Maine
Social Services Block Grant (SSBG)
Intended Use Plan & Pre-Expenditure Report
Federal Fiscal Year 2020

Christa Elwell, LMSW
Maine Department of Health & Human Services
Office of Child and Family Services
2 Anthony Ave.
Augusta, Maine 04333-0011
Telephone (207) 624-7900
Fax (207) 287-6156
christa.elwell@maine.gov

DUNS#: 809045594
EIN#: 1-016000001

Project Period: October 1, 2019 – September 30, 2020

This document has been prepared in accordance with Title XX of the Social Security Act, the Social Services Block Grant (SSBG).
INTRODUCTION

I. State/Federal Fiscal Year Covered in Pre-Expenditure Plan

II. Letter of Transmittal

III. Public Inspection

IV. Narrative
   A. Administrative Operations
   B. Fiscal Operations
   C. Program Operations

V. Pre-Expenditure Reporting Form

VI. Appendices
   Appendix A: Documentation of Public Inspection
   Appendix B: Certifications
   Appendix C: Proof of Audit
INTRODUCTION

The Social Services Block Grant (SSBG) legislation requires that each state seeking funds under this program prepare a report on the intended use of the Block Grant funds prior to their distribution. The report must include information on the service activities that will be supported by these funds and the characteristics or categories of persons who will be eligible to receive the services. The report is submitted to the Secretary of the Federal Department of Health and Human Services and simultaneously published within the state. Should any substantial changes occur in the services or use of the funds during the year, a revised report must be submitted to the Secretary and made public within the state.

This SSBG Intended Use Plan and Pre-Expenditure Report is intended to briefly explain the social services available to the citizens of Maine through SSBG, other federal funds, and related state appropriations for the upcoming federal fiscal year.
I. State/Federal Fiscal Year covered in Pre-Expenditure Plan

Specify the fiscal year, including start and end dates, covered in the pre-expenditure plan.

Fiscal Year (select one):
- [ ] State
- [x] Federal

Dates (start and end date of fiscal year):
- Start Date: 10/01/2019
- End Date: 09/30/2020
William Bolduc, MS, LCSW, BCD, CDR, USPHS
Chief, Social Services Block Grant (SSBG)
Division of Social Services (DSS)
Office of Community Services, Administration for Children and Families
Department of Health and Human Services
330 C Street, SW., Mailroom 5411
Washington, DC 20201

Dear Mr. Bolduc:

Enclosed is the Social Services Block Grant (SSBG) Intended Use Plan and Pre-Expenditure Report for the State of Maine. This report covers Federal Fiscal Year 2020, which operates from October 1, 2019, through September 30, 2020.

The State official receiving the SSBG Grant Award is:

Ms. Jeanne Lambrew, Commissioner
Maine Department of Health and Human Services
109 Capitol St.
Augusta, ME 04330
Telephone: 207-287-3707
Fax: 207-287-3005
Email: Jeanne.M.Lambrew@maine.gov

The Grant Administrator is:

Ms. Christa Elwell, LMSW
Maine Office of Child and Family Services
2 Anthony Ave.
Augusta, ME 04330
Telephone: 207-624-7900
Email: Christa.Elwell@maine.gov

If you have any questions regarding this report, please contact christa.elwell@maine.gov.

Sincerely,

Christa Elwell, LMSW
Business Services Manager
Office of Child and Family Service
III. Public Inspection

With passage of the Omnibus Budget Reconciliation Act of 1981 (PL 97-35) creating the block grants, the Governor of the State of Maine designated the Department of Health and Human Services (DHHS) as the state’s lead agency for the planning and administration of the Title XX Social Services Block Grant. Since 1981, the Office of Child and Family Services (OCFS) has overseen the administering and monitoring of SSBG with consultation from the DHHS Financial Services Center and the DHHS Commissioner’s Office.

Maine DHHS has produced this plan to meet the requirements for receiving Title XX Social Services Block Grant (SSBG) funds and to facilitate public comment on the services to be supported by Title XX funds.

The goal of providing social services is to help families and individuals with challenges that threaten their well-being or their ability to function self-sufficiently. Input from consumers, community leaders, providers, and citizens is a critical component to maintaining a viable network of social services. Maine DHHS places a three-day public notice in the Kennebec Journal, notifying Maine citizens of the posting of the Draft Report and seeking comments/feedback.

In accordance with Section 2004 (U.S.C. 1397c), the Maine Social Services Block Grant (SSBG) Pre-Expenditure Report (Intended Use Plan) Federal Fiscal Year 2020 was published and made electronically available for public comment and review July 16th through August 15th on the State of Maine DHHS website at https://www.maine.gov/dhhs/ocfs/policy.shtml#plans. A public notice requesting comment was placed in the Kennebec Journal July 16, 17, and 18, 2019. See Appendix A.

Comments/feedback regarding the Draft Report/Plan were submitted to Christa Elwell via email at christa.elwell@maine.gov, via fax at (207) 287-6156, or via mail at 2 Anthony Ave., Augusta, ME 04333. Comments/Feedback were accepted until August 15, 2019, at 5pm Eastern Standard Time.

IV. Narrative

A. Administrative Operations

1. State Administrative Agency

Agency Designated to Administer SSBG Program:
Maine Department of Health and Human Services (MDHHS)

Vision
Maine people living safe, healthy, and productive lives.

