		EXHIBIT B: REQUIR	RED REPORTS		
				Due (Calendar days unless	
Report Name	Sub-reports	Citation	Frequency	otherwise specified)	Applicability
Attestation - Completion of				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				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		- (,,,,,,,	•	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
		CI OF 00-10	Allitually	therealter	res - II 13 of more employees
Attestation - Emergency				20.1 6	
Preparedness Plan training for				30 days after contract	
staff		CFCHS Specific	Annually	execution	Yes
				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				September 1 each year of the	Yes - if contracted for BNET
Costs		Guidance 12	Annually	contract period	services
			•	30 days after contract	
Civil Rights Compliance		45 CFR, Part 80		execution and July 30 annually	
Checklist		CFOP 60-16	Annually	thereafter	Yes - if 15 or more employees
CHECKIST		CI OF 00-10	Allitually		res - II 13 of more employees
Company Dr. 11 5		Cuidana 2		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					
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				July 31 each year of the	p,
		CECHS Specific	Annually		Yes
year end		CFCHS Specific	Annually	contract period	
				180 days after end of provider	Yes - if receive over \$700,000
				fiscal year, submitted in	annually in state or federal
Independent Financial Audit		65E-14.003, FAC	Annually	accordance with Attachment II	funds
	includes liability, auto, and				
	medical malpractice with DCF			30 days after contract	
	and CFCHS named as	GHME1 Section D.1		execution and ongoing upon	
Insurance Certificates	additionally insured	CFCHS Specific	Annually	renewal of expired certificates	Yes
	, , , , , , , , , , , , , , , , , , , ,			July 30 each year of the	Yes - if CFCHS contract require
Local Match Form - Actuals		Template 9	Annually	contract period	local match
Local Materi Form Actuals		Template 3	Ailliually	November 17 annually,	iocai matem
				• • • • • • • • • • • • • • • • • • • •	V :6
				submitted to	Yes - if contracted for PATH
PATH Annual Report		Guidance 15	Annually	https://www.pathpdx.org/	services
				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		Galdanice 14	7 till dally	30 days after contract	SCI VICES
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			'	
Consider Audit College	,	CEE 44 002 EAC	A	Independent Financial Audit	V
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		
Documentation			As INCEUEU	20 days after contract	
				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
					Peer Support S

Behavioral Health Consultant (BICK) Monthly Report  SERF Alternative Service Guidance 12 Guidance 12 Guidance 27 Monthly Guidance 28 Monthly Guidance 29 Monthly Guidance 28 Monthly Guida			EVUIDIT D. DEOLI	IDED DEDODT	c	
Region Name  Read Ascessment at spir Brotish  Notification Rule  4 S CER 89 154 A00-114  A liveded  Notification Rule  4 S CER 89 154 A00-114  A liveded  Notification Rule  5 Section 504, ADA  Compliance Database sky  Services, submitted to HHS  Compliance Database, with  Copy of His Freezest admitted  Applicability Add Service Record  CHO FG 10  Monthly  Shape and Explanation of His Compliance Database, with  COPY FG 10  Monthly  Shape and Health Consultant  Shape and Health			EXHIBIT B. REQU	IKED KEPOKI		
Million Subjects   Million Sub	Report Name	Sub-reports	Citation	Frequency		Applicability
Section 504 ADA Auxilliary Add Service Record GPOP 60.10 Monthly Complained Sealeshee, with recombined of services, submitted to 81% Complained Sealeshee, with Complained Sealeshee, w						
Section 504 ADA	Notification Rule		45 CFR §§ 164.400-414	As Needed	<u>-</u>	Yes
Apellary Ad Service Record CPO 60-10 Moenthy Complained bashase, with C						
Compliance Database, with   Compliance Database					· ·	
Acadillary Ad Service Record CPO 60 10 Monthly C						
Ausiliary and Services Record  Behavioral Health Consultant  Benavioral Health Consultant  Benavioral Health Consultant  Belavioral Health Consultant  Belav			Section 504 ADA			
Behavioral Health Consultant (BitC) Monthly Report  CFO15 BitC Protocol  Monthly Monthly Report  Forms  Tomas  Tomas  Tomas  Guidance 12  Guidance 27  Beport  Guidance 28  Beport (CT)  Guidance 28  Guidance 38  Guidance 38  Guidance 38  Guidance 38  Guidance 38  Guidance 38  Guidance 48  Formatic Preparati  Guidance 38  Guidance 48  Formatic Preparati  Guidance 48  Formatic Commitment Diversions  Tracking Report  Formatic Commitment Diversions  Trackin	Auxiliary Aid Service Record			Monthly		Yes - if 15 or more employees
(BICK) Monthly Report  BICK Abernative Service  Guidance 12  Forms Template 7  Monthly Including the month of services services  Template 7  Monthly Including the month of services services  Template 7  Monthly Including the month of services services  Work and the month of services	,			,	by the tenth (10th) day	. ,
BREF Alternative Service Forms Template 7 Monthly Monthly BREF Alternative Service Forms Template 7 Monthly Mo	Behavioral Health Consultant				following the month of	
Template 7   Monthly   Collowing the month of services services   Very 1   Contracted for CAT   CAT Oat oa Report (C.1)   Call Guidance 32   Monthly   Callowing the month of services services   Very 1   Contracted for CAT   Call Client Information Report (C.1)   Coll Client Information R	, ,		CFCHS BHC Protocol	Monthly	· · · · · · · · · · · · · · · · · · ·	
ACT Data Report (C.1)  Guidance 32  Monthly following the month of services services  Community Competency Report REPORET REPORT REPORT REPORT REPORT REPORT REPORT REPORT REPORT REPORE						
CAT Data Report (C.)   Guidance 32   Monthly   following the month of services services   Guidance 7   By the teeth (10th) day   Ves. If contracted for CAN   CAN Data Report   CAN DEF Request   Monthly   following the month of services   Laison services   CAT monthly crans to   DCF Request   Monthly   following the month of services   Laison services   CAT monthly crans to   DCF Request   Monthly   following the month of services services   CAT monthly crans to   DCF Request   Monthly   following the month of services services   CAT monthly variant Postition   CAN Def Request   Monthly   following the month of services services   CAT monthly variant Postition   CAN Def Request   Monthly   following the month of services services   CAT monthly variant Postition   CAN Def Request   Monthly   following the month of services services   CAT monthly variant Postition   CAN Def Report   CAN Def Request   Monthly   following the month of services services   CAN Def Report   CAN Def Rep	Forms		Template 7	Monthly		
Guildient Information Report CORTMUNITY Competency Report Report RECORDINATION CONTROLLED TO CORT Request Monthly Following the month of services services Report RECORDINATION CONTROLLED TO CORT REQUEST Monthly Following the month of services services Report RECORDINATION CONTROLLED TO CORT REQUEST Monthly Following the month of services services Formatic Controlled For FACT Include waitists CPCHS Specific Monthly Following the month of services services Formatic Controlled For FACT RECORDINATION CONTROLLED TO CORT SERVICES FOR SERVI	CAT Data Papart (C1)		Guidanco 22	Monthly		
Clord Clear Information Report Restoration Training Tracking Restoration Training Tracking Report DCF Request Monthly following the month of services Liabon services PACT monthly cansus to Include waitlife ACT Monthly cansus to Include waitlife Report ACT Monthly variety Report Report Report GUIdance 16 GUIdance 16 GUIdance 17 GUIdance 18 GUIdance 18 GUIdance 18 GUIdance 18 Farmly Intensive Freatment Team Services (FIT) Report Farmly Intensive Freatment Team Services (FIT) Report Farmly Intensive Freatment Tracking Report Foremis (FIT) Report FOREMI	CAT Data Report (C1)			ivioritiny	<u>-</u>	
Community Competency	Civil Client Information Report			Monthly		
Report	· ·			,		
FACT monthly census to include waitins in CFCHS Specific Monthly following the month of services: services or fact monthly following	Restoration Training Tracking				by the tenth (10th) day	Yes - If contracted for CCR
include wallst	Report		DCF Request	Monthly	following the month of services	services
FACT Monthly Vacant Position Report  Guidance 16  Guidance 18  Template 17  Monthly  Monthly  Guidance 18  Template 17  Monthly  Following the month of services services  Includes:  Inclu	'					
Report Guidance 16 Monthly Following the month of services services Family Intensive Treatment Team Services (FIT) Report  Includes:			CFCHS Specific	Monthly		
Family intensive Treatment Team Services (FIT) Report  Includes: Forensic Pre-Post Commitment Diversion Tracking Report Forensic Individuals Waiting to Return Report Forensic Individuals Waiting to Return Report Forensic Individuals Waiting to Return Report Forensic Conditional Release Forensic Census Report Forensic Conditional Release Graft Report Pregnant GMRL_Attachment I GMRL_Att			0.11		, , , ,	
Team Services [FIT] Report    Includes	<u>'</u>			Monthly	<u>-</u>	
includies:Forensic Pre-Post Commitment Diversion Tracking ReportForensic Individuals Waiting to Return ReportForensic Consus Report ReportForensic Individuals Waiting to Return Report ReportFregnant ReportFregn	,			Monthly		
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-Forensic Individuals Waiting to Return Report -Forensic Cenditional Release Forensic Cenditional Report Forensic Cenditional Release Forensic Cenditional Report F						
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Activity Report  CFCHS Specific  Nonthly  Tollowing the month of services services  Whe tenth (10th) day following the month of services, submitted to services, submitted to Cfchsdato.org  Yes  Narcan Monthly Summary Report  DCF Request  Monthly  Tollowing the month of services To yby the tenth (10th) day following the month of services To yby the tenth (10th) day following the month of services To yby the tenth (10th) day following the month of To yes - if contracted for prevention Data  Guidance 10  Monthly  Tollowing the month of To yes - if contracted for Prevention Data  CAT Census  CFCHS Specific  Monthly  Tollowing the month of Services Tollowing the month			B.1.a.(5)(n)	Monthly		
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by the tenth (10th) day following the month of services services  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  Monthly  Following the month of services services  by the tenth (10th) day  Yes - if contracted for CAT  CAT Vacant Position Report  CAT Vacant Position Report  CAT Vacant Position Report  Guidance 9  Monthly  Monthl	Narcan Monthly Summary				by the tenth (10th) day	
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Prevention Data Guidance 10 Monthly services, submitted to PBPS prevention services by the tenth (10th) day Yes - if contracted for CAT following the month of services services by the eighteenth (10th) day Yes - if contracted for CAT following the month of services services  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 services, submitted to OATS services  SOAR Data Guidance 9 Monthly services, submitted to Tata by the eighteenth (18th) day following the month of yes - if contracted for SOAR services by the tenth (10th) day Yes - if contracted for MRT following the month of services services  ANT Vacant Position Report CFCHS Specific Monthly following the month of services services by the tenth (10th) day Yes - if contracted for MRT following the month of services services CFCHS Specific Monthly following the month of services services  Test ontracted for EPP following Tracking Report DCF Request Monthly following the month of services Training by the tenth (10th) day Yes - if contracted for FMT following the month of services Services Community Competency Restoration Training Tracking DCF Request Monthly following the month of services Training by the tenth (10th) day Yes - if contracted for FMT following the month of services Services CFCHS Specific Monthly following the month of services Services Services CFCHS Specific Monthly following the month of services Services Services CFCHS Specific Monthly following the month of services Services Services CFCHS Specific Monthly following the month of services Services Services CFCHS Specific Monthly following the month of services Services Services CFCHS Specific Monthly following the month of services Services Services CFCHS Specific Monthly following the month of services Services Services CFCHS Specific Monthly following the month of services Services Services CFCHS Specific Monthly following the month of services Services Services Servi						
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by the tenth (10th) day Yes - if contracted for MRT following the month of services services  What Vacant Position Report CFCHS Specific Monthly following the month of services services  By the tenth (10th) day Yes - if contracted for MRT following the month of services services  By the tenth (10th) day Yes - if contracted for MRT following the month of services services  By the tenth (10th) day Yes - if contracted for FEP following the month of services services  Community Competency  Restoration Training Tracking  Report DCF Request Monthly following the month of services Training  By the tenth (10th) day Competency Restoration following the month of services Training  By the tenth (10th) day Yes - if contracted for FMT following the month of services services  CFCHS Specific Monthly following the month of services services  Child Welfare Referral Tracking  Report CFCHS Specific Monthly following the month of services Welfare State Opioid Respon for State Opioid Respon for FEP	SOAR Data		Guidance 9	Monthly	•	
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Community Competency Restoration Training Tracking Report  DCF Request Monthly FMT Vacant Position Report  CFCHS Specific Monthly FMI						
Restoration Training Tracking Report  DCF Request  Monthly  following the month of services Training by the tenth (10th) day Yes - if contracted for FMT FMT Vacant Position Report  CFCHS Specific  Monthly  following the month of services services  When tenth (10th) day Yes - if contracted for FMT following the month of services services  by the tenth (10th) day Yes - if contracted for Child Report  CFCHS Specific  Monthly  following the month of services Welfare State Opioid Respor  First Episode Psychosis (FEP)  by the tenth (10th) day Yes - if contracted for FEP			CFCHS Specific	Monthly	tollowing the month of services	
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	· ·		p <del>-</del>	··· <b>1</b>		<u> </u>
Monthly Report CFCHS Request Monthly following the month of services services			CFCHS Request	Monthly		

		EXHIBIT B: REQUIR	ED REPORTS	<u> </u>	
		EXTRIBIT B. REQUI	LED REFORMS	Due (Calendar days unless	
Report Name	Sub-reports	Citation	Frequency	otherwise specified)	Applicability
TANE CAAMIN		0.11		by the tenth (10th) day	Yes- if contracted for TANF
TANF SAMH Participating Log		Guidance 16 65E-14.021(5)(b), FAC	Monthly	following the month of services 30 days after contract	services.
Cost Allocation Plan - Final		Template 14	Once	execution	Yes
		65E-14.021(5)(b), FAC		120 days before contract	
Cost Allocation Plan - Proposed	tu di idaa.	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
Local Match Form - Projected		Template 9	Once	30 days after contract execution	Yes - if CFCHS contract requires 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 of discounts referenced in Rule			30 days after contract	
Sliding Fee Scale - Original	65E-14.018, FAC	CFCHS Sliding Fee P&P	Once	execution	Yes
	includes:		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	
Invoice Support - Form CF-MH		CFF 14 020 FAC	Overterly	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
		050105 11 0 1000	0	Quarterly by October 10,	v
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				Quarterly by October 10,	Yes - if contracted for an EOG
Investment - Actuals		GHME1 C2-3.2.2	Quarterly	January 10, April 10, July 10	project
FACT Ad Hoc Quarterly Report, Enhancement Reconciliation		Guidance 16	Quartorly	Quarterly by October 10,	Yes - if contracted for FACT services
Ennancement Reconciliation		Guidance 16	Quarterly	January 10, April 10, July 10  Quarterly by October 10,	Yes - if contracted for PATH
PATH Summary Information		Guidance 15	Quarterly	January 10, April 10, July 10,	services
Report of aggregate quarterly		Guidance 25		Quarterly by October 5,	Yes - if required by Attachment
NVRA activities		(form DS-DE13)	Quarterly	January 5, April 5, July 5	I of CFCHS contract
Representative Payee				Quarterly by October 10,	
accounting documentation		1 CFR § 305.91-3	Quarterly	January 10, April 10, July 10	Yes - LifeStream Only
FMT Quarterly Report		CFCHS Specific	Quarterly	Quarterly by October 10, January 10, April 10, July 10	Yes - if contracted for FMT services
Z22, Nopo. c				February 15 and August 15	Yes - if contracted for anything
Block Grant Report - Data		Template 2	Semi-Annually	each year of the contract	EXCEPT for profit, UCF, CRS
FACT Admission and Discharge		<u> </u>	Upon Admission	Upon Admission and Discharge	Yes - if contracted for FACT
Certificates		CFCHS Specific	and Discharge of	of all clients	services
FMT weekly census		CFCHS Specific	Weekly	Thursday	Yes - if contracted for FMT services
SRT Census and Waitlist		CFCHS Specific	Weekly	Monday	Yes - if contracted for SRT services
Jan. Sensus una Waltist		5. 5. 15 Specific	. reckly		55. 1.665