

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

**7500 Security Boulevard
Baltimore, MD 21244-1850**

PROGRAM ANNOUNCEMENT

Agency Name:

**Department of Health and Human Services
Centers for Medicare & Medicaid Services
Center for Medicaid and State Operations**

Funding Opportunity Title:

**The National HCBS Quality Enterprise:
Assisting States to Achieve Enhanced Quality in a Rebalanced Environment**

Announcement Type: Initial Announcement

Funding Opportunity No.:

HHS-2009-CMS-RCMFTP-0002

Catalog of Federal Domestic Assistance No. (CFDA): 93.791

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PART ONE: OVERVIEW INFORMATION

**Department of Health and Human Services
Centers for Medicare & Medicaid Services
MEDICAID PROGRAM:
GRANT OPPORTUNITY:
The National HCBS Quality Enterprise:
Assisting States to Achieve Enhanced Quality in a Rebalanced Environment**

Initial Announcement

Invitation to Apply for FY2009: **MONEY FOLLOWS THE PERSON REBALANCING
DEMONSTRATION**

Agency Funding Opportunity Number

HHS-2009-CMS- RCMFTP-0002

CFDA 93.791

August 8, 2008

Applicable Dates:

Applicants' Informational Teleconference:	September 3, 2008
Voluntary Notice of Intent to Apply:	August 25, 2008
Proposal Due Date:	October 6, 2008, 11:59 pm, EST
Notice of Grant Awards:	October 24, 2008
Project Period Begins:	October 27, 2008

Grant Period of Performance/Budget Period:

October 27, 2008 to April 15, 2013

For more details and news about events relevant to this and other related grant opportunities, please periodically consult our Web site at www.grants.gov.

http://www.cms.hhs.gov/DeficitReductionAct/20_MFP.asp#TopOfPage

This information collection requirement is subject to the Paperwork Reduction Act. The burden for this collection requirement is currently approved under OMB control number 0938-0836 with a current expiration date of 1/31/2007.

PART TWO: FULL TEXT OF ANNOUNCEMENT

I. FUNDING OPPORTUNITY DESCRIPTION

1. Introduction

The Centers for Medicare & Medicaid Services (CMS) is soliciting proposals from qualified organizations to improve the quality of HCBS programs through the Money Follows the Person Rebalancing Demonstration Project. The grant supports States' efforts to improve quality in a "rebalanced" long-term support system by offering \$3.9 Million over 4.5 years in a competitive grant to a qualified organization. The grant supports States to adopt a strategic approach to improving quality across home and community-based services programs as they design and implement their rebalancing initiatives.

2. Background

A. Evolution of Home and Community-Based Services

Expenditures on nursing facilities account for the majority of Medicaid Long Term Care spending. In fiscal year 2005, spending for Home and Community Based Services waiver programs, personal care, and home health services accounted for just over one-third (37%) of all Medicaid long-term care expenditures. Despite an increasing use of home and community services long-term care systems, the organization, financing, and delivery of Medicaid-funded long-term care services remains biased towards institutional care. Home and Community-Based Services waivers afford States the flexibility to develop and implement creative alternatives to hospitals, nursing facilities or intermediate care facilities for persons with mental retardation.

B. The Deficit Reduction Act of 2005 Bolsters States' Efforts

With the enactment of the Deficit Reduction Act (DRA) of 2005, States have new options to rebalance their long-term support programs to allow their Medicaid programs to be increasingly sustainable while helping individuals achieve independence. The DRA reflects a growing consensus that long-term supports must be transformed from institutionally-based and provider-driven to "person-centered" and consumer-controlled. The DRA provisions reflect a long-awaited commitment to independence, choice, and dignity for countless Americans who want to have control of their lives. And, it gives States many of the tools they need to "rebalance" their long-term support programs.

Included in the Money Follows the Person Demonstration project, was the directive to the Secretary that CMS provide technical assistance and oversight to the States, for the purpose of upgrading their quality improvement strategy under Medicaid HCBS waivers, including:

- Dissemination of information on promising practices;
- Guidance on systems design elements that address the unique needs of participating beneficiaries;
- Ongoing consultation on quality, including assistance in developing necessary tools, resources, and monitoring systems; and

- Guidance on remedying programmatic and systemic problems.

CMS has been allocated \$3,900,000 for these quality-related activities. The funds will be available in three Phases throughout the duration of the demonstration (beginning October 27, 2008 and ending April 15, 2013). CMS expects to issue a grant award to a non-government entity for quality technical assistance activities.

C. Quality in Home and Community-Based Services

As health care costs continue in an inflationary trend, coupled with changes in the economy and population demographics, health care quality has garnered increased attention in both the public and private sectors. *Crossing the Quality Chasm*, highlighted data revealing that individuals do not consistently receive care that is appropriate, timely, or evidenced-based, leading to adverse outcomes.

Quality measurement efforts help to strengthen accountability and support performance improvement initiatives. The CMS encourages the use of quality performance measures in HCBS programs that have been validated, tested, and vetted through consensus processes. CMS further encourages States to address quality program performance improvements with a focus on oversight and integration across State agencies, and Medicaid HCBS authorities. Such initiatives require intensive schedule, project and resource management, as well as attention to coordination efforts across programs. Given such complexity, CMS is providing States with a National HCBS Quality Enterprise where the following support can be accessed:

- Assistance in the development and ongoing implementation of evidence-based Quality Improvement (QI) strategies;
- Assistance to successfully bridge a QI strategy across various HCBS programs and authorities, addressing regulatory and operational issues;
- Assistance to determine specific performance measures that comport with statutory and regulatory requirements for various HCBS long-term supports programs; and
- Development of a cross State quality infrastructure through the alignment of quality endeavors using Measures Development, Payment Systems, Transparency, and Communication/External Networks.

3. Overview of Funding

Enacted by the Deficit Reduction Act of 2005, the Money Follows the Person (MFP) Rebalancing Demonstration, Section 6071, is part of a comprehensive, coordinated strategy to assist States, in collaboration with stakeholders, to make widespread changes to their systems of long-term services and supports. The MFP legislation addresses quality with the intention of ensuring that procedures are in place to provide quality assurance for eligible individuals receiving Medicaid HCBS and to provide for continuous quality improvement in such services.

A. Quality Technical Assistance

Adverse events in some States' waiver programs, resulting in poor health outcomes and impaired qualities of life, have focused State and Federal attention on the need for improved quality oversight in HCBS programs. Starting in 2002, CMS articulated design requirements for States, via a web based application, to guide the development of States' quality improvement strategies. Since then, CMS has provided, through a National Quality Contractor (NQC), technical assistance (TA) to 42 States and the District of Columbia and 153 waiver programs (87 Aged/Disabled waivers; 66 MR/DD waivers). Several of these waivers have received more than one formalized round of TA.

