

I. State Information

State Information

Plan Year

Federal Fiscal Year 2026

State Identification Numbers

Unique Entity ID HKQDEXRXGKL1

EIN/TIN 47-0491233

I. State Agency to be the Grantee for the PATH Grant

Agency Name Nebraska Department of Health and Human Services

Organizational Unit Division of Behavioral Health

Mailing Address PO Box 95026

City Lincoln

Zip Code 68509-5026

II. Authorized Representative for the PATH Grant

First Name Thomas

Last Name Janousek

Agency Name NE DHHS Division of Behavioral Health

Mailing Address 301 Centennial Mall South, Fourth Floor PO Box 95026

City Lincoln

Zip Code 68509-5026

Telephone (402) 471-7732

Fax (402) 742-8314

Email Address Thomas.Janousek@nebraska.gov

III. Expenditure Period

From 10/1/2025

To 9/30/2026

IV. Date Submitted

NOTE: this field will be automatically populated when the application is submitted.

Submission Date 4/27/2026 7:18:31 PM

Revision Date 4/27/2026 7:18:41 PM

V. Contact Person Responsible for Application Submission

First Name John

Last Name Trouba

Telephone (402) 471-7824

Fax (402) 742-8314

Email Address John.Trouba@nebraska.gov

Footnotes:

I. State Information

Assurances - Non-Construction Programs

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

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As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standard for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §5794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §3601 et seq.), as amended, relating to non-discrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetland pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C.

§470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.
19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

HHS Assurances of Compliance (HHS 690)

ASSURANCE OF COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE DISCRIMINATION ACT OF 1975, AND SECTION 1557 OF THE AFFORDABLE CARE ACT

The Applicant provides this assurance in consideration of and for the purpose of obtaining Federal grants, loans, contracts, property, discounts or other Federal financial assistance from the U.S. Department of Health and Human Services.

THE APPLICANT HEREBY AGREES THAT IT WILL COMPLY WITH:

1. Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80), to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
2. Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified individual with a disability in the United States shall, solely by reason of her or his disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
3. Title IX of the Education Amendments of 1972 (Pub. L. 92-318), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 86), to the end that, in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives Federal financial assistance from the Department.
4. The Age Discrimination Act of 1975 (Pub. L. 94-135), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91), to the end that, in accordance with the Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
5. Section 1557 of the Affordable Care Act (Pub. L. 111-148), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 92), to the end that, in accordance with Section 1557 and the Regulation, no person in the United States shall, on the ground of race, color, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any health program or activity for which the Applicant receives Federal financial assistance from the Department.

The Applicant agrees that compliance with this assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the Applicant, its successors, transferees and assignees for the period during which such assistance is provided. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. The Applicant further recognizes and agrees that the United States shall have the right to seek judicial enforcement of this assurance.

The grantee, as the awardee organization, is legally and financially responsible for all aspects of this award including funds provided to sub-recipients in accordance with 45 CFR ? 75.351-75.352, Subrecipient monitoring and management.

Name

Thomas Janousek, PsyD

Title

Director Division of Behavioral Health

Organization

NE Department of Health and Human Services - Division of Behavioral Health

Signature:

Date:

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

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1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standard for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
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The grantee, as the awardee organization, is legally and financially responsible for all aspects of this award including funds provided to sub-recipients in accordance with 45 CFR ? 75.351-75.352, Subrecipient monitoring and management.

Name _____

Thomas Janousek, PsyD

Printed: 4/20/2026 12:12 PM - Nebraska

Page 2 of 3

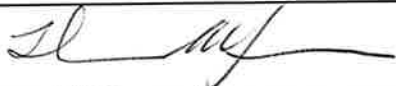
Title

Director Division of Behavioral Health

Organization

NE Department of Health and Human Services - Division of Behavioral Health

Signature:



Date:

4/23/26

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

I. State Information

Certifications

1. Certification Regarding Debarment and Suspension

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 2 CFR part 180, and its principals:

- a. Agrees to comply with 2 CFR Part 180, Subpart C by administering each lower tier subaward or contract that exceeds \$25,000 as a "covered transaction" and verify each lower tier participant of a "covered transaction" under the award is not presently debarred or otherwise disqualified from participation in this federally assisted project by:
 - a. Checking the Exclusion Extract located on the System for Award Management (SAM) at <http://sam.gov>
 - b. Collecting a certification statement similar to paragraph (a)
 - c. Inserting a clause or condition in the covered transaction with the lower tier contract

2. Certification Regarding Drug-Free Workplace Requirements

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free workplace in accordance with 2 CFR Part 182by:

- 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 work-place 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) above;
- d. Notifying the employee in the statement required by paragraph (a), above, 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).

3. Certifications Regarding Lobbying

Per 45 CFR 75.215, Recipients are subject to the restrictions on lobbying as set forth in 45 CFR part 93. Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs. The undersigned (authorized official signing for the applicant organization) 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 any 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 Federally 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 of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients 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, 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.

4. Certification Regarding Program Fraud Civil Remedies Act (PFCRA) (31 U.S.C ? 3801- 3812)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

5. Certification Regarding Environmental Tobacco Smoke

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, daycare, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, 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 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

Name

Thomas Janousek, PsyD

Title

Director Division of Behavioral Health

Organization

NE Department of Health and Human Services - Division of Behavioral Health

Signature:

Date:

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

I. State Information

Certifications

1. Certification Regarding Debarment and Suspension

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 2 CFR part 180, and its principals:

- a. Agrees to comply with 2 CFR Part 180, Subpart C by administering each lower tier subaward or contract that exceeds \$25,000 as a "covered transaction" and verify each lower tier participant of a "covered transaction" under the award is not presently debarred or otherwise disqualified from participation in this federally assisted project by:
 - a. Checking the Exclusion Extract located on the System for Award Management (SAM) at <http://sam.gov>
 - b. Collecting a certification statement similar to paragraph (a)
 - c. Inserting a clause or condition in the covered transaction with the lower tier contract

2. Certification Regarding Drug-Free Workplace Requirements

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free workplace in accordance with 2 CFR Part 182by:

- 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 work-place 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) above;
- d. Notifying the employee in the statement required by paragraph (a), above, 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).

3. Certifications Regarding Lobbying

Per 45 CFR 775.215, Recipients are subject to the restrictions on lobbying as set forth in 45 CFR part 93. Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs. The undersigned (authorized official signing for the applicant organization) 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 any 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 Federally 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 of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients 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, 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.

4. Certification Regarding Program Fraud Civil Remedies Act (PFCRA) (31 U.S.C ? 3801- 3812)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

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Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

Name

Thomas Janousek, PsyD

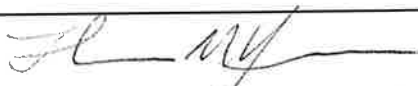
Title

Director Division of Behavioral Health

Organization

NE Department of Health and Human Services - Division of Behavioral Health

Signature:



Date:

4/23/26

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

I. State Information

Funding Agreement

FISCAL YEAR 2026

PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS (PATH) AGREEMENT

I hereby certify that the State/Territory of Nebraska agrees to the following:

Section 522(a). Amounts received under the PATH Formula Grant Program will be expended solely for making grants to political subdivisions of the State, and to nonprofit private entities (including community-based veterans organizations and other community organizations) for the purpose of providing the services specified in Section 522(b) to individuals who:

- Are suffering from serious mental illness; or
- Are suffering from serious mental illness and from a substance use disorder; and
- Are homeless or at imminent risk of becoming homeless.

Section 522(b). Entities receiving grants under the PATH Formula Grant Program will expend funds for the following services:

- Outreach;
- Screening and diagnostic treatment;
- Habilitation and rehabilitation;
- Community mental health;
- Alcohol or drug treatment;
- Staff training, including the training of individuals who work in shelters, mental health clinics, substance abuse programs, and other sites where individuals experiencing homelessness require services;
- Case management services, including:
 - Preparing a plan for the provision of community mental health services to the eligible homeless individual involved, and reviewing such plan not less than once every 3 months;
 - Providing assistance in obtaining and coordinating social and maintenance services for the eligible individuals experiencing homelessness, including services relating to daily living activities, personal financial planning, transportation services, and habilitation and rehabilitation services, prevocational and vocational services, and housing;
 - Providing assistance to the eligible homeless individual in obtaining income support services, including housing assistance, food stamps, and supplemental security income benefits;
 - Referring the eligible homeless individual for such other services as may be appropriate; and
 - Providing representative payee services in accordance with Section 1631(a) (2) of the Social Security Act if the eligible homeless individual is receiving aid under Title XVI of such act and if the applicant is designated by the Secretary to provide such services.
- Supportive and supervisory services in residential settings;
- Referrals for primary health services, job training, education services and relevant housing services;
- Housing services [subject to Section 522(h)(1)] including:
 - Minor renovation, expansion, and repair of housing;
 - Planning of housing;
 - Technical assistance in applying for housing assistance;
 - Improving the coordination of housing services;
 - Security deposits;
 - The costs associated with matching eligible individuals experiencing homelessness with appropriate housing situations;
 - One-time rental payments to prevent eviction.

Section 522(c). The State will make grants pursuant to Section 522(a) only to entities that have the capacity to provide, directly through arrangements, the services specified in Section 522(b), including coordinating the provision of services in order to meet the needs of eligible individuals experiencing homelessness who are both mentally ill and suffering from a substance abuse disorder.

Section 522(d). In making grants to entities pursuant to Section 522(a), the State will give special consideration to entities with a demonstrated effectiveness in serving homeless veterans.

Section 522(e). The state agrees that grants pursuant to Section 522(a) will not be made to any entity that:

- Has a policy of excluding individuals from mental health services due to the existence or suspicion of a substance use disorder; or
- Has a policy of excluding individuals from substance use services due to the existence or suspicion of mental illness.

Section 522(f). Not more than four (4) percent of the payments received under the PATH Formula Grant Program will be expended for administrative expenses.

Section 522(h). The State agrees that not more than 20 percent of the payments will be expended for housing services under section 522(b)(10); and the payments will not be expended for the following:

- To support emergency shelters or construction of housing facilities;
- For inpatient psychiatric treatment costs or inpatient substance use treatment costs; or
- To make cash payments to intended recipients of mental health or substance use services.

Section 523(a). The State will make available, directly or through donations from public or private entities, non-federal contributions toward such costs in an amount that is not less than \$1 for each \$3 of funds provided in such payments. The amount of non-federal contributions shall be determined in accordance with Section 523(b).

Section 523(c). The State will not require the entities to which grants are provided pursuant to Section 522(a) to provide non-federal contributions in excess of the non-federal contributions described in Section 523(a).

Section 526. The State has attached a Statement that includes the following:

- Identifies existing programs providing services and housing to eligible individuals experiencing homelessness and gaps in the delivery systems of such programs;
- Includes a plan for providing services and housing to eligible individuals experiencing homelessness, which:
 - Describes the coordinated and comprehensive means of providing services and housing to individuals experiencing homelessness; and
 - Includes documentation that suitable housing for eligible individuals experiencing homelessness will accompany the provision of services to such individuals;
- Describes the source of the non-federal contributions described in Section 523;
- Contains assurances that the non-federal contributions described in Section 523 will be available at the beginning of the grant period;
- Describes any voucher system that may be used to carry out this part; and
- Contains such other information or assurances as the Secretary may reasonably require.

Section 527(a)(1), (2), and (3). The State has attached a description of the intended use of PATH Formula grant amounts for which the State is applying. This description shall:

- Identify the geographic areas within the State in which the greatest numbers of individuals experiencing homelessness with a need for mental health, substance use, and housing services are located; and
- Provide information relating to the program and activities to be supported and services to be provided, including information relating to coordinating such programs and activities with any similar programs and activities of public and private entities.

