

West Virginia

UNIFORM APPLICATION

FY 2016/2017 - STATE BEHAVIORAL HEALTH ASSESSMENT AND PLAN

SUBSTANCE ABUSE PREVENTION AND TREATMENT and COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

OMB - Approved 06/12/2015 - Expires 06/30/2018
(generated on 10/07/2016 2.41.45 PM)

Center for Substance Abuse Prevention
Division of State Programs

Center for Substance Abuse Treatment
Division of State and Community Assistance

and

Center for Mental Health Services
Division of State and Community Systems Development

State Information

State Information

Plan Year

Start Year 2017

End Year 2018

State SAPT DUNS Number

Number 618137715

Expiration Date

I. State Agency to be the SAPT Grantee for the Block Grant

Agency Name West Virginia Department of Health and Human Resources

Organizational Unit Office of the Secretary

Mailing Address One Davis Square, Suite 100 East

City Charleston

Zip Code 25301

II. Contact Person for the SAPT Grantee of the Block Grant

First Name Kimberly

Last Name Walsh

Agency Name West Virginia Department of Health and Human Resources

Mailing Address 350 Capitol Street, Room 350

City Charleston

Zip Code 25301

Telephone 304-356-4798

Fax 304-558-1008

Email Address Kimberly.A.Walsh@wv.gov

State CMHS DUNS Number

Number 618137715

Expiration Date

I. State Agency to be the CMHS Grantee for the Block Grant

Agency Name West Virginia Department of Health and Human Resources

Organizational Unit Office of the Secretary

Mailing Address One Davis Square, Suite 100 East

City Charleston

Zip Code 25301

II. Contact Person for the CMHS Grantee of the Block Grant

First Name Vickie

Last Name Jones

Agency Name West Virginia Department of Health and Human Resources

Mailing Address 350 Capitol Street, Room 350

City Charleston

Zip Code 25271

Telephone 304-356-4771

Fax 304-558-2230

Email Address victoria.l.jones@wv.gov

III. State Expenditure Period (Most recent State expenditure period that is closed out)

From

To

IV. Date Submitted

Submission Date 8/30/2016 3:59:06 PM

Revision Date 10/7/2016 2:41:25 PM

V. Contact Person Responsible for Application Submission

First Name Melissa

Last Name Mullins

Telephone 304-356-4990

Fax 304-558-1008

Email Address melissa.d.mullins@wv.gov

Footnotes:

State Information

Chief Executive Officer's Funding Agreement - Certifications and Assurances / Letter Designating Signatory Authority [SA]

Fiscal Year 2017

U.S. Department of Health and Human Services
 Substance Abuse and Mental Health Services Administrations
 Funding Agreements
 as required by
 Substance Abuse Prevention and Treatment Block Grant Program
 as authorized by
 Title XIX, Part B, Subpart II and Subpart III of the Public Health Service Act
 and
 Title 42, Chapter 6A, Subchapter XVII of the United States Code

Title XIX, Part B, Subpart II of the Public Health Service Act		
Section	Title	Chapter
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Section 1923	Intravenous Substance Abuse	42 USC § 300x-23
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Section 1941	Opportunity for Public Comment on State Plans	42 USC § 300x-51
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Section 1943	Additional Requirements	42 USC § 300x-53

Section 1946	Prohibition Regarding Receipt of Funds	42 USC § 300x-56
Section 1947	Nondiscrimination	42 USC § 300x-57
Section 1953	Continuation of Certain Programs	42 USC § 300x-63
Section 1955	Services Provided by Nongovernmental Organizations	42 USC § 300x-65
Section 1956	Services for Individuals with Co-Occurring Disorders	42 USC § 300x-66

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standard for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685- 1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §§794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to non- discrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327- 333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetland pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Costal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g)

protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§ 469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
16. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
17. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

LIST of CERTIFICATIONS

1. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93). By signing and submitting this application, the applicant is providing certification set out in Appendix A to 45 CFR Part 93.

2. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Department of Health and Human Services terms and conditions of award if a grant is awarded as a result of this application.

3. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

The authorized official signing for the applicant organization certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act. The applicant organization agrees that it will require that the language of this certification be included in any sub-awards which contain provisions for children's services and that all sub-recipients shall certify accordingly.

The Department of Health and Human Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the DHHS mission to protect and advance the physical and mental health of the American people.

I hereby certify that the state or territory will comply with Title XIX, Part B, Subpart II and Subpart III of the Public Health Service (PHS) Act, as amended, and summarized above, except for those sections in the PHS Act that do not apply or for which a waiver has been granted or may be granted by the Secretary for the period covered by this agreement.

I also certify that the state or territory will comply with the Assurances Non-Construction Programs and Certifications summarized above.

Name of Chief Executive Officer (CEO) or Designee: Karen L. Bowling

Signature of CEO or Designee¹: _____

Title: Cabinet Secretary

Date Signed: _____

mm/dd/yyyy

¹If the agreement is signed by an authorized designee, a copy of the designation must be attached.