Foundational Values
Honesty, Respect, Integrity, Responsibility, Accountability, Compassion, Empathy, and Fairness.

Guiding Principles
- Treat consumers with dignity and respect.
- Deliver services that are individualized, family-centered, easily accessible, preventative, independence-oriented, interdisciplinary, collaborative, evidence-based and consistent with best and promising practices.
• Value and support departmental staff as a critical connection to the consumer.
• Engage staff, stakeholders, providers and customers in a collaborative partnership that continuously seeks excellence in service design and delivery.
• Balance centralized accountability with regional flexibility.
• Align systems, actions, and values toward a common vision.

Goals
• Protect and enhance the health and well-being of Maine people.
• Promote independence and self-sufficiency.
• Protect and care for those who are unable to care for themselves.
• Provide effective stewardship for the resources entrusted to the department.

Outcomes
• High Performing Staff
• Excellent Provider Partnerships
• Integrated Services
• Superior Customer Service
• Efficient and Effective Administration

Most recent strategic plan can be reviewed here: http://www.maine.gov/dhhs/documents/DHHS-Strategic-Plan.pdf

Maine Department of Health and Human Services’ (MDHHS) SSBG grant administration occurs within the Office of Child and Family Services’ (OCFS) Operations Unit. The Business Services Manager is the Grant Administrator and coordinates the programmatic and financial management and monitoring across the Department. Monitoring at the individual service level is conducted throughout MDHHS by the service area’s respective program manager(s). OCFS works closely with all program managers to ensure coordination, as well as coordinating with MDHHS’ Financial Services Center regarding financial management. OCFS also works with the Division of Contract Management Services in procurement of all contracted services.

2. State Offices/Departments

Below are descriptions of MDHHS Offices where Title XX funds are intended to be allocated:

Maine Center for Disease Control and Prevention (MeCDC) - http://www.maine.gov/dhhs/mecdcm
Maine Center for Disease Control and Prevention (MeCDC) has a vision for a strong, safe, and healthy Maine. Its mission is to provide the leadership, expertise, information, and tools to assure conditions in which all Maine people can be healthy. MeCDC accomplishes this through its programs within its Division of Environmental Health, Division of Infectious Disease, Division of Disease Prevention, Division of Public Health Systems, and Office of Health Equity.

Maine Office of Aging and Disability Services (OADS) - http://www.maine.gov/dhhs/oads/
The Office of Aging and Disability Services (OADS) supports Maine's older and disabled adults by providing Adult Protective, Brain Injury, Other Related Conditions, Intellectual and Developmental Disability, Long Term Care, and Aging and Community services to the people of Maine.

OADS coordinates the programs and benefits to assure they operate consistent with the state and federal policies and the Maine Department of Health and Human Services' goals. Its vision is promoting individual dignity through respect, choice, and support for all adults. Its mission is to promote the highest level of independence, health and safety of older citizens, vulnerable adults and adults with disabilities.


The Office of Child and Family Services (OCFS) supports Maine's children and their families by providing Children's Behavioral Health, Child Welfare, Early Intervention and Prevention Services, and Operations. Its vision is that Maine children can count on communities promoting safety, resiliency, and the well-being of their families. Its mission is to protect the vulnerable by promoting a collaborative, efficient, accountable and consistent service array which encourages recovery, resilience, and growth in children and families.

*Children's Behavioral Health Services* focus on behavioral health treatment and services for children from birth up to their 21st birthday. Services include providing information and assistance with referrals for children and youth with developmental disabilities/delays, intellectual disability, Autism Spectrum Disorders, and mental health disorders.

*Child Welfare* seeks safety, well-being, and permanent homes for children, working with professionalism and respecting the dignity of all families. Child abuse reports are investigated on behalf of Maine communities, working to keep children safe and to guide families in creating safe homes for children.

*Early Intervention and Prevention Services* seek to promote the health, well-being, and safety of children and families by reducing the risk and effect of adverse childhood experiences (such as neglect, trauma, or exposure to violence). Administering best practice services that create a community of caring for intergenerational members focused on increasing protective factors such as health, education, safety promotion, social connections and family strengthening supports.

*Operations* perform a variety of functions that assist OCFS managers, supervisors, and staff in managing their performance, as well as programs that assist the children and families they serve. Their mission is to provide quality services in the areas of administration, finance, contracting, quality improvement, and information services to all OCFS programs. They achieve this by being efficient, effective, and customer-service focused.

**Maine Office of Substance Abuse and Mental Health Services (SAMHS) - [http://www.maine.gov/dhhs/samhs/](http://www.maine.gov/dhhs/samhs/)**

The Maine Office of Substance Abuse and Mental Health Services (SAMHS) is the single state administrative authority responsible for the planning, development, implementation, regulation, and evaluation of substance abuse and mental health.

SAMHS provides leadership in substance abuse and mental health prevention, intervention, treatment, and recovery. Its goal is to enhance the health and safety of Maine citizens through the reduction of the overall impact of mental illness and substance use, abuse, and dependency.
B. Fiscal Operations

1. Criteria for Distribution
The distribution of SSBG funds is influenced by many factors, such as the availability of other federal, state and local funds; the availability of services from other federal or state agencies, private non-profit agencies, local agencies or family members; and the priorities and strategic plan of MDHHS.