Section 527(a)(4). The description of intended use for the fiscal year of the amounts for which the State is applying will be revised throughout the year as may be necessary to reflect substantial changes in the programs and activities assisted by the State pursuant to the PATH Formula Grant Program.

Section 527(b). In developing and carrying out the description required in Section 527(a), the State will provide public notice with respect to the description (including any revisions) and such opportunities as may be necessary to provide interested clients, such as family members, consumers and mental health, substance use, and housing agencies, an opportunity to present comments and recommendations with respect to the description.

Section 527(c)(1)(2). The services to be provided pursuant to the description of the intended use required in Section 527(a), have been considered in the preparation of, have been included in, and are consistent with the State Plan for Comprehensive Community Mental Health Services under P.L. 102-321.

Section 528(a). The State will, by January 31, 2027, prepare and submit a report providing such information as is necessary for the following:

- To secure a record and description of the purposes for which amounts received under the PATH Formula Grant Program were expended during fiscal year 2026 and of the recipients of such amounts; and
- To determine whether such amounts were expended in accordance with the provisions of Part C – PATH.

Section 528(b). The State further agrees that it will make copies of the reports described in Section 528(a) available for public inspection.

Section 529. Payments may not be made unless the State agreements are made through certification from the chief executive officer of the State.

Charitable Choice Provisions:

The State will comply, as applicable, with the Substance Abuse and Mental Health Services Administration's (SAMHSA) Charitable Choice statutes codified at sections 581-584 and 1955 of the Public Health Service Act (42 U.S.C. §5290kk, et seq., and 300x-65) and their governing regulations at

Governor/Designee Name	Thomas Janousek, PsyD
Title	Director Division of Behavioral Health
Organization	NE Department of Health and Human Services - Division of Behavioral Health

Signature:

Date:

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

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42 C.F.R. part 54 and 54a respectively.

Governor/Designee Name

Thomas Janousek, PsyD

Title

Director Division of Behavioral Health

Organization

NE Department of Health and Human Services - Division of Behavioral Health

Signature:



Date:

4/23/26

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:



Jim Pillen
Governor

STATE OF NEBRASKA

OFFICE OF THE GOVERNOR
P.O. Box 94848 • Lincoln, Nebraska 68509-4848
Phone: (402) 471-2244 • jim.pillen@nebraska.gov

October 30, 2024

Ms. Odessa F. Crocker
Division of Grants Management, Office of Financial Resources
Substance Abuse and Mental Health Services Administration
5600 Fishers Lane, 17E22
Rockville, MD 20857

Dear Ms. Crocker:

On behalf of the State of Nebraska, I hereby authorize Dr. Steve Corsi, Chief Executive Officer of the Department of Health and Human Services, or his designee, to make all required applications, agreements, certifications and reports related to the Community Mental Health Services Block Grant (CFDA 93.958); the Substance Use Prevention, Treatment, and Recovery Services Block Grant (CFDA 93.959), the Projects for Assistance in Transition from Homelessness (PATH) grant (CFDA 93.150):

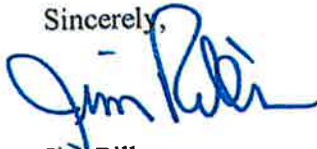
Dr. Steve Corsi, PsyD
Chief Executive Officer
Nebraska Department of Health and Human Services
P.O. Box 95026
Lincoln, NE 68509-5026

Effective immediately and until further notice, please send all Grant Awards and similar notices concerning the three programs listed above to:

Thomas Janousek, PsyD, Director
Division of Behavioral Health
Nebraska Department of Health and Human Services
P.O. Box 95026
Lincoln, NE 68509-5026

Thank you for your attention to this matter.

Sincerely,



Jim Pillen
Governor

An Equal Opportunity Employer



October 30, 2024

Ms. Odessa F. Crocker
Division of Grants Management, Office of Financial Resources
Substance Abuse and Mental Health Services Administration
5600 Fishers Lane, 17E22
Rockville, MD 20857

Dear Ms. Crocker:

On behalf of the State of Nebraska, I hereby designate and authorize Thomas Janousek, Director, Division of Behavioral Health of the Department of Health and Human Services, to make all required applications, agreements, certifications and reports related to the Community Mental Health Services Block Grant (CFDA 93.958); the Substance Use Prevention, Treatment, and Recovery Services Block Grant (CFDA 93.959), the Projects for Assistance in Transition from Homelessness (PATH) grant (CFDA 93.150):

Thomas Janousek, PsyD, Director
Division of Behavioral Health
Nebraska Department of Health and Human Services
P.O. Box 95026
Lincoln, NE 68509-5026

Effective immediately and until further notice, please send all Grant Awards and similar notices concerning the three programs listed above to:

Thomas Janousek, PsyD, Director
Division of Behavioral Health
Nebraska Department of Health and Human Services
P.O. Box 95026
Lincoln, NE 68509-5026

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Steve Corsi".

Dr. Steve Corsi, PsyD
Chief Executive Officer
Nebraska Department of Health and Human Services

I. State Information

Disclosure of Lobbying Activities

Are there lobbying activities pursuant to 31 U.S.C. 1352 to be disclosed? Yes ☐ No ☒

To View Standard Form LLL, Click the link below (This form is OPTIONAL).

[Standard Form LLL \(click here\)](#)

Name: Thomas Janousek, PsyD
Title: Director Division of Behavioral Health
Organization: NE Department of Health and Human Services -
Division of Behavioral Health

Signature: _____

Date Signed: _____

mm/dd/yyyy

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

I. State Information

State PATH Regions

Name	Description	Actions
Region 1 Behavioral Health Services	Eleven Counties in the Panhandle area of Western Nebraska. Region 1 address: 4110 Avenue D, Scottsbluff, NE 69361-4650. The Region 1 PATH Provider (Cirrus House) is located in Scottsbluff and primarily serves the City of Scottsbluff and Scotts Bluff County. Cirrus House address: 1509 1st Avenue, Scottsbluff, NE 69361-3106.	
Region 5 Behavioral Health Services	Sixteen Counties in Southeast Nebraska. Region 5 Systems address: 3600 Union Drive, Lincoln, NE 68516-6623. The Region 5 Provider (CenterPointe, Inc.) primarily serves the city of Lincoln and Lancaster County. CenterPointe, Inc. address: 2202 South 11th Street, Lincoln, NE 68502-3501.	
Region 6 Behavioral Health Services	Five Counties in Eastern Nebraska. Region 6 Behavioral Healthcare address: 4715 S 132nd Street, Omaha, NE 68137-1899. The Region 6 Provider (Community Alliance Rehabilitation Services) primarily serves the City of Omaha and Douglas County. Community Alliance address: 7150 Arbor Street, Omaha, NE 68106-3063.	

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

II. Executive Summary

1. State Summary Narrative

Narrative Question:

Provide an overview of the state's PATH program with key points that are expanded upon in the State Level Sections of WebBGAS.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

State Summary Narrative

The Nebraska PATH Program assists adults with serious mental illnesses experiencing homelessness and chronic homelessness engage in services necessary for recovery support, find a place to call home, and address behavioral and medical healthcare needs. Its focus is on helping people live better lives.

The Nebraska PATH Program will prioritize street outreach and case management, in areas of the state with the highest concentration of people who are experiencing homelessness.

The Nebraska PATH Program is aligned with SAMHSA goals and supports the goals established in the Nebraska “Opening Doors: 10 Year Plan to Prevent and End Homelessness in the State of Nebraska, 2015-2025.” Nebraska is still in discussion with collaborating entities on incorporating current federal priorities and executive orders into the development of a new state plan to end homelessness.

To accomplish this work, PATH providers will provide referrals for services as appropriate, including mental health services, housing, primary healthcare, job training and education. All PATH providers utilize the Homeless Management Information Service and are active participants in their local Continuum of Care (CoC) and CoC All Doors Lead Home Coordinated Entry systems (see Figure 1).

The PATH Program is administered within the Nebraska Department of Health and Human Services-Division of Behavioral Health (NDHHS-DBH). The NDHHS-DBH is the designated State Mental Health Authority (SMHA) and the State Substance Abuse Authority (Single State Authority (SSA)). As such, the NDHHS-DBH administers and oversees Nebraska’s public behavioral health system to address the prevention and treatment of mental health and substance use disorders. Nebraska adheres to the Substance Abuse and Mental Health Services Administration’s (SAMHSA) Recovery Support Strategic Initiative that delineates four major dimensions that support a life in recovery: Health, Home, Purpose, and Community and Presidential executive orders.

The vision of NDHHS-DBH includes a focus on positive outcomes and continuous quality improvement for the Division of Behavioral Health, the intermediary Regional Behavioral Health Authorities and local PATH providers. It encourages adding and/or promoting the use of Evidence-Based Practices.

Organizations to Receive Funds

A. Region 1 – Scottsbluff (Cirrus House)

1. Organization to Receive Funds: Private non-profit Consumer-run mental health agency
2. PATH Funds Received: \$31,704
3. Service Area: Western Nebraska – Region 1; Scottsbluff; Scotts Bluff County
4. Required Matching Funds (non-federal/local): \$10,569
 - 4a. Source: Private donations to the agency and agency funds.
5. Number of Individuals Contacted (FY2026): 25
 - 5a. Adults and Literally Homeless: 15
6. Number of Individuals Served/Enrolled (FY2026): 18
7. Services to be provided: Street outreach, screening, and referral to and linkage with appropriate services.

B. Region 5 Systems - Lincoln (CenterPointe, Inc.)

1. Organization to Receive Funds: Private non-profit Community mental health center and Certified Community Behavioral Health Clinic.
2. PATH Funds Received: \$74,039
3. Service Area: Southeast Nebraska – Region 5 Systems: Lincoln; Lancaster County
4. Required Matching Funds (non-federal/local): \$27,084
 - 4a. Source: Agency funds
5. Number of Individuals Contacted (FY2026): 120
 - 5a. Adults and Literally Homeless: 110
6. Number of Individuals Served/Enrolled (FY2026): 90
7. Services to be provided: Street outreach, screening, and referral to and linkage with appropriate services.

C. Region 6 - Omaha (Community Alliance Rehabilitation Services)

1. Organization to Receive Funds: Private non-profit Other mental health agency
2. PATH Funds Received: \$209,373
3. Service Area: Eastern Nebraska – Region 6; Omaha; Douglas County
4. Required Matching Funds (non-federal/local): \$86,486
 - 4a. Source: Agency funds from Region 6 Behavioral Healthcare
5. Number of Individuals Contacted (FY2026): 400
 - 5a. Adults and Literally Homeless: 400
6. Number of Individuals Served/Enrolled (FY2026): 375
7. Services to be provided: Street outreach, screening, and referral to and linkage with appropriate services.

The Regional Behavioral Health Authorities and local PATH Providers, identified above, are located in three Continuum of Care (CoC) regions which are geographically organized and represented individually in the state CoC system. The Nebraska Balance of State CoC has been recognized by the U.S. Department of Housing and Urban Development as the consolidation of five distinct regions (CoC Regions 1, 2, 3, 4 and 5) which governs these five regions.