While many States have incorporated quality in the design of their 1915(c) Home and Community Based Services waivers, States continue to need and request assistance to ensure quality in long term supports to eligible individuals through effective oversight and evidence-based, continuous quality improvement practices. States' increased attention to the design and implementation of positive quality improvement activities in HCBS programs underscore the ongoing need for a national technical assistance/training function to support the pursuit of continuous quality improvement in HCBS programs. Under this demonstration, a State's Quality Improvement Strategy must meet Federal quality requirements and ensure the health and welfare of HCBS program participants. Likewise, as CMS adopts quality improvements in its own operations, system developments, and tracking/oversight processes, the need for technical assistance is critical to the responsiveness and effectiveness of quality practices.

The National HCBS Quality Enterprise supports CMS' initiative to improve the quality of services and supports in the Medicaid 1915(c) and other Home and Community-Based Services Programs. The Enterprise will help CMS realize this goal through the provision of technical assistance to States in the design and implementation of quality improvement strategies, and assistance to CMS in a variety of supportive activities related to oversight, systems development, and staff development.

B. Amount of Funding Offered

CMS is offering a total of approximately \$3.9 million to a qualified organization based on a competitive award process. This total represents funding from the Congressional appropriation for the Money Follows the Person award under the Deficit Reduction Act of 2005.

The grant shall be conducted in three phases. Each phase is contingent upon funding availability. The successful Grantee will receive one grant award based on this solicitation. Initial funding will be awarded for Phase One, additional funds may be requested under Phases Two, and Phase Three.

4. Grant Design and Development

(CMS) is soliciting grant proposals from qualified organizations to provide the National HCBS Quality Enterprise. This grant, created by Section 6071 of the Deficit Reduction Act of 2005 (P.L. 109-171), supports State and CMS efforts to improve quality in a “rebalanced” long-term support system, and demonstrate the ongoing benefits from and need for an effective HCBS QI Enterprise. The grant offers \$3.9 million in three phases over 4.5 years through a competitive process.

The demonstration provides for technical assistance consultation to States to design and implement evidence-based, continuous quality improvement as authorized through Section 6086 of the Deficit Reduction Act of 2005 (DRA), in Section 1915(c) Home and Community-Based Services (HCBS) waivers, and the other Medicaid HCBS long term care authorities, such as Section 1915(i), 1915(b), 1915(j) and so on. It enables States to access necessary assistance from the National HCBS Quality Enterprise to design and oversee performance based quality improvements in HCBS programs that comport with Medicaid requirements. The National HCBS Quality Enterprise grant will operate from October 2008 to April 2013.

The National HCBS Quality Enterprise will also provide technical assistance and training to CMS staff, from both Regional and Central Offices, in quality oversight techniques and systems design assessment. The technical assistance may be provided as on-site consultation, or by video, webinar or teleconference consultation.

The Grantee may also be required to conduct research and develop quality-related technical assistance curriculums, analytic papers, guides, and other technical assistance tools that will be disseminated to a national audience.

5. Requirements of the National HCBS Quality Enterprise

The Grantee shall provide a quality technical assistance model and work plan focused on four major goals that must be approved by CMS prior to implementation of the Grant:

- Development of a process that demonstrates consistency between the Grantee and CMS, and across all Grantee staff and subcontractors for providing technical assistance (Project Management, 1.1);
- The Provision of Technical Assistance to States Related to Quality in Home and Community-Based Services Programs (Technical Assistance, 2.1b);
- Provision of technical assistance to CMS staff Related to the Oversight of Quality in HCBS Programs (Technical Assistance, 2.1c); and
- The ongoing development and maintenance of a national HCBS quality web-based technical assistance site and quality TA manuscripts (Technical Assistance, 2.1d and e).

A. Funding Period One (FY 2009)

October 27, 2008 to October 14, 2009

i. Project Management/Administration

The successful Grantee is required to coordinate all the activities necessary to complete the project in accordance with the terms and conditions of the award and the CMS HCBS program requirements. The Grantee shall closely oversee all work performed by subcontractors, and assure uniformity in the provision of all work tasks associated with this grant. The Grantee is responsible to ensure consistency and reliability among all subcontractors related to CMS policies, standards, communications and directives associated with quality in HCBS programs.

The Grantee will be required to collect informational data from each State on quality improvement assistance provided, performance measures used, and additional data as requested to help evaluate the core objectives of the legislation. Specifically, the Grantee must provide information that evidences their work with States to develop effective systems for providing quality assurance for eligible individuals receiving Medicaid home and community-based long term care services and to provide for continuous quality improvement in such services.

Monthly Conference Calls

The Grantee shall coordinate and participate in monthly conference calls with the Project Officer and CMS staff, as appropriate. These calls shall be used as a mechanism for discussing and managing administrative and project issues. The Grantee shall submit an electronic version of the agenda 2-3 days prior to the call.

Monthly Progress Reports

The Grantee shall submit monthly administrative progress reports outlining all work accomplished during the previous month, including the status of technical assistance activities, identifying any obstacles to completion of future grant activities.

End of Phase Report

The Grantee shall provide to CMS within 60 days of the end of each calendar year during the period of performance, a summary of all technical assistance activities provided. The report shall be prepared in accordance with the format specified by CMS.

Meetings

The Grantee shall participate in a one-day meeting in Baltimore, Maryland, within 3 weeks of the date of award to discuss the proposed grant activities, development of the technical assistance work plan, and to clarify any issues related to the grant proposal.

Supervision and Training of Consultants

The Grantee will provide leadership and supervision in the performance of tasks related to this grant. Particularly, the Grantee will communicate regularly with CMS to stay abreast of changes in quality and, in turn, ensure timely communication with all affiliates involved in activities for this grant. Further, the Grantee will provide adequate supervision of all subcontractors in order to ensure the consistent and effective performance of all those hired to accomplish the contracted tasks.

ii. Technical Assistance

Development of the Technical Assistance Model and Work Plan

The Grantee shall develop a model and work plan, after consultation with CMS Project Officer, States, and others as needed, for the provision of technical assistance and training to States and CMS staff. The work plan will project the number, types, and methods of technical assistance (focus and mode of technical assistance, method of State access, and method of reporting) to be provided during this grant, taking into account CMS priorities (e.g. the need for technical assistance by States that have not substantially met the statutory assurances) and State identified needs for technical assistance.

Provision of Technical Assistance to States

The Grantee shall provide technical assistance in the scope, duration and manner approved by CMS, and report monthly on the status of the activities (see 1.1b). The Grantee will provide technical assistance in the most functional, effective, and cost-efficient manner available.

