Substance Abuse and Mental Health Services Administration (SAMHSA)

SAMHSA Unified Performance Reporting Tool (SUPRT) - C

FREQUENTLY ASKED QUESTIONS (FAQs)

September 2025 V1.0

A message from the Ohio Department of Behavioral Health: Grantees in Ohio submit SUPRT data through the DBH iPortal application, not directly into SPARS.

SPARS

SAMHSA
Substance Abuse and Mental Health
Services Administration

Table of Contents

General Questions

1. What is the Government Performance and Results Act of 1993 (GPRA)?

GPRA is a public law that was passed by Congress in 1993. GPRA was enacted to improve stewardship in the federal government and to link resources and management decisions with program performance. GPRA requires that all federal agencies:

- Develop strategic plans specifying what they will accomplish over a 3- to 5-year period;

- Annually set performance targets related to their strategic plans;

- Annually report the degree to which the targets set in the previous year were met; and

- Regularly conduct evaluations of their programs and use performance monitoring data to understand their successes and opportunities for improvement.

The GPRA Modernization Act of 2010 updated some aspects of the GPRA of 1993. It placed greater emphasis on setting goals, cross-organizational collaboration, and improving programs using performance metrics. As part of this federal mandate, all SAMHSA grantees are required to collect and report performance data using approved measurement tools.

2. What is SPARS?

SPARS is the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Performance Accountability and Reporting System. SPARS is a web-based data entry system used by grantees to report timely and accurate data to SAMHSA.

3. How are the data in SPARS used?

Data collected through SPARS are used to monitor the progress of SAMHSA's discretionary grants, improve the quality of services provided through these programs, and assist as a decision-making tool on program funding. SPARS provides real-time performance monitoring of SAMHSA's discretionary grant portfolio and allows SAMHSA to provide timely, accurate information to stakeholders and Congress. SPARS features include data entry, data validation and verification, data management, data utilization, data analysis support and automated reporting.

4. How do I get a SPARS account?

Access to SUPRT-A/C will be managed through a new, self-serve interface. Users will be able to use the SPARS website to request new SPARS accounts and access to specific grants. Please see posted resources and training materials for more details about how to request a new SPARS account.

5. What is the Grant ID?

The Grant ID is an alphanumeric code assigned by SAMHSA that identifies each grant. It usually starts with two letters followed by numbers (e.g., "TI123456"). The Grant ID should be listed in each grant's Notice of Award (NOA).

6. How do I contact the SPARS Help Desk?

You can call the SPARS Help Desk at 1-800-685-7623. It is available Monday–Friday, 9 a.m.– 8 p.m. (EST). The SPARS Help Desk is closed on News Years Day, Martin Luther King Jr Day, Memorial Day, Independence Day, Labor Day, Thanksgiving and the day after Thanksgiving, and Christmas Day. Grantees can also check the SPARS announcement page on the SPARS homepage to look for upcoming holidays for when the help desk will be closed. The Help Desk email address is SPARSHelpDesk@mathematica-mpr.com.

Tool-Specific Information

7. What is SUPRT-C?

SAMHSA's Unified Performance and Reporting Tool (SUPRT)-C: Client or Caregiver Form is a self-administered tool for clients, proxies, and caregivers or parents that facilitates the collection and reporting of client-level data at baseline, reassessment, and annual assessment stages. Data collected through this tool are entered by grantee staff into SPARS. The tool can be accessed by grantees in the Resources section of the SPARS website (https://spars.samhsa.gov/resources) (SPARS login required).

SUPRT-C collects standardized data about the client, including client demographics, social drivers of health, and measures of recovery, capital, quality of life, and client goals influenced by the services received. The tool also collects administrative information from grantee staff including the date of assessment and whether the assessment was completed by the client, proxy, or caregiver or parent. There are specific forms depending on the client's age at baseline (see page 7-8), assessment point, and whether a client, proxy, or caregiver or parent is completing the assessment.

8. Who should complete SUPRT-C questions?

SUPRT-C assessments should be completed independently by the client, proxy, or caregiver or parent, with the exception of the Record Management section, which must be completed by grantee staff. If necessary, due to the client's age or other limitations (e.g., cognitive ability, reading level), a caregiver or proxy can complete the assessment on behalf of the client. For the purposes of SUPRT-C:

- A *caregiver* is defined as a person who has knowledge of, or a role in, the behavioral health needs of the client. The caregiver does not need to be a parent or legal guardian.