- A. Cirrus House (Region 1) is located in CoC Region 1 (Part of the HUD designation Balance of State CoC NE-500)
- B. CenterPointe, Inc. (Region 5 Systems) is located in CoC Region 6 (HUD designation NE-502 Lincoln CoC)
- C. Community Alliance Rehabilitation Services (Region 6) is located in CoC Region 7 (HUD designation NE-501 Omaha, Council Bluffs CoC)

Figure 1

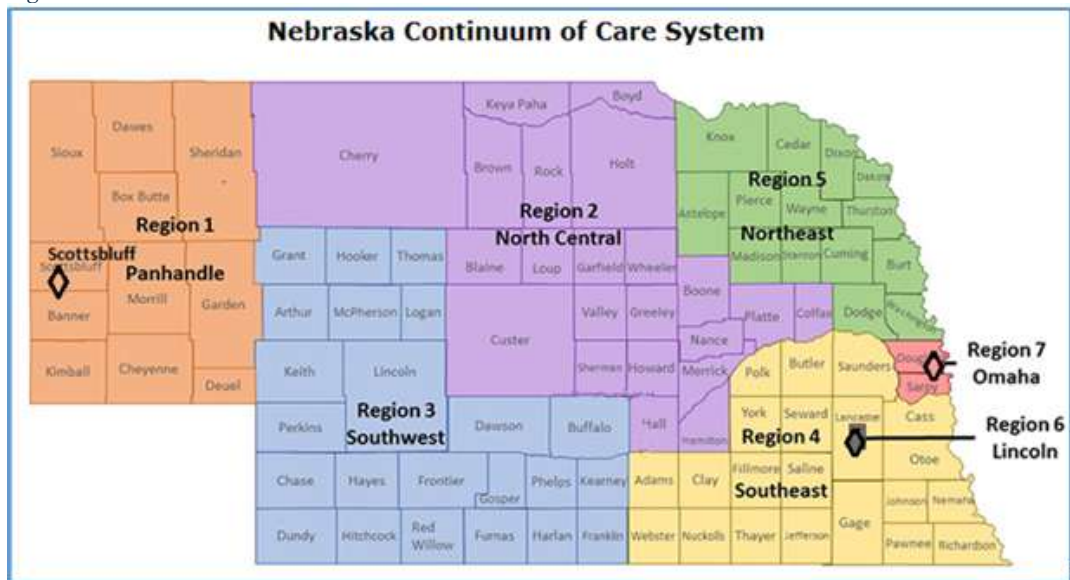
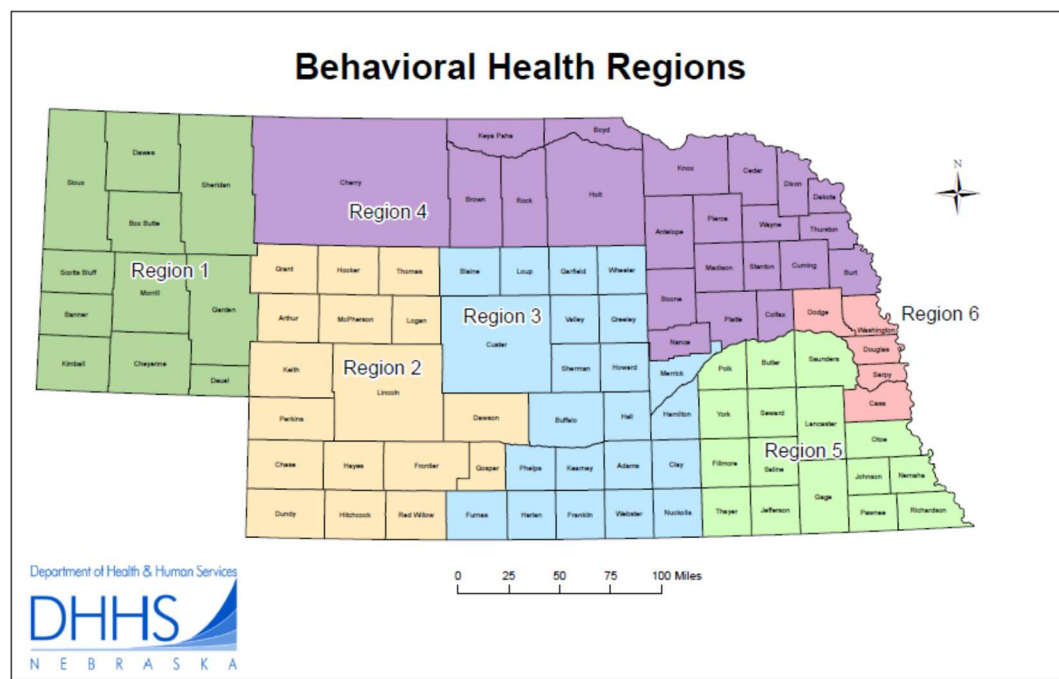


Figure 2



II. Executive Summary

2. State Budget

Planning Period From 10/1/2025 to 9/30/2026

A budget and budget narrative that includes the state's use of PATH funds are required. The budget can be entered directly into WebBGAS, or you can upload the budget as an attachment. The Budget Narrative is a separate document that must be uploaded as an Attachment. It must provide a justification for the basis of each proposed cost in the budget and how that cost was calculated. The proposed costs must be reasonable, allowable, allocable, and necessary for the supported activity.

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments			
a. Personnel	\$ 8,628	\$ 0	\$ 8,628				
Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
PATH Administrator	49,300.00	18.00 %	0.18	8,627.98	0.00	8,627.98	
Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments		
b. Fringe Benefits	28.11%	\$ 2,425.13	\$ 0.00	\$ 2,425.13			
Category	Federal Dollars	Matched Dollars	Total Dollars	Comments			
c. Travel	\$ 946.89	\$ 0.00	\$ 946.89				
Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments			
Other (Describe in Comments)	\$ 946.89	\$ 0.00	\$ 946.89	SPC monitoring site visits - state vehicle & mileage reimbursement and two nights hotel.			
d. Equipment	\$ 0.00	\$ 0.00	\$ 0.00				
No Data Available							
e. Supplies	\$ 0.00	\$ 0.00	\$ 0.00				
No Data Available							
f1. Contractual (IUPs)	\$ 315,116.00	\$ 124,139.00	\$ 439,255.00				
f2. Contractual (State)	\$ 0.00	\$ 0.00	\$ 0.00				
No Data Available							
Category	Percentage	Federal Dollars	Matched Dollars	Total Dollars	Comments		
PATH housing costs are limited to 20% and can only be PATH allowable costs. Personnel who are considered to be a housing cost should be entered here and not included in the Personnel line item. For questions, call your Program Officer.							
g1. Housing (IUPs)	0.70%	\$ 2,278.00	\$ 2,968.00	\$ 5,246.00			
g2. Housing (State)		\$ 0.00	\$ 0.00	\$ 0.00			
No Data Available							
Category	Federal Dollars	Matched Dollars	Total Dollars	Comments			
h. Construction (non-allowable)							
i. Other	\$ 0.00	\$ 0.00	\$ 0.00				
No Data Available							
j. Total Direct Charges (Sum of a-i minus g1)	\$ 327,116.00	\$ 124,139.00	\$ 451,255.00				
Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments			
k. Indirect Costs (Administrative Costs)	\$ 0.00	\$ 0.00	\$ 0.00				
l. Grand Total (Sum of j and k)	\$ 327,116.00	\$ 124,139.00	\$ 451,255.00				

Allocation of Federal PATH Funds	\$	327,299	\$	109,100	\$	436,399
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Source(s) of Match Dollars for State Funds:

Source(s) of Match Dollars for State Funds: Region 1 (Cirrus House) source of match dollars are private donations and agency in-kind services. Region 5 Systems (CenterPointe, Inc.) agency funds. Region 6 Behavioral Health Care (Community Alliance Rehabilitation Services) from Region 6 Behavioral Healthcare agency funds.

Nebraska – 2026 PATH Grant Application

II. Executive Summary

2. State Budget

Planning Period From 10/1/2026 to 9/30/2027			
Category	Federal Dollars	Matched Dollars	Total Dollars
a. Personnel	\$8,627.98	\$0	\$8,627.98
b. Fringe Benefits	\$2,425.13	\$0	\$2,425.13
c. Travel	\$946.89	\$0	\$946.89
d. Equipment	\$0	\$0	\$0
e. Supplies	\$0	\$0	\$0
f1. Contractual (IUPs)	\$315,116	\$124,139	\$451,255
f2. Contractual (State)	\$0	\$0	\$0
g. Construction	\$0	\$0	\$0
h. Other	\$0	\$0	\$0
i. Total Direct Charges (Sum of a-h)	\$327,116	\$124,139	\$451,255
j. Indirect Charges	\$0	\$0	\$0
k. Grant Total (Sum of i and j)	\$327,116	\$124,139	\$451,255
Allocation of Federal PATH Funds	\$327,116	\$109,039	\$436,155

Allocation of Federal PATH Funds

Source(s) of Match Dollars for State Funds:

Region 1 (Cirrus House) Donations & In-kind services

Region 5 Systems (CenterPointe, Inc.) Agency funds

Region 6 (Community Alliance) Agency funds from Region 6 Behavioral Healthcare

Detailed Budget: See next page.

Nebraska Department of Health & Human Services
Division of Behavioral Health
 Budget & Budget Justification 2026 PATH Application

Item: Personnel & Fringe Benefits	Federal Funds	Required Match	Total
State PATH Contact salary (0.18 FTE)	8,627.98	0	8,627.98
Fringe Benefits	2,425.13	0	2,425.13
Total	\$11,053.11	\$0	\$11,053.11

Personnel and fringe benefits support the State PATH Contact position at 0.18 FTE.

Item: Travel	Federal Funds	Required Match	Total
State PATH Monitoring Site Visits	946.89	0	946.89
Total	\$946.89	\$0	\$946.89

SAMHSA has not announced it is hosting a mandatory PATH Grantee Meeting in 2026 therefore only Travel funds for SPC monitoring site visits have been designated.

Contractual	Purpose	Federal Funds	Required Match	Total
Service contracts for identified services (see Provider Intended Use Plans)				
Region 1 (Cirrus House)	Outreach, case management, screening and referral to appropriate services.	\$31,704	\$10,569	\$42,273
Region 5 Systems (CenterPointe, Inc.)	Street outreach and case management, which focuses on moving individuals to appropriate housing while addressing their behavioral and primary health care issues based on their individual needs.	\$74,039	\$27,084	\$101,123
Region 6 (Community Alliance Rehabilitation Services)	Assertive outreach including street outreach, case management, referral to and linkage with behavioral health, income support, and housing services.	\$209,373	\$86,486	\$295,859
Total Contractual		\$315,116	\$124,139	\$439,255

Contracts with three entities to provide PATH service throughout Nebraska.

Summary Direct & Indirect Costs

Direct & Indirect Costs	Federal Funds	Required Match	Total
Total Direct	\$327,116	\$109,039	\$436,155
Indirect	\$0	\$0	\$0
Total Direct & Indirect	\$327,116	\$109,039	\$436,155

Total Project Cost: \$436,155

Total Federal Cost: \$327,116

Source of Match Funds as Identified in Letters of Assurance

Region 1 (Cirrus House)	Donations & In-kind services
Region 5 Systems (CenterPointe, Inc.)	Agency funds
Region 6 (Community Alliance)	Agency funds from Region 6 Behavioral Healthcare

Footnotes:

II. Executive Summary

3. Intended Use Plans

Expenditure Period Start Date: 10/01/2025

Expenditure Period End Date: 09/30/2026

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

Primary IUP Provider	Provider Type	Geographic Service Area	Allocations	Matching Funds	Estimated # to Contact	Estimated # to Enroll
Region 1 Behavioral Health Authority *	Regional Behavioral Health Authority	Region 1 Behavioral Health Services	\$31,704.00	\$10,569.00	25	18
Region 5 Systems *	Regional Behavioral Health Authority	Region 5 Behavioral Health Services	\$74,039.00	\$27,084.00	120	90
Region 6 Behavioral Healthcare *	Regional Behavioral Health Authority	Region 6 Behavioral Health Services	\$209,373.00	\$86,486.00	400	375
Grand Total			\$315,116.00	\$124,139.00	545	483

* IUP with sub-IUPs

Footnotes:

Region V Systems changed the name of their organization to Region 5 Systems.

