



**STATE OF NORTH CAROLINA
OFFICE OF STATE BUDGET AND MANAGEMENT**

PAT MCCRORY
GOVERNOR

LEE HARRISS ROBERTS
STATE BUDGET DIRECTOR

January 27, 2015

MEMORANDUM

TO: Senator Phil Berger, President Pro-Tempore of the Senate
Representative Tim Moore, Speaker of the House of Representatives

FROM: Lee Harriss Roberts
State Budget Director

A handwritten signature in black ink, appearing to read "Lee Roberts", written over a horizontal line.

SUBJECT: Consultation on Expenditure of Grant Awards

Pursuant to Section 5.2 of Session Law 2013-360, the Office of State Budget and Management is to report to the Joint Legislative Commission on Governmental Operations prior to expending funds received from grant awards. Funding is anticipated to be received and expended for grants included in the attached Notification of Application for Grant Funds/Awards.

Regarding the Division of Mental Health (DMH) DDSAS grant, Access to Recovery, it is intended to facilitate substance abuse treatment and recovery support for active duty military, National Guard, veterans and others transitioning back to the community. These funds have been allocated but it is not anticipated that any expenditures would occur until the 90 day period has been satisfied.

If you have any questions or concerns, please contact Pam Kilpatrick, Assistant State Budget Officer for Health and Human Services, by dialing (919) 807-4722 or emailing to pam.kilpatrick@osbm.nc.gov.

Thank you.

Notification of Application for Grant Funds/Awards, 2014-15

Office of State Budget and Management, 116 West Jones Street, Raleigh, NC 27603-8005, 919-807-4700.

Instructions at http://www.osbm.state.nc.us/files/pdf_files/grants_instr.pdf

1 Department	Department of Health and Human Services
2 Division (except in DHHS)	DMHDDASAS
3 DHHS only, choose division from drop down list	
4 Contact person (name)	Dede Severino
5 Phone number	919-733-0696
6 E-mail	dede.severino@dhs.nc.gov
7 Funding Entity (grantor)	SAMHSA
8 CFDA number	93.243
9 Grant title	PPHF-2014 Access to Recovery
10 Grant application deadline (MM/DD/YY)	03/31/14
11 Start date of grant (MM/DD/YY)	10/01/14
12 End date of grant (MM/DD/YY)	09/30/15
13 Application type	new
14 Is this grant already in agency's continuation budget?	no
15 Budget code the grant will be expended in (XXXX)	1460
16 Fund code (XXXX or NA)	1464
17 Is there a state matching requirement?	no
18 If yes, what is the matching requirement?	
19 If yes, what is the source of state funds being used to match grant funds.	
20 Is there a maintenance of effort (MOE) requirement?	no
21 If yes, what is the MOE?	
22 Is an additional General Fund appropriation required to meet the state match requirement?	no
23 Will any of these funds be passed through to local governments or non-state entities?	yes
24 If yes, identify affected entities by type	local govt AND private non-profit
25 Will additional state monies be required to continue the program if grant expires or is reduced?	yes
26 If yes, is this a requirement of the grant?	no
27 Are new FTEs funded through the grant?	no

27 If yes, give the number by type for each year	Permanent Time-Limited	For 2014-15 Complete either Authorized or Proposed				SFY 2015-16 Proposed	SFY 2016-17 Proposed	SFY 2017-18 Proposed
		SFY 2013-14 Actual	SFY 2014-15 Authorized	SFY 2014-15 Proposed				
28 Amount of grants funds applied for in each year				\$3,000,000.00				
29 Amount of grants funds awarded in each year				\$2,622,222.00		\$2,622,222.00	\$2,622,222.00	

<p>30 Purpose of grant or amendment</p>	<p>The purpose of this program is to provide funding to single state agencies to implement and carry out voucher programs for individuals in need of formal, clinical treatment and/or recovery support services for substance use disorders. Intended outcomes include increasing abstinence, improving client choice of service provider(s), expanding access to a comprehensive array of treatment and recovery support service options, strengthening an individual's capacity to build and sustain a life in recovery. The population of focus includes individuals with a substance use disorder including active military National Guard members, veterans, individuals returning to the community from the criminal justice system, individuals involved with Drug Courts, clients stepping down from residential or inpatient treatment, parenting, pregnant and post-partum women, individuals involved in the child welfare/social services system and individuals experiencing homelessness. Grant funds will be used to facilitate individual choice and promote multiple pathways to recovery through the development and implementation of substance abuse treatment and recovery support service voucher systems.</p>
<p>31 Comments</p>	

Return completed form as email attachment and indicate in message that proper agency sign-offs have been obtained. Contact your OSBM budget analyst if you have questions.