2. Planning Process for Use and Distribution of Funds
Temporary Assistance to Needy Families' (TANF) regulations authorize the use of up to 10% of a state's TANF grant to deliver programs pursuant to Title XX of the Social Security Act.

TANF-transferred SSBG funds will support OCFS' Foster Care Services as described in this report, subject to the federal requirement that TANF funds transferred to SSBG shall be used only for programs and services to children and their families whose income is below 200% of the federal income poverty guidelines. The Department is estimating transfer of $7,786,309.

3. Financial Operating System
The State of Maine has two indirect cost allocation agreements that affect the accounts within Maine Department of Health and Human Services (MDHHS). These two allocation agreements are a Statewide Cost Allocation agreement (Sta-Cap) and a Departmental Indirect Cost Allocation Plan (Di-Cap, PACAP). These two plans pay for entirely different services, so the underlying costs that make up the negotiated plans are entirely separate.

Sta-Cap is known as a Central Services Cost Allocation Plan. This plan is rate-based and pays for central services, such as Bureau of Budget, State Controller's Office, utility costs for State-owned office buildings, and other statewide services. The Sta-Cap rate is negotiated yearly with Cost Allocation Services of the federal DHHS. The approved rate for MDHHS for SFY 2020 (July 2019-June 2020) is 4.586%. The calculation is the 4.586% multiplied by expenditures eligible for allocations. Eligible expenditures include all expenditures except for pass-through money, direct services to the affected public, capital expenditures, and bank fees.

Di-Cap is known as a Public Assistance Cost Allocation Plan (PACAP). This plan is not a rate-based plan but based on actual administrative expenditures. Costs are broken up into cost pools, which for DHHS are the accounting units. Each unit has a cost pool that is allocated based on an approved allocation method. All units within DHHS have an assigned allocation method. There are two types of allocation methods: Direct and Indirect methods. Direct methods are costs that can be easily identified to the program they benefit. In this case the Direct Method would be “Direct to Social Services Block Grant.” Indirect methods are costs that benefit multiple programs and are not easily identified.

Since the PACAP is based on actual expenditures, the amount of Di-Cap is estimated based on the prior year's expenditures for the indirect cost pools. The two primary drivers of indirect costs for OCFS grants (excluding Title IV-E) include Head Count and Contract Count.
C. Program Operations

1. **SSBG Statutory Goals the State Plans to Achieve**
   In accordance with SSBG legislation, the Maine Department of Health and Human Services (MDHHS) makes available services intended to:

   1. Assist individuals in achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency;
   2. Assist individuals in achieving or maintaining self-sufficiency, including reduction or prevention of dependency;
   3. Prevent or remedy neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserve, rehabilitate or reunite families;
   4. Prevent or reduce inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care; and
   5. Secure referral or admission for institutional care when other forms of care are not appropriate, or provide services to individuals in institutions.

2. **Characteristics of Individuals to be Served**

**DEFINITION OF FAMILY**
For purposes of determining financial eligibility, a family is defined as: A group of related or non-related individuals, who are not residents of an institution or boarding house, but who are living as one economic unit. An economic unit consists of all individuals who share a dwelling unit and either pool income or share expenses in common. Children in the care or custody of MDHHS are exempted from the above definition of family and are considered a family of one.

**DEFINITION OF CHILD**
An individual less than 18 years of age.

**DEFINITION OF ADULT**
A person who has attained the age of eighteen (18).

**ELIGIBILITY FOR SERVICES**
While the federal legislation creating SSBG repealed the client income eligibility requirements of the previous Title XX program, the State of Maine has retained the concept of income eligibility when maintenance in the community and rehabilitation are the goals to which services are directed. MDHHS through its experience in the social, health, and financial assistance fields regarding individuals with low incomes is acutely aware of the challenges many of these individuals encounter in their attempts to strengthen themselves financially and socially. MDHHS continues to direct its programs and services to those individuals least able to access needed services on their own.

Further, MDHHS has determined that particular groups of individuals are to be provided SSBG-funded services regardless of income level. Individuals receiving services within the framework of the MDHHS’ Child Protective Services are eligible for service without regard to income when part of an MDHHS case plan. In addition, sexual assault services, domestic violence services, and nutrition services for the elderly are available without regard to income.
Except as noted in this section, MDHHS' Social Services Block Grant-funded services and related state-funded services will retain income eligibility requirements for FY2020. Persons receiving assistance through the Temporary Assistance for Needy Families (TANF) or Supplemental Security Income (SSI) programs are financially eligible for needed services based on their income maintenance status. Other persons whose gross family income does not exceed the limits set forth in this report are also financially eligible to receive needed services.

In all circumstances, MDHHS assures that there shall be no discrimination against any applicant for, or recipient of, services on the basis of race, color, sex, religious creed, ancestry, national origin, or any other factors specified in Title IV of the Civil Rights Act of 1964, (42 U.S.C. 2000d); Section 504 of the Rehabilitation Act of 1973, et.seq.; the Age Discrimination Act of 1975, et.seq., and any applicable state statutes.