- A *proxy* is someone who represents the client or is authorized to act on their behalf. The proxy does not need to be a legally appointed representative but should have sufficient knowledge to answer most questions about the client.

Grantees should provide reasonable accommodations to respondents as needed to complete the assessment. Examples of accommodations may include support for individuals with impaired vision or reading difficulties, assistance with tablets or other electronic tools, translation services, or other accessibility needs.

If an individual has trouble understanding a question or its response options, grantee staff should offer respondents the SUPRT-C Client/Caregiver FAQ (Coming Soon). However, questions must not be rephrased or altered.

9. Are there guidelines for obtaining client consent for SUPRT-C?

The client, proxy, or caregiver or parent should review the consent page before completing the assessment. As noted on the consent page, individuals may indicate at any point that they do not wish to complete the assessment. If this occurs, grantee staff should select '*No – The assessment was not completed*' to question 1 in the **Record Management** section, then select '*Client/Caregiver was unable to provide consent*' to question 1b.

Declining to participate in a SUPRT-C assessment applies only to that specific assessment point (e.g., baseline, reassessment, or annual assessment). Grantee staff must offer SUPRT-C to the client, proxy, or caregiver or parent at each assessment point.

IMPORTANT: *Participation in SUPRT-C is completely voluntary, although encouraged. Declining a SUPRT-C assessment does not affect eligibility for any grant-funded services and does not negatively affect grantee compliance.*

The consent page outlines:

- The purpose of the assessment.

- The expected duration for clients, proxies, or caregivers/parents to complete the assessment.

- The voluntary nature of their participation in the assessment.

- Assurance that services will be provided regardless of participation or completion of the assessment.

- The right for clients, proxies, or caregivers/parents to skip any question, choose 'prefer not to answer', or stop the assessment at any time without adverse impacts on receipt of services.

- The extent to which the confidentiality of records identifying the subject will be maintained.

10. Does SUPRT-C have to be captured on paper?

No, SUPRT-C does not have to be captured on paper. Clients, proxies, or caregivers/parents should respond to the SUPRT-C independently, using the paper tool or another data collection system (e.g., within their EHR, using survey software, etc.). Grantee staff must then enter the data into SPARS.

11. How long do we need to retain paper tools after the interview?

There is no SAMHSA-mandated minimum requirement for retention of paper records. Grantees are required to follow their own established retention policies and procedures that maintain confidentiality and enable accuracy checks of SPARS data. The following resource provides suggested standards to guide retention and destruction of completed interviews and other records: [Records Management Regulations and Guidance | National Archives](#).

12. Can clients, proxies, and caregivers/parents skip or decline SUPRT-C questions?

Respondents can skip any questions they do not wish to answer. The option 'Prefer not to answer' is available for most questions, but respondents may also leave any question blank.

13. Who should complete the Record Management section?

Questions in the Record Management section must be completed by grantee staff.

14. Can questions in the Record Management section be left blank?

Grantee staff must complete all questions in the Record Management section at each assessment point.

15. Do grantees have to collect information on every person their program serves?

Unless a client has already completed a prior assessment or is receiving services funded through a specific program, SUPRT-C assessments should be offered to all clients receiving services (or their proxies, caregivers, or parents). Exceptions include:

- Clients who previously completed an assessment using the CSAT GPRA Tool or CMHS NOMs Tool do not need to be offered a SUPRT-C assessment for the same episode of care. See the 'SUPRT-C Requirements for Grantees Moving From GPRA/NOMs' section below for more information.

- Certified Community Behavioral Health Clinic Expansion - Improvement and Advancement (CCBHC-E-IA) and Certified Community Behavioral Health Clinic-Expansion-Planning, Development, and Implementation (CCBHC-E-PDI) grantees will continue to use sampling methods to identify clients to complete SUPRT-C assessments.

16. Who develops the client identification (Client ID) number?

SUPRT-C clients should use the same Client ID as SUPRT-A. Each grant develops its own client identification (ID). The Client ID can be between 1 character and 11 characters in length and can include both numbers and/or letters. It cannot begin with a dash or contain non-alphanumeric characters, including any of the following: ". [ ]! @#$%^&*( )", but with the exception of dashes or underscores. For confidentiality reasons, do not use any portion of the client's date of birth, Social Security number, Medicaid number, or names in the Client ID.

17. When is the Client ID used?

Each client should have their own unique Client ID that is used at all data collection points (i.e., baseline, 3-month reassessment and/or 6-month reassessment, annual assessment, and closeout). The same unique Client ID is used even if the client has more than one episode of care and is used for both SUPRT-A and SUPRT-C.