The following range of technical assistance to States, in whole or in part, but not limited to, the following activities are associated with this grant:

- Design of QI Strategies utilizing an evidence-based continuous quality improvement approach as applied to focus/assurance areas within the respective Medicaid HCBS authorities;
- Design or improvement of specific components of States' QI strategies, including but not limited to their mechanisms for discovery, remediation and continuous systems improvement;
- Self-assessments, or gap analyses, to identify areas in States' QI strategies that may be missing or need improvement;
- Development and implementation strategies for performance measurement, sampling, data collection/analysis functions to enhance QI;
- The use of measures and the production of evidence related to the implementation of QI designs;
- Redesign of business practices to support Continuous QI

- Public reporting and transparency of quality data;
- Use of the CMS HCBS web-based waiver application and required reporting requirements;
- Response to CMS requests for evidence of quality improvement;
- Quality improvement in self-directed waiver programs;
- Design and use of survey tools for the HCBS waiver programs;
- Research and the development of written technical assistance materials.

All instances of technical assistance provided will be pre-approved by CMS for scope, duration, and content.

Provision of Technical Assistance to CMS

The Grantee will provide technical support and oversight assistance to CMS Regional and Central Office staff and managers related to quality in HCBS programs. The technical assistance is focused on the ongoing oversight and application of an internal quality review process to promote improved controls, consistency, transparency, and quality across all CMS offices that deal with HCBS authorities.

The following range of technical assistance to CMS, in whole or in part, but not limited to, the following activities are associated with this grant:

- The use of on-site, phone, and other modes of communication to elicit feedback, address questions, and support needs of CMS Regional and Central Office staff on evidence-based, internal QI strategies consistent with measures associated with HCBS business lines;
- Development of a web-based orientation curriculum related to the quality oversight of HCBS programs for CMS staff that entails 1) Federal quality assessment and review based on the CMS quality review process, and 2) a method for measuring demonstrated competence in the CMS expectations for Federal quality design and program reviews.
- Design and implementation of methods to assess and ensure consistency in the performance of work related to the design and oversight of quality activities in HCBS programs.
- Support to introduce an internal evidence-based QI approach associated with business lines and standard operating practices.
- Support to develop integrated, cross-cutting approaches to quality across all Medicaid HCBS authorities, including the synthesis and testing of a core set of HCBS measures.

Web-Based Provision of Technical Assistance in HCBS Quality

The Grantee shall maximize the provision of technical assistance associated with this grant through the continuation of a National HCBS Quality web site. The site is intended to be a first line option for States to access technical assistance information related to quality in HCBS programs. Specifically, the site is intended to:

- Inform State users of the purpose of the National HCBS Quality Enterprise
- Provide methods to access the National HCBS Quality Enterprise team of consultants,
- Provide links in a file vault for HCBS quality technical assistance materials,
- Provide an on-line forum to exchange information and ask questions,
- Serve as a source for the latest announcements and materials associated with quality in HCBS programs, and finally
- Serve as a link to the CMS Participant Experience Survey (PES) Users Group.

The Grantee is expected to maintain and further develop this site, at CMS' request, as a companion resource of the National HCBS Quality Enterprise for State technical assistance in HCBS quality.

Development of Research Papers or Manuscripts Related to HCBS Quality, at the Request of CMS

The manuscripts inform and provide relevant, timely, and applied information related to continuous quality improvement of HCBS programs. The manuscripts are intended to:

- Inform State users about effective methods to improve quality in and across HCBS programs;
- Provide tools for States to create continuous quality improvement and evidence of such oversight activities;
- Provide evidence of State and CMS quality-related oversight activities such as gap analyses, needs assessments, and so on.
- Partner in the appraisal of available results from HCBS measures' development and testing efforts resulting in recommendations for 1) a core set of HCBS measures, 2) a national system and process for collection and reporting of HCBS measures set, and 3) a national system for audit and analysis of measures.

B. Funding Period Two (FY 2010) October 15, 2009 to October 14, 2010

The Grantee shall perform the same tasks in Phase II as required in Phase I.

C. Funding Period Three (FY 2011) October 15, 2010 to April 15, 2013

The Grantee shall perform the same tasks in Phase III as required in Phase II.

6. Funding Requirements

Funds Available for the Demonstration

The following funds are made available in each respective fiscal year:

FY 2009	\$ 864,197
FY 2010	\$ 864,197
FY 2011	\$2,171,606

Supplemental Awards

The project period is for fifty-four months, covering three funding periods. For funding in FY 2010 and 2011 the Grantee will be required to request a supplemental award to access the new allocation. The Grantee will be required to submit a request for additional funding and a revised budget, as well as any requested revisions to the Implementation Plan. The successful performance of the Grantee will likewise impact supplemental grant awards.

Indirect Costs

The provisions of the OMB Circular A-87 govern reimbursement of indirect costs under this solicitation. A copy of OMB Circular A-87 is available online at:

http://www.whitehouse.gov/omb/circulars/a087/a87_2004.html

Reimbursement of Pre-Award Costs

No grant funds awarded under this solicitation may be used to reimburse pre-award costs.

Financial Reporting

The Grantee will be required to submit a Financial Status Report, Form (SF-269A). This report, submitted on a semi-annual basis, accounts for all uses of grant monies during each reporting period. In addition, at the end of each demonstration grant year, the Grantee will be required to produce documentation that they have not exceeded the determined budget ceiling and have met all CMS financial requirements. Additional formats of financial reporting will be determined during the Implementation Plan phase of the Demonstration.

7. Final Summary Report

In addition to monthly progress reports, the Grantee shall provide to CMS a final report of all technical assistance provided respectively in Phases I, II, and III of this solicitation. The Grantee shall submit the report within 90 days of the end of the each period of performance.

The final report shall be delivered to the OAGM in the three formats described below and in the required electronic formats:

- paper, bound, in the number of copies specified by the Project Officer;
- paper, unbound, suitable for use as camera-ready copy;
- electronic, as one file in Portable Document Format (.pdf), as one file in HTML (Hypertext Markup Language), and in Microsoft Word (for text) or Microsoft EXCEL (for tables). Documents submitted in .pdf must be prepared using Adobe Acrobat 5.0 or subsequent versions to assure compliance with the requirements of Section 508 (Rehabilitation Act) when placed on CMS's website. More detailed guidelines are available on CMS's website at <http://www.cms.hhs.gov>. In addition, the Grantee shall provide a 200-word summary/abstract of the final report suitable for submission to the National Technical Information Service (NTI)

II. AWARD INFORMATION

1. AWARD TABLE: NATIONAL HCBS QUALITY ENTERPRISE GRANT FY 2009

This solicitation discusses the available funding from CMS for the National HCBS Quality Enterprise Grant for FY 2009 to 2013. The authority for the National HCBS Quality Enterprise Grant is found in the Deficit Reduction Act of 2005 under Money Follows the Person, Section 6071. The grant is authorized by the President’s Executive Order 13217 “Community-Based Alternatives for Individuals with Disabilities” pursuant to Section 1110 of the Social Security Act (the Act).