II. Executive Summary

Intended Use Plans

Region 1 Behavioral Health Authority
4110 Avenue D
Scottsbluff, NE 69361
Contact: Holly Brandt
Email Address:

Provider Type: Other (please specify)
PDX ID:
State Provider ID:
Contact Phone #: 308-635-3173

- **Local Area Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD CoC Program** – Provide a brief description of the organization's collaboration with HUD's **Continuum of Care (CoC) Program**. Describe the organization's participation with local HUD CoC recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary care, mental health, substance use, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization's plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are **literally** and **chronically** homeless, including those with COD, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have a COD; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are **literally homeless**.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illness, and their family members, will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- **Budget Narrative** – Provide a budget and budget narrative that includes the local-area provider's use of PATH funds.

Planning Period From 10/1/2025 to 9/30/2026

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category		Federal Dollars	Matched Dollars	Total Dollars
a. Personnel		\$26,331.00	\$7,014.00	\$33,345.00

Category	Percentage	Federal Dollars	Matched Dollars	Total Dollars
b. Fringe Benefits	82.64 %	\$2,795.00	\$587.00	\$3,382.00

Category	Federal Dollars	Matched Dollars	Total Dollars
c. Travel	\$100.00	\$0.00	\$100.00
d. Equipment	\$0.00	\$0.00	\$0.00
e. Supplies	\$200.00	\$0.00	\$200.00
f. Contractual	\$0.00	\$0.00	\$0.00
g. Housing	\$2,278.00	\$2,968.00	\$5,246.00
h. Construction (non-allowable)			
i. Other	\$0.00	\$0.00	\$0.00
j. Total Direct Charges (Sum of a-i)	\$ 31,704.00	\$ 10,569.00	\$ 42,273.00
k. Indirect Costs (Administrative Costs)	\$0.00	\$0.00	\$0.00
l. Grand Total (Sum of j and k)	\$ 31,704.00	\$ 10,569.00	\$ 42,273.00

Source(s) of Match Dollars print:
☐

Estimated Number of Persons to be Contacted: 25 Estimated Number of Persons to be Enrolled: 18

Estimated Number of Persons to be Contacted who are Literally Homeless: 15

Number staff trained in SOAR in grant year ending in 2025: 2 Number of PATH-funded consumers assisted through SOAR: 0

II. Executive Summary

Intended Use Plans

Cirrus House, Inc.
1509 1st Avenue
Scottsbluff, NE 69361-3106
Contact: Brent Anderson
Email Address:

Provider Type: Consumer-run mental health agency
PDX ID: NE-008
State Provider ID:
Contact Phone #: 308-635-1488

- **Local Area Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD CoC Program** – Provide a brief description of the organization’s collaboration with HUD’s **Continuum of Care (CoC) Program**. Describe the organization’s participation with local HUD CoC recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary care, mental health, substance use, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are **literally** and **chronically** homeless, including those with COD, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have a COD; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are **literally homeless**.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illness, and their family members, will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- **Budget Narrative** – Provide a budget and budget narrative that includes the local-area provider’s use of PATH funds.

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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a. Personnel \$ 26,331 \$ 7,014 \$ 33,345

Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
Case Manager	29,952.00	29.00 %	0.44	13,166.00	3,507.00	16,673.00	
Case Manager	29,952.00	29.00 %	0.44	13,165.00	3,507.00	16,672.00	

Category	Percentage	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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b. Fringe Benefits 8.38% \$ 2,795.00 \$ 587.00 \$ 3,382.00

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments
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c. Travel \$ 100.00 \$ 0.00 \$ 100.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Mileage Reimbursement	\$ 100.00	\$ 0.00	\$ 100.00	

d. Equipment \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

e. Supplies \$ 200.00 \$ 0.00 \$ 200.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Office: Supplies	\$ 200.00	\$ 0.00	\$ 200.00	General supplies, office expenses for paper, ink, electronic health records, etc.

f. Contractual \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

g. Housing \$ 2,278.00 \$ 2,968.00 \$ 5,246.00

Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
Other (Describe in Comments)	\$ 2,278.00	\$ 2,968.00	\$ 5,246.00	Housing may include direct services to clients, including housing assistance for deposits, one-time rent, etc.

h. Construction (non-allowable)

i. Other \$ 0.00 \$ 0.00 \$ 0.00

No Data Available

j. Total Direct Charges (Sum of a-i) \$ 31,704.00 \$ 10,569.00 \$ 42,273.00

Category	Federal Dollars *	Matched Dollars *	Total Dollars	Comments
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k. Indirect Costs (Administrative Costs) \$ 0.00 \$ 0.00 \$ 0.00

l. Grand Total (Sum of j and k) \$ 31,704.00 \$ 10,569.00 \$ 42,273.00

Source(s) of Match Dollars for State Funds:

Cirrus House has designated agency donations and in-kind services for match.

Estimated Number of Persons to be Contacted:

25 Estimated Number of Persons to be Enrolled:

18

Estimated Number of Persons to be Contacted who are Literally Homeless:

15

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Region V Systems changed the name of their organization to Region 5 Systems.

II. Executive Summary

Intended Use Plans

Region 5 Systems

3600 Union Drive

Provider Type: Other (please specify)

PDX ID:

Lincoln, NE 68516

Contact: Patrick Kreifels

Email Address:

State Provider ID:

Contact Phone #: 402-441-4349

- **Local Area Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD CoC Program** – Provide a brief description of the organization’s collaboration with HUD’s **Continuum of Care (CoC) Program**. Describe the organization’s participation with local HUD CoC recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary care, mental health, substance use, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are **literally** and **chronically** homeless, including those with COD, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have a COD; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are **literally homeless**.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illness, and their family members, will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- **Budget Narrative** – Provide a budget and budget narrative that includes the local-area provider’s use of PATH funds.

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category		Federal Dollars	Matched Dollars	Total Dollars
a. Personnel		\$74,039.00	\$7,000.00	\$81,039.00

Category	Percentage	Federal Dollars	Matched Dollars	Total Dollars
b. Fringe Benefits	0.00 %	\$0.00	\$15,346.00	\$15,346.00

Category	Federal Dollars	Matched Dollars	Total Dollars
c. Travel	\$0.00	\$3,600.00	\$3,600.00
d. Equipment	\$0.00	\$0.00	\$0.00
e. Supplies	\$0.00	\$0.00	\$0.00
f. Contractual	\$0.00	\$1,138.00	\$1,138.00
g. Housing	\$0.00	\$0.00	\$0.00

h. Construction (non-allowable)			
i. Other	\$0.00	\$0.00	\$0.00

j. Total Direct Charges (Sum of a-i)	\$	\$74,039.00	\$	\$27,084.00	\$	\$101,123.00
k. Indirect Costs (Administrative Costs)		\$0.00		\$0.00		\$0.00
l. Grand Total (Sum of j and k)	\$	\$74,039.00	\$	\$27,084.00	\$	\$101,123.00

Source(s) of Match Dollars print:

CenterPointe Inc. commits to obligate \$27,084 of the agency's general funds to cover the non-federal cash match requirement of the project.

Estimated Number of Persons to be Contacted:	120	Estimated Number of Persons to be Enrolled:	90
Estimated Number of Persons to be Contacted who are Literally Homeless:	110		
Number staff trained in SOAR in grant year ending in 2025:	3	Number of PATH-funded consumers assisted through SOAR:	8

II. Executive Summary

Intended Use Plans

CenterPointe, Inc.
2202 S 11th Street
Lincoln, NE 68502
Contact: Maggie Peavy
Email Address:

Provider Type: Other (please specify)
PDX ID: NE-001
State Provider ID:
Contact Phone #: 402-475-8717

- **Local Area Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD CoC Program** – Provide a brief description of the organization’s collaboration with HUD’s **Continuum of Care (CoC) Program**. Describe the organization’s participation with local HUD CoC recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary care, mental health, substance use, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are **literally** and **chronically** homeless, including those with COD, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have a COD; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are **literally homeless**.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illness, and their family members, will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
- **Budget Narrative** – Provide a budget and budget narrative that includes the local-area provider’s use of PATH funds.

The state can either enter all the IUPs and associated budgets as in prior years, or they may allow IUP users to enter their own information into WebBGAS. For more information on allowing IUP users to enter their own details, please see the tutorial under the Training Tab in WebBGAS that instructs states and IUP providers on this new process.

* Indicates a required field

Category	Federal Dollars	Matched Dollars	Total Dollars	Comments			
a. Personnel	\$ 74,039	\$ 7,000	\$ 81,039				
Position *	Annual Salary *	% of time spent on PATH *	PATH-Funded FTE	PATH-Funded Salary *	Matched Dollars *	Total Dollars	Comments
Case Manager	37,019.50	1.00 %	1.00	37,019.50	5,500.00	42,519.50	
Outreach worker	37,019.50	1.00 %	1.00	37,019.50	1,500.00	38,519.50	
b. Fringe Benefits	0.00%	\$ 0.00	\$ 15,346.00	\$ 15,346.00	Fringe Benefits @ 23% of Salary		
c. Travel	\$ 0.00	\$ 3,600.00	\$ 3,600.00				
Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments			
Mileage Reimbursement	\$ 0.00	\$ 3,600.00	\$ 3,600.00	Mileage reimbursement @ \$0.44/mile.			
d. Equipment	\$ 0.00	\$ 0.00	\$ 0.00	No Data Available			
e. Supplies	\$ 0.00	\$ 0.00	\$ 0.00	No Data Available			
f. Contractual	\$ 0.00	\$ 1,138.00	\$ 1,138.00				
Line Item Detail *	Federal Dollars *	Matched Dollars *	Total Dollars	Comments			
Other (Describe in Comments)	\$ 0.00	\$ 1,138.00	\$ 1,138.00	Psychiatric consultation			
g. Housing	\$ 0.00	\$ 0.00	\$ 0.00	No Data Available			
h. Construction (non-allowable)							
i. Other	\$ 0.00	\$ 0.00	\$ 0.00	No Data Available			
j. Total Direct Charges (Sum of a-i)	\$ 74,039.00	\$ 27,084.00	\$ 101,123.00				
k. Indirect Costs (Administrative Costs)	\$ 0.00	\$ 0.00	\$ 0.00				
l. Grand Total (Sum of j and k)	\$ 74,039.00	\$ 27,084.00	\$ 101,123.00				

Source(s) of Match Dollars for State Funds:

CenterPointe Inc. commits to obligate \$27,084 of the agency's general funds to cover the non-federal cash match requirement of the project.

Estimated Number of Persons to be Contacted:

120

Estimated Number of Persons to be Enrolled:

90

Estimated Number of Persons to be Contacted who are Literally Homeless:

110

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Region V Systems changed the name of their organization to Region 5 Systems.

