## EXHIBIT B: REQUIRED REPORTS

		EXHIBIT B: REQUIE	RED REPORT		
Report Name	Sub-reports	Citation	Frequency	Due (Calendar days unless otherwise specified)	Applicability
Attestation - Completion of	<u>305 reports</u>	enation	nequency	30 days after contract	
Auxiliary Aids Service and		Section 504, ADA		execution and July 30 annually	Yes - regardless of number of
Monitoring Plan		CFOP 60-10	Annually	thereafter	employees
Attestation - Completion of		0.01.00.10	, initiating	30 days after contract	
Risk Analysis as per HIPAA				execution and July 30 annually	
Security Rule		45 CFR § 164.308(a)(1)(ii)(A)	Annually	thereafter	Yes
Attestation - Effective		10 01 11 9 10 11000(0/(1/(1/(1/(1/	, initiating	30 days after contract	
Communication training for		Section 504, ADA		execution and July 30 annually	
direct service employees		CFOP 60-10	Annually	thereafter	Yes - if 15 or more employees
Attestation - Emergency		0.01.00.10	, initiating		
Preparedness Plan training for				30 days after contract	
staff		CFCHS Specific	Annually	execution	Yes
			, initiating	May 30 each year of the	Yes - if contracted for anything
Block Grant Report - Narrative		Template 3	Annually	contract period	EXCEPT for profit, UCF, CRS
BNET Statement of Program			, initiating	September 1 each year of the	Yes - if contracted for BNET
Costs		Guidance 12	Annually	contract period	services
			, initiating	30 days after contract	50.11005
Civil Rights Compliance		45 CFR, Part 80		execution and July 30 annually	
Checklist		CFOP 60-16	Annually	thereafter	Yes - if 15 or more employees
		0.01.00.10	, initiating	30 days after contract	
Contract Provider Property		Guidance 2		execution and July 30 annually	
Inventory Form		Template 1	Annually	thereafter	Yes
CRS Financial Report and		Guidance 27		September 1 each year of the	Yes - if contracted for CRS
reconciliation		CF-MH 1037	Annually	contract period	services
EOG/OPB Return on			,auity		
Investment - Projected				July 20 each year of the	Yes - if contracted for an EOG
Estimates		GHME1 C2-3.2.1	Annually	contract period	project
Final data submission for fiscal		0111111112-5.2.1	Annuany	July 31 each year of the	project
year end		CFCHS Specific	Annually	contract period	Yes
		ci ci i specific	Annuany	180 days after end of provider	
				fiscal year, submitted in	annually in state or federal
Independent Financial Audit		65E-14.003, FAC	Annually	accordance with Attachment II	
	includes liability, auto, and	05L-14.003, TAC	Annuany	accordance with Attachment in	Turius
	medical malpractice with DCF			30 days after contract	
	and CFCHS named as	GHME1 Section D.1		execution and ongoing upon	
Insurance Certificates			Appually		Voc
	additionally insured	CFCHS Specific	Annually	renewal of expired certificates July 30 each year of the	Yes - if CFCHS contract requires
		Tomplate 0	Annually		
Local Match Form - Actuals		Template 9	Annually	contract period	local match
				November 17 annually,	Vac if contracted for DATU
DATU Annual Danant		Cuidanas 45	A	submitted to	Yes - if contracted for PATH
PATH Annual Report		Guidance 15	Annually	https://www.pathpdx.org/	services
		0.11 45		March 1 of each year during	Yes - if contracted for PATH
PATH Intended Use Plan (IUP)		Guidance 15	Annually	the contract period	services
				September 1 each year of the	Yes - if contracted for PPG
PPG Financial Status Report		Guidance 14	Annually	contract period	services
				September 1 each year of the	Yes - if contracted for PPG
PPG Program Status Report		Guidance 14	Annually	contract period	services
Security Agreement Forms and				30 days after contract	
Training Certificates for staff				execution and July 30 annually	
that touch CFCHS data systems		CFOP 50-2	Annually	thereafter	Yes
Sliding Fee Scale - Annual	reflecting annual Federal	65E-14.018, FAC		February 1 each year of the	
Revision	Poverty Guidelines revisions	CFCHS Sliding Fee P&P	Annually	contract period	Yes
	includes:				
	Schedule of State Earnings				
	Schedule of Related Party				
	Transaction Adjustments			With Independent Financial	
	Program/Cost Center Actual			Audit. Or within 45 days of	
	Expenses & Revenues Schedule			end of provider fiscal year if no	
	Schedule of Bed-Day			Independent Financial Audit	
Special Audit Schedules	Availability Payments	65E-14.003, FAC	Annually	required.	Yes
FEP fiscal year-end financial				July 20 each year of the	Yes - if contracted for FEP
report	CF-MH 1037	CFCHS Specific	Annually	contract period	services
	Report only those incidents				
	that involve clients that are				
	funded partially or in whole by			Within 1 business day of	
Incident Report–	CFCHS or local match	CFOP 215-6	As Needed	occurrence, submitted to IRAS	Yes