The total award for this grant is \$3,900,000. Funding for Fiscal Year 2009 is \$864,197. Based on the Grantee’s continued level of acceptable performance and the availability of funds, the Grantee may be awarded supplemental Fiscal Year 2010 award of \$864,197 and Fiscal Year 2011 of \$2,171,606. Note: The “maximum award” spans the project period of fifty-four months, or 4.5 fiscal years. Once the grant is awarded, the Grantee must request supplemental award funds in fiscal years 2010 and 2011. Supplemental funds for FY 2010 and 2011 are contingent on Grantee performance and the successful completion of grant requirements. Grantee performance will be reviewed by CMS during monthly phone meetings (see 1.1) and written feedback on grant deliverables.

**TOTAL GRANT AWARD
54-Month Project and Budget Period**

CFDA 93.791 Grant Opportunity	Total Funding	Who May Apply?	No of Grant Awards	Maximum Award	Total Project Period	Estimated No. of Award
HCBS-Quality Enterprise	\$3,900,000	Qualified organizations	1	\$3,900,00 spread across three supplemental phases	54 mos.	1

GRANT AWARD BY GRANT PERIODS

CFDA 93.791 Grant Opportunity	Maximum Award by Supplemental Period	Total Supplemental Period
Fiscal Year 2009 HCBS - QE:	864,197	12 mos.
Fiscal Year 2010 HCBS - QE: Supplemental Year Two	864,197	12 mos.
Fiscal Year 2011 HCBS - QE: Supplemental Years Three to Five	2,171,606	30 mos.

A. Anticipated Award Date

Awards will be announced by October 24, 2008, with the grant period starting October 27, 2008.

B. The Period of Performance

The period of performance for the respective grant categories is as follows:

- Fiscal Year 2009 is October 27, 2008 to October 26, 2009
- Fiscal Year 2010 is October 27, 2009 to October 26, 2010 (supplemental)
- Fiscal Year 2011 is October 27, 2010 to April 15, 2013 (supplemental)

C. Renewal or Supplements of Existing Projects

Renewal or supplements of existing projects are eligible to compete for these new awards. All entities that meet the eligibility requirements as stated in **Section III, Eligibility Information** are eligible to apply if they also have existing projects.

III. ELIGIBILITY INFORMATION

1. Eligible Applicants

CMS will award one National HCBS Quality Enterprise grant to a qualifying organization to improve quality in a rebalanced long term support system. CMS will accept one proposal from each applicant to participate in the grant. The organization must propose a total demonstration period of no greater than 4.5 years, with three funding periods, Fiscal Years 2009 and 2010 consisting of 12 months each, and Fiscal Year 2011 consisting of 30 months.

Failure to comply with all requirements of this solicitation will result in withdrawal of the application from competitive status.

This grant opportunity is open to any organization with demonstrated experience working with States on quality in Medicaid home and community-based services programs. This experience is further defined as an organization that can demonstrate all of the following:

- Method of Technical Assistance: The demonstrated provision of on-site technical assistance (while on-site TA is the preferred method, other forms such as webinar, videoconferencing, teleconferencing are acceptable)
- Recipient(s) of Technical Assistance: The Grantee must demonstrate technical assistance provision to at least twenty (20) States in the areas of HCBS quality.
- Focus of HCBS Authorities: The provision of technical assistance related to the 1915(c) waiver program is preferable, and will result in a higher score. However, the applicant can demonstrate experience in the provision of TA in any or all of the following HCBS

- Medicaid authorities: Section 1915(c), Section 1915(i), Section 1915(j), 1115 demonstration, Section 1915(b)(c) combination managed long term care.
- Focus of Technical Assistance Provision: The provision of technical assistance to States in the design of an HCBS evidence-based quality improvement strategy, including the use of performance measures that comport with Medicaid requirements;
- Publication of HCBS Quality Manuscripts: The publication of at least five manuscripts, each written on an aspect of CMS quality assurances in the Section 1915(c) HCBS Medicaid program with demonstrated national dissemination. The highest scores in this area will be focused on Medicaid HCBS assurances, continuous quality improvement, Medicaid requirements, sampling, and information management.
- Partner in the Development and Testing of HCBS Measures: Work in collaboration with CMS and other partners on the development and testing of a set of HCBS measures.

2. Cost Sharing or Matching

There is no cost matching associated with this grant.

3. Foreign and International Organizations

Foreign and International Organizations are not eligible to apply.

4. Faith-Based Organizations

Faith-based organizations may apply.

NOTE: This grant is not open to individuals, foreign or international organizations

IV. APPLICATION AND SUBMISSION INFORMATION

Applications not received by the application deadline will not be reviewed. Applicants that fail to meet the Eligibility Criteria as outlined in Section III., *Eligibility Information*, and the checklist of qualifications in Attachment 3, will not be considered or reviewed.

Applicants are **strongly encouraged** to use the review criteria information provided in Section V., *Application Review Information*, and *Attachment 3, Technical Evaluation Criteria*, to help ensure that all the criteria that will be used in evaluating the proposals are adequately addressed.

1. Address to Request Application Package

Applicants must submit their applications electronically through <http://www.Grants.gov>.

Please note when submitting your application electronically, you are required, additionally, to *mail* a signed SF 424 to Nicole Nicholson, Centers for Medicare & Medicaid Services Office of Acquisition and Grants Management, Acquisition and Grants Group, C2-21-15 Central Building, 7500 Security Boulevard, Baltimore, MD 21244-1850. The mailed SF 424 form must be received at the CMS within two (2) business days of the application closing date.

- A complete electronic application package, including all required forms for this demonstration grant is available at:
http://www.grants.gov/agencies/forms_repository_information.jsp
- Standard application forms and related instructions may also be requested from Nicole Nicholson, Centers for Medicare & Medicaid Services, Office of Acquisition and Grants Management, Acquisition and Grants Group, C2-21-15 Central Building, 7500 Security

Boulevard, Baltimore, MD 21244-1850, by e-mail only at Nicole.Nicholson@cms.hhs.gov.

2. Form and Content of Application Submission

In the event that the electronic submission of the application has failed through <http://www.grants.gov>, please mail the complete paper application and CD to Nicole Nicholson. You **must** include a copy of the failed submission notice from <http://www.grants.gov> with the paper application as evidence of attempted submission. If you have successfully submitted an electronic application through grants.gov, please do **not** mail in a paper application as well. Only the signed SF 424 form should be mailed.