SAMHSA highly recommends that the same Client ID formula be used for individuals receiving services through different grants across the same organization, even if Grant ID or Site ID differs.

18. Where can grantees get copies of SUPRT-C and associated resources (e.g., Question-by-Question Guide, Codebook, etc.)?

Grantees can access SUPRT-C forms and support materials, including the Question-by-Question Guide (QxQ) and Codebook, in the [Resources section](#) of the SPARS website. A SPARS login is required to access materials. Materials can be filtered by Resource Type, User Type, and/or Data Entry Type (the tool used to collect data). Users can also search for

resources by keyword and sort search results alphabetically or by recency. Results are automatically filtered from Newest to Oldest.

19. Where can grantees view recorded SUPRT-C trainings?

SAMHSA encourages all grantees using SPARS to visit the Training page on SPARS (login required) by selecting the Training tab on the top of the SPARS homepage (https://spars-lc.samhsa.gov/). Available training courses will include a SUPRT-A/C tool walkthrough and data entry training, both of which will include closed captioning and presentation slides with speaker's notes. Users can browse or search the full course catalog directly from the Training page. To find SUPRT-C trainings, filter by "SUPRT" under "Data Entry Type."

20. Is the SUPRT-C tool available in other languages?

The SUPRT-C tool is available in both English and Spanish on the SPARS Resources page (https://spars.samhsa.gov/resources).

Data Collection Requirements

21. When should grantees collect SUPRT-C from the client, proxy, or caregiver or parent?

For each episode of care:

- The **baseline assessment** should be collected at any time between 30 days before and 30 days after the client first receives services. Grantee staff must then enter the completed assessment record into SPARS within 30 days of completion. Note: If the SUPRT-C baseline assessment is completed *before* the client begins receiving services, grantee staff should promptly follow up with the client to schedule a service appointment.

- *Please note that some CSAT designated programs have an assessment window of 120 days, starting 60 days before and ending 60 days after the client's first service date.*

- The 3- or 6-month reassessment is due either 3 months (90 days) or 6 months (180 days) after the SUPRT-A baseline assessment, depending on the assigned grant cohort. Note that the reassessment due date is measured in days (90 days or 180 days) not months and is based on the SUPRT-A baseline assessment date.

  Each client has a 60-day "reassessment window" during which grantee staff should ensure the reassessment is completed (or declined). The reassessment window opens 30 days before the 90- or 180-day anniversary of the SUPRT-A baseline assessment date and closes 30 days after. Grantee staff must then enter the completed reassessment record into SPARS within 30 days of completion. For example:

  - **3-month reassessment**: A client has a SUPRT-A baseline assessment date of March 3. The client is due for a 3-month reassessment on June 1 and can complete it between May 2 and July 1. Grantee staff should enter the reassessment into SPARS by August 1.

  - **6-month reassessment:** A client has a SUPRT-A baseline assessment date of March 3rd. The client is due for a 6-month reassessment on August 30th and can complete it

between July 31st and September 29th. Grantee staff should enter the reassessment into SPARS by October 29th.

Please note that programs designated by CSAT have a reassessment window of 120 days, starting 60 days before and ending 60 days after the 3- or 6-month anniversary of the SUPRT-A baseline assessment date.

- The annual assessment is due 12 months (or 365 days) after the SUPRT-A baseline assessment and annually thereafter, until the client stops receiving grant services. Annual assessments should only be completed by individuals who completed the Adult (18+) version of SUPRT-C at baseline. The annual assessment window opens 30 days before the 12-month anniversary of the SUPRT-A baseline assessment date and closes 30 days after. Grantee staff must then enter the completed assessment record into SPARS within 30 days of completion. For example:

  o **Annual assessment**: A client has a SUPRT-A baseline assessment date of May 3rd. The client is due for an annual assessment on May 3rd of the subsequent year (in a non-leap year) and can complete it between April 3rd and June 2nd. Grantee staff should enter the annual assessment into SPARS by July 2nd.

    Please note that programs designated by CSAT have an annual assessment window of 120 days, starting 60 days before and ending 60 days after the 12-month anniversary of the SUPRT-A baseline assessment date.

Refer to Table 1 for a summary of SUPRT-C data collection requirements.

Grantees should offer assessments to all **active** clients, proxies, or caregivers/parents at each timepoint (i.e., baseline, reassessment, and annual stages) once per episode of care, regardless of how long a client receives services. Once the assessment window has closed, grantees should not offer SUPRT-C until the next assessment point. Grantees should ask the Government Project Officer (GPO) for details.