Notification of Application for Grant Funds/Awards, 2014-15

Office of State Budget and Management, 116 West Jones Street, Raleigh, NC 27603-9005, 919-807-4700.
Instructions at http://www.osbm.state.nc.us/files/pdf_files/grants_instr.pdf

1 Department	Department of Health and Human Services
2 Division (except in DHHS)	Division of Aging and Adult Services
3 DHHS only, choose division from drop down list	Melvina Adams
4 Contact person (name)	919-855-3438
5 Phone number	melvina.adams@dhs.nc.gov
6 E-mail	Administration on Aging - Administration for Community Living
7 Funding Entity (grantor)	93,761
8 CFDA number	PPHF-2014-Evidence-Based Falls Prevention Programs Financed Solely by 2014 Prevention and Public Health Funds
9 Grant title	07/09/14
10 Grant application deadline (MM/DD/YY)	10/01/14
11 Start date of grant (MM/DD/YY)	09/30/16
12 End date of grant (MM/DD/YY)	New
13 Application type	No
14 Is this grant already in agency's continuation budget?	14411
15 Budget code the grant will be expended in (XXXXX)	1270
16 Fund code (XXXX or NA)	No
17 Is there a state matching requirement?	
18 If yes, what is the matching requirement?	
19 If yes, what is the source of state funds being used to match grant funds.	
20 Is there a maintenance of effort (MOE) requirement?	No
21 If yes, what is the MOE?	
22 Is an additional General Fund appropriation required to meet the state match requirement?	No
23 Will any of these funds be passed through to local governments or non-state entities?	Yes
24 If yes, identify affected entities by type	local gov AND private non-profit AND other state agency
25 Will additional state monies be required to continue the program if grant expires or is reduced?	No
26 If yes, is this a requirement of the grant?	
27 Are new FTEs funded through the grant?	No

	For 2014-15			
	SFY 2013-14 Actual	SFY 2014-15 Authorized	SFY 2014-15 Proposed	SFY 2015-16 Proposed
27 If yes, give the number by type for each year. Permanent Time-Limited				
28 Amount of grants funds applied for in each year			\$180,000.00	\$200,000.00
29 Amount of grants funds awarded in each year			\$100,000.00	\$153,822.00

30 Purpose of grant or amendment	<p>This funding opportunity is designed to increase the number of older adults and adults with disabilities at risk for falls who participate in evidence-based community programs to reduce falls and falls risk while concurrently increasing the sustainability of these programs through innovative financing arrangements.</p>
31 Comments	<p>Each year, one in every three adults age 65 and older falls (CDC). Falls can cause moderate to severe injuries, such as hip fractures and head traumas, and can increase the risk of early death. 64% of unintentional fall-related deaths in 2012 occurred in adults over the age of 65. In 2012, 61% of injury-related emergency department visits among older adults were for unintentional injuries. Falls and falls risks can be reduced through systematic risk identification and targeted intervention, including a combination of clinical and community-based interventions. Many evidence-based community programs, such as A Matter of Balance and Tai Chi, have been shown to reduce falls and/or falls risk factors and provide opportunities for substantial return on investment.</p> <p>Funds may be passed through to local governments, public universities, and and/or non-profit entities.</p>

Return completed form as email attachment and indicate in message that proper agency sign-offs have been obtained. Contact your OSBM budget analyst if you have questions.

Notification of Application for Grant Funds/Awards, 2014-15

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Office of State Budget and Management, 115 West Jones Street, Raleigh, NC 27603-8006, 919-807-4700.

Instructions at http://www.osbm.state.nc.us/officeof_budget/awards.htm

1 Department (except in DHS)	Division of Public Health				
2 Division (except in DHS)	Vital Records				
3 Contact person (name)	Wendy Holmes				
4 Phone number	919-707-6561				
5 E-mail	wendy.holmes@dhhs.nc.gov				
6 Funding Entity (grantor)	Department of Health and Human Services, Centers for Disease Control and Prevention				
7 CRDA number	82,733				
8 Grant title	FY14-2014: Immunization - Enhance an Immunization Information System (IIS) to Interface with CDC's Vaccine Ordering and Management System				
9 Grant application deadline (MM/DD/YYYY)	07/31/14				
10 Start date of grant (MM/DD/YYYY)	08/01/14				
11 End date of grant (MM/DD/YYYY)	08/29/16				
12 Application type	New				
13 Is this grant already in agency's continuation budget?	No				
14 Budget code the grant will be expended in (XXXXX)	14430				
15 Fund code (XXXX or NA)	1331				
16 Is there a state matching requirement?	No				
17 If yes, what is the matching requirement?					
18 If yes, what is the source of state funds being used to match grant funds?					
19 Is there a maintenance of effort (MOE) requirement?	No				
20 If yes, what is the MOE?					
21 Is an additional General Fund appropriation required to meet the state match requirement?	No				
22 Will any of these funds be passed through to local governments or non-state entities?	No				
23 If yes, identify affected entities by type					
24 Will additional state monies be required to continue the program if grant expires or is reduced?	No				
25 If yes, is this a requirement of the grant?					
26 Are new FTEs funded through the grant?	No				

27 If yes, give the number by type for each year: Permanent	For 2014-15				
	Actual	Authorized	Proposed	Proposed	Proposed
28 Amount of grants funds provided for in each year					
29 Amount of grants funds provided in each year			\$104,188.70	\$125,000.00	\$20,811.30
			\$104,188.70	\$125,000.00	\$20,811.30

9-23-2014
 9-26-2014
 JMB
 9-24-2014 gmo

<p>31 Comments</p>	<p>New Project Title: North Carolina Immunization Registry which is the State Immunization Information system will improve interface capacity with CDC's vaccine ordering system Vaccine Tracking System (VTracS). VTracS is an information technology system from the Centers for Disease Control and Prevention (CDC) that integrates the entire publicly-funded vaccine supply chain from purchasing and ordering to distribution of the vaccine. Activities include enhancement of NC Immunization Registry (NCIR) components to meet VTracS specifications; ensure providers are trained on use of the IIS system enhancements implemented; and building capacity within the NCIR community through participation project analyses and pilot testing. CDC-RFA-14-1408P-PHF-14 National Center for Immunization and Respiratory Diseases (NCIRD), Centers for Disease Control and Prevention (CDC) Notice of Award dated 08/09/2014 - Amount \$250,000 Grant Number 1H2SP000810-01</p>
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Report completed from an email attachment and includes in message the proper agency sign-offs have been obtained. Contact your ODSM business analyst if you have questions



FUND CODE - NC IMMZ REG INFO SYSTEM

Status: Submitted_To_OSBM

Budget Code: 34410
Fund Code: 35MR
Request Number: 3004
Company: 2001
GASB#: 1103
Short Title: NC Immz Reg Info System
Long Title: NC Immz Reg Info System

Created Date: 01/16/2015
Last Modified Date: 01/16/2015
Effective Date: 01/16/2015
Expiration Date:

Will payroll be distributed No
out of this fund?

Fund Purpose: The purpose of this grant is to improve interface capacity with CDC's Vaccine Ordering #1H23JP00910. The NC Division of Information Resource Management (DIRM) will be directing this project in conjunction with the NC Division of Public Health. This IT project will improve the interface between the NC Immunization Registry and the CDC Vaccine Ordering System.

Justification: To set up new federal fund at Division of Public Health.

Revenue Source: These funds were received from USDHHS - CDC.

Expenditure/Accounting Activity: These funds will be spent in budget code 14430 Fund 1331.
These funds will also be spent in budget code 14410.

AGENCY REQUESTOR INFO

Name: Scarlett A. Edwards
Phone Number: 9198553718
Email: scarlette.edwards@dhhs.nc.gov

REVIEW AND APPROVAL

Reviewed by OSBM Analyst: N.A.
Initiated by OSBM (ASBO): N.A.
Entered into NCAS (OSC): N.A.
Approved by OSC: N.A.
Approved by OSBM (ASBO): N.A.
Approval Date: N.A.