A. Required Contents

For the National HCBS Quality Enterprise, a complete application consists of the following materials organized in the following sequence:

i. Notice of Intent to Apply

Applicants are encouraged to submit a non-binding Notice of Intent to Apply, along with Attachment 3, Eligibility Checklist. Notices of Intent to Apply are not required and submission or failure to submit a notice has no bearing on the scoring of proposals received. But receipt of such notices enables CMS to better plan for the application review process. These may be submitted in any format; however, a sample is included in Attachment 1. *Notices of Intent to Apply are due August 25, 2008 and should be faxed to Ruth McKesson at 410-786-9004.*

ii. Standard Forms (SF)

Standard forms are available as detailed in Section IV.1, Address to Request Application Package. The following standard forms must be completed with an original signature and enclosed as part of the proposal:

SF 424: Official Application for Federal Assistance (see **Note** below)

SF 424A: Budget Information Non-Construction

SF 424B: Assurances—Non-Construction Programs

SF LLL: Disclosure of Lobbying Activities

Additional Assurances Certifications:

http://apply.grants.gov/forms/sample/SSA_AdditionalAssurances-V1.0.pdf

Note: On SF 424 “Application for Federal Assistance”:

- Item 15 “Descriptive Title of Grantee’s Project.” Please indicate in this section the name of this grant: National HCBS Quality Enterprise
- Check box “C” to item 19, as Review by State Executive Order 12372 does not apply to these grants.

Ensure the **total federal grant funding requested is for all 4.5 years.**

iii. Required Letters of Support and Memoranda of Agreement

Letters of endorsement from major partners (State Medicaid Agencies, Department of Mental Health Services, Department of Developmental Disabilities, local Areas Agencies on Aging, Independent Living Centers, etc.), are integrally involved in the Technical assistance services provided. Please include no more than 20 letters. Letters of endorsement must be scanned and uploaded in Grants.gov under the Project Narrative Attachment Form under “Add Optional Project Narrative File”.

A Memorandum of Agreement must be submitted for all the partners that will play a key role in the development and implementation of the grant. These include primarily subcontractors. Failure to include the required letter of support and Memoranda of Agreement will result in an incomplete application, which is not eligible for review and award.

iv. Project Abstract

A one-page abstract should serve as a succinct description of the proposed project and should include the goals of the technical assistance project, the total budget, a description of how the grant will be used to develop or improve quality in home and community-based services programs, and the ultimate outcomes.

v. Cover Letter

A letter from the applicant must identify the agency serving as the lead organization, indicating the title of the project, the total amount of funding requested for the 4.5 years, and the names and major partners actively participating in the project. The letter must also clearly identify the Principal Investigator/Project Director of the grant project with contact information. The letter should indicate the submitting agency has clear authority to oversee and coordinate the proposed activities and is capable of convening a suitable work group of all relevant parties. This letter should be addressed to:

Nicole Nicholson
Centers for Medicare & Medicaid Services
Office of Acquisition and Grants Management
Mail Stop C2-21-15
7500 Security Boulevard
Baltimore, Maryland 21244-1850

vi. Application Narrative

The application narrative is comprised of five parts. The Applicants shall complete the application with the page limit guidance as articulated below:

Part 1: Technical Assistance Approach

Part 2: Personnel Qualifications

Part 3: Operational Plan
Part 4: Past Performance

The above four Parts combined must not be more than 50 pages with one and one half line spacing. Type font may be no smaller than Times Roman 12 point and all page margins must be at least one inch. Substantive technical content must be included in the 50-page limit of the grant proposal and not included in Appendices. At our discretion, submissions that do not conform to these specifications may be returned as non-responsive. Pages may be allocated across chapters as the applicant sees fit. Detailed vitae and project summaries may be included in separate attachments without length restrictions. Appendices must be bound separately and must be carefully cross-referenced.

Part 5: Budget

In addition to the above, Grantees shall submit a budget, bound separately from grant proposal, which includes costs broken down by tasks, key personnel, and time periods itemized by year.

Part 1 - Technical Assistance Approach

The applicant shall make a clear and concise presentation of the technical approach chosen for this grant. The technical approach must be complete and cover all aspects of the scope of work. The applicant should provide sufficient detail in the proposal to indicate a technical understanding of and capacity to perform the requirements of the grant. Proposals that merely restate the requirements in the solicitation without providing substantive descriptions of the planned activities will be considered technically unacceptable.

Specific topics to be addressed in this chapter include:

- A statement of the background and need for the task and a discussion of potential problems that can arise in the process of performing this task.
- The proposed technical approach to carrying out the work described in the grant solicitation, including a detailed outline of the proposed steps to be undertaken.
- A detailed description of work processes and data to be managed for this project.
- A discussion of the specific activities to be undertaken, including a discussion of why these were selected over other possibilities.

Part 2 - Personnel Qualifications

This section shall describe the educational background, professional experience, and special qualifications that directly relate to the proposed project of all professional personnel involved. When consultants or subcontractors are to be employed, the applicant must include their special qualifications, educational background, and experience. The proposal shall specify how the personnel employed under this grant will be managed, supervised, and organizationally integrated, the scope of their proposed responsibilities, and the percentage of their time under the grant.

The Government wishes to procure the services of the most qualified project director with the requisite time available to effectively manage the project and the personnel. The project director shall be experienced in the management and direction of large-scale Medicaid HCBS quality improvement projects. He or she should be capable of effectively communicating with individuals representing various professional disciplines and service providers.

The authors of the proposal must be identified. It is to the applicant's competitive advantage if they are the same persons who will carry out the grant, if awarded. CMS deems this procedure necessary to ensure that the capability demonstrated by the thought and substance of the proposal will be applied to the grant.

Specific topics to be addressed in this chapter for key personnel include:

- A description of anticipated functions and duties with respect to this project.
- A brief description of relevant training, experience, and publications.
- Specification of anticipated degree of availability for the project period (i.e., any other work that might constrain the availability and at what times).
- A description of the formal relationship between the key personnel and the applicant (e.g., employee, employee of subcontractor, consultant).

The proposal shall indicate relevant experience and knowledge of key personnel. Specific experience and capabilities that must be addressed in the proposal are as follows:

- Current policies related to quality in HCBS programs, and HCBS QI requirements, and general knowledge of Medicaid HCBS authorities.
- Understanding of Medicaid quality-related policies, specifically related to home and community-based services (HCBS), HCBS Quality, long-term care, and consumer-directed services.
- Specific developmental knowledge of State QI strategies for HCBS programs and effective methods of technical assistance, including State needs assessments for HCBS quality TA and methods of service provision.
- Knowledge and experience in the development and testing of HCBS measures.