Invoice Review Supporting					
Documentation			As Needed		
				30 days after contract	
				execution and ongoing upon	
Current licenses		65E-14.021, FAC	As Needed	renewal of expired licenses	Yes
Other Reports as Requested			As Needed		
Response to Monitoring					
Reports and Corrective Action					
Plans		402.7306, F.S.	As Needed	30 days after receipt of report	Yes
					Osceola Mental Health, In

## EXHIBIT B: REQUIRED REPORTS

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				Due (Calendar days unless	
Report Name	Sub-reports	Citation	Frequency	otherwise specified)	Applicability
Risk Assessment as per Breach				Within 5 business days	
Notification Rule		45 CFR §§ 164.400-414	As Needed	following a breach	Yes
				by the fifth (5th) <b>business</b> day	
				following the month of	
				services, submitted to HHS	
				Compliance Database, with	
		Section 504, ADA		copy of HHS receipt submitted	
Auxiliary Aid Service Record		CFOP 60-10	Monthly	to CFCHS	Yes - if 15 or more employees
				by the tenth (10th) day	
Behavioral Health Consultant				following the month of	
(BHC) Monthly Report		CFCHS BHC Protocol	Monthly	services, submitted to PBPS	Yes - if contracted for BHC
BNET Alternative Service		Guidance 12		by the tenth (10th) day	Yes - if contracted for BNET
Forms		Template 7	Monthly	following the month of services	
				by the tenth (10th) day	Yes - if contracted for CAT
CAT Data Report (C1)		Guidance 32	Monthly	following the month of services	
		Guidance 7	wontiny	by the tenth (10th) day	Yes - If contracted for Civil
Civil Client Information Report		DCF Request	Monthly		
Civil Client Information Report		DCF Request	Monthly	following the month of services	
Community Competency					
Restoration Training Tracking		D.05.D.		by the tenth (10th) day	Yes - If contracted for CCR
Report		DCF Request	Monthly	following the month of services	
FACT monthly census to				by the tenth (10th) day	Yes - if contracted for FACT
include waitlist		CFCHS Specific	Monthly	following the month of services	
FACT Monthly Vacant Position				by the tenth (10th) day	Yes - if contracted for FACT
Report		Guidance 16	Monthly	following the month of services	services
Family Intensive Treatment		Guidance 18		by the tenth (10th) day	Yes - if contracted for FIT
Team Services (FIT) Report		Template 17	Monthly	following the month of services	services
	includes:				
	Forensic Pre-Post				
	Commitment Diversion				
	Tracking Report				
	Forensic Individuals Waiting				
	to Return Report				
	•	Cuidanas C		houth a tractic (10th) days	
	Forensic Conditional Release			by the tenth (10th) day	Yes - if contracted for Forensic
Forensic Census Report	Report	CFOP 155-18	Monthly	following the month of services	
Grant Report - Pregnant		GHME1, Attachment I		by the tenth (10th) day	Yes - if contracted for PPW
Woman Expansion		B.1.a.(5)(n)	Monthly	following the month of services	
		GHME1, Attachment I		by the tenth (10th) day	Yes - if contracted for STR
Grant Report - STR		B.1.a.(5)(n)	Monthly	following the month of services	
Invoice Support - Outreach				by the tenth (10th) day	Yes - if contracted for Outreach
Activity Report		CFCHS Specific	Monthly	following the month of services	services
				by the tenth (10th) day	
				following the month of	
				services, submitted to	
Monthly Data		PAM 155-2	Monthly	cfchsdata.org	Yes
Narcan Monthly Summary				by the tenth (10th) day	
Report		DCF Request	Monthly	following the month of services	Ves -if distribute Narcan kits
		Der Request	wontiny		
				by the tenth (10th) day	Voc if contracted for
Drovention Data		Cuidanas 10	Monthly	following the month of	Yes - if contracted for
Prevention Data		Guidance 10	Monthly	services, submitted to PBPS	prevention services
				by the tenth (10th) day	Yes - if contracted for CAT
CAT Census		CFCHS Specific	Monthly	following the month of services	
				by the tenth (10th) day	Yes - if contracted for CAT
CAT Vacant Position Report		CFCHS Specific	Monthly	following the month of services	services
				by the eighteenth (18th) day	
				following the month of	Yes - if contracted for SOAR
SOAR Data		Guidance 9	Monthly	services, submitted to OATS	services
				by the tenth (10th) day	Yes - if contracted for MRT
MRT Census		CFCHS Specific	Monthly	following the month of services	
				by the tenth (10th) day	Yes - if contracted for MRT
MRT Vacant Position Report		CFCHS Specific	Monthly	following the month of services	
with vacant rosition report		ci cho opecilic	wonully	by the tenth (10th) day	Yes - if contracted for FEP
			Monthly	, , , ,	
FEP Invoice		CFCHS Specific	Monthly	following the month of services	
Community Competency					Yes - if contracted for