Table 1. SUPRT-A/C Data Collection Requirements

Assessment	Completion Window	Example Date	Example Assessment Completion Window[1]	
			Start	End
SUPRT-A Baseline	Within 30 days of intake	3/3/2025		
SUPRT-A/C Reassessment				
3-month reassessment	Due 90 days after baseline assessment Completed +/-30 days from due date	6/1/2025	5/2/2025	7/1/2025
6-month reassessment	Due 180 days from baseline assessment Completed +/-30 days from due date	8/30/2025	7/31/2025	9/29/2025
SUPRT-A/C[2] Annual	Due every 12-month anniversary of the baseline assessment Completed +/-30 days from due date	3/3/2026	2/1/2026	4/2/2026

Assessment	Completion Window	Example Date	Example Assessment Completion Window[1]	
			Start	End
Close Out	Due w/in 30 days of end of episode of care	5/1/2026	5/1/2026	5/31/2026

[1] Excludes programs designated by CSAT, which have different completion ranges
[2] Note that only adults are required to complete a SUPRT-C annual assessment

22. Should reassessments and annual assessments be collected if clients are no longer active in the program?

SUPRT-A closeout assessments should be completed when the client is no longer receiving services through the grant program. SUPRT-C reassessments and annual assessments are no longer required once a closeout is completed.

23. Which SUPRT-C form should the client, proxy, or caregiver or parent complete?

Please follow these guidelines:

- **For clients aged 0-4 years**, caregivers or parents should complete the **Young Child assessment**.

- **For clients aged 5-11 years**, caregivers or parents should complete the **Child assessment**.

- **For clients aged 12-17,** clients can complete either the **Youth assessment** independently (or with assistance from a proxy), or a caregiver or parent may complete the **Child assessment** on their behalf. The choice depends on the client's preference and abilities (e.g., cognitive ability, reading level).

  - The **Youth assessment** is directed to the client (e.g., What is your race or ethnicity?")

  - The **Child assessment** is directed to the caregiver or parent (e.g., "What is your child's race or ethnicity?").

- For clients aged 18 years and older, the **Adult assessment** should be completed either by the client or by a caregiver or proxy if needed.

Clients, proxies, or caregivers/parents should complete the _same_ **age version** of SUPRT-C at each subsequent assessment, regardless of the client's age at the time. For example, a client who completes the Youth baseline assessment should complete the Youth reassessment, even if they have turned 18 years old at reassessment.

Grantee staff should ensure that respondents receive the correct form at each assessment. Refer to Table 2 for a list of SUPRT-C forms by client age range, respondent type and assessment point.

Table 2. SUPRT-C Forms by Client Age Range, Respondent Type, and Assessment

Age Range	Respondent Type	Assessment Point
Adults (18+ years)	Client (or proxy)	Adult Baseline
Adults (18+ years)	Client (or proxy)	Adult Reassessment
Adults (18+ years)	Client (or proxy)	Adult Annual
Youth (12-17 years)	Client (or proxy)	Youth Baseline
Youth (12-17 years)	Client (or proxy)	Youth Reassessment
Child (5-17 years)	Caregiver or parent	Child Baseline
Child (5-17 years)	Caregiver or parent	Child Reassessment
Young Child (0-4 years)	Caregiver or parent	Young Child Baseline
Young Child (0-4 years)	Caregiver or parent	Young Child Reassessment

24. Does the same proxy or caregiver or parent have to complete every assessment?

No. SUPRT-C should always be about the same client, but a different proxy, caregiver, or parent can complete the assessment across rounds.

25. When do grantees need to collect the annual assessment?

The annual assessment is due 365 after the SUPRT-A baseline and every 365 days while the client continues to receive services. Grantees should only collect SUPRT-C annual assessments from individuals who completed the Adult (18+) baseline assessment. Grantees should not collect the annual assessment if the Young Child, Child, or Youth assessment was completed at baseline.

26. Does the SUPRT-C baseline assessment need to be completed at the same time as the SUPRT-A baseline assessment?

No, SUPRT-C baseline assessments do not need to be completed at the same time as the SUPRT-A baseline assessment.

27. Does the Record Management section need to be completed for each assessment?

Yes, grantee staff must complete the Record Management section for every client at each assessment point, regardless of whether the assessment was completed or declined.