II. Executive Summary

Intended Use Plans

Region 6 Behavioral Healthcare

4715 South 132nd Street

Omaha, NE 68137

Contact: Patti Jurjevich

Email Address:

Provider Type: Other (please specify)

PDX ID:

State Provider ID:

Contact Phone #: 402-444-6534

- **Local Area Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
- **Collaboration with HUD CoC Program** – Provide a brief description of the organization’s collaboration with HUD’s **Continuum of Care (CoC) Program**. Describe the organization’s participation with local HUD CoC recipient(s) and other local planning activities and program coordination initiatives, such as coordinated entry activities. If the organization is not currently working with the CoC(s), briefly explain the approaches to be taken by the organization to collaborate with the CoC(s) in the areas where PATH operates.
- **Collaboration with Local Community Organizations** – Provide a brief description of partnerships and activities with local community organizations that provide key services (e.g., outreach teams, primary care, mental health, substance use, housing, employment) to PATH-eligible clients, and describe the coordination of activities and policies with those organizations. Provide specific information about how coordination with other outreach teams will be achieved.
- **Service Provision** – Describe the organization’s plan to provide coordinated and comprehensive services to PATH-eligible clients, including:
 - How the services to be provided using PATH funds will align with PATH goals and maximize serving the most vulnerable adults who are **literally** and **chronically** homeless, including those with COD, to obtain housing and mental/substance use disorder treatment services and community recovery supports necessary to assure success in long-term housing;
 - Any gaps that exist in the current service systems;
 - A brief description of the current services available to clients who have a COD; and
 - A brief description of how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented for PATH enrolled clients.
- **Housing** – Indicate the strategies that will be used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).
- **Client Information** – Describe the demographics of the client population, the projected number of adult clients to be contacted and enrolled, and the percentage of adult clients to be served using PATH funds who are **literally homeless**.
- **Consumer Involvement** – Describe how individuals who experience homelessness and have serious mental illness, and their family members, will be meaningfully involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards.
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Category		Federal Dollars	Matched Dollars	Total Dollars
a. Personnel		\$103,900.00	\$67,646.00	\$171,546.00
Category	Percentage	Federal Dollars	Matched Dollars	Total Dollars
b. Fringe Benefits	60.57 %	\$28,940.00	\$18,840.00	\$47,780.00
Category		Federal Dollars	Matched Dollars	Total Dollars
c. Travel		\$5,400.00	\$0.00	\$5,400.00
d. Equipment		\$0.00	\$0.00	\$0.00
e. Supplies		\$1,200.00	\$0.00	\$1,200.00
f. Contractual		\$49,638.00	\$0.00	\$49,638.00
g. Housing		\$0.00	\$0.00	\$0.00
h. Construction (non-allowable)				
i. Other		\$20,295.00	\$0.00	\$20,295.00
j. Total Direct Charges (Sum of a-i)		\$ 209,373.00	\$ 86,486.00	\$ 295,859.00
k. Indirect Costs (Administrative Costs)		\$0.00	\$0.00	\$0.00
l. Grand Total (Sum of j and k)		\$ 209,373.00	\$ 86,486.00	\$ 295,859.00

Source(s) of Match Dollars print:

Non-federal funds provided by Region 6 Behavioral Healthcare, the area mental health authority, to Community Alliance Rehabilitation Services for the provision of services to persons served.

Estimated Number of Persons to be Contacted:	400	Estimated Number of Persons to be Enrolled:	375
Estimated Number of Persons to be Contacted who are Literally Homeless:	400		
Number staff trained in SOAR in grant year ending in 2025:	8	Number of PATH-funded consumers assisted through SOAR:	99

II. Executive Summary

Intended Use Plans

Community Alliance Rehabilitation Services, In.c
7150 Arbor Street
Omaha, NE 68106-3063
Contact: Carole Boye
Email Address:

Provider Type: Other (please specify)
PDX ID: NE-002
State Provider ID:
Contact Phone #: 402-341-5128

- **Local Area Provider Description** – Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.
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I. Grand Total (Sum of j and k)	\$ 209,373.00	\$ 86,486.00	\$ 295,859.00	

Source(s) of Match Dollars for State Funds:

Non-federal funds provided by Region 6 Behavioral Healthcare, the area mental health authority, to Community Alliance Rehabilitation Services for the provision of services to persons served.

Estimated Number of Persons to be Contacted:

400 Estimated Number of Persons to be Enrolled:

375

Estimated Number of Persons to be Contacted who are Literally Homeless:

400

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Region V Systems changed the name of their organization to Region 5 Systems.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

III. State Level Information

A. Operational Definitions

Term	Definition
Individual Experiencing Homelessness:	An individual is considered Homeless if he/she: 1) lacks a fixed, regular, and adequate night-time residence; 2) has a primary night-time residence that is (a) a supervised publicly or privately operated shelter designed to provide temporary living accommodations; (b) an institution that provides a temporary residence for individuals intended to be institutionalized; or (c) a public or private space not designed, or ordinarily used as, regular sleeping accommodations for human beings.
Imminent Risk of Becoming Homeless:	Individuals are considered to be at Imminent Risk of Becoming Homeless if: (1) they are in the process of being evicted from dwelling units or are being discharged from institutions; (2) they have no subsequent residences identified; and (3) they lack the resource and support networks to obtain access to housing.
Serious Mental Illness (SMI):	An individual is considered to have a Serious Mental Illness if he/she meets the following four criteria. 1. Diagnosis consistent with a serious and persistent mental illness under the current edition of DSM. 2. Persistent mental illness as demonstrated by the presence of the disorder for the last 12 months or which is expected to last 12 months or longer and will result in a degree of limitation that seriously interferes with the client's ability to function independently in an appropriate manner in two of three functional areas. 3. Presence of functional deficits in two of three functional areas as evidenced in: Vocational/Education; Social skills; and/or Activities of Daily Living. 4. Symptoms and functional deficits are related to the primary diagnosis.
Co-occurring Disorders (COD):	An individual is considered to have a Co-occurring Serious Mental Illness and Substance Use Disorder if he/she meets the criteria for Serious Mental Illness, and has a co-existing Substance Use Disorder that conforms to the diagnostic criteria for Psychoactive Substance Use Disorders in the most recent edition of the Diagnostic and Statistical Manual for Mental Disorders (DSM).

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

III. State Level Information

B. Collaboration

Narrative Question:

Describe how the state will implement a collaborative relationship with the department/office responsible for providing housing to qualifying residents.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

III. State Level Information

B. Collaboration - Describe how the state will implement a collaborative relationship with the department/office responsible for providing housing to qualifying residents.

Hundreds of individuals with mental illness are living successfully in their own apartments as a result of the commitment of state resources to rental assistance and housing coordinators. More individuals with disabilities are living in the community today as the Department of Health and Human Services (DHHS) has reduced overall the number of institutional beds and repurposed funding to expand community-based services. Individuals with disabilities of all ages are able to remain in their homes and communities as a result of state agencies' efforts to secure funding from federal sources, including grants and Medicaid waivers. DHHS has created a housing administrator leadership position within the Division of Behavioral Health to work across departments to facilitate statewide system development and provide education and better align prioritization of housing and service resources.

The Nebraska State PATH Contact participates in the activities of agencies leading efforts to coordinate and address the housing needs of people experiencing homelessness or marginally housed.

This includes participation in statewide groups which facilitate statewide collaboration among homeless service providers; housing authorities; the Continuums of Care (CoCs); Nebraska Homeless Assistance Program; the Nebraska Investment Finance Authority (NIFA); the Nebraska Commission on Housing and Homelessness (NCHH); Nebraska Department of Economic Development, and other communities and organizations throughout the state. The goal of this collaboration is to share information and inform policies on the administration of affordable housing programs, particularly in the areas of special needs housing and permanent supportive housing.

NIFA is designated as Nebraska's housing credit allocation agency. NIFA's mission includes providing a broad range of financial resources for the development of affordable housing. NIFA also provides technical assistance for such activities. Nebraska DHHS is actively collaborating with NIFA through a formal structure for collaboration to better position Nebraska to ensure that adequate housing and services are available for all citizens of Nebraska, including those who are homeless and those with disabilities. NIFA is currently implementing a HUD Section 811 Project Rental Assistance Program (awarded in 2024 but not approved by HUD for implementation until 2026) to develop permanent supportive housing for extremely low-income individuals with disabilities across the State of Nebraska.

The Department of Economic Development is the state's housing agency and administers HUD community and housing programs and state housing development funds.

The Nebraska Homeless Assistance Program (NHAP) is the recipient of HUD Emergency Solution Grant funds allocated for the BoS CoC and the State of Nebraska Homeless Shelter Assistance Trust Fund (HSATF) dollars that are allocated statewide. NHAP coordinates with the

entire Continuum of Care System on an ongoing basis by participating in meetings, leading strategic planning efforts, coordinating with ESG entitlement city administrators, supporting the Homeless Management Information System (HMIS), and participating in the establishment and evaluation of ESG and CoC funding priorities. The State of Nebraska has four ESG entitlement cities, which are the cities of Lincoln (Region 6 Lincoln CoC), Omaha and Bellevue (Region 7 Omaha CoC), and Grand Island (Region 2 North Central which is in the Balance of State CoC). The Non-entitlement area of the state includes the remaining local five regions which collectively form the Balance of State (BoS) CoC. The entire state is referred to as the Continuum of Care System.

Under the guidance and direction of Nebraska Commission on Housing and Homeless, the State Continuum of Care Committee is charged with implementing the Opening Doors: 10 Year Plan to Prevent and End Homelessness in Nebraska. The Opening Doors Plan is considered a living document and it will reflect the actual and evolving reality of funding, economics, and society. Planning activity to update the Opening Doors Plan continues. Public and private partners are currently in discussion to either update or create a new plan.

The State Continuum of Care Committee has been established to effectively help facilitate a cohesive statewide CoC network. It includes representation from governmental, homeless and/or formerly homeless individuals, public, and private entities. All seven local CoC regions have representation on the State CoC Committee.

The purpose of the State CoC Committee is to support the objectives of the Nebraska Commission on Housing and Homelessness (NCHH). The NCHH serves as an advisory body to NHAP, also. To accomplish this, the following objectives are observed:

- 1) Focus attention of the need of persons who are homeless and persons at risk of homelessness;
- 2) Propose solutions to the needs of persons who are homeless and persons at risk of homelessness;
- 3) Encourage and support continuity, coordination, and cooperation at the State level among the State agencies that deliver programs and services to persons who are homeless and persons at risk of homelessness;
- 4) Coordinate the development of a statewide comprehensive plan; and
- 5) Coordinate with the NCHH in developing recommendations for programs and/or services that involve housing persons who are homeless persons at risk of homelessness.

III. State Level Information

C. Veterans

Narrative Question:

Describe how the state gives consideration in awarding PATH funds to entities with demonstrated effectiveness in serving veterans experiencing homelessness.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Nebraska – 2026 PATH Grant Application

III. State Level Information

C. Veterans - Describe how the state gives consideration in awarding PATH funds to entities with demonstrated effectiveness in serving veterans experiencing homelessness.

Nebraska addresses the needs of veterans and military families in all our behavioral health service activities, including PATH. The Nebraska Department of Health and Human Services Division of Behavioral Health (NDHHS-DBH) is sensitive to the distinctive needs of veterans and military families and expects PATH providers to outreach and extend services to veterans and their families. The DHHS-DBH housing administrator and State PATH Contact work alongside the Nebraska Veterans Administration representative on the Nebraska Olmstead Committee on veteran housing and homeless issues, including with state and local housing agencies to support veterans and military families experiencing homelessness.

All Nebraska PATH providers coordinate and collaborate across systems to serve veterans and military families, including participation in coordinated entry systems in their Continuum of Care (CoC) and the By-Name List entry program coordinated by the Veterans Administration.

Ending veteran homelessness is one goal of the Nebraska Commission on Housing and Homelessness state homeless plan “Opening Doors: 10 Year Plan to Prevent and End Homelessness in the State of Nebraska, 2015-2025.” As of March 2026, the United States Department of Veterans Affairs has recognized the collective, cooperative effort among agencies across the CoC has made instances of homelessness among the veteran population rare, brief and non-recurring in the Nebraska Balance of State CoC (NE-500) and Lincoln CoC (NE-502). An end to homelessness means that every community will have a comprehensive response in place that ensures homelessness is prevented whenever possible, or if it can’t be prevented, it is a rare, brief, and one-time experience.

As part of their active participation in their CoC, PATH providers assist veterans in accessing behavioral health services within the broader community including working with area Supportive Services for Veteran Families (SSVF) offices and HUD-Veterans Affairs Supportive Housing (HUD-VASH) programs in urban and rural Nebraska. HUD-VASH links and assists eligible veterans in obtaining needed housing and supports. PATH providers train staff on how to coordinate with the local Veterans Administration office to facilitate delivery of services in their Omaha city (Region 6), Lincoln city (Region 5), and Scotts Bluff County (Region 1) service areas where HUD-VASH is available.