Part 3 –Operational Plan

The applicant must provide a preliminary operational plan. The following key components must be addressed:

Operational Plan

- Describe how the applicant will organize and manage the project, how tasks will be sequenced, within what time frames, and what management control and coordination mechanisms will be used to ensure the timely and successful accomplishment of this project.
- Address the procedures used to handle the coordination of hired and qualified consultants and multiple tasks that will occur simultaneously.
- Indicate all tasks that will be subcontracted and how subcontracted work will be monitored to ensure consistency of deliverables. Lines of communication between the applicant, CMS, and subcontractors are to be carefully considered in the project organization with preference for a clear, efficient, and consistent line of communication between CMS and the applicant and between the applicant and subcontractors.
- Indicate the organizational capacity to effectively implement this project, describing availability of and access to requisite resources and facilities, such as staff, consultants, computers, and technical equipment.
- Organizational structure: Provide an organizational chart that describes the entity that is responsible for the management of this grant and how that entity relates to all other departments, agencies and service systems that will provide care and services and have interface with the eligible beneficiaries under this grant.
- Staffing Plan: Provide a staffing plan that includes the number and title of dedicated positions paid for by the grant. Please indicate the key staff assigned to the grant.
 - Percentage of time each individual/position is dedicated to the grant
 - Brief description of role/responsibilities of each position
- Identify any positions providing IN-KIND support to the grant.
 - Percentage of time each position will provide to the grant
 - Brief description of role/responsibilities of each position
- Number of contracted individuals supporting the grant.
 - Percentage of time each individual will provide to the grant
 - Brief description of role/responsibilities of each position

Part 4 - Past Performance

Applicants shall submit summaries of recent grants, contracts, subcontracts, and task or purchase orders with CMS, other Department of Health and Human Services (HHS) agencies, other U.S. Government organizations, and/or commercial firms for the same or similar services required by this solicitation. The list of directly related projects should cover at least the last six months, but not more than the most recent five years, and should include for each listing:

- Project title and grant number (for subcontracts, provide the prime contract number and the subcontract number)
- Amount and period of performance
- Project description that stresses the relationship of that work to the work required by this solicitation
- Key project staff

- Sponsoring agency and its technical representative(s)
- Contact information, such as telephone number of sponsoring agency's technical representative

CMS will contact the sponsoring agency's technical representative associated with these projects concerning:

- The nature and duration of the work and the conditions of performance
- The quality of services rendered, in terms of compliance with adequate specifications and statements of work
- The timeliness of performance, taking into account all excusable delays
- The cost or price of performance, in terms of initial reasonableness and control of exigencies
- The applicant's compliance with other grant or contract terms and conditions
- The effectiveness of applicant's management of the administrative aspects of performance, such as communicating and performing routine clerical tasks
- The applicant's willingness to cooperate with, and assist the customer in routine matters when confronted by unexpected difficulties
- The applicant's business integrity

Each applicant will be evaluated on performance under existing and prior grants and contracts for similar products or services. Performance information will be used for both responsibility determinations and as an evaluation factor against which applicant's relative rankings will be compared to ensure best value to the Government. The Government will focus on information that demonstrates quality of performance relative to the size and complexity of the acquisition under consideration. The Government is not required to contact all references provided by the applicant. Also, references other than those identified by the applicant may be contacted by the Government to obtain additional information that will be used to evaluate the applicant's past performance.

Part 5 – Budget

The applicant is required to provide a detailed budget for the 4.5 year (54 month) grant period. The budget presentation must include at minimum:

- Estimated Budget Total, broken down by the Federal fiscal year.
- Total estimated funding requirements for each of the following line items, and a break down for each line item by grant year—provide estimated funding requirements for:
 - Personnel
 - Fringe benefits
 - Contractual costs, including consultant contracts
 - Indirect charges, by Federal regulation
 - Travel
 - Supplies

- Equipment
- Other costs
- Completion of the Budget Form 424A remains a requirement for consideration of your application. This Estimated Budget Presentation is an important part of your proposal and will be reviewed carefully by CMS staff. Remember all 54 months (4.5 years) of the budget must be included on this form.
- If requesting indirect costs in the budget, a copy of the indirect cost rate agreement is required.
- Provide budget notes for major expenditures and notes on personnel costs and major contractual costs.

vii. Required Attachments (Placed in Appendix)

Attachment 1: Notice of Intent to Apply (Faxed to CMS as instructed in C-1 of this section)

Attachment 2: Prohibited Use of Grant Funds

Attachment 3: Resumes (key project staff)

Applicants are strongly encouraged to use the review criteria information provided in Section V, *Application Review Criteria and Information*, to help ensure that you adequately address all the criteria that will be used in evaluating the proposals.

3. Anticipated Announcement and Award Dates

A. Applicant's Teleconference

Information regarding the time and call-in number for an open applicant's teleconference is available on the CMS website www.cms.hhs.gov/newfreedominitiative. The applicant informational teleconference is scheduled for September 3, 2008.

B. Notices of Intent to Apply

Notices of Intent to Apply for a grant are due by August 25, 2008 and should be faxed to Ruth McKesson at 410-786-3262. It is not mandatory for an applicant to submit a Notice of Intent to Apply; however, such submissions help CMS plan its review process, including its review panels. Submission of a Notice of Intent to Apply does not bind the applicant to apply; nor will it cause a proposal to be reviewed more favorably.

C. Grant Applications (DUE DATE)

All grant applications are due by October 6, 2008. Applications submitted through <http://www.grants.gov> until 11:59 p.m. Eastern time on October 6, 2008 will be considered "on time." All applications will receive an automatic time stamp upon submission and applicants will receive an automatic e-mail reply acknowledging the application's receipt.

Please note when submitting your application electronically, you are required, to mail a signed SF 424 to Nicole Nicholson, Centers for Medicare & Medicaid Services, Office of Acquisition and Grants Management, C2-21-15 Central Building, 7500 Security Boulevard,

Baltimore, MD 21244-1850. The mailed SF 424 form must be received at the CMS within two (2) business days of the application closing date.

Late applications will not be reviewed.

4. Intergovernmental Review

Applications for these grants are not subject to review by States under Executive Order 12372, “Intergovernmental Review of Federal Programs” (45 CFR 100).

5. Other Submission Requirements

A. Electronic Applications

The deadline for all applications to be submitted through <http://www.grants.gov> is **October 6, 2008**. For information on how to get started with Grants.gov, please visit http://www.grants.gov/applicants/get_registered.jsp. We strongly recommend that you do **not** wait until the application deadline date to begin the application process through Grants.gov. We recommend you visit Grants.gov at least 30 days prior to filing your application to fully understand the process and requirements. We encourage applicants to submit well before the closing date.