Footnotes:



STATE OF WEST VIRGINIA
OFFICE OF THE GOVERNOR
1900 KANAWHA BOULEVARD, EAST
CHARLESTON, WV 25305
(304) 558-2000

EARL RAY TOMBLIN
GOVERNOR

August 9, 2013

Karen L. Bowling, Cabinet Secretary
West Virginia Department of Health and Human Resources
One Davis Square, Suite 100 East
Charleston, West Virginia 25301

Dear Cabinet Secretary Bowling:

This letter is to authorize you in your position as Cabinet Secretary of the West Virginia Department of Health and Human Resources to serve as my designee for the purpose of signing the Substance Abuse Prevention and Treatment block grant application, certifications, waiver requests, etc.

This authorization will remain in effect until further notice.

Wish warmest regards,

A handwritten signature in blue ink that reads "Earl Ray Tomblin".

Earl Ray Tomblin
Governor

State Information

Chief Executive Officer's Funding Agreement - Certifications and Assurances / Letter Designating Signatory Authority [SA]

Fiscal Year 2017

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 as required by
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2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
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Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

The authorized official signing for the applicant organization certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act. The applicant organization agrees that it will require that the language of this certification be included in any sub-awards which contain provisions for children's services and that all sub-recipients shall certify accordingly.

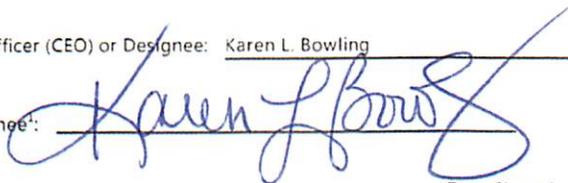
The Department of Health and Human Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the DHHS mission to protect and advance the physical and mental health of the American people.

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I also certify that the state or territory will comply with the Assurances Non-Construction Programs and Certifications summarized above.

Name of Chief Executive Officer (CEO) or Designee: Karen L. Bowling

Signature of CEO or Designee:



Title: Cabinet Secretary

Date Signed:

8/30/2016

nim/dd/yyyy

Footnotes:

State Information

Chief Executive Officer's Funding Agreement - Certifications and Assurances / Letter Designating Signatory Authority [MH]

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Title XIX, Part B, Subpart II of the Public Health Service Act		
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Section 1911	Formula Grants to States	42 USC § 300x
Section 1912	State Plan for Comprehensive Community Mental Health Services for Certain Individuals	42 USC § 300x-1
Section 1913	Certain Agreements	42 USC § 300x-2
Section 1914	State Mental Health Planning Council	42 USC § 300x-3
Section 1915	Additional Provisions	42 USC § 300x-4
Section 1916	Restrictions on Use of Payments	42 USC § 300x-5
Section 1917	Application for Grant	42 USC § 300x-6
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2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
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4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
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6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685- 1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §§794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to non- discrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327- 333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetland pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Costal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g)

protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§ 469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
16. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
17. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

LIST of CERTIFICATIONS

1. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93). By signing and submitting this application, the applicant is providing certification set out in Appendix A to 45 CFR Part 93.

2. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Department of Health and Human Services terms and conditions of award if a grant is awarded as a result of this application.

3. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

The authorized official signing for the applicant organization certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act. The applicant organization agrees that it will require that the language of this certification be included in any sub-awards which contain provisions for children's services and that all sub-recipients shall certify accordingly.

The Department of Health and Human Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the DHHS mission to protect and advance the physical and mental health of the American people.

I hereby certify that the state or territory will comply with Title XIX, Part B, Subpart II and Subpart III of the Public Health Service (PHS) Act, as amended, and summarized above, except for those sections in the PHS Act that do not apply or for which a waiver has been granted or may be granted by the Secretary for the period covered by this agreement.

I also certify that the state or territory will comply with the Assurances Non-Construction Programs and Certifications summarized above.

Name of Chief Executive Officer (CEO) or Designee: Karen L. Bowling

Signature of CEO or Designee¹: _____

Title: Cabinet Secretary

Date Signed: _____

mm/dd/yyyy

¹If the agreement is signed by an authorized designee, a copy of the designation must be attached.

Footnotes:



STATE OF WEST VIRGINIA
OFFICE OF THE GOVERNOR
1900 KANAWHA BOULEVARD, EAST
CHARLESTON, WV 25305
(304) 558-2000

EARL RAY TOMBLIN
GOVERNOR

August 9, 2013

Karen L. Bowling, Cabinet Secretary
West Virginia Department of Health and Human Resources
One Davis Square, Suite 100, East
Charleston, West Virginia 25301

Dear Cabinet Secretary Bowling:

This letter is to authorize you in your position as Cabinet Secretary of the West Virginia Department of Health and Human Resources to serve as my designee for the purpose of signing the Mental Health Services Block Grant application, certifications, waiver requests, etc.

This authorization will remain in effect until further notice.

With warmest regards,

A handwritten signature in blue ink that reads "Earl Ray Tomblin".