### 2019 Poverty Guidelines for the 48 Contiguous States and the District of Columbia

<table>
<thead>
<tr>
<th>Persons in Family/Household</th>
<th>Poverty Guideline</th>
</tr>
</thead>
<tbody>
<tr>
<td>For families/households with more than 8 persons, add $4,420 for each additional person.</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>$12,490</td>
</tr>
<tr>
<td>2</td>
<td>$16,910</td>
</tr>
<tr>
<td>3</td>
<td>$21,330</td>
</tr>
<tr>
<td>4</td>
<td>$25,750</td>
</tr>
<tr>
<td>5</td>
<td>$30,170</td>
</tr>
<tr>
<td>6</td>
<td>$34,590</td>
</tr>
<tr>
<td>7</td>
<td>$39,010</td>
</tr>
<tr>
<td>8</td>
<td>$43,430</td>
</tr>
</tbody>
</table>

**SOURCE:** https://aspe.hhs.gov/poverty-guidelines

**AVAILABILITY OF SERVICES**

SSBG services are purchased from private, community programs and are available statewide. Because the need for services often exceeds the limited funds available for service, agencies may establish waiting lists, priority systems, or limits on the length of or amount of services that an individual may receive. A list of agencies with which MDHHS contracts for services are available upon request from the Office of Child and Family Services (OCFS) or the MDHHS Division of Contract Management.

### 3. Types of Activities to be Supported

This report highlights the specific programs and services which MDHHS has determined be made available in FFY2020, to assist individuals in attaining the five federal block grant program goals. OCFS in its administration of multiple social services programs approaches the funding of these programs through the coordinated use of federal, state, and local funds. SSBG funds are utilized in conjunction with legislatively appropriated state social
services funds and other federal funding sources, to meet a broad range of client needs identified within service programs.

**CATALOG OF PROGRAMS and SERVICES**
The following services and programs will be funded, in whole or in part, with SSBG funds during FFY2020. The following list is organized by the federal SSBG service category titles and the corresponding MDHHS service area titles.

<table>
<thead>
<tr>
<th>SSBG Service Category</th>
<th>State Administered Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment Services</td>
<td>Supported Employment</td>
</tr>
<tr>
<td>Family Planning Services</td>
<td>Family Planning</td>
</tr>
<tr>
<td>Foster Care Services - Children</td>
<td>Services for Families and their Children that are in Foster Care</td>
</tr>
<tr>
<td>Home-Based Services</td>
<td>Consumer Directed Home Based Care, Home Based Care, and</td>
</tr>
<tr>
<td></td>
<td>Independent Support Services</td>
</tr>
<tr>
<td>Home-Delivered Meals</td>
<td>Nutrition Services</td>
</tr>
<tr>
<td>Prevention and Intervention</td>
<td>Domestic Violence Services/ Sexual Assault Services</td>
</tr>
<tr>
<td>Transportation Services</td>
<td>Transportation</td>
</tr>
</tbody>
</table>

Charts on the following pages provide overviews of each MDHHS-administered program/service to be provided. For each service, charts include the service description, the method of delivery, service/program objective(s), service eligibility criteria, the service budget allocations and the projected number of clients to be served.

The method of delivery indicated on the charts reflects the manner in which MDHHS offers each service. Services made available through private, community agencies are purchased through formal agreements between the Department and each service provider agency.

Eligibility criteria cited on the charts reflects eligibility for SSBG-related services based upon an individual’s inclusion in particular target groups, income maintenance status, individual’s presenting problem and/or need, and/or general income criteria. Unless noted elsewhere in this report, the eligibility criteria information for the services provided by private agencies applies to that portion of the services these agencies provide. These are included in their MDHHS’ service agreements that contain SSBG funding, other federal funds, related state funds, and any required local matching funds. These private agencies may provide services through other funding arrangements to persons other than those described in the following charts.

The service funding information presented on the following pages reflect only those other federal and state funds directly related to MDHHS service provision. Unless noted in the charts on the following pages, services are available on a statewide basis.
EMployment Services
Supported Employment

Program/Service Definition: Supported Employment is an evidenced-based practice to assist adult mental health consumers obtain employment in the community, maintain employment, and improve their employment-related skills. This service is provided by certified Employment Specialists who receive training to maintain their certification.

Method of Delivery: Purchased - Private agencies
Contracted through MDHHS, Office of Substance Abuse and Mental Health Services

Service Objective: Certified Employment Specialists provide supported employment services in order to assist individuals in becoming employed and maintaining employment. These services are integrated with behavioral health services. Employment Services are included as a core service in the Consent Decree. Additionally, workforce development services ensure the system has capacity of trained and certified employment specialists.

Client Eligibility:
Supported Employment Services are provided to individuals who are interested in becoming employed who meet the following eligibility requirement of the MaineCare Benefits Manual:
- Specific Requirements, as stated in 10-144 C.M.R. ch. 101, ch. 2, § 17.02-3; or
- Specific Requirements, as stated in 10-144 C.M.R. ch. 101, ch. 2, § 92.03-2.

FFY2020 Service Budget Allocation:

<table>
<thead>
<tr>
<th>SSBG Funds</th>
<th>Funds Transferred into SSBG</th>
<th>Other Federal &amp; State Funds</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>$182,045</td>
<td>$0</td>
<td>$544,734</td>
<td>$726,779</td>
</tr>
</tbody>
</table>

FFY2020 Service Recipient Projections:

<table>
<thead>
<tr>
<th>Children</th>
<th>Adults Age 59 Years &amp; Younger</th>
<th>Adults Age 60 Years &amp; Older</th>
<th>Adults of Unknown Age</th>
<th>Total Adults</th>
<th>Total</th>
<th>Actual (A), Estimated (E), Sampled (S) data?</th>
<th>Duplicated (D) or Unduplicated (U) Counts?</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>320</td>
<td>40</td>
<td>5</td>
<td>365</td>
<td>365</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>
FAMILY PLANNING SERVICES
Family Planning

Program/Service Definition: Family Planning services include screening and treatment of Sexually Transmitted Infections (STIs), cancers related to the reproductive system, intimate partner violence, other related health concerns, and related educational and prevention services.