Also visit the following website: <http://Grants.gov/resources/newsletter.jsp> for all of the latest information about the benefits and success of this initiative. In order to submit their applications electronically, applicants will need to:

- Download and install PureEdge Viewer from the <http://www.grants.gov/DownloadViewer> site. This small, free program will allow applicants to access, complete, and submit applications electronically and securely.
- Find an opportunity for which you wish to apply at http://www.grants.gov/applicants/find_grant_opportunities.jsp and record the Funding Opportunity number or CFDA. *You will need to enter the Funding Opportunity and/or CFDA number to access the application package and instructions.*
- Download the complete electronic grant application package from <http://www.grants.gov>
- Register with Central Contractor Registry (CCR)—Applicants may register for the CCR by calling the CCR Assistance Center at 1-888-227-2423 or online at <http://www.ccr.gov>. Online registration will take about 30 minutes before attempting to register with CCR. Applicants should receive their CCR registration confirmation within 5 business days after CCR registration. Note: Registering with the CCR requires that applicants have a DUNS number from Dun & Bradstreet.¹

¹ The requirement that applicants have a DUNS number to apply for a grant or cooperative agreement from the Federal government went into effect beginning October 1, 2003.
The National HCBS Quality Enterprise Program Announcement
Issue Date: August 8, 2008

The DUNS number is a nine-digit identification number that uniquely identifies business entities. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access the following Website: www.dunandbradstreet.com or call 1-866-705-5711. This number should be entered in the block with the applicant's name and address on the cover page of the application (Item 5 on the Form SF-424, Application for Federal Assistance), with the annotation "DUNS" followed by the DUNS number that identified the applicant. The name and address in the application should be exactly as given for the DUNS number.

Register with the Credential Provider—Applicants must register with the Credential Provider to receive a username and password to securely submit their grant application.

Register with <http://www.grants.gov>—Registering with Grants.gov is required to submit grant applications electronically on behalf of your organization. After completing the registration process, applicants will receive e-mail notification confirming their ability to submit applications through Grants.gov. (Technical support for Grants.Gov is available Monday-Friday from 7:00 a.m. to 9:00 p.m. Eastern time.)

Upon submission of the grant application to www.grants.gov, applicants will receive an e-mail confirming that the application was received. In the event that the electronic submission of the application has failed through www.grants.gov, please mail the application to Nicole Nicholson. Please include a copy of the failed submission notice from www.grants.gov with the paper application as evidence of attempted submission.

Applicants may not submit the same application in more than one format, and the choice of one application format over another will not cause an application to be reviewed more favorably. All standard application forms may be obtained as detailed in, Section V.A, *Address to Request Application Package*, of this solicitation.

For assistance with the Grants.Gov on-line process, including registration, installing the PureEdge viewer, up-loading documents and password problems, please contact grants.gov directly at 1-800-518-4726. Please do not contact CMS regarding grants.gov related issues.

V. APPLICATION REVIEW INFORMATION

This section fully describes the evaluation criteria for the funding opportunity to which this solicitation applies. In preparing applications, applicants are strongly encouraged to review the programmatic requirements detailed in, Section I, Funding Opportunity Description. The Project Narrative must be organized as detailed in, Section IV, Application and Submission, of this solicitation.

In preparing applications, applicants are strongly encouraged to review the programmatic requirements detailed in, Section I, *Funding Opportunity Description*. The Project Narrative must be organized as detailed in, Section IV, *Application and Submission Information*, of this solicitation.

1. Review Criteria

Upon receipt of the proposals, CMS's Acquisition and Grants Group may request further supporting documentation or a meeting with key operating staff to clarify the specifics proposed. Proposals that do not comply with the minimum requirements outlined in this solicitation will not be considered further. The following criteria and weights will be used in the technical evaluation of proposals that comply with the minimum requirements:

A. Technical Assistance Approach (25 Points)

The proposal should reflect a good understanding of the scope, complexity, and requirements associated with the project described in this grant solicitation.

The technical approach should be specific, detailed, and complete enough to clearly and thoroughly demonstrate that the applicant understands and can respond to the intent of the solicitation. Proposals that merely restate the requirements, promising to carry out requested activities without providing substantive descriptions of anticipated approaches to the work-- will be downgraded. Similarly, proposals that merely present extensive discussion that elaborate on general principles (i.e., text book examples) of continuous quality improvement theory or technical assistance design are not acceptable.

B. Personnel (25 Points)

CMS will review the proposal with respect to relevant background, experience, and accomplishments of key staff, including the project director, staff, subcontractor (if any), and consultants (if any).

Project organization will be reviewed for the specificity, nature of the responsibility, and authorities and organization of key personnel. CMS will review the applicant's capacity to execute this project effectively.

C. Operational Plan (10 Points)

The operational plan is to be comprehensive, specific, and feasible, including a coordination plan for personnel and subcontractors, alignment with the latest CMS quality policies, and access to requisite resources, staff, expert consultants, computers, and equipment.

D. Past Performance (30 Points)

The application will be reviewed with respect to the applicant's and key staffs' experience and actual performance on work similar to that required under this grant. There must be sufficient information to permit CMS to make the necessary reference check

E. Budget (10 Points)

The budget will be reviewed based on the reasonable and effective projection of grant activities, and the completion of and comprehensiveness of the budget information, specifically:

- Funding Request Form
- Maintenance of Effort Form
- Budget narrative that defines the major categories of this grant
- Reasonable methodology to determine the costs for project periods as defined in this solicitation

The following additional criteria will be used to judge the budget presentation and narrative:

- Are the applicant's budget and budget notes justified with respect to the goals, objectives and activities provided in the Work Plan/Timeline?
- Are completed *Funding Request and Maintenance of Effort* Forms included?
- Is there a narrative defining the costs, and the methodology used to determine the costs for each fiscal year of the project period?
- Does the budget specify resource allocation by tasks and sub-tasks, including a matrix of hours committed to the project, by person by task
- Does the budget reflect the salary and fringe benefit cost or contractual cost of adequate staff including a project director and other key staff to ensure proper direction, management and timely completion of the grant project?

TOTAL POINTS: 100

Review Criteria (Maximum 100 Points): See Attachment 4 for more details.

1. Technical Assistance Approach	25 points
2. Personnel Qualifications	25 points
3. Operational Plan and Budget	10 points
4. Past Performance	30 points
5. Budget	10 points

2. Review and Selection Process

A. How the Merit of Applications Will Be Determined

CMS will employ a multiphase review process to determine the applications that will be reviewed and the merit of the applications that are reviewed. The multiphase review process includes the following:

- Applications will be screened by Federal staff to determine eligibility for further review using the criteria detailed in the “Eligibility Information” section of this solicitation. Applications that are received late or fail to meet the eligibility

requirements as detailed in the “Applicant Eligibility” section of this solicitation will not be reviewed.

- Applications will be objectively reviewed by a panel of experts, the exact number and composition of which will be determined by CMS at its discretion, but may include private sector subject matter experts, beneficiaries of Medicaid supports, and Federal and State policy staff. The review panels will utilize the objective criteria described in the “Application Review Criteria Information” section of this solicitation to establish an overall numeric score for each application.
- The results of the objective review of applications will be used to advise the approving CMS official. Additionally, CMS staff will make final recommendations to the approving official after ranking applications using the scores and comments from the review panel and weighing other factors as described below.