Earl Ray Tomblin
Governor

State Information

Chief Executive Officer's Funding Agreement - Certifications and Assurances / Letter Designating Signatory Authority [MH]

Fiscal Year 2017

U.S. Department of Health and Human Services
 Substance Abuse and Mental Health Services Administrations
 Funding Agreements
 as required by
 Community Mental Health Services Block Grant Program
 as authorized by
 Title XIX, Part B, Subpart II and Subpart III of the Public Health Service Act
 and
 Title 42, Chapter 6A, Subchapter XVII of the United States Code

Title XIX, Part B, Subpart II of the Public Health Service Act		
Section	Title	Chapter
Section 1911	Formula Grants to States	42 USC § 300x
Section 1912	State Plan for Comprehensive Community Mental Health Services for Certain Individuals	42 USC § 300x-1
Section 1913	Certain Agreements	42 USC § 300x-2
Section 1914	State Mental Health Planning Council	42 USC § 300x-3
Section 1915	Additional Provisions	42 USC § 300x-4
Section 1916	Restrictions on Use of Payments	42 USC § 300x-5
Section 1917	Application for Grant	42 USC § 300x-6
Title XIX, Part B, Subpart III of the Public Health Service Act		
Section 1941	Opportunity for Public Comment on State Plans	42 USC § 300x-51
Section 1942	Requirement of Reports and Audits by States	42 USC § 300x-52
Section 1943	Additional Requirements	42 USC § 300x-53
Section 1946	Prohibition Regarding Receipt of Funds	42 USC § 300x-56
Section 1947	Nondiscrimination	42 USC § 300x-57
Section 1953	Continuation of Certain Programs	42 USC § 300x-63
Section 1955	Services Provided by Nongovernmental Organizations	42 USC § 300x-65
Section 1956	Services for Individuals with Co-Occurring Disorders	42 USC § 300x-66

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standard for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
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protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

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16. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
17. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

LIST of CERTIFICATIONS

1. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93). By signing and submitting this application, the applicant is providing certification set out in Appendix A to 45 CFR Part 93.

2. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Department of Health and Human Services terms and conditions of award if a grant is awarded as a result of this application.

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Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

The authorized official signing for the applicant organization certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act. The applicant organization agrees that it will require that the language of this certification be included in any sub-awards which contain provisions for children's services and that all sub-recipients shall certify accordingly.

The Department of Health and Human Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the DHHS mission to protect and advance the physical and mental health of the American people.

I hereby certify that the state or territory will comply with Title XIX, Part B, Subpart II and Subpart III of the Public Health Service (PHS) Act, as amended, and summarized above, except for those sections in the PHS Act that do not apply or for which a waiver has been granted or may be granted by the Secretary for the period covered by this agreement.

I also certify that the state or territory will comply with the Assurances Non-Construction Programs and Certifications summarized above.

Name of Chief Executive Officer (CEO) or Designee: Karen L. Bowling

Signature of CEO or Designee¹ 

Title: Cabinet Secretary

Date Signed: 8/30/2016

mm/dd/yyyy

¹If the agreement is signed by an authorized designee, a copy of the designation must be attached.

Footnotes:

State Information

Disclosure of Lobbying Activities

To View Standard Form LLL, Click the link below (This form is OPTIONAL)

[Standard Form LLL \(click here\)](#)

Name	<input type="text" value="Karen L. Bowling"/>
Title	<input type="text" value="Cabinet Secretary"/>
Organization	<input type="text" value="West Virginia Department of Health and Human Resources"/>

Signature: _____ Date: _____

Footnotes:

State Information

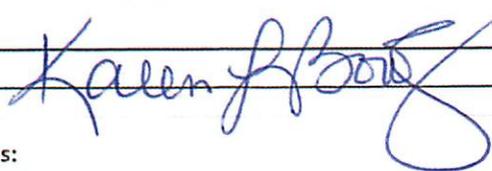
Disclosure of Lobbying Activities

To View Standard Form LLL, Click the link below (This form is OPTIONAL)

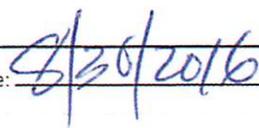
[Standard Form LLL \(click here\)](#)

Name: Karen L. Bowling
Title: Cabinet Secretary
Organization: West Virginia Department of Health and Human Resources

Signature:



Date:



Footnotes:

Planning Tables

Table 2 State Agency Planned Expenditures [MH]

Planning Period Start Date: 7/1/2016 Planning Period End Date: 6/30/2017

Activity (See instructions for using Row 1.)	A.Substance Abuse Block Grant	B.Mental Health Block Grant	C.Medicaid (Federal, State, and Local)	D.Other Federal Funds (e.g., ACF (TANF), CDC, CMS (Medicare) SAMHSA, etc.)	E.State Funds	F.Local Funds (excluding local Medicaid)	G.Other
1. Substance Abuse Prevention* and Treatment							
a. Pregnant Women and Women with Dependent Children*							
b. All Other							
2. Substance Abuse Primary Prevention							
3. Tuberculosis Services							
4. HIV Early Intervention Services							
5. State Hospital			\$0	\$0	\$0	\$0	\$0
6. Other 24 Hour Care		\$0	\$0	\$0	\$0	\$0	\$0
7. Ambulatory/Community Non-24 Hour Care		\$2,470,171	\$15,249,362	\$1,136,000	\$52,114,557	\$0	\$0
8. Mental Health Primary Prevention**		\$0	\$0	\$0	\$160,000	\$0	\$0
9. Evidenced Based Practices for First Episode Psychosis (10% of the state's total MHBG award)		\$290,608	\$0	\$0	\$0	\$0	\$0
10. Administration (Excluding Program and Provider Level)		\$145,304	\$0	\$0	\$134,400	\$0	\$0
11. Total	\$0	\$2,906,083	\$15,249,362	\$1,136,000	\$52,408,957	\$0	\$0

* Prevention other than primary prevention

** It is important to note that while a state may use state or other funding for these services, the MHBG funds must be directed toward adults with SMI or children with SED.