28. Does a new SUPRT-C baseline assessment need to be offered to clients starting a new episode of care?

Yes, grantee staff should offer the SUPRT-C baseline assessment for each episode of care, and the version of the form will depend on the client's age at the time of the new episode of care. The client's previous episode of care will become inactive in SPARS but will not be deleted. Grantees must use the same Client ID for all episodes of care.

29. Can the reassessment or annual assessment be collected after the assessment window closes?

Grantees are not required to offer SUPRT-C outside the 60-day assessment window. However, if SUPRT-C is completed outside this window, grantee staff may still enter or upload the data into SPARS. Data collected outside the 60-day window will not count towards the grantee's performance metrics but will be available in the user's data download.

30. Is completion of SUPRT-C required to receive services?

No, the completion of SUPRT-C is not required to receive services. Clients should be offered to complete SUPRT-C at each assessment. However, clients are still eligible to receive grant-funded services if the SUPRT-C assessment is declined.

31. Should grantees use the same Client ID for SUPRT-C and SUPRT-A?

Yes, the Client ID used for SUPRT-C and SUPRT-A should be identical.

32. How should grantees handle clients who are readmitted for treatment services?

Occasionally, a client will return for treatment after stopping services and being discharged. When this happens, grantees should initiate a new episode of care by completing another SUPRT-A baseline assessment using the same Client ID as in previous episodes of care and offering the client, proxy, or caregiver or parent the SUPRT-C baseline assessment.

Reassessment and annual assessment due dates for the new episode of care are determined by the most recent **SUPRT-A** baseline assessment date. Each client is counted only once toward the grant's target number of clients served, based on their most recent episode of care, regardless of the number of episodes of care during the grant period.

33. If a client declines to participate in a SUPRT-C assessment, should they be offered to complete future assessments?

Yes, grantee staff should still offer clients, proxies, or caregivers/parents the opportunity to complete future assessments as long as a SUPRT-A baseline was completed. A client's decision to decline a SUPRT-C assessment applies only to that specific assessment (i.e., baseline, reassessment, or annual).

34. What is the target SUPRT-C completion rate?

There is no required completion rate for SUPRT-C. A completion rate will be calculated for SUPRT-C, so that response rates can be monitored for these assessments. The SUPRT-C reassessment completion rate is calculated by dividing the total number of reassessments completed (not declined) by the total number of clients enrolled for more than 3 or 6 months (i.e., 90 or 180 days), depending on the cohort. The SUPRT-C annual assessment completion rate is calculated by dividing the total number of annual assessments completed (not declined) by the total number of adult clients enrolled for more than 12 months (i.e., 365 days). For clients with multiple episodes of care, only the most recently completed reassessment/annual assessment is used in the calculation.

Data Entry

35. Where do grantees enter SUPRT-C data?

Starting on October 1, 2025, grantees will be able to enter SUPRT-C data by clicking the 'SUPRT A/C' link' under the 'Quick Links' menu on the SPARS homepage. Batch upload will also become available for grantees towards the end of 2025. Data entry and batch upload trainings will also become available on the SPARS [Training](#) page.

36. Should SUPRT-C or SUPRT-A data be entered into SPARS first?

Grantees must begin SUPRT-A baseline data entry in SPARS before entering SUPRT-C data. At baseline, grantee staff should leave the demographics section blank in SUPRT-A until they offer the client, proxy, or caregiver or parent the opportunity to complete SUPRT-C.

SUPRT-A and SUPRT-C reassessments and annual assessments can be entered into SPARS in any order.

37. If a respondent left a question blank, should grantees select 'prefer not to answer' when data is entered into SPARS?

No. Grantees should only select 'prefer not to answer' if the client selected that response option. If no response is provided to a question, grantee staff should select "MISSING." During batch upload, grantees should use the 'MISSING DATA' value (-9) for questions with no responses.

38. If inconsistent responses are provided by respondents on SUPRT-C, how should grantees enter data into SPARS?

If possible, grantee staff should enter SUPRT-C data into SPARS exactly as entered by the respondent on the form. However, the data entry system may not allow all types of inconsistent responses. If client responses to the paper tool are invalid for the question (e.g., multiple responses provided to a single response question, crossed out words, illegible writing, etc.), SPARS users should select "INVALID RESPONSE" upon data entry. During batch upload, grantees can use the code -2 to represent invalid responses.

Grantees should consult the [SUPRT-C codebook](#) for details about allowable responses to questions and the SUPRT-C QxQ documentation for specific guidance by question.