Region 1 - Cirrus House, the PATH provider in western Nebraska’s Panhandle area of the Balance of State CoC, provides training for their staff on how to better understand the military culture and collaborate with the programs available for eligible veterans. They have positive relationships with veteran’s service agencies and when working with veterans they schedule appointments with appropriate veteran benefits staff and organizations. There are currently three case managers at veterans organizations who were previous Cirrus House employees and we

have maintained positive working relationships with all of them. As previous employees they are intimately aware of the services offered and are able to make appropriate cross referrals and continue Cirrus House's active partnerships with area veterans service agencies in the multi-state area of Nebraska South Dakota and Wyoming. For example, Cirrus House and its CoC work with the Southwestern Wyoming Recovery Access Programs and the Black Hills VA Health Care for Homeless Veterans. In April of each year, Cirrus House collaborates with the Nebraska, Wyoming and South Dakota state veteran's service agencies at a Stand Down event in Scottsbluff, Nebraska, providing supplies, services and referrals for other assistance to homeless Veterans.

In Region 5 - Lincoln, CenterPointe provides housing and support services to homeless veterans and their families through a HUD Permanent Supportive Housing grant and one Veterans Health Administration Grant. The HUD project provides 9 apartments in scattered site locations to veterans who may not be eligible for VA benefits. Residential Contract provides 10 emergency housing beds in a congregate living facility. In addition, CenterPointe is actively involved in the CoC's effort to end veteran's homelessness. A by-name list of veterans who are homeless is reviewed weekly with the goal of moving all veterans to permanent housing through coordinated entry.

In Region 6 – Omaha, the PATH provider, Community Alliance Rehabilitative Services, partners with the broader behavioral health community in both outreach and services to veterans and military families. The programs are aware of the statistics associated with suicide among veterans and is vigilant in working with veterans to access needed behavioral health services. If eligible for behavioral health services at the Veterans Administration, the case manager assists the veteran in connecting and gaining access. The case manager also coordinates transitions into the VA system (or out of the system) that may become necessary. There can be unique access issues at the Veterans Administration that staff can assist the eligible veteran in navigating. If the veteran is not eligible, needed behavioral health services are coordinated within the broader community. Community Alliance staff also work with Blue Valley Community Action Partnership with the Supportive Services for Veteran Families (SSVF) program as needed.

Community Alliance provides training for staff working within its homeless services including those that are PATH funded related to how to coordinate with the local Veterans Administration. Homeless services staff also work with HUD's VASH program linking and assisting eligible veterans in obtaining needed housing. Case management staff work closely to transition case management responsibilities to the HUD VASH program case managers.

III. State Level Information

D. Alignment with PATH Goals

Narrative Question:

Describe how the services to be provided using PATH funds will target outreach and case management as priority services; including serving the most vulnerable adults who are **literally** and **chronically** homeless, and to individuals with a history of incarceration.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Nebraska – 2026 PATH Grant Application

III. State Level Information

D. Alignment with PATH Goals

The Nebraska PATH Program will target street outreach and case management as priority services in areas of the state with the highest concentration of people who are experiencing homelessness, particularly adults who are literally and chronically homeless, and individuals with a history of incarceration. PATH providers leverage their outreach resources by collaborating with other public and private service providers in their Continuums of Care, including Veterans Administration Street Outreach, Nebraska Homeless Assistance Program, public school systems, religious organizations, soup kitchens, hospitals and law enforcement.

Nebraska PATH providers are active participants in their Continuums of Care (CoC) and the broader community. They are a recognized partner in providing a pathway out of homelessness and operate within their respective referral networks to connect PATH-assisted consumers to treatment services. PATH providers target outreach and case management as priority services and upon enrollment into the PATH program link individuals experiencing homelessness with support services and resources, assisting them to access housing, income and mainstream resources, as well address their individual goals to prevent future episodes of homelessness.

Nebraska PATH provider agencies employ peers who have various behavioral health and homeless lived experiences. This is helpful to better understand the culture of homelessness in general and the needs of people experiencing homelessness who struggle with a disabling condition such as a serious mental illness, substance use disorder or co-occurring condition.

All Nebraska PATH providers utilize the Homeless Management Information System (HMIS) and work with their local HMIS administrators who coordinate data and reporting services and training opportunities.

The CoCs have implemented common assessment and coordinated entry systems. The common assessment tool used across the state and by PATH providers is the Vulnerability Index & Service Prioritization Decision Assistance Tool (VI-SPDAT). The PATH providers in the Balance of State and Lincoln Continuums of Care have implemented a coordinated entry referral and priority listing system, known as “All Doors Lead Home,” utilizing a review protocol to prioritize the most vulnerable in the CoC, identify appropriate and available housing options, and offer housing as quickly as possible regardless of location of the housing or person experiencing homelessness. The PATH provider in the Omaha Metro Area Continuum of Care for the Homeless, Community Alliance, participates in a similar system, known as the Homeless Review Team, within its Threshold Continuum of Care for the Homeless which consists of a weekly coordination meeting specifically focused on the individuals who identified as most vulnerable and have the highest needs on the VI-SPDAT.

III. State Level Information

E. Alignment with State Comprehensive Mental Health Services Plan

Narrative Question:

Describe how the services to be provided using PATH funds are consistent with the State Comprehensive Mental Health Services Plans.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

III. State Level Information

E. Alignment with State Comprehensive Mental Health Services Plan

The Nebraska Behavioral Health Services Act designates the Nebraska Department of Health and Human Services Division of Behavioral Health (DHHS-DBH) as the chief behavioral health authority for the State [§71- 806 (1)]. The DHHS-DBH is both the State Mental Health Authority (SMHA) and the State Substance Abuse Authority [or Single State Authority (SSA)]. Therefore, the DHHS-DBH is responsible for managing both the Community Mental Health Services Block Grant (CMHSBG) and the Substance Use Prevention, Treatment, and Recovery Services Block Grant (SUPTRSBG).

Behavioral health services funded through DHHS-DBH are available to provide a continuity of care for individuals who have been served through programs providing outreach and services for rural residents, older adults, and individuals who experience homelessness in frontier, rural and urban areas. Behavioral health services funded through the CMHSBG and the SUPTRSBG are identified below.

Community Mental Health Services Block Grant

Assertive Community Treatment	Community Support	Day Treatment
Professional Partner Wraparound	Psych Residential Treatment	Bed Registry
Day Rehabilitation	Coordinated Specialty Care	

Substance Abuse Prevention & Treatment Block Grant

Assessment	Intensive Outpatient	Recovery Support
Community Support	Opioid Treatment Program	Short Term Residential
Dual Residential	Outpatient Psychotherapy	Social Detox (3.2)
Halfway House	Prevention/Synar activities	Therapeutic Community
Intermediate Residential	Medically Monitored Withdrawal Management (3.7)	

In addition to the block grant prioritized services, the DHHS-DBH and DHHS Division of Medicaid and Long-Term Care provide an array of state funded behavioral health services, many of which benefit persons with serious mental illness experiencing homelessness that may not have been reached via PATH funded activities and services. These behavioral health services include, but are not limited to, consumer-provided services, support services, inpatient residential, and nonresidential services. These services are provided for the prevention, diagnosis, and treatment of behavioral health disorders and the rehabilitation and recovery of adults and youth with such disorders.

Persons who are experiencing homelessness and have serious mental illness in Nebraska have specialized needs that may not be met by more traditional service delivery methods. PATH works with local area providers in areas with the highest rates of homelessness who provide

outreach, engagement, and meet the immediate needs of individuals experiencing homelessness and at the same time assist consumers in developing self-sufficiency through referral and attainment of services. PATH funds support the outreach and engagement activities of local agencies across Nebraska, a geographically large area with 99.3% of its land area classified as rural based on population size. The National Center for Frontier Communities, using the state office of rural health definition of frontier, classified 39 of the 93 Nebraska counties as frontier based on census data. The Health Resources & Services Administration identifies 88 of Nebraska's 93 counties as designated federal mental health professional shortage areas.

In addition to the PATH funds that support services in areas with the highest rates of homelessness, the Nebraska Homeless Assistance Program (NHAP) within the DHHS Division of Public Health supports a network of shelter, supportive housing, and service providers. These providers plan for and provide a balance of emergency, transitional, and permanent housing and service resources to address the needs of people who are experiencing homelessness so they can make the critical transition from homelessness to jobs, independent living, and permanent housing. For more information on NHAP see the DHHS web site at:

<http://dhhs.ne.gov/Pages/Homeless-Assistance.aspx>

Partnerships and collaboration with public and private systems, as well as with individuals, families, and communities, are important components in systems of care surrounding each individual served. For example, other state agencies (e.g., State Probation through the Nebraska Supreme Court, the Nebraska Department of Correctional Services, the Nebraska Department of Education – Office of Vocational Rehabilitation (NDE-VR), and the Nebraska Department of Veterans' Affairs fund or support behavioral health services for specific populations. The DHHS-DBH also works closely with NDE-VR to provide Supported Employment services to individuals with serious mental illness and substance use disorders.

III. State Level Information

F. Process for Providing Public Notice

Narrative Question:

Describe the process for providing public notice to allow interested parties (e.g., family members; individuals who are PATH eligible; mental health, substance use disorder, and housing agencies; the general public) to review the proposed use of PATH funds including any subsequent revisions to the application. Describe opportunities for these parties to present comments and recommendations prior to submission of the state PATH application to SAMHSA.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Nebraska – 2026 PATH Grant Application
III. State Level Information
F. Process for Providing Public Notice

The State PATH Contact (SPC) will be requesting a Revision Request to complete the Public Notice activities which have not been completed as necessary at this time. Any public comments or questions will be identified here upon completion of the public notice.

The SPC will distribute a Notice of Intent to apply for Nebraska Projects for Assistance in Transition from Homelessness (PATH) Formula Grant Program to the Nebraska Department of Health and Human Services – Division of Behavioral Health (DBH) Listserv on [.....], 2026 for public comment. Public comment will be invited in the period [.....] through [.....], 2026. This main DBH listserv has 1,200 subscribers. The notice will identify the Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) has invited the State of Nebraska to apply for Federal Fiscal Year 2026 funding under the Projects for Assistance in Transition from Homelessness (PATH) Formula Grant Program.

Below will be the Notice of Intent to apply to be distributed.

Notice of Intent to Apply

Nebraska Projects for Assistance in Transition from Homelessness (PATH) Formula Grant Program

The Division of Behavioral Health is sharing this information about the intent to apply for federal Fiscal Year 2026-2027 funding under the Projects for Assistance in Transition from Homelessness (PATH) Formula Grant Program. The public is invited to review and provide written comments regarding the Nebraska PATH Program Application by 4:00 PM on [.....], 2026. At the close of the comment period all responses submitted to the posted Notice of Intent to Apply for the Projects for Assistance in Transition from Homelessness (PATH) Formula Grant Program will be reviewed.

The goal of the PATH formula grants is to reduce or eliminate homelessness for individuals who are homeless or at imminent risk of becoming homeless and who have serious mental illnesses (SMIs) or co-occurring SMIs and substance use disorders. Through its services, PATH links a vulnerable population who experience persistent and pervasive health disparities to mainstream and other supportive services.

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) has invited the State of Nebraska to apply for federal Fiscal Year 2026-2027 funding under the Projects for Assistance in Transition from Homelessness (PATH) Formula Grant Program. The PATH Program is authorized under Section 521 of the Public Health Services Act, Title V, Part C, as amended. You are invited to send written comments regarding the Nebraska PATH Program Application via email or mail to John Trouba at john.trouba@nebraska.gov or John Trouba, Federal Aid Administrator, DHHS Division of Behavioral Health, PO Box 95026, Lincoln, NE 68509-5026, by 4:00 p.m. [.....], [.....], 2026.