Method of Delivery: Contracted through MDHHS, Maine Center for Disease Control and Prevention services are delivered through seventeen (17) directly managed sites, one (1) directly managed combined family planning/primary care site, four (4) sites operated by a sub-grantee, twenty (20) sites operated by Federally Qualified Health Centers (FQHCs), and five (5) sites operated by School-based Health Centers (SBHCs) by providing them with funding, contraceptives, and/or training to increase geographic access to Family Planning services.

Service Objectives:
- Increase the percentage of already sexually active teens in Maine who use a Highly Effective Method of Birth Control.
- Increase the percentage of women aged twenty (20) and over, who are currently trying to avoid pregnancy and use one of these methods of birth control: IUDs, implants, or injections.
- Increase the percentage of females under the age of twenty-five (25) who are screened for chlamydia.

Client Eligibility: All men and women of child bearing age, regardless of income. A sliding fee scale is utilized in which fees are based upon gross income and household size relative to a percentage of the Federal Poverty Limit.

-------------------------------------------------------------

**FFY2020 SERVICE BUDGET ALLOCATION:**

<table>
<thead>
<tr>
<th>SSBG Funds</th>
<th>Funds Transferred into SSBG</th>
<th>Other Federal &amp; State Funds</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>$900,000</td>
<td>$0</td>
<td>$79,000</td>
<td>$979,000</td>
</tr>
</tbody>
</table>

**FFY2020 SERVICE RECIPIENT PROJECTIONS:**

<table>
<thead>
<tr>
<th>Children</th>
<th>Adults Age 59 Years &amp; Younger</th>
<th>Adults Age 60 Years &amp; Older</th>
<th>Adults of Unknown Age</th>
<th>Total Adults</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>5,000</td>
<td>16,315</td>
<td>1,685</td>
<td>0</td>
<td>18,000</td>
<td>23,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Actual (A), Estimated (E), Sampled (S) data?</th>
<th>Duplicated (D) or Unduplicated (U) Counts?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>X</td>
</tr>
<tr>
<td>E</td>
<td>X</td>
</tr>
<tr>
<td>S</td>
<td>X</td>
</tr>
</tbody>
</table>

9
FOSTER CARE SERVICES - CHILDREN

Program/Service Definition:
Services are provided to children and their families that are involved in Maine's foster care system, as well as older youth participating in extended care agreements. Foster care services include, but are not limited to, services to support reunification of youth in care with their parents, temporary emergency shelter, child care, and transportation.

Method of Delivery: Purchased - private agencies
Contracted through MDHHS, Office of Child and Family Services

Service Objectives:

- To provide services to children in foster care to reunify with their families or other permanent outcome.

Client Eligibility:

- Must meet 200% of the Federal Poverty Limit.
- Children and families involved in child protective services.

FFY2020 SERVICE BUDGET ALLOCATION:

<table>
<thead>
<tr>
<th>SSBG Funds</th>
<th>Funds Transferred into SSBG</th>
<th>Other Federal &amp; State Funds</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0</td>
<td>$7,786,309</td>
<td>$45,000,000</td>
<td>$52,786,309</td>
</tr>
</tbody>
</table>

FFY2020 SERVICE RECIPIENT PROJECTIONS:

<table>
<thead>
<tr>
<th>Children Age 59 Years &amp; Younger</th>
<th>Adults Age 60 Years &amp; Older</th>
<th>Adults of Unknown Age</th>
<th>Total Adults</th>
<th>Total</th>
<th>Actual (A), Estimated (E), Sampled (S) data?</th>
<th>Duplicated (D) or Unduplicated (U) Counts?</th>
</tr>
</thead>
<tbody>
<tr>
<td>10,000</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>10,000</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>
HOME-BASED SERVICES
Consumer Directed Home-Based Care, Home-Based Care, and Independent Support Services

Program/Service Definition:
Consumer Directed Home-Based Care (CDHBC) delivers services to elders and adults with disabilities that allow them to maximize independent living opportunity at home, to remain in the community, and avoid or delay placement in higher cost settings. Consumer Directed Home-Based Care services include the following: service coordination, personal assistance services, transitional services, transportation, and personal emergency response (assistive technology). Home-Based Care (HBC) serves individuals who are at greatest risk of institutionalization through the provision of service coordination, personal care, nursing, therapies, respite, adult day health, home modifications, personal emergency response (assistive technology), and limited transportation to activities covered in the plan of care. Independent Support Services (ISS) deliver services to individuals assessed as needing assistance at home with Independent Activities of Daily Living (IADL). Activities supported include meal preparation, light household cleaning, laundry, grocery shopping, and limited transportation.

Method of Delivery: 
Purchased – private agencies
Contracted through MDHHS, Office of Aging and Disability Services

Service Objectives:
The overall goal is to assist eligible consumers with services needed to avoid or delay placement in higher cost settings. Consumers receiving Home-Based Care services will retain or increase their level of independent living, receiving the quality and quantity of services needed to remain at home.

Client Eligibility:
- The Assessing Services Agency (ASA) conducts a face-to-face assessment to determine medical eligibility and the need for CDHBC and HBC services covered.
- The ASA develops an authorized plan of care that specifies all services to be delivered based on the assessment, within the service-level boundaries established in the policy referenced above.
- The contracted Provider of ISS conducts a face-to-face assessment to determine medical eligibility and the need for ISS.
- Reassessments which follow the same procedures are conducted annually or sooner when the client’s medical condition changes.

<table>
<thead>
<tr>
<th>FFY2020 SERVICE BUDGET ALLOCATION:</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSBG Funds</td>
</tr>
<tr>
<td>$2,272,238</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FFY2020 SERVICE RECIPIENT PROJECTIONS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
</tr>
<tr>
<td>0</td>
</tr>
<tr>
<td>Actual (A), Estimated (E), Sampled (S) data?</td>
</tr>
<tr>
<td>A</td>
</tr>
<tr>
<td>x</td>
</tr>
</tbody>
</table>
HOME-DELIVERED MEALS
Nutrition Services

Program/Service Definition:
Home-Delivered Meals provide a hot meal that includes one third the minimum daily adult requirements and may be supported by nutritional education, counseling, and socialization. Meals are delivered to the residence of individuals who are homebound.

Method of Delivery: Purchased – private agencies
Contracted through MDHHS, Office of Aging and Disability Services

Service Objectives:

- To prevent institutionalization, malnutrition, and feelings of isolation of adults living in the community.

Client Eligibility:

- Adults in public guardianship and active adult protective cases, when part of the Department case plan.
- Elderly persons who are Area Agency on Aging case management clients, when part of a case plan.
- Physically handicapped adults and elderly individuals residing in the community.

<table>
<thead>
<tr>
<th>SSBG Funds</th>
<th>Funds Transferred into SSBG</th>
<th>Other Federal &amp; State Funds</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>$710,793</td>
<td>$0</td>
<td>$2,887,373</td>
<td>$3,598,166</td>
</tr>
</tbody>
</table>

FFY2020 SERVICE BUDGET ALLOCATION:

<table>
<thead>
<tr>
<th>Children</th>
<th>Adults Age 59 Years &amp; Younger</th>
<th>Adults Age 60 Years &amp; Older</th>
<th>Adults of Unknown Age</th>
<th>Total Adults</th>
<th>Total Actual (A), Estimated (E), Sampled (S) or Unduplicated (U) Counts?</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>5,000</td>
<td>5,000</td>
<td>X</td>
</tr>
</tbody>
</table>
PREVENTION and INTERVENTION
Domestic Violence and Sexual Assault Services

Program/Service Definition:
Domestic Violence Resource Centers (DVRC’s) and Sexual Assault Support Centers (SASCs) offer an array of services statewide for victims of human trafficking, and/or domestic, dating, and/or sexual violence, including, but not limited to: advocacy and information through a 24-hour help line, temporary emergency shelter and transitional housing (DVRC’s only), specialized programming for children exposed to domestic and/or sexual violence, school and community-based outreach and education, court advocacy, medical accompaniment, and support groups. There is also a Child Protective Services-Domestic Violence Liaison located within the eight (8) district offices.

There is a Children’s Advocacy Center (CAC) located within each of the eight (8) districts. The CAC’s mission is to promote the healing of child victims of sexual abuse by providing a strong community response to the investigation, treatment, and prevention of child sexual abuse. Referrals to CAC’s are only accepted by law enforcement or CPS.

Method of Delivery: Purchased - Private agencies
Contracted through MDHHS, Office of Child and Family Services

Service Objective:
- To provide advocacy and support to victims of human trafficking, domestic, dating, and/or sexual violence and their affected family members.

Client Eligibility:
- Without regard to income, victims of human trafficking, domestic, dating, and/or sexual violence and their affected family members.

<table>
<thead>
<tr>
<th>FFY2020 SERVICE BUDGET ALLOCATION:</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSBG Funds</td>
</tr>
<tr>
<td>$857,631</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FFY2020 SERVICE RECIPIENT PROJECTIONS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
</tr>
<tr>
<td>Duplicated (D) or Unduplicated (U) Counts?</td>
</tr>
<tr>
<td>Children</td>
</tr>
<tr>
<td>Duplicated (D) or Unduplicated (U) Counts?</td>
</tr>
<tr>
<td>2,100</td>
</tr>
</tbody>
</table>
TRANSPORTATION SERVICES

Program/Service Definition:
Transportation services consist of the provision of or arrangement for the conveyance of individuals from one location to another via means of public and/or private vehicle.

Method of Delivery: (Purchased - private agencies)
Contracted through MDHHS, Office of Child and Family Services and Office of Substance Abuse and Mental Health Services

Service Objective:
- To enable persons who have no other reasonable means of transportation available to access necessary and critical social and medical services.

Client Eligibility:
- When division financial eligibility standards are met, the following groups are eligible: elderly persons at risk of institutionalization or needing preventive services; physically handicapped persons; persons with intellectual disabilities living in the community; persons with mental illness living in the community; and families with low incomes that have medical, social, and employment needs.