39. Are we able to access old records submitted to SPARS using the GPRA or NOMs tools?

Yes, grantees can continue to access individual GPRA or NOMS client records and data in the [CSAT Data Entry portal](#), [CMHS Data Entry portal](#), and the Client Record within the Client tab in SPARS. Please note, for select grantees, data collected after October 1st, 2025, will be using SUPRT-A and not the GPRA or NOMs.

40. If grantees need to delete or change data in a SUPRT-C assessment, how do they do that?

Data can be deleted or changed for 60 days after submission. After the editing period, data may be edited with assistance from the helpdesk. To edit or delete assessments, contact the SPARS Help Desk, Monday through Friday, 9:00 AM to 8:00 PM ET, by phone (1-800-685-7623, toll-free) or email (SPARSHelpDesk@mathematica-mpr.com). The SPARS Help Desk is closed on

News Years Day, Martin Luther King Jr Day, Memorial Day, Independence Day, Labor Day, Thanksgiving and the day after Thanksgiving, and Christmas Day. Grantees can also check the SPARS announcement page on the SPARS homepage to look for upcoming holidays for when the help desk will be closed. A data entry training will be available on the SPARS Training page.

41. Can grantees batch upload SUPRT-C data rather than using the manual data entry system?

This functionality is coming in late 2025. Once it is available, grantees can enter multiple records at a time using the SPARS batch upload feature. The batch upload template is available on the Resources Page. A SUPRT-C batch upload training will be posted to the SPARS Training page alongside the availability of this function.

42. How often should grantees enter SUPRT-C data into SPARS?

All SUPRT-C data records must be entered or uploaded to SPARS within 30 days of completion of the assessment.

43. Can the race or sex categories in SUPRT-C be modified?

No, the race or sex categories in SUPRT-C cannot be modified. Grantees must enter the data into SPARS exactly as selected or written on the form by the client, proxy, or caregiver or parent. If the respondent left this question blank on the form, grantees should leave the question blank in SPARS.

SUPRT-C Requirements for Grantees Moving From GPRA/NOMs

44. When should grantees start using SUPRT-C?

Grantees that collected client-level data in FY 2025 will move from using the CSAT Government Performance and Results Act (GPRA) Tool or the CMHS National Outcome Measures (NOMs) Tool to SUPRT-A and C. Grantees should start data collection using these tools on October 1st, 2025. Grantees will be notified via eRA Commons regarding whether their grant is transitioning to SUPRT-A.

45. If grantees previously conducted the baseline assessment using GPRA or NOMs tools and are now moving to SUPRT, when should they complete SUPRT-C?

For clients with a baseline assessment conducted using the CSAT GPRA Tool or CMHS NOMs Tool who are eligible for reassessment or annual assessment after October 1st, 2025, grantees are <u>only</u> required to complete the appropriate <u>SUPRT-A</u> reassessment and annual assessments and are <u>not</u> required to complete SUPRT-C.

- The assessment window opens **30 days before** and closes **30 days after** the 3, 6, or 12-month anniversary of the GPRA or NOMS intake date (measured in days). For example, if the GPRA or NOMS intake was completed on August 1st, 2025, the 3-month reassessment window will open on September 30th, 2025, and close on November 28th, 2025.

- **Grantees are not required to offer SUPRT-C unless the client begins a new episode of care and completes a SUPRT-A baseline assessment.**

If the SUPRT-A baseline assessment was completed on or after October 1st, 2025, grantees must complete SUPRT-A *and* offer SUPRT-C for reassessments and annual assessments (Adults only).

46. If a grantee is not moving to SUPRT-A and SUPRT-C on October 1, 2025, what tool should they use?

Grantees who are not moving to SUPRT-A will continue to collect data using the tool they were using previously, the CSAT GPRA or the CMHS NOMs, until the end of their grant period. Grantees should submit CSAT GPRA or CMHS NOMs discharges for clients when they cease to receive grant services.

Who to Contact

47. If grantees have additional questions that need to be addressed, what is the best way to get answers?

For all questions related to SPARS, grantees should contact the SPARS Help Desk, Monday through Friday, 9:00 AM to 8:00 PM ET, by phone (1-800-685-7623, toll-free) and email (SPARSHelpDesk@mathematica-mpr.com). The SPARS Help Desk is closed on News Years Day, Martin Luther King Jr Day, Memorial Day, Independence Day, Labor Day, Thanksgiving and the day after Thanksgiving, and Christmas Day. Grantees can also check the SPARS announcement page on the SPARS homepage to look for upcoming holidays for when the help desk will be closed. Grantees can contact their GPO for any other project-related questions.