It is the intent of the State of Nebraska to fund Regional Behavioral Health Authority PATH program grantees at 2025-2026 PATH levels if funding is available, all application elements are met, and the grantee has fulfilled all prior grant agreement requirements.

The PATH Program grant is intended to reduce or eliminate homelessness for individuals with serious mental illness or co-occurring serious mental illness and substance use disorders or who are at imminent risk of becoming homeless. PATH funds are used to provide an array of allowable services, including street outreach, case management and services which are not supported by mainstream community mental health programs.

The State of Nebraska is a minimum allotment state for the PATH Program grant but has been allocated additional funding for the current program year. The maximum amount the State can receive is \$327,116. As required by Statute, states must agree to make available, directly or through donations from public or private entities, non-federal contributions that are not less than \$1 (in cash or in kind) for each \$3 of federal funds. A maximum of 4% (\$12,000) of the grant allotment can be used for state administrative expenses. At least \$315,116 will be subgranted to Regional Behavioral Health Authorities for three local agencies who will provide street outreach, case management, screening, diagnostic and short-term treatment, and/or housing assistance services to homeless individuals with serious mental illness. The three local agencies providing PATH program services will provide \$109,039 required match through private donations, agency revenue and/or in-kind services.

A draft of the Nebraska PATH Program Federal Fiscal Year 2026-2027 Application is available upon request from the NDHHS-DBH. Please contact John Trouba, State PATH Contact at the Division of Behavioral Health via email john.trouba@nebraska.gov or at (402) 471-7824 to obtain an electronic copy.

#END

The final application to be submitted in WebBGAS will be posted to the DBH website from the date of its submission through the grant award period. The URL will be <http://dhhs.ne.gov/Pages/Behavioral-Health.aspx> and the document will be located in the General Documents section of the page.

The grant documentation review process is being conducted and completed by the Nebraska SPC.

III. State Level Information

G. Programmatic and Financial Oversight

Narrative Question:

Describe how the state will provide necessary programmatic and financial oversight of PATH-supported providers, such as site visits, evaluation of performance goals, audits, etc. In cases where the state provides funds through intermediary organizations (i.e., county agencies, regional behavioral health authorities), describe how these organizations will monitor the use of PATH funds.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Nebraska – 2026 PATH Grant Application
III. State Level Information
G. Programmatic and Financial Oversight

Nebraska has six established behavioral health regions which together cover the entire state. Each region is created by Interlocal Agreement and established as a Regional Behavioral Health Authority, statutorily responsible for providing direct oversight of the local supported behavioral health services network of providers. Programmatic and financial oversight takes place through monthly and/or quarterly conference calls or meetings and quarterly reports from the Regions, financial audits, and contract compliance provisions that are reported to the State. The Nebraska Department of Health and Human Services-Division of Behavioral Health (NDHHS-DBH) contracts with three of the behavioral health regions (1, 5, and 6) to provide PATH services through subawards to local area PATH providers. The Regions subcontract with a provider in their respective region to carry out the services. The Regions and NDHHS-DBH State PATH Contact separately conduct provider site visits to review programmatic activity. In addition, calls are conducted and electronic messages are exchanged with the State PATH Contact, the Regional Behavioral Health Authority PATH contacts, and the PATH providers to collaborate and coordinate information.

State level activities include reviews of quarterly activity reports and monthly billing documents, technical assistance, and contract compliance provisions with the Regions and local PATH providers. All PATH Providers are also enrolled in the public mental health and substance abuse network provider system and, therefore, must meet system and network management enrollment criteria.

The PATH provider monitoring site visits include a review of client records, personal interviews with at least one consumer who is benefiting from PATH services, discussions with PATH staff, as well as a tour of the facilities, operations, and in the field street outreach activity.

III. State Level Information

H. Selection of PATH Local-Area Providers

Narrative Question:

Describe the method(s) used to allocate PATH funds to areas and providers with the greatest number of individuals who experience homelessness with serious mental illnesses or co-occurring substance use disorders (i.e., through annual competitions, distribution by formula, data driven, or other means).

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Nebraska – 2026 PATH Grant Application

III. State Level Information

H. Selection of PATH Local-Area Providers

Nebraska proposes to continue funding the three Regions in the same amount as it did previously in the FY2025 project period. The PATH funds are allocated to the Regions as follows:

- Region 1 \$31,704
- Region 5 \$74,039
- Region 6 \$209,373

According to the Census Bureau's Population Estimates Program (PEP), which produces estimates of the population on an annual basis, Nebraska's 2023 population was 1,978,379. The five counties that comprise Region 6 Behavioral Health Region (Omaha) have a total population of 875,211, (44.2%) and the sixteen counties that comprise Region 5 Behavioral Health Region (Lincoln) have a total population of 488,323 (24.7%). Combined, these two regions constitute sixty-nine percent of the State population and have the largest population of people experiencing homelessness in Nebraska.

In each of the three PATH providers' local area are military installations.

- Both federal and state military installations are located in Omaha (Region 6), including the U.S. Air Force Offutt Air Force Base, the host base for the 55th Wing and US Strategic Air Command, supporting more than 50 mission partners including the 557th Weather Wing, the 595th Command & Control Group, as well as 44,000 family members and retirees in the local area. In addition, the base co-locates the Nebraska Air National Guard 170th Group and Nebraska Army National Guard.
- In the Lincoln (Region 5) area, military bases include the Nebraska Air National Guard 155th Air Refueling Wing and Nebraska Army National Guard.
- The Scottsbluff (Region 1) area is home to units of the Nebraska Army National Guard. PATH providers are cognizant of the statistics associated with suicide among veterans and are vigilant in working with veterans who are experiencing homelessness to access needed behavioral health services.

According to the 2024 Point in Time (PIT) summary count data (the latest available), Region 6 and Region 5 account for 79% of the adults who are experiencing homelessness. As the state population continues to increase, these two regions continue to represent a greater share of the state population as it becomes more metropolitan-based. Among the adult population identified experiencing homelessness in Nebraska, 44% were identified as having a Serious Mental Illness, compared to 42% in 2023 and 84% of this population live in Region 6 and Region 5. In addition, Region 6 and Region 5 are home to 86% of veterans who are experiencing homelessness. The geographic distribution of individuals experiencing homelessness is consistent year-to-year, therefore, Region 6 and Region 5 receive the largest portion of the PATH funds. The remainder of the funds is allocated to the Scottsbluff area (Region 1) in western Nebraska, part of the Balance of State Continuum of Care.

III. State Level Information

I. Location of Individuals with Serious Mental Illnesses or Co-Occurring Disorders who are Experiencing Homelessness

Narrative Question:

Indicate the number of individuals with SMI/COD experiencing homelessness by each region or geographic area of the entire state. Indicate how the numbers were derived and where the selected providers are located on a map.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

III. State Level Information

I. Homelessness - Location of Individuals with Serious Mental Illness who are Experiencing Homelessness

Nebraska has PATH providers located in three cities: Scottsbluff – Region 1 Behavioral Health Authority (Region 1), Lincoln – Region 5 Behavioral Health Authority (Region 5), and Omaha – Region 6 Behavioral Health Authority (Region 6). Nationally, it is estimated that 35%-45% of persons who are experiencing homelessness may have a Serious Mental Illness (SMI), and 45% may have a co-existing substance use disorder.

The chronically homeless population has higher rates of behavioral health needs. According to the Office of National Drug Control Policy, approximately 30 percent of the chronically homeless population has a SMI and around two-thirds have a primary substance use disorder or other chronic health condition. According to estimates reported in the 2011 SAMHSA factsheet “Current Statistics on Prevalence and Characteristics of People Experiencing Homelessness in the United States,” 45% of Veterans who are experiencing homelessness experience mental illness.

Each regional CoC addresses community-level planning, identify service gaps, and plan and prioritize new and renewal CoC projects within their respective regions. Each regional CoC collects, reports, and submits information and project applications to the U.S. Department of Housing and Urban Development (HUD).

The 2024 Point-in-Time (PIT) Count was conducted by each CoC in Nebraska on one night January during the last ten days of 2024. The HUD data for the 2025 PIT are not yet available. The 2024 PIT counts are reported in this grant application.

There are three reporting CoC in Nebraska which encompass the entire geographic area of the state, these include the NE-500-Balance of State CoC, NE-501-Omaha CoC, and NE-502-Lincoln CoC. The Balance of State CoC is the HUD recognized consolidation of the other regional CoCs.

- According to the 2024 PIT count, across the state, the total number of adults experiencing homelessness in Nebraska increased 11% between 2023 (2,043) and 2024 (2,260).
- The number of adults experiencing homelessness who also have a SMI increased 14% between 2023 (862) and 2024 (986).
- The number of veterans experiencing homelessness decreased 2% between 2023 (132) and 2024 (129), following the 12% increase between the 2021 and 2022 PIT counts. The count of veterans with serious mental illness decreased 2% between 2023 (61) and 2024 (60).

The NE-501 Omaha CoC continues to report the largest number of adults experiencing homelessness within the state, a count of 1,407, representing 62% of the state total in 2024 (2,260). The Omaha CoC continues to report the largest the number of veterans experiencing homelessness (92, or 71% of the state total), and veterans experiencing homelessness who also have a SMI (42, or 70% of the state total). The city of Omaha is the largest city in the state, with a 2024 population of 489,265 and a metropolitan area population of 1,001,186. However, the NE-501 Omaha CoC only includes two counties of the metropolitan area, Douglas and Sarpy, which combined have a 2024 total population of 805,986.

- The Omaha CoC 2024 PIT count of adults experiencing homelessness increased 8% between 2023 (1,301) and 2024 (1,407).
- The count of adults with a SMI increased 17% between 2023 (574) and 2024 (671).
- The count of veterans experiencing homelessness remained steady at 92 in both report years.
- The count of veterans experiencing homelessness who also have a SMI did not change over the period, 42 in 2023 and 2024.

The NE-502 Lincoln CoC 2024 PIT continues to report the third largest number of adults experiencing homelessness among the CoCs (375, 17% of the state total). The city of Lincoln is the second largest city in the state with a 2024 population of 300,619. The NE-502 Lincoln CoC boundary coincide with that of the city of Lincoln.

- The Lincoln CoC 2024 PIT count of adults experiencing homelessness increased 12% between 2023 (334) and 2024 (375).
- The number of adults experiencing homelessness who also have a SMI was the same count of 163 in both 2023 and 2024.
- The count of veterans experiencing homelessness and estimate of veterans experiencing homelessness who also have a SMI decreased 10% and 15%, respectively. The count of veterans decreased to 19 in 2024 from 21 in 2023.
- The count of veterans experiencing homelessness who also have a SMI decreased to 9 in 2024 from 10 in 2023.

The NE-500 Balance of State CoC 2024 PIT continues to report the second largest number of adults experiencing homelessness (478, 21% of the state total). The Balance of State CoC encompasses the balance of the state not served by NE-501 Omaha CoC and NE-502 Lincoln CoC, which represents over 99% of the total land area of the state. Nebraska funds a PATH provider located in the western portion of the Balance of State CoC that works with local area communities and homeless services providers. The distance between the PATH provider located in the NE-501 Omaha CoC and the PATH providers located in the NE-502 Lincoln CoC and NE-500 Balance of State CoC is 50 miles and 455 miles, respectively.

- The 2024 PIT count of adults experiencing homelessness increased 17% between 2023 and 2024.
- The number of adults experiencing homelessness who also have an SMI increased by 22%, from 125 to 152 between 2023 and 2024.

- The count of veterans experiencing homelessness decreased to 18 in 2024 from 19 in 2023.
- The count of veterans who also have a SMI remained constant at 9 in both 2023 and 2024.