Footnotes:

Planning Tables

Table 4 SABG Planned Expenditures

Planning Period Start Date: 10/1/2016 Planning Period End Date: 9/30/2018

Expenditure Category	FY 2016 SA Block Grant Award	FY 2017 SA Block Grant Award
1 . Substance Abuse Prevention* and Treatment	\$6,324,510	\$6,324,510
2 . Substance Abuse Primary Prevention	\$1,686,536	\$1,686,536
3 . Tuberculosis Services		
4 . HIV Early Intervention Services**		
5 . Administration (SSA Level Only)	\$421,634	\$421,634
6. Total	\$8,432,680	\$8,432,680

* Prevention other than primary prevention

** 1924(b)(2) of Title XIX, Part B, Subpart II of the Public Health Service Act (42 U.S.C. § 300x-24(b)(2)) and section 96.128(b) of the Substance Abuse Prevention and Treatment Block Grant; Interim Final Rule (45 CFR 96.120-137), SAMHSA relies on the HIV Surveillance Report produced by CDC, National Center for HIV/AIDS, Hepatitis, STD and TB Prevention. The HIV Surveillance Report, Volume 24, will be used to determine the states and jurisdictions that will be required to set-aside 5 percent of their respective FY 2016 SABG allotments to establish one or more projects to provide early intervention services for HIV at the sites at which individuals are receiving SUD treatment services. In FY 2012, SAMHSA developed and disseminated a policy change applicable to the EIS/HIV which provided any state that was a "designated state" in any of the three years prior to the year for which a state is applying for SABG funds with the flexibility to obligate and expend SABG funds for EIS/HIV even though the state does not meet the AIDS case rate threshold for the fiscal year involved. Therefore, any state with an AIDS case rate below 10 or more such cases per 100,000 that meets the criteria described in the 2012 policy guidance would be allowed to obligate and expend FY 2016 SABG funds for EIS/HIV if they chose to do so.

Footnotes:

Planning Tables

Table 5a SABG Primary Prevention Planned Expenditures

Planning Period Start Date: 10/1/2016 Planning Period End Date: 9/30/2018

Strategy	IOM Target	FY 2016	FY 2017
		SA Block Grant Award	SA Block Grant Award
Information Dissemination	Universal	\$129,286	\$129,286
	Selective		\$0
	Indicated		\$0
	Unspecified		\$0
	Total	\$129,286	\$129,286
Education	Universal	\$265,119	\$265,119
	Selective		\$0
	Indicated		\$0
	Unspecified		\$0
	Total	\$265,119	\$265,119
Alternatives	Universal	\$52,369	\$52,369
	Selective		\$0
	Indicated		\$0
	Unspecified		\$0
	Total	\$52,369	\$52,369
Problem Identification and Referral	Universal	\$19,638	\$19,638
	Selective		\$0
	Indicated		\$0
	Unspecified		\$0
	Total	\$19,638	\$19,638

Community-Based Process	Universal	\$790,447	\$790,447
	Selective		\$0
	Indicated		\$0
	Unspecified		\$0
	Total	\$790,447	\$790,447
Environmental	Universal	\$379,677	\$379,677
	Selective		\$0
	Indicated		\$0
	Unspecified		\$0
	Total	\$379,677	\$379,677
Section 1926 Tobacco	Universal	\$50,000	\$50,000
	Selective		\$0
	Indicated		\$0
	Unspecified		\$0
	Total	\$50,000	\$50,000
Other	Universal		\$0
	Selective		\$0
	Indicated		\$0
	Unspecified		\$0
	Total	\$0	\$0
Total Prevention Expenditures		\$1,686,536	\$1,686,536
Total SABG Award*		\$8,432,680	\$8,432,680
Planned Primary Prevention Percentage		20.00 %	20.00 %

*Total SABG Award is populated from Table 4 - SABG Planned Expenditures

Footnotes:

Planning Tables

Table 5b SABG Primary Prevention Planned Expenditures by IOM Category

Planning Period Start Date: 10/1/2016 Planning Period End Date: 9/30/2018

Activity	FY 2016 SA Block Grant Award	FY 2017 SA Block Grant Award
Universal Direct	\$1,686,536	\$1,686,536
Universal Indirect		
Selective		
Indicated		
Column Total	\$1,686,536	\$1,686,536
Total SABG Award*	\$8,432,680	\$8,432,680
Planned Primary Prevention Percentage	20.00 %	20.00 %

*Total SABG Award is populated from Table 4 - SABG Planned Expenditures

Footnotes:

Planning Tables

Table 5c SABG Planned Primary Prevention Targeted Priorities

Planning Period Start Date: 10/1/2016 Planning Period End Date: 9/30/2018

Targeted Substances	
Alcohol	b
Tobacco	e
Marijuana	b
Prescription Drugs	b
Cocaine	e
Heroin	b
Inhalants	e
Methamphetamine	e
Synthetic Drugs (i.e. Bath salts, Spice, K2)	e
Targeted Populations	
Students in College	b
Military Families	b
LGBTQ	b
American Indians/Alaska Natives	e
African American	e
Hispanic	e
Homeless	e
Native Hawaiian/Other Pacific Islanders	e
Asian	e
Rural	e
Underserved Racial and Ethnic Minorities	e