Restoration Training Tracking				by the tenth (10th) day	Competency Restoration
Report		DCF Request	Monthly	following the month of services	
				by the tenth (10th) day	Yes - if contracted for FMT
FMT Vacant Position Report		CFCHS Specific	Monthly	following the month of services	services
Child Welfare Referral Tracking				by the tenth (10th) day	Yes - if contracted for Child
Report		CFCHS Specific	Monthly		Welfare State Opioid Response
First Episode Psychosis (FEP)				by the tenth (10th) day	Yes - if contracted for FEP
Monthly Report		CFCHS Request	Monthly	following the month of services	
		ci ci i si nequest	Monthly	ionowing the month of services	
					Osceola Mental Health In

		EXHIBIT B: REQUIR	ED REPORTS	5	
Denert News	Cub reports	Citation	Freeseware	Due (Calendar days unless	A walt on billion
Report Name	Sub-reports	Citation	Frequency	otherwise specified)	Applicability
				by the tenth (10th) day	Yes- if contracted for TANF
TANF SAMH Participating Log		Guidance 16	Monthly	following the month of services	
		65E-14.021(5)(b), FAC		30 days after contract	
Cost Allocation Plan - Final		Template 14	Once	execution	Yes
		65E-14.021(5)(b), FAC		120 days before contract	
Cost Allocation Plan - Proposed		Template 14	Once	expiration	Yes
· · · · ·	includes:				
	Personnel Detail Record			120 days before contract	Yes - if annual contract amount
Fiscal Reports - Proposed	Projected Cost Center	65E-14.021(5)(e)1, FAC	Once	expiration	is over \$200,000
				30 days after contract	Yes - if CFCHS contract requires
Local Match Form - Projected		Template 9	Once	execution	local match
	includes:				
Program Description -	Organizational Profile			120 days before contract	
Proposed	Service Activity Description	65E-14.021(5)(e)1, FAC	Once	expiration	Yes
	reflecting the uniform schedule			20 days ofter contract	
Sliding Fee Scale - Original	of discounts referenced in Rule 65E-14.018, FAC	CFCHS Sliding Fee P&P	Once	30 days after contract execution	Yes
Siluing Fee Scale - Original	includes:	CFCH3 Siluling Fee P&P	Once and as	30 days after contract	Yes - if annual contract amount
Fiscal Reports - Final	Personnel Detail Record	65E-14.021(5)(e)1, FAC	Needed	execution and after any	is over \$200,000
	includes:		Once and as	30 days after contract	. ,
Program Description - Final	Organizational Profile	65E-14.021(5)(e)1, FAC	Needed	execution and 10 calendar days	Yes
Invoice Support - Form CF-MH				Quarterly by October 10,	Yes - if paid on a cost
1040		65E-14.020, FAC	Quarterly	January 10, April 10, July 10	reimbursement basis or if
				Quarterly by October 10,	
Attestation - Exception Report		CFCHS Exception Report P&P	Quarterly	January 10, April 10, July 10	Yes
			· ·		
				Quarterly by October 10,	Yes - if contracted for CRS
CRS Program Status Report		Guidance 27	Quarterly	January 10, April 10, July 10	services
EOG/OPB Return on Investment - Actuals		GHME1 C2-3.2.2	Quarterly	Quarterly by October 10, January 10, April 10, July 10	Yes - if contracted for an EOG project
FACT Ad Hoc Quarterly Report,		01111111122 3.2.2	Quarterly	Quarterly by October 10,	Yes - if contracted for FACT
Enhancement Reconciliation		Guidance 16	Quarterly	January 10, April 10, July 10	services
				Quarterly by October 10,	Yes - if contracted for PATH
PATH Summary Information		Guidance 15	Quarterly	January 10, April 10, July 10,	services
Poport of aggregate quarterily		Guidance 25		Quartarly by October 5	Voc if roquirod by Attacher
Report of aggregate quarterly NVRA activities		(form DS-DE13)	Quarterly	Quarterly by October 5, January 5, April 5, July 5	Yes - if required by Attachment I of CFCHS contract
Representative Payee			Quarterry	Quarterly by October 10,	
accounting documentation		1 CFR § 305.91-3	Quarterly	January 10, April 10, July 10	Yes - LifeStream Only
					· · ·
				Quarterly by October 10,	Yes - if contracted for FMT
FMT Quarterly Report		CFCHS Specific	Quarterly	January 10, April 10, July 10	services
		Tomplato 2	Somi Annually	February 15 and August 15	Yes - if contracted for anything
Plack Grant Banart Data		Template 2	Semi-Annually	each year of the contract	EXCEPT for profit, UCF, CRS
1			I Inon Admission	I Inon Admission and Discharge	
Block Grant Report - Data FACT Admission and Discharge Certificates			Upon Admission and Discharge of	Upon Admission and Discharge of all clients	
1		CFCHS Specific	Upon Admission and Discharge of	Upon Admission and Discharge of all clients	Yes - if contracted for FACT services Yes - if contracted for FMT
FACT Admission and Discharge			•		services
FACT Admission and Discharge Certificates		CFCHS Specific	and Discharge of	of all clients	services Yes - if contracted for FMT