Nebraska PATH providers utilize the Homeless Management Information System (HMIS) to collect, utilize and report PATH service activities and in their internal data evaluation and reporting activities. There are two HMIS Administrators serving the Nebraska PATH providers. Two PATH providers, Region 1 (Cirrus House) and Region 5 (CenterPointe), use the University of Nebraska-Lincoln Center on Children, Family, and the Law which is located in Lincoln, Nebraska. The HMIS Administrator for Region 6 (Community Alliance) is the Institute for Community Alliances in Iowa. Both HMIS Administrators provide new user training and assistance for PATH HMIS users. Both HMIS systems use Clarity by BitFocus.

The 2023 and 2024 PIT reports published by the two Nebraska Homeless Management Information System (HMIS) Administrators serving the state are reported in the table below.

SUMMARY OF HOMELESS POPULATIONS – PIT COUNT 2023 & 2024								
Continuum of Care	Total Adults		Total Adults with SMI		Of Total Adults / # Of Veterans		# Of Veterans With SMI Estimate*	
	2023	2024	2023	2024	2023	2024	2023	2024
NE-500 Balance of State CoC (CoC Regions 1-5)	408	478	125	152	19	18	9	9
NE-501 Omaha CoC (CoC Region 7)	1,301	1,407	574	671	92	92	42	42
NE-502 Lincoln CoC (CoC Region 6)	334	375	163	163	21	19	10	9
TOTAL	2,043	2,260	862	986	132	129	61	60
* “# of Veterans with SMI” is estimated based on SAMHSA 2011 factsheet “Current Statistics on Prevalence and Characteristics of People Experiencing Homelessness in the United States,” that states 45% of veterans experiencing homelessness are also experiencing a mental illness.								

III. State Level Information

J. Matching Funds

Narrative Question:

Describe the sources of the required PATH match contributions and provide assurances that these contributions will be available at the beginning of the grant period.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Nebraska – 2026 PATH Grant Application
III. State Level Information
J. Matching Funds

The sources of the required PATH match contributions are provided by each PATH Provider. These sources are identified for each PATH Provider, as well as assurances that these match contributions will be available at the beginning of the grant period.

Region 1 - Cirrus House, Inc. is utilizing donations to the agency and in-kind agency services for the PATH match contribution.

Region 5 - CenterPointe, Inc. is utilizing agency general funds for the PATH match contribution.

Region 6 - Community Alliance Rehabilitation Services is utilizing non-federal funds supporting services from Region 6 Behavioral Healthcare as the source of the PATH match contribution.

At this time, the Letters of assurances of PATH match contributions are not available. Nebraska SPC will has contacted the Nebraska SPO requesting that a revision request be opened in order to update this document with the images of these letters.

Letters of assurances of PATH match contribution and available at the beginning of the grant period will be provided below.

Region 1 - Cirrus House, Inc. Letter of Assurance of Matching Funds

Region 5 - CenterPointe, Inc. Letter of Assurance of Matching Funds

Region 6 – Community Alliance Rehabilitation Services Letter of Assurance of Matching Funds

III. State Level Information

K. Other Designated Fundings

Narrative Question:

Indicate whether the Community Mental Health Services Block Grant (MHBG), the Substance Use Prevention, Treatment, and Recovery Services Block Grant (SUPTRSBG), and/or general revenue funds are designated specifically for serving eligible individuals.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Nebraska – 2026 PATH Grant Application

III. State Level Information

K. Other Designated Funding

The PATH program is the only statewide program dedicated to supporting outreach and case management of the seriously mentally ill population who are experiencing homelessness.

No Community Mental Health Services Block Grant or Substance Use Prevention, Treatment, and Recovery Services Block Grant funds are designated specifically for serving people who are experiencing homelessness and have a serious mental illness. However, as identified in Section E. Alignment with State Comprehensive Mental Health Services Plan, PATH engaged and enrolled consumers may benefit from behavioral health services including, but are not limited to, consumer-provided services, support services, inpatient and outpatient services, and residential and nonresidential services. These services are provided for the prevention, diagnosis, and treatment of behavioral health disorders and the rehabilitation and recovery of adults with such disorders.

NDHHS does have dedicated funding for adults with a serious mental illness who are extremely low income through the NDHHS Division of Behavioral Health Nebraska Supported Housing Program. The purpose of the program is to address housing needs of people with serious mental illness and other behavioral health disorders. The program provides financial assistance for rental assistance, other housing-related assistance, and facilitation of community integration as strategies to prevent homelessness as well as sustain stable housing. Stable affordable housing is often the biggest barrier for individuals attempting to transition to independent living. The program is a recovery support service designed to be person centered, recovery oriented, and focused on a positive outcome of promoting integrated independent housing and living for individuals in the program.

III. State Level Information

L. Data

Narrative Question:

Describe the state's/territory's and providers' participation in HMIS and describe plans for continued training and how the state will support new local-area providers. For any providers not fully participating in HMIS, please include a transition plan with an accompanying timeline for collecting all PATH data in HMIS.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Nebraska – 2026 PATH Grant Application

III. State Level Information

L. Data

Nebraska PATH providers fully utilize the Homeless Management Information System (HMIS) to collect and report PATH service activities, and in their internal data evaluation and reporting activities. There are two HMIS Administrators serving the Nebraska PATH providers. The HMIS Administrator for two PATH providers, Region 1 (Cirrus House) and Region 5 (CenterPointe), is the University of Nebraska-Lincoln Center on Children, Family, and the Law which is located in Lincoln, Nebraska. The HMIS Administrator for Region 6 (Community Alliance) is the Institute for Community Alliances in Council Bluffs, Iowa. Both HMIS Administrators provide new user training and assistance for PATH HMIS users. Region 6 use of Clarity by BitFocus is supported by the Institutes for Community Alliances. Regions 1 and 5 use of Clarity by BitFocus is supported by the University of Nebraska – Lincoln Center on Children, Family and the Law.

NDHHS-DBH continues to communicate with the PATH providers and the Nebraska HMIS administrators to assist and evaluate Nebraska's current status and inclusion of the PATH program in the data collection and reporting activities. NDHHS-DBH participates in statewide groups which facilitate statewide use and discussion of shared data and performance metrics, such as the Nebraska Commission on Housing and Homelessness's State Continuum of Care Committee and HMIS Committee (the advisory body to the Nebraska Homeless Assistance Program) and Balance of State Subcommittee (the subcommittee works with the Balance of State CoC All Doors Lead Home Coordinated Entry program).

The Nebraska State PATH Contact and PATH providers participate in webinars topical to data, data reporting, and HMIS issues when sponsored by SAMHSA and/or HUD.

PATH providers utilize and participate in SAMHSA's Homeless and Housing Resources Network (HHRN) PATH HMIS Learning Communities focusing on PATH and HMIS data collection workflow and decision points and webinars pertaining to HMIS PATH Project Setup, PATH PDX and the PATH Annual Report.

Upon referral to community-based treatment and recovery support services, consumer-level data are reported in the Division of Behavioral Health Centralized Data System (CDS). In the CDS, PATH is formally listed as one of the referrals sources. Being a distinct referral source offers an opportunity to account for types of services subsequently attained by those PATH consumer referrals. CDS collects consumer level information that are reported in Treatment Episode Date Set (TEDS) to SAMHSA. TEDS data pertain to MH and SUD Disorders services funded by DBH, either directly or through regional contracts.

III. State Level Information

M. PATH Eligibility and Enrollment

Narrative Question:

Describe how PATH eligibility is determined, when enrollment occurs, and how eligibility is documented.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes:

Nebraska – 2026 PATH Grant Application
III. State Level Information
M. PATH Eligibility and Enrollment

The PATH Program reaches the areas in the state where the greatest number of individuals who are experiencing homelessness with a need for mental health, substance use disorder, and housing services are located. Outreach service to the most vulnerable experiencing homelessness is a prioritized activity. Outreach is activity to establish a trusting relationship that respects the autonomy of the individual and meets the individual where they are.

Describe How PATH Eligibility is Determined: PATH eligibility includes the two conditions of 1) experiencing homelessness and 2) a Serious Mental Illness. PATH eligibility is determined after a deliberate clinical assessment is completed which includes homeless status and determination of Serious Mental Illness (SMI), prior to enrollment in the PATH program. (Please see Section A. State Operational Definitions)

PATH eligibility determination usually happens over time during outreach activities and engagement. It is during outreach when the Outreach Worker contacts an individual who is potentially PATH eligible. Contacts may occur in a street outreach setting or at an emergency shelter or hospital or drop-in center. It is at first contact that an Outreach Worker identifies if an individual is experiencing homelessness. Whether at first contact or later during continued outreach, an Outreach Worker will identify where an individual generally resides by asking “Where did you stay last night” and the response determines PATH project set-up for project entry reporting.

Engagement of an individual by the PATH program occurs at the point at which an interactive client relationship results in clinical client assessment to confirm SMI or beginning of a case plan if SMI has previously been established. This includes obtaining all necessary consent forms from the consumer. PATH providers follow a data collection workflow process which record contacts with outreached individuals from first contact to engagement and enrollment and through project exit.

In addition to documenting that an individual is experiencing homelessness and has a Serious Mental Illness, the PATH provider will have collected information to record all HMIS Universal Data Elements required at the point of engagement.

Describe when Enrollment Occurs: Enrollment into the PATH program occurs when the individual is found to be PATH-eligible and he/she agrees to engage in services. It is at this time that PATH funded services and referrals begin.

PATH funded services may include Re-engagement, Screening, Clinical Assessment, Community Mental Health, Case Management, and housing-related supportive services. PATH funded referrals may include: Community Mental Health, Substance Use Treatment, Housing

Services, Primary Health/Dental Services, Job Training, Educational Services, Permanent Housing, Temporary Housing, Income Assistance, Employment Assistance, and Medical Insurance.

Describe How Eligibility is Documented:

PATH programs begin collecting client data from their first contact. PATH programs utilize the Homeless Management Information System (HMIS) to document the person's living situation or self-certification of experiencing homelessness and diagnosis of a Serious Mental Illness. They use HMIS to collect demographic data, store case management information in the form of "encounters" which support their contact and engagement data collection, manage caseloads, generate homeless certification, and track performance. This data collection includes all universal data elements as well as all program specific data elements (used to generate the Annual PATH Report).

Upon referral to community-based treatment and recovery support services, for those persons eligible for the Division of Behavioral Health (DBH) services, consumer-level data are reported in the DBH Centralized Data System (CDS). CDS collects consumer level information that are reported in Treatment Episode Date Set (TEDS) to SAMHSA. TEDS data pertain to MH and SUD Disorders services funded by DBH, either directly or through regional contracts.

PATH Reported Activities

Charitable Choice for PATH

Does your state use PATH funds to fund religiously-affiliated providers to provide substance use treatment services? Yes ☐ No ☒

If "Yes" is selected please list providers in text box below and complete the rest of the table

Expenditure Period Start Date: Expenditure Period End Date:

Notice to Program Beneficiaries - Check all that apply

- ☐ Used model notice provided in final regulation.
- ☐ Used notice developed by State (please attach a copy to the Report).
- ☐ State has disseminated notice to religious organizations that are providers.
- ☐ State requires these religious organizations to give notice to all potential beneficiaries.

Referrals to Alternative Services - Check all that apply

- ☐ State has developed specific referral system for this requirement.
- ☐ State has incorporated this requirement into existing referral system(s).
- ☐ SAMHSA's Treatment Facility Locator is used to help identify providers.
- ☐ Other networks and information systems are used to help identify providers.
- ☐ State maintains record of referrals made by religious organizations that are providers.
- ☐ Enter total number of referrals necessitated by religious objection to other substance abuse providers ("alternative providers"), as defined above, made in previous fiscal year. Provide total only; no information on specific referrals required.

Brief description (one paragraph) of any training for local governments and faith-based and community organizations on these requirements.

FY 2026 PATH FOA Catalog No.: 93.150 FOA No.: SM-26-050 Approved: 02/06/2026

Footnotes: