**Schedule 1 Tribal-Urban Indian Health Program Set Aside**

**Opioid Abatement Settlement Dollars Scope of Work**

1. Purpose

The purpose of this project is to distribute opioid abatement settlement dollars to Indian Nations/Urban Indian Health Programs (UIHPs) as allocated by the Washington State legislature in 2022. The funds under this Scope of Work (SOW) were appropriated by the Washington State legislature and can be used by Indian Nations/Urban Indian Health Programs to support opioid crisis abatement services in the areas of prevention, outreach, treatment, recovery support, harm reduction strategies to address and mitigate the effects of misuse and abuse of opioid related products as they see fit to benefit their communities in combatting the opioid epidemic. Services supported must be implemented as Indian Nations and UIHPs see fit to benefit their communities addressing opioid crisis abatement, provided that actvities are allowable under the terms of the opioid settlement agreements. For the purposes of this SOW, please use Exhibit E as a guidance for a list of opioid abatement strategies provided by the distributor’s settlement agreement.

1. Scope of Work Term

The Scope of Work becomes effective November 1, 2023, and ends on June 30, 2025, unless extended or terminated prior to that date.

1. Definitions
	1. Administrative Costs: Means the costs incurred by the Indian Nation/UIHP that are not attributed to direct services. Examples of Administrative Costs include non-direct costs associated with customer service, utilization management, network development, and quality management programs.
	2. Direct Costs: Means the costs incurred by the Indian Nation/UIHP to specifically implement the program including planning, implementation, and evaluation costs as outlined in the negotiated plan.
	3. Demographics of Individuals Served: Means demographic categories to be collected by each Indian Nation/UIHP program. Minimum reporting categories include:
		1. I. Breakdown of race categories for total individuals served/reached.
		2. II. Breakdown of ethnicity categories for total individuals served/reached.
		3. III. Breakdown of age range categories for total individuals served/reached.
		4. IV. Breakdown of gender categories for total individuals served/reached.
2. Funding

The Indian Nation/UIHP will have access to $496,774 under this Scope of Work from November 1, 2023 – June 30, 2025, which is the maximum not-to-exceed consideration payable to Indian Nation/UIHP. The payment method is set forth under Section 9.

1. Responsibilities of the Indian Nation/UIHP
2. Submit a project plan to the HCA Contract Manager for this Scope of Work that describes how the funds will be used to support the purpose of this project, including prevention, outreach, treatment, recovery support services and harm reduction implemented to address and mitigate the effects of misuse and abuse of opioid related products.
3. Submit the project plan deliverable described in the preceding subsection 5.a. to the Contract Manager for this Scope of Work at tribalreports@hca.wa.gov within 60 days of agreement execution.
4. The project plan must describe how the Opioid Abatement Settlement Response project supports the purpose of the funding as outlined in the Purpose Section of this Scope of Work.
	* + Describe the projects and how each project aligns with one of the allowable opioid abatement strategies.
		+ Name the opioid strategy category being implemented as outlined in the strategies category document, Exhibit E, provided by the HCA.
		+ Provide project budget. Estimate how much funding will go to each funding category listed in subsection 8.a.ii, including the amount of funds to be expended on administrative Indirect dollars versus direct services provided.
		+ Include a timeline for implementation of the project.
		+ Provide the estimated number of activities or services provided.
		+ Provide estimated/projected number of people served under this scope of work.
		+ Provide projected region and location of services provided.
		+ Outline the desired outcomes and milestones of the project outlined on a quarterly basis for the duration of the project timeline.
		+ Describe how activities will be tracked to ensure minimum reporting requirements are met.
5. The HCA Contract Manager for this Scope of Work will complete plan review with 21 calendar days of plan submission.
6. Project Implementation
	1. Begin program implementation as outlined in their final negotiated project plan.
	2. The Tribe may update the final negotiated project plan at any time during the duration of the performance period by following instructions outlined in Section 5 of this SOW.
	3. Ensure that the project is completed by June 30, 2025, and in accordance with the timeline in the preceding subsection 4.
7. Biannual Check In
	1. Participate in check in every 6 months during the project period, either by email progress report or informal meetings with HCA OTA contracts manager. Items to be shared include:
		1. Progress of project implementation and milestones achieved.
		2. Description of successes and challenges.
		3. Progress on spending allocated funds.
8. Reporting
	1. Each fiscal year provide project reporting within 45 calendar days of the end of the state fiscal year (June 30) HCA shall provide the form(s) and format for opioid settlement project reporting, which will contain the following at a minimum:
		1. A narrative summary of project implementation and progress that includes:
9. The reporting period;
10. A description of successes and challenges;
11. Progress on project implementation including a description of remaining work necessary if the project is not completed during the contract period;
12. A list of other organizations that the Tribe is partnering with;
	* 1. The amount of funds used for opioid mitigation that contains the following categories at a minimum:
			1. Staff
			2. Fringe Benefits
			3. Travel
			4. Supplies
			5. Medications
			6. Direct services
			7. Training and Technical Assistance
			8. Contractual
			9. Capital Expenses
			10. Indirect/administrative Costs
	1. The number of individuals served by the project as outlined in the final negotiated plan during reporting period.
		1. Provide demographic information for individuals served by the project in the following categories:
			1. Age range
			2. Race
			3. Ethnicity
			4. Gender identity
	2. Fiscal year end reporting shall be submitted by electronic means using the template provided by the Health Care Authority, unless otherwise specified, in written format.
	3. Participate in a project evaluation coordinated by the American Indian Health Commission in collaboration with the AI/AN Opioid Response Workgroup and the Northwest Portland Area Indian Health Board.
13. Billing

9.1. The amount payable to the Indian Nation/UIHP for the negotiated project plan due within 60 days of agreement/contract execution, will not exceed $400,000.

9.2. HCA will pay Indian Nation/UIHP two lump sum payments as outlined in the deliverables table below.

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| --- | --- |
| **Deliverable and Due Date** | **Total Payment**  |
| HCA receipt and satisfaction of the negotiated project plan due within 60 days of agreement execution. | $400,000 |
| HCA receipt and satisfaction of all reporting requirements outlined in the SOW.  | $96,774 |

c. and upon:

1. HCA receipt of an A-19 invoice (in EXCEL format) and certified copy of the reporting form submitted to HCA no later than 45 days following the end of the biennium 6/30/2025.

ii. Submit to tribalreports@hca.wa.gov and your assigned INA contracts manager.

9.3 Payment by HCA shall be timely if paid within 30 days of receipt of deliverables outlined in the deliverables table section 9.2 and A-19 invoice/Reporting form.

9.4 Administrative costs are allowable at up to twenty percent (20%) of the total amounts expended under this Scope of Work.