major medical equipment?	45 CFR 96.135(a)(3)				
Requirements Related to Treatment Services for Pregnant Women for all SABG Providers					
If the provider serves women and receives SABG funds, does it provide preference to pregnant women, and has a policy and procedure in place to assure this?	45 CFR 96.131(a)				
If the provider serves injecting drug abusers and receives SABG funds, does it provide preference to treatment as follows? #1 Pregnant injecting drug users #2 Pregnant substance abusers #3 Injecting drug users #4 All others <i>Review Provider Policy</i>	45 CFR 96.131(a)				
Does the provider promote availability of services to women and the fact that pregnant women receive preference? How?	45 CFR 96.131(b)				

Substance Abuse Treatment Block Grant Monitoring Tool Provider Agency Compliance with Priority Poluations Access to Services, Waitlist Requirements

Provider Name:		Reviewer:
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Requirements	Authority	Yes	No	Partial	Comments
Policies for Women's Special Funding -Substance Abuse Services for Pregnant Women and Mothers					
Does the provider have a Policy to ensure women receiving services have no other financial means to obtain treatment?	45 CFR 96				
A Policy that ensures where appropriate, the family is treated as a unit, and both women and their children are admitted to treatment?	45 CFR 96				
The provider to ensure that their minimum service array provides or arranges for the following: o Primary medical care, including referral for prenatal care; o Primary pediatric care, including immunization for their children; o Gender specific therapeutic interventions for the women; o Appropriate therapeutic interventions for the children in custody of women in treatment; o Child care while the women are receiving services; and o Sufficient case management and transportation to ensure women and their children have access to the minimum service array.	45 CFR 96				
Subcontract Document - Block Grant Requirements					
Ensure that Subcontractors that receive federal block grant funds from the Substance Abuse Prevention and Treatment Block Grant comply with all of the requirements of the Substance Abuse and Mental Health Services Administration (SAMHSA) Charitable Choice provisions and the implementing regulations of 42 CFR 54a. Does the provider have a policy for this?	Exhibit A.5.1.a.				
Ensure that Subcontractors that receive federal block grant funds from the Substance Abuse Prevention and Treatment Block Grant comply with 42 CFR, Part 2.	Exhibit A.5.1.b.				
If funding is received from the Substance Abuse Prevention and Treatment Block Grant, the Managing Entity shall comply and ensure that all Subcontractors comply with the data submission requirements outlined in PAM 155-2 and within the funding restrictions outlined in "SAMH OCA's and Funding Restrictions" which is incorporated herein by reference and may be found at: http://www.dcf.state.fl.us/programs/samh/contractingMore.shtml	Attachment 1, B.1.a.(5)(b)				