- Consumers of mental health services who meet MaineCare Benefits Manual Section 17 eligibility requirements, to participate in educational, employment, social, and recreational opportunities as identified in their treatment plan as part of their planned recovery. Such services include only those which are not covered by the MaineCare non-emergency medical transportation program, which assists qualified consumers with mental health needs with access to medical, education, employment, and social services. The Bates v. DHHS Consent Decree requires this service be provided.

FFY2020 SERVICE BUDGET ALLOCATION:

<table>
<thead>
<tr>
<th>SSBG Funds</th>
<th>Funds Transferred into SSBG</th>
<th>Other Federal &amp; State Funds</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,238,320</td>
<td>$0</td>
<td>$3,350,795</td>
<td>$4,589,115</td>
</tr>
</tbody>
</table>

FFY2020 SERVICE RECIPIENT PROJECTIONS:

<table>
<thead>
<tr>
<th>Children</th>
<th>Adults Age 59 Years &amp; Younger</th>
<th>Adults Age 60 Years &amp; Older</th>
<th>Adults of Unknown Age</th>
<th>Total Adults</th>
<th>Total</th>
<th>Actual (A), Estimated (E), Sampled (S) data?</th>
<th>Duplicated (D) or Unduplicated (U) Counts?</th>
</tr>
</thead>
<tbody>
<tr>
<td>8,000</td>
<td>310</td>
<td>70</td>
<td>12,000</td>
<td>12,380</td>
<td>20,380</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

14
Maine Department of Health & Human Services Social Services Block Grant
Summary of Services and Projected Funding

<table>
<thead>
<tr>
<th>Service Categories</th>
<th>SSBG Funds</th>
<th>SSBG Transfer*</th>
<th>Other Federal &amp; State Funds</th>
<th>Total Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment Services</td>
<td>$182,045</td>
<td>$0</td>
<td>$544,734</td>
<td>$726,779</td>
</tr>
<tr>
<td>Family Planning</td>
<td>$900,000</td>
<td>$0</td>
<td>$79,000</td>
<td>$979,000</td>
</tr>
<tr>
<td>Foster Care Services-Children</td>
<td>$0</td>
<td>$7,786,309</td>
<td>$45,000,000</td>
<td>$52,786,309</td>
</tr>
<tr>
<td>Home-Based Services</td>
<td>$2,272,238</td>
<td>$0</td>
<td>$15,704,465</td>
<td>$17,976,703</td>
</tr>
<tr>
<td>Home-Delivered Meals</td>
<td>$710,793</td>
<td>$0</td>
<td>$2,887,373</td>
<td>$3,598,166</td>
</tr>
<tr>
<td>Prevention &amp; Intervention</td>
<td>$857,631</td>
<td>$0</td>
<td>$14,596,081</td>
<td>$15,453,712</td>
</tr>
<tr>
<td>Transportation Services</td>
<td>$1,238,320</td>
<td>$0</td>
<td>$3,350,795</td>
<td>$4,589,115</td>
</tr>
<tr>
<td><strong>SERVICE TOTAL</strong></td>
<td><strong>$6,161,027</strong></td>
<td><strong>$7,786,309</strong></td>
<td><strong>$82,162,448</strong></td>
<td><strong>$96,109,784</strong></td>
</tr>
</tbody>
</table>

*Transferred from TANF

<table>
<thead>
<tr>
<th>SSBG Funds</th>
<th>$6,161,027</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSBG Transfer*</td>
<td>$7,786,309</td>
</tr>
<tr>
<td>SSBG Subtotal</td>
<td>$13,947,336</td>
</tr>
<tr>
<td>SSBG Administration</td>
<td>$325,178</td>
</tr>
<tr>
<td><strong>TOTAL SSBG</strong></td>
<td><strong>$14,272,514</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Service Categories</th>
<th>Total Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment Services</td>
<td>365</td>
</tr>
<tr>
<td>Family Planning</td>
<td>23,000</td>
</tr>
<tr>
<td>Foster Care Services-Children</td>
<td>10,000</td>
</tr>
<tr>
<td>Home-Based Services</td>
<td>4,300</td>
</tr>
<tr>
<td>Home-Delivered Meals</td>
<td>5,000</td>
</tr>
<tr>
<td>Prevention &amp; Intervention</td>
<td>19,950</td>
</tr>
<tr>
<td>Transportation Services</td>
<td>20,380</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>82,995</strong></td>
</tr>
</tbody>
</table>
V. Pre-Expenditure Reporting Form

The program period reflected in this report is October 1, 2019, through September 30, 2020, the Federal Fiscal Year 2020 (FFY20). In FFY20, Maine plans to spend its entire anticipated allotment of federal funds under the SSBG Program.

Pre-expenditure report is available at: https://www.maine.gov/dhhs/ocfs/policy.shtml#plans
VI. Appendices

Appendix A: Documentation of Public Inspection
Appendix B: Certifications
Appendix C: Proof of Audit
Appendix D: SF 424M - Available at: https://www.main.gov/dhhs/ocfs/policy.shtml#plans
APPENDIX A: DOCUMENTATION OF PUBLIC INSPECTION

PUBLIC NOTICE
Issue Date: July 16, 2019

MAINE DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC COMMENT ON THE STATE OF MAINE SOCIAL SERVICES BLOCK GRANT (SSBG) PLAN
OCTOBER 1, 2019 – SEPTEMBER 30, 2020

The Department of Health and Human Services requests public comment on the above-referenced plan. A copy of the proposed plan is available for public inspection on the Maine.gov website at: https://www.maine.gov/dhhs/ocfs/policy.shtml#plans

The Department will accept written comments on the plan sent to any of the following addresses:

E-mail: Christa.Elwell@Maine.gov

Fax: (207) 287-6156

Mail: Maine Department of Health and Human Services
  Office of Child and Family Services
  ATTN: Christa Elwell
  2 Anthony Avenue, SHS 11
  Augusta, ME 04333-0011

Written comments should be sent, so the Department will receive them before 5:00pm, August 15, 2019, and should include contact information for the person providing comments, as well as the name of the organization that person represents, if applicable.
APPENDIX B: CERTIFICATIONS (REQUIRED)

CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988: 45 CFR Part 76, Subpart. F. Sections 76.630(c) and (d)(2) and 76.645(a)(1) and (b) provide that a Federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For the Department of Health and Human Services, the central pint is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

Certification Regarding Drug-Free Workplace Requirements (Instructions for Certification)
1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.

3. For grantees other than individuals, Alternate I applies.

4. For grantees who are individuals, Alternate II applies.

5. Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.

6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).

7. If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph five).

8. Definitions of terms in the No procurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

*Controlled substance* means a controlled substance in Schedules I through V of the Controlled
Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

*Conviction* means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

*Criminal drug statute* means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

*Employee* means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All direct charge employees; (ii) All indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) Temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of sub recipients or subcontractors in covered workplaces).

**Certification Regarding Drug-Free Workplace Requirements**

Alternate I. (Grantees Other Than Individuals)

The grantee certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an ongoing drug-free awareness program to inform employees about --

(1) The dangers of drug abuse in the workplace;

(2) The grantee's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will --

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency in writing, within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on
whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted --

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

(B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)
2 Anthony Ave., Augusta, Maine 04330 Kennebec County

Check if there are workplaces on file that are not identified here.
Alternate II. (Grantees Who Are Individuals)

(a) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant;

(b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.

Bethany L. Hamm
Deputy Commissioner
Title

Maine Department of Health and Human Services
Organization
CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

The Pro-Children Act of 2001, 42 U.S.C. 7181 through 7184, imposes restrictions on smoking in facilities where Federally-funded children’s services are provided. HHS grants are subject to these requirements only if they meet the Act’s specified coverage. The Act specifies that smoking is prohibited in any indoor facility (owned, leased, or contracted for) used for the routine or regular provision of kindergarten, elementary, or secondary education or library services to children under the age of 18. In addition, smoking is prohibited in any indoor facility or portion of a facility (owned, leased, or contracted for) used for the routine or regular provision of federally funded health care, day care, or early childhood development, including Head Start services to children under the age of 18. The statutory prohibition also applies if such facilities are constructed, operated, or maintained with Federal funds. The statute does not apply to children’s services provided in private residences, facilities funded solely by Medicare or Medicaid funds, portions of facilities used for inpatient drug or alcohol treatment, 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 per violation and/or the imposition of an administrative compliance order on the responsible entity.

Bethany L. Hamm
Deputy Commissioner
Title
Maine Department of Health and Human Services
Organization
CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

Certification Regarding Debarment, Suspension, and Other Responsibility Matters—Primary Covered Transactions

instructions for Certification

1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.

2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency’s determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

5. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.

6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.

7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Non procurement Programs.

9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these Instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment...
under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

**********

Certification Regarding Debarment, Suspension, and Other Responsibility Matters--Primary Covered Transactions

(1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
   (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;
   (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
   (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
   (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

**********

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transactions

Instructions for Certification
1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that, [([Page 33043])] should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared
ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the
department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause
titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion—Lower Tier Covered
Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier
covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier
covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended,
ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A
participant may decide the method and frequency by which it determines the eligibility of its principals. Each
participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Non
procurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order
to render in good faith the certification required by this clause. The knowledge and information of a participant is
not required to exceed that which is normally possessed by a prudent person in the ordinary course of business
dealings.

9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered
transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment
under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this
transaction, in addition to other remedies available to the Federal Government, the department or agency with
which this transaction originated may pursue available remedies, including suspension and/or debarment.

**Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion—Lower Tier Covered
Transactions**

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals
is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from
participation in this transaction by any Federal department or agency.

(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification,
such prospective participant shall attach an explanation to this proposal.

Bethany L. Hamm

**Deputy Commissioner**

Title

**Maine Department of Health and Human Services**

Organization
CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:
(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all sub awards at all tiers (including subcontracts, sub grants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance
The undersigned states, to the best of his or her knowledge and belief, that:
If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Bethany L. Ham
Deputy Commissioner
Title

Maine Department of Health and Human Services
Organization
APPENDIX C: PROOF OF AUDIT (REQUIRED)

Federal regulation state that: “Each State shall, not less often than every two years, audit its expenditures from amounts received (or transferred for use) under this title...Within 30 days following the completion of each audit, the State shall submit a copy of that audit to the legislature of the State and to the Secretary.” (Sec. 2006 [42 U.S.C. 1397a, Sec. 2006]).

Provide a copy or link to the most recent audit, or a description of the audit that specifies when the audit occurred and summarizes the results of the audit.

See: http://www.maine.gov/audit/osa-reports/annual-single-audit.html