Footnotes:

Planning Tables

Table 6a SABG Resource Development Activities Planned Expenditures

Planning Period Start Date: 10/1/2016 Planning Period End Date: 9/30/2018

Activity	FY 2016 SA Block Grant Award				FY 2017 SA Block Grant Award			
	Prevention	Treatment	Combined	Total	Prevention	Treatment	Combined	Total
1. Planning, Coordination and Needs Assessment	\$5,000	\$20,000		\$25,000	\$5,000	\$20,000		\$25,000
2. Quality Assurance				\$0				\$0
3. Training (Post-Employment)	\$5,000	\$20,000		\$25,000	\$5,000	\$20,000		\$25,000
4. Education (Pre-Employment)				\$0				\$0
5. Program Development	\$5,000	\$20,000		\$25,000	\$5,000	\$20,000		\$25,000
6. Research and Evaluation	\$5,000	\$20,000		\$25,000	\$5,000	\$20,000		\$25,000
7. Information Systems	\$5,000	\$20,000		\$25,000	\$5,000	\$20,000		\$25,000
8. Total	\$25,000	\$100,000	\$0	\$125,000	\$25,000	\$100,000	\$0	\$125,000

Footnotes:

Planning Tables

Table 6b MHBG Non-Direct Service Activities Planned Expenditures

Planning Period Start Date: 7/1/2016 Planning Period End Date: 6/30/2017

Service	Block Grant
MHA Technical Assistance Activities	\$
MHA Planning Council Activities	\$47,569
MHA Administration	\$145,304
MHA Data Collection/Reporting	\$
MHA Activities Other Than Those Above	\$2,170,268
Total Non-Direct Services	\$2363141
Comments on Data: <input data-bbox="100 911 1521 934" type="text"/>	

Footnotes:

West Virginia does not fund direct services, but rather support services to keep individuals in the community. MHA Activities Other Than Those Above includes funding to providers for drop-in centers, day programs, outreach, and peer support services. Data collection and analysis is now performed in house by our Data Division.

Environmental Factors and Plan

22. State Behavioral Health Planning/Advisory Council and Input on the Mental Health/Substance Abuse Block Grant Application

Narrative Question:

Each state is required to establish and maintain a state Mental Health Planning/Advisory Council for adults with SMI or children with SED. To meet the needs of states that are integrating mental health and substance abuse agencies, SAMHSA is recommending that states expand their Mental Health Advisory Council to include substance abuse, referred to here as a Behavioral Health Advisory/Planning Council (BHPC). SAMHSA encourages states to expand their required Council's comprehensive approach by designing and implementing regularly scheduled collaborations with an existing substance abuse prevention and treatment advisory council to ensure that the council reviews issues and services for persons with, or at risk for, substance abuse and substance use disorders. To assist with implementing a BHPC, SAMHSA has created [Best Practices for State Behavioral Health Planning Councils: The Road to Planning Council Integration](#).⁹⁷

Additionally, [Title XIX, Subpart III, section 1941 of the PHS Act \(42 U.S.C. 300x-51\)](#) applicable to the SABG and the MHBG, requires that, as a condition of the funding agreement for the grant, states will provide an opportunity for the public to comment on the state block grant plan. States should make the plan public in such a manner as to facilitate comment from any person (including federal, tribal, or other public agencies) both during the development of the plan (including any revisions) and after the submission of the plan to SAMHSA.

For SABG only - describe the steps the state took to make the public aware of the plan and allow for public comment.

For MHBG and integrated BHPC: States must include documentation that they shared their application and implementation report with the Planning Council; please also describe the steps the state took to make the public aware of the plan and allow for public comment.

SAMHSA requests that any recommendations for modifications to the application or comments to the implementation report that were received from the Planning Council be submitted to SAMHSA, regardless of whether the state has accepted the recommendations. The documentation, preferably a letter signed by the Chair of the Planning Council, should state that the Planning Council reviewed the application and implementation report and should be transmitted as attachments by the state.

Please consider the following items as a guide when preparing the description of the state's system:

1. How was the Council actively involved in the state plan? Attach supporting documentation (e.g., meeting minutes, letters of support, etc.).
2. What mechanism does the state use to plan and implement substance abuse services?
3. Has the Council successfully integrated substance abuse prevention and treatment or co-occurring disorder issues, concerns, and activities into its work?
4. Is the membership representative of the service area population (e.g., ethnic, cultural, linguistic, rural, suburban, urban, older adults, families of young children)?
5. Please describe the duties and responsibilities of the Council, including how it gathers meaningful input from people in recovery, families and other important stakeholders, and how it has advocated for individuals with SMI or SED.

*Additionally, please complete the Behavioral Health Advisory Council Members and Behavioral Health Advisory Council Composition by Member Type forms.*⁹⁸

⁹⁷<http://beta.samhsa.gov/grants/block-grants/resources>

⁹⁸There are strict state Council membership guidelines. States must demonstrate: (1) the involvement of people in recovery and their family members; (2) the ratio of parents of children with SED to other Council members is sufficient to provide adequate representation of that constituency in deliberations on the Council; and (3) no less than 50 percent of the members of the Council are individuals who are not state employees or providers of mental health services.

Please use the box below to indicate areas of technical assistance needed related to this section:

Footnotes:

22. State Behavioral Health Planning/Advisory Council and Input on the Mental Health/Substance Abuse Block Grant Application

1. How was the Council actively involved in the state plan? Attach supporting documentation (e.g., meeting minutes, letters of support, etc.).

Members of the Council have been involved throughout the year in numerous community planning settings and venues, including but not limited to quarterly Council meetings, BRSS-TACS Team conference calls, the GACSA Regional Task Force meetings, in identifying issues and priorities which BBHFF has now incorporated into this year's plan. In addition, the Council will be given time to review and comment on the plan after it is posted on the Bureau's website during the two-week period in which it is also being reviewed by DHHR's Grant's Management Office. Finally, the Council Chair will once again be invited to submit a letter from the Council recommending modifications to the application and/or comments on the latest implementation report. The general public was made aware of the plan being posted on the website and available for comment through a mass email announcement using the BBHFF's statewide list serve. The West Virginia BBHFF made the plan available to the public for comment both before and after the submission of the plan to the secretary of HHS. This was accomplished through use of our list serve and posting on our external website, which is available to the public.

2. What mechanism does the state use to plan and implement substance abuse services?

Governor Earl Ray Tomblin issued Executive Order No. 5-11 on September 6, 2011, which created the Governor's Advisory Council on Substance Abuse (GACSA). Appointed council members include Cabinet level positions in the Department of Health and Human Resources, Department of Military Affairs and Public Safety, and the Department of Veterans Assistance; persons in leadership positions representing the State Police, Chiefs of Police, Sheriffs, Supreme Court, Education, WorkForce West Virginia, Behavioral Health and Health Facilities; experts from the fields of behavioral medicine, substance abuse prevention and treatment, peer and recovery supports, the faith-based and minority communities, homelessness, domestic violence prevention; and, a range of health professionals, among others. Responsibilities of the GACSA include: provide guidance regarding implementation of the Statewide Substance Abuse Strategic Action Plan; identify planning opportunities with other interrelated systems to increase both public and private support concerning substance abuse initiatives; recommend a list of priorities for the improvement of the substance abuse continuum of care; receive input from local communities throughout West Virginia; and, provide recommendations to the Governor to improve education, data needs, employment opportunities, communication, crime prevention, and other matters related to substance abuse. The six Regional Substance Abuse Task Forces met publicly every other month initially, now quarterly, to gather community input and funnel recommendations up to the GACSA, which then issues a yearly report with recommendations subsequently made to the Governor and his state agencies.

3. Has the Council successfully integrated substance abuse prevention and treatment or co-occurring disorder issues, concerns, and activities into its work?

The WV Behavioral Health Planning Council had the foresight to fold in substance abuse stakeholders as far back as 2006, when it added seven seats for substance abuse, including the SSA, two people in recovery, two family members of someone with an addiction and two substance abuse providers. Substance abuse and co-occurring mental health issues are regularly discussed at quarterly Council meetings, including updates from the SSA on funding and policy issues.

There is on-going communication and regularly scheduled meetings between the Bureau for Behavioral Health and Health Facilities and the WVMHPC and the GACSA in determining need, addressing gaps in services and promoting quality outcomes for behavioral health. The Bureau continues to support the coordination of efforts among the West Virginia Comprehensive Behavioral Health Commission, the Governor's Advisory Council on Substance Abuse, the Governor's Regional Task Forces and the Behavioral Health Planning Council in order to support an integrated culturally diverse advisement structure.

4. Is the membership representative of the service area population (e.g., ethnic, cultural, linguistic, rural, suburban, urban, older adults, families of young children)?

The Bureau for Behavioral Health and Health Facilities continues to use Mental Health Block Grant to support the operational expenses of the West Virginia Mental Health Planning Council (WVMHPC). The WVMHPC maintains at least 51% consumer membership and provides input and recommendations to the BBHFF on issues facing consumers with mental health problems. The WVMHPC is comprised of consumers, families, and representatives of mental health and substance abuse providers, and key state entities including the West Virginia Department of Education, West Virginia Behavioral Health Provider Association, West Virginia Coalition to End Homelessness, the West Virginia Council for the Prevention of Suicide, Department of Juvenile Service, Department of Corrections, Bureau for Medical Services, Bureau for Children and Families, West Virginia Housing Development Authority and the Department of Rehabilitation Services..

There are vacancies for stakeholders representing older adults and families of young children. In addition, the Council does not currently have seats for agency staff from the Bureau of Public Health and the Bureau of Senior Services. West Virginia does not operate its own Insurance Marketplace but the Council also does not include a representative from the Office of the WV Insurance Commissioner's Office.

5. Please describe the duties and responsibilities of the Council, including how it gathers meaningful input from people in recovery, families and other important stakeholders, and how it has advocated for individuals with SMI or SED.

The mission of the WVMHPC is to improve the mental health service system and function as a catalyst for change. The Council is federally mandated to review and comment on the State mental health plan, monitor, review, and evaluate allocation and adequacy of mental health block grant services, and advocate for services for individuals with mental illness and co-occurring substance abuse issues. The members of the Council and its subcommittees, including the Executive, Membership, Children and Families Services, Adult Services, Housing and Olmstead Committees, work collaboratively with the member state agencies to solicit input from the applicable stakeholders and provide input on agency priorities and plans, including but not limited to the Community Mental Health Services and SAPT Block

Grant applications. The Council accomplishes this by: meeting at least quarterly in different areas of the State; developing strategies to accomplish Council goals pursuant to the federal mandate; actively participating in a wide range of state and local initiatives that impact behavioral health, homelessness, and community services; and, partnering with the WVDHHR Bureau for Behavioral Health and Health Facilities to assure the availability of person centered, high quality behavioral health services throughout the State and conducting independent assessments of need which are reported to the Bureau.



West Virginia Behavioral Health Planning Council

PO Box 1095

Charleston, WV 25324-1095

August 25, 2016

Ms. Vickie Jones, Commissioner
Bureau for Behavioral Health and Health Facilities
350 Capitol Street, Room 350
Charleston, West Virginia 25301

Ms. Jones:

I wish to inform you that personnel from the Bureau of Behavioral Health and Health Facilities who were working on the combined Federal Block Grant for the next funding period requested that members of the West Virginia Behavioral Health Planning Council and other interested citizens read the draft of the document and send them recommendations of corrections and additions to incorporate into the final product. The staff members took the time to list each suggestion and how they planned to use them in the grant application. A member of the group took the time to go over this list with the people who had sent in their ideas and explained what would be done with the information.

I wish to commend the Bureau for demonstrating the importance of input from all regions of the State when planning for behavioral health services for the coming years. This recognition can only strengthen the working relationship between the Bureau and the Planning Council membership.

Respectfully,

Linda Pauley, PR
Chair
West Virginia Behavioral Health Planning Council

Environmental Factors and Plan

Behavioral Health Advisory Council Members

Start Year: 2017 End Year: 2018

Name	Type of Membership	Agency or Organization Represented	Address,Phone, and Fax	Email(if available)
Frank Armstead	Providers		1636 Clay Ave Charleston WV, 25387 PH: 304-206-0027	armsteadfranksoldier@yahoo.com
Jennifer Ballard	State Employees	WV Division of Corrections (Criminal Justice)	1409 Greenbrier Street Charleston WV, 25311 PH: 304-558-2063	Jennifer.M.Ballard@wv.gov
Elliott Birkhead	State Employees	BBHMF (Mental Health)	350 Capitol Street Room 350 Charleston WV, 25301 PH: 304-356-4787	Elliot.H.Birkhead@wv.gov
Ginger Carr	Parents of children with SED		PH: 304-993-6778	ginger.carr@redcross.org
Carla Cleek	State Employees	Department of Vocational Rehabilitation (Vocational Rehabilitation)	State Capitol Charleston WV, 25305 PH: 304-766-4881	Carla.B.Cleek@wv.gov
Rhonda Cooper	State Employees	WV Army National Guard	1740 Coonskin Drive Charleston WV, 25311 PH: 304-561-6578	cooper.e.cooper.ctr@us.army.mil
Ardella Cottrill	Family Members of Individuals in Recovery (to include family members of adults with SMI)		1709 Clay Ave Fairmont WV, 26554 PH: 304-680-4837	Ardella.cottrill@yahoo.com
Susan Coyer	Providers		135 Fourth Ave Huntington WV, 25704 PH: 304-525-5691	Susan.Coyer@acadiahealthcare.com
Joe Cunningham	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		713 Bigley Ave Charleston WV, 25302 PH: 304-982-6217	joec.pm@gmail.com
Nancy Deming	Providers		15 Tiger Trail Fairmont WV, 26554 PH: 304-363-6844	ndeming@valleyhealthcare.org
Melissa Duncan	Providers		706 Reedyville Rd Spencer WV, 26276 PH: 304-695-1193	melissa.duncan@anthem.com
Angie Ferrari	Parents of children with SED		212 P Woodland Drive Nitro WV, 25143 PH: 304-377-9491	Afferrari@asphealthcare.com

Joyce Floyd	Family Members of Individuals in Recovery (to include family members of adults with SMI)		302 Nathan Street Elkins WV, 26241 PH: 304-637-0903	floydjoyce35@yahoo.com
Debi Gillespie	State Employees	WV Department of Juvenile Services	1200 Quarrier St Charleston WV, 25301 PH: 304-558-9800	Debi.d.gillespie@wv.gov
Katie Heller	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		PH: 304-299-4166	katiehellerwv@gmail.com
Heather Hoelscher	Providers		PO Box 1082 Parkersburg WV, 26102 PH: 304-276-8687	hahoelscher@yahoo.com
Ted Johnson	Family Members of Individuals in Recovery (to include family members of adults with SMI)		2105 Superior Ave Charleston WV, 25303 PH: 304-746-1155	Jonnetj@comcast.net
Thomas Kimm	Providers		164 Goose Run Court Inwood WV, 25428 PH: 304-886-5550	tskimm@tskimm.com
Michael Mayton	Providers		508-G Allen Hall Morgantown WV, 26506 PH: 304-293-4382	michael.mayton@mail.wvu.edu
JK McAtee	Parents of children with SED		203 Greenbrier Point Dunbar WV, 25064 PH: 304-460-2624	wvleader@hotmail.com
Bob McConnell	Parents of children with SED		357 Valley Point Lane Wheeling WV, 26003 PH: 304-780-3417	tdototh@msn.com
Merritt Moore	State Employees	BBHFF - PATH	350 Capitol Street, Room 350 Charleston WV, 25301 PH: 304-558-0627	Merritt.E.Moore@wv.gov
Aaron Morris	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		1039 Canneton Hollow Rd Canneton WV, 25036 PH: 304-442-4726	aaronmorris127@gmail.com
Beth Morrison	State Employees	BBHFF - Childrens Mental Health	350 Capitol Street, Room 350 Charleston WV, 25301 PH: 304-356-4976	Beth.J.Morrison@wv.gov
Donna Moss	Parents of children with SED		1739 Saint Mary's Ave Parkersburg WV, 26101 PH: 304-428-0365	donnamoss52@yahoo.com
Bob Musick	Providers		256 Normandy Street Morgantown WV, 26505 PH: 304-296-1731	bmusick@valleyhealthcare.org

Cynthia Parsons	State Employees	Medicaid	350 Capitol Street, Room 251Charleston WV, 25301 PH: 304-588-5962	Cynthia.A.Parsons@wv.gov
Linda Pauley	Providers		1449 Childress RoadAlum Creek WV, 25003 PH: 304-283-0041	linda_pauley@yahoo.com
Louann Petts	Providers		1003 Edgewood DriveCharleston WV, 25301 PH: 304-341-6303	Louann.petta.ctr@ang.af.mil
Cathy Reed	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		Rt 7 Box 480Fairmont WV, 26554	kitcatwv@yahoo.com
Phil Reed	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		Rt 7 Box 480 Fairmont WV, 26554 PH: 304-363-5205	numbersmann@yahoo.com
James Ruckle	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		521 Jacob Street Apt 601Charleston WV, 25301 PH: 304-542-6717	jbobruckle@yahoo.com
David Sanders	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		350 Captiol StreetCharleston WV, 25302 PH: 304-345-7312	David.H.Sander@wv.gov
Nancy Schmitt	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		3723 Winchester AveMartinsburg WV, 25404 PH: 304-676-8053	nschmitt52@gmail.com
Melissa Southall	Parents of children with SED		1505 20th StreetParkersburg WV, 26101 PH: 304-917-4434	medicalmellissa@yahoo.com
Laura Sperry-Barno	State Employees	WV DHHR - BCF (Social Services)	350 Capitol Street Room 691Charleston WV, 25305 PH: 304-356-4575	Laura.S.Barno@wv.gov
Marian Steele	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		1022 Arbuckle Road Lot 11Summersville WV, 26651 PH: 304-651-0714	mls@shsinc.org
Patrick Tenney	Family Members of Individuals in Recovery (to include family members of adults with SMI)		301 Scott AveMorgantown WV, 26505 PH: 304-282-1278	ptenney@valleyhealthcare.org
Billie Tharp	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		1471 Whitewater RoadSummersville WV, 26651 PH: 304-618-7519	bjean0820@gmail.com
Vanessa Vangilder	Providers		326 Dutch RoadCharleston WV, 25301 PH: 304-421-0915	vkvangilder@aol.com

Brandon Whitehouse	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		306 N Church St.Ripley WV, 25271 PH: 304-372-3722	bradonwhitehouse@hotmail.com
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Footnotes:

The position for the council member who represents the state education agency is currently vacant. This vacancy is due to staff turnover at that position in the West Virginia Department of Education (WVDE). The WVDE is in the process of filling that position and once the position is filled, the new employee will represent to the West Virginia Behavioral Health Planning Council.

There is not a representative from the agency on aging. West Virginia's Bureau for Senior Services (BSS) is the state agency on aging. The West Virginia Behavioral Health Planning Council has considered adding a representative from BSS and will explore the option in the future.

Environmental Factors and Plan

Behavioral Health Council Composition by Member Type

Start Year: 2017 End Year: 2018

Type of Membership	Number	Percentage
Total Membership	46	
Individuals in Recovery* (to include adults with SMI who are receiving, or have received, mental health services)	11	
Family Members of Individuals in Recovery* (to include family members of adults with SMI)	4	
Parents of children with SED*	6	
Vacancies (Individuals and Family Members)	2	
Others (Not State employees or providers)	0	
Total Individuals in Recovery, Family Members & Others	23	50.0%
State Employees	11	
Providers	12	
Federally Recognized Tribe Representatives	0	
Vacancies	0	
Total State Employees & Providers	23	50.0%
Individuals/Family Members from Diverse Racial, Ethnic, and LGBTQ Populations	0	
Providers from Diverse Racial, Ethnic, and LGBTQ Populations	0	
Total Individuals and Providers from Diverse Racial, Ethnic, and LGBTQ Populations	0	
Persons in recovery from or providing treatment for or advocating for substance abuse services	0	

* States are encouraged to select these representatives from state Family/Consumer organizations.

Indicate how the Planning Council was involved in the review of the application. Did the Planning Council make any recommendations to modify the application?

See attached letter in Section 22

Footnotes: