



**Recipient Information**

**1. Recipient Name**  
 COUNTY OF WEBB  
 1110 WASHINGTON ST  
 STE 101  
 LAREDO, TX 78040

**2. Congressional District of Recipient**  
 28

**3. Payment System Identifier (ID)**  
 1746001587A5

**4. Employer Identification Number (EIN)**  
 746001587

**5. Data Universal Numbering System (DUNS)**  
 052767030

**6. Recipient's Unique Entity Identifier**  
 KJ57ZV6UCFB4

**7. Project Director or Principal Investigator**  
 Margarita Herrera-Garza  
  
 mhgarza@webbcountytx.gov  
 956-523-4654

**8. Authorized Official**  
 Tano Tijerina  
 judge\_tano@webbcountytx.gov  
 956-523-4600

**Federal Award Information**

**11. Award Number**  
 6H79TI081929-05M001 (Multiple)

**12. Unique Federal Award Identification Number (FAIN)**  
 H79TI081929

**13. Statutory Authority**  
 PHS Act, Title V, Section 509; 42 U.S.C 290bb-2

**14. Federal Award Project Title**  
 Grant to Expand Substance Abuse Treatment Capacity in the Adult Treatment Drug Courts and Tribal Healing to Wellness Courts (Short Title: SAMHA Treatment Drug Courts)

**15. Assistance Listing Number**  
 93.243

**16. Assistance Listing Program Title**  
 Substance Abuse and Mental Health Services\_Projects of Regional and National Significance

**17. Award Action Type**  
 Amendment

**18. Is the Award R&D?**  
 No

Summary Federal Award Financial Information	
<b>19. Budget Period Start Date</b> 05/31/2023 – <b>End Date</b> 10/31/2024	
<b>20. Total Amount of Federal Funds Obligated by this Action</b>	\$0
20a. Direct Cost Amount	\$0
20b. Indirect Cost Amount	\$0
<b>21. Authorized Carryover</b>	\$0
<b>22. Offset</b>	\$0
<b>23. Total Amount of Federal Funds Obligated this budget period</b>	\$400,000
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>	\$0
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>	\$400,000
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<b>26. Project Period Start Date</b> 05/31/2019 – <b>End Date</b> 10/31/2024	
<b>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period</b>	\$1,880,000

**Federal Agency Information**

**9. Awarding Agency Contact Information**  
 Aina Halili  
 Grants Specialist  
 aina.halili@samhsa.hhs.gov  
 240-276-2820

**10. Program Official Contact Information**  
 Daniel Maas  
 Program Official  
 Daniel.Maas@samhsa.hhs.gov

**28. Authorized Treatment of Program Income**  
 Additional Costs

**29. Grants Management Officer - Signature**  
 Aina Halili

**30. Remarks**

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.



SAMHSA Treatment Drug Courts  
Department of Health and Human Services  
Substance Abuse and Mental Health Services Administration

Notice of Award

**Issue Date:** 05/15/2024

Center for Substance Abuse Treatment

**Award Number:** 6H79TI081929-05M001  
**FAIN:** H79TI081929  
**Program Director:** Margarita Herrera-Garza

**Project Title:** Grant to Expand Substance Abuse Treatment Capacity in the Adult Treatment Drug Courts and Tribal Healing to Wellness Courts (Short Title: SAMHA Treatment Drug Courts)

**Organization Name:** COUNTY OF WEBB

**Authorized Official:** Tano Tijerina

**Authorized Official e-mail address:** judge\_tano@webbcountytx.gov

**Budget Period:** 05/31/2023 – 10/31/2024

**Project Period:** 05/31/2019 – 10/31/2024

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$0 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to COUNTY OF WEBB in support of the above referenced project. This award is pursuant to the authority of PHS Act, Title V, Section 509; 42 U.S.C 290bb-2 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

This award addresses the following Amendment requests:

- No-Cost Extension (6H79TI081929-05L001)

Award recipients may access the SAMHSA website at [www.samhsa.gov](http://www.samhsa.gov) (click on "Grants" then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,  
Aina Halili  
Grants Management Officer  
Division of Grants Management

See additional information below

**SECTION I – AWARD DATA – 6H79TI081929-05M001**

**Award Calculation (U.S. Dollars)**

Personnel(non-research)	\$153,049
Fringe Benefits	\$65,251
Travel	\$14,775
Supplies	\$3,209
Contractual	\$146,907
Other	\$16,809
<b>Direct Cost</b>	<b>\$400,000</b>
<b>Approved Budget</b>	<b>\$400,000</b>
<b>Federal Share</b>	<b>\$400,000</b>
<b>Less Unobligated Balance</b>	<b>\$120,000</b>
<b>Cumulative Prior Awards for this Budget Period</b>	<b>\$280,000</b>
 <b>AMOUNT OF THIS ACTION (FEDERAL SHARE)</b>	 <b>\$0</b>

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
5	\$280,000

Note: Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

**Fiscal Information:**

**CFDA Number:** 93.243  
**EIN:** 1746001587A5  
**Document Number:** 19TI81929A  
**Fiscal Year:** 2023

<b>IC</b>	<b>CAN</b>	<b>Amount</b>
TI	C96N363	\$0

IC	CAN	2023
TI	C96N363	\$0

**TI Administrative Data:**

**PCC:** DCT-AD19 / **OC:** 4145

**SECTION II – PAYMENT/HOTLINE INFORMATION – 6H79TI081929-05M001**

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

**SECTION III – TERMS AND CONDITIONS – 6H79TI081929-05M001**

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 75 as applicable.
- d. The HHS Grants Policy Statement.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

**Treatment of Program Income:**

Use of program income – Additive: Recipients will add program income to funds committed to the project to further eligible project objectives. Sub-recipients that are for-profit commercial organizations under the same award must use the deductive alternative and reduce their subaward by the amount of program income earned.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

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**SECTION IV – TI SPECIAL TERMS AND CONDITIONS – 6H79TI081929-05M001**

**REMARKS**

**Removal of Special Condition of Award**

This award removes the following *Special Condition of Award* based on the documentation submitted on 05/25/2023.

Revised Budget due on 06/30/2023 based on the documentation received on 05/25/2023.

This is a post-award amendment, therefore, this NoA reflects the current budget year only.

**STANDARD TERMS OF AWARD:**

**All previous terms and conditions remain in effect until specifically approved and removed by the Grants Management Officer.**

**Post Award Amendment - No Cost Extension**

This award approves a **5 month** NO COST EXTENSION extending the budget and project period end dates from 05/30/2024 to 10/31/2024, based on documentation received on 03/26/2024.

**If the final resolution of the audit covering the above stated budget period(s)**

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determines that the unobligated balance of funds is incorrect, SAMHSA will not make additional funds available to cover any shortfall.

- o A maximum of \$500,000 can be utilized for both the Year 5 Budget Period and the No-Cost Extension period combined.

You are required to submit **an annual** cumulative 12-month FFR ([SF-425](#)) ([PDF | 268 KB](#)) **no later than 90 days** after the close of the **original** project period as well as a **final FFR no later than 120 days** after the end of the No Cost Extension project period as per Closeout guidance: <https://www.samhsa.gov/grants/grants-management/grant-closeout>.

- o **Annual FFR Due: 08/28/2024**
- o **Final FFR : 120 days after the No Cost Extension (NCE) end date.**

All previous terms and conditions remain in effect until specifically approved and removed by the Grants Management Officer.

## **STANDARD TERMS AND CONDITIONS**

### **No Cost Extension Closeout Requirements - Discretionary Grants Closeout Process**

**Recipients must complete all actions required for closeout to include:**

- o Liquidate all obligations incurred under the award. All payment requests must be submitted before the end of the **(120) days post-award reconciliation/liquidation period.**
- o Reconcile financial expenditures to the reported total disbursements and charges in PMS.
- o Return any funds due to [PMS](#) due to refunds, corrections, or audits.
- o Submit required final reports.

Recipients must close the award in accordance with [2 CFR 200.344](#) Closeout and the terms and conditions listed in the grant notice of award. Recipients must liquidate all obligations incurred under an award not later than one hundred twenty (120) days after the end of awards obligation and project period. **After one hundred twenty (120) days, PMS account is automatically - locked. SAMHSA does not approve payment requests after one hundred twenty (120) days post-award reconciliation/liquidation period.**

Therefore, recipients are expected to complete all expenditure requests within the approved project period and the aforementioned 120-day post-award reconciliation/liquidation period. **Recipients' late withdrawal requests occurring after the aforementioned periods will be denied. Final reports are due to SAMHSA no later than 120 days after the end of the project period.**

Final reports include:

- o Submit via PMS the [Final Financial Report \(FFR, SF-425\) in the Payment Management System \(PDF | 228 KB\)](#)
- o Submit in eRA Commons the [Final Progress Report \(FPR\)](#) or other reports

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- required by the terms and conditions of the award
- o Submit in eRA Commons the Final [Tangible Personal Property Report \(TPPR\) SF428-Series \(SF-428-B and SF-428-S, as applicable\)](#) to account for any property acquired with federal funds or indicate on the form that you have no property to

**Failure to complete the closeout actions in 120 days after the project period end may result in a unilateral closeout of the grant by SAMHSA.** This may affect future funding of federal programs and result in the reimbursement of funding to SAMHSA. **If the recipient does not submit all reports satisfactorily in accordance with [2 CFR 200.344](#) SAMHSA will report the recipient's material failure to comply with the terms and conditions of the award with the OMB-designated integrity and performance system (currently FAPIIS). Federal awarding agencies may also pursue other enforcement actions per [2 CFR 200.339](#).** Refer to the following SAMHSA for Closeout Standard Terms and Conditions <https://www.samhsa.gov/grants/grants-management/notice-awardnoa/standard-terms-conditions>. Additional information on closeout is available at <https://www.samhsa.gov/grants/grants-management/grant-closeout>.

Resources:

[Video: SAMHSA Grant Closeout via eRA Commons \(6 minutes, 25 seconds\)](#) [Grantee Closeout Reference Sheet for FPR and TPPR Due 120 Days \(PDF | 1.2 MB\)](#): Guidance on how to submit the FPR and the TPPR in the eRA system.

**Staff Contacts:**

Daniel Maas, Program Official  
**Email:** Daniel.Maas@samhsa.hhs.gov

Aina Halili, Grants Specialist  
**Phone:** 240-276-2820 **Email:** aina.halili@samhsa.hhs.gov