B. Factors Other than Merit

Factors other than merit may be used in selecting applications for award. CMS may redistribute grant funds (as detailed in the “Award Information” section of this solicitation) based upon the number and quality of applications received. (e.g., to adjust the minimum or maximum awards permitted or adjust the aggregate amount of Federal funds allotted to a particular category of grants).

3. Anticipated Announcement and Award Date

Awards will be announced and awarded in October, 2008.

Date of Issue	August 8, 2008
Proposal Due Date	October 6, 2008 11:59pm Eastern Standard Time
Grant Period	October 27, 2008 – April 15, 2013

VI. AWARD ADMINISTRATION INFORMATION

1. Award Notices

The successful applicant will receive a Notice of Award signed and dated by the CMS Grants Management Officer. The NoA is the document authorizing the grant award and will be sent through the U.S. Postal Service to the applicant organization as listed on its SF 424. Any communication between CMS and applicants prior to issuance of the NoA is not an authorization to begin performance of a project.

Unsuccessful applicants will be notified by letter, sent through the U.S. Postal Service to the applicant organization as listed on its SF 424, after October 15, 2008.

2. Administrative and National Policy Requirements

Usual Requirements

- a) Specific administrative and policy requirements of Grantees as outlined in 45 CFR 74 and 45 CFR 92, apply to this grant opportunity.
- b) All Grantees receiving awards under these grant programs must meet the requirements of:
 - Title VI of the Civil Rights Act of 1964,
 - Section 504 of the Rehabilitation Act of 1973,
 - The Age Discrimination Act of 1975,
 - Hill-Burton Community Service nondiscrimination provisions, and
 - Title II Subtitle A of the Americans with Disabilities Act of 1990.
- c) All equipment, staff, and other budgeted resources and expenses must be used exclusively for the projects identified in the Grantee's original grant application or agreed upon subsequently with CMS, and may not be used for any prohibited purposes.
- d) Stakeholders must have meaningful input into the planning, implementation, and evaluation of the project.

Terms and Conditions

A grant award with CMS will include standard terms and conditions and may also include additional specific grant "special" terms and conditions. Potential applicants should be aware that special requirements could apply to grant awards based on the particular circumstances of the effort to be supported and/or deficiencies identified in the application by the review panel or CMS.

3. Reporting

Grantees must agree to cooperate with any Federal evaluation of the program and provide annual (every 12 months) and final (at the end of the grant period) reports in a form prescribed by CMS (including the SF 269a "Financial Status Report" forms). Reports will be submitted electronically. These reports will outline how grant funds were used, describe program progress, and describe any barriers and measurable outcomes. CMS will work with the contractor to develop a format for reporting and technical assistance necessary to complete required report forms. Grantees must also agree to respond to requests that are necessary for the evaluation of the national efforts and provide data on key elements of their own grant activities.

VII. AGENCY CONTACTS

1. Programmatic Content

Programmatic questions about the Quality Enterprise Grant program may be directed to:

Anita Yuskauskas, Ph.D.
Technical Director of HCBS Quality
CMSO, DEHPG, DCIS
Centers for Medicare & Medicaid Services
7500 Security Boulevard
South Building, Mail Stop S2-14-26
Baltimore, MD 21244-1850
Ph: 410-786-0268
Fax: 410-786-3262
Anita.Yuskauskas@cms.hhs.gov

2. Administrative Questions

Administrative questions about the Quality Enterprise grant program may be emailed to:

Nicole Nicholson
Centers for Medicare & Medicaid Services
OAGM, Acquisition and Grants Group,
C2-21-15 Central Building
7500 Security Boulevard,
Baltimore, MD 21244-1850
Nicole.Nicholson@cms.hhs.gov.

VIII. OTHER INFORMATION

1. Applicant's Teleconference

Information regarding the date, time and call-in number for an open applicants' teleconference will be made available to all applicants. Please contact Anita Yuskauskas at the above email address for more information, or check the web site:

http://www.cms.hhs.gov/DeficitReductionAct/20_MFP.asp#TopOfPage

ATTACHMENT 1

**Notice of Intent to Apply
Submission by Facsimile Preferred
Fax: 410-786-3262**

Please complete and return, by August 25, 2008, to:
Ruth McKesson
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850
Phone: 410-786-8611, Fax: 410-786-3262

1. **Name of State:** _____
2. **Applicant Agency/Organization:** _____
3. **Contact Name and Title:** _____
4. **Address:** _____
5. **Phone:** _____ **Fax:** _____
6. **E-mail address:** _____

ATTACHMENT 2

Prohibited Uses of Grant Funds

Quality Enterprise Grant funds may not be used for any of the following:

1. To match any other Federal funds.
2. To provide services, equipment, or supports that are the legal responsibility of another party under Federal or State law (e.g., vocational rehabilitation or education services) or under any civil rights laws. Such legal responsibilities include, but are not limited to, modifications of a workplace or other reasonable accommodations that are a specific obligation of the employer or other party.
3. To provide infrastructure for which Federal Medicaid matching funds are available at the 90/10 matching rate, such as certain information systems projects.
4. To supplant existing State, local, or private funding of infrastructure or services such as staff salaries, etc.
5. To be used for expenses that will not primarily benefit individuals of any age who have a disability or long-term illness.
6. To be used for ongoing administrative expenses related to Medicaid services unless such administration is part of a well-defined test of alternate and improved methods focused specifically on personal assistance services that maximize consumer control.

ATTACHMENT 3

**ELIGIBILITY CHECKLIST

NOTE: In order to be considered for this grant award, an applicant must be able to answer “yes” to all the following questions. If any items are marked “no”, the applicant is not eligible to apply and CMS will not consider the application.

Grantee Minimum Demonstrated Work Experience	YES or NO
Method of TA: Applicant can demonstrate provision of TA in HCBS quality to States on site, or via webinars, videoconferencing or teleconferencing	
Recipients of TA: Applicant can demonstrate TA in HCBS quality provided to at minimum 20 States	
Focus of HCBS Authorities: Applicant can demonstrate provision of TA in HCBS quality to States on one or more of the following authorities: 1915(c), 1915(i), 1915(j), 1115 demonstrations, 1915(b)(c)	
Focus of TA: Applicant can demonstrate the focus of TA provided to States included the areas of QI strategy development, performance measures, Medicaid assurances, sampling, continuous quality improvement, information management, or other required areas in HCBS quality.	
Publication of HCBS Quality Manuscripts: Applicant has written and disseminated nationally at least five manuscripts on an aspect of HCBS quality dealing with QI strategy development, performance measures, Medicaid assurances, sampling, continuous quality improvement, information management, or other required areas in HCBS quality.	
Development & Testing of HCBS Measures: Applicant can demonstrate experience in the development and testing of a set of HCBS measures.	

** Must accompany both the Notice of Intent to Apply form and the submitted grant application.