Medicare Improvements for Patients and Providers Act: Medicare Savings Program, Low Income Subsidy & Prescription Drug Enrollment Assistance through the Aging Network, State Health Insurance Assistance Program and Aging & Disability Resource Centers.

Funding Opportunity Announcement (FOA) #: HHS-2013-ACL-AOA-MI-0051

Frequently Asked Questions

Additional Questions:

1. We have a question that is not answered in this document.   Who can we contact?

   Answer: Please contact Katie Glendening at the Administration for Community Living (ACL), and she will answer or route your question to the appropriate person at ACL or CMS. Katie can be reached at Katherine.Glendening@acl.hhs.gov or 202-357-3589.

Application:

2. Do we submit a separate application of each Priority area or a single application?

   Answer: States should submit a single application covering Priority areas 1 (SHIPs), 2 (AAAs) and 3 (ADRC). From this single application you will receive a separate Notice of Award for each priority. NoAs for Priority area 1 will be from CMS and priority areas 2 and 3 will be from ACL. As outlined in section IV.2 of the FOA: The applicant is required to provide a detailed budget for the 12-month grant period. A combined state budget is required as well as individual priority area budgets. The budget presentation must include the following:

   - Estimated Total Budget separated for each Priority area proposed.
   - One SF-424A shall be submitted by the lead agency. On the SF-424A form, Column 1 shall depict costs for SHIP (Priority Area 1), Column 2 shall depict costs for AAA (Priority Area 2) and Column 3 shall depict costs for ADRC (Priority Area 3). Column 5 shall depict a grand total of all the Priority Area costs combined. Each Priority Area proposed shall include a SEPARATE BUDGET NARRATIVE that is labeled for the Specific Priority Area that provides a detailed breakdown of those costs independently.

3. ***** Does a state have to apply for each priority?
   Answer: No

4. Can we apply for more than the amounts listed in the MIPPA Funding Allocation by State document in the Funding Opportunity Announcement?

* Question asked 2013 MIPPA Applicant Teleconference

Answer: No, assuming all states apply, each state will be funded the amount that is listed on the MIPPA Funding Allocation by State document. If some states/territories choose not to apply for funding under priority area 1, 2, or 3, ACL and CMS will send out a revised allocation document. This document will be available by the end of June. Applicants will then be required to re-submit a budget for the new funding allocation.

5. Knowing that some states might not apply, if we don't apply for more than what is shown in The MIPPA Funding Allocation by State document, will we lose out on the opportunity to receive these additional funds?

   Answer: No. Funds that were not applied for will be re-distributed to all eligible states based on the original funding distribution formula for that priority. Applicants will be required to submit a revised budget and SF424.

6. Is the requirement for involved departments to sign a statement of collaboration (found on the MIPPA Application Cover Sheet) a state level requirement or do the targeted local areas also have to sign this as part of the application?

   Answer: This is a state level requirement only.

7. If SHIPs, AAAs and ADRCs are all in one department, who signs the statement of collaboration?

   Answer: The director of that department submits the statement agreeing to collaborate across the three program areas.

8. In the Description of the Funding Opportunity under PL 110-275.113, the last bullet states that "Leads data transmitted to states shall be considered by the states as an initiative of an application for benefits under MSP." How should we plan for this activity? Also, will the "leads" provided by SSA as noted above include names and addresses?

   Answer: The answer to this question will vary from state to state. We suggest you check with your state Medicaid office. However, with regard to reporting, an MSP application generated from SSA's transmission of LIS data to your state Medicaid agency should not be counted as part of your MIPPA grant reporting, unless you (or your local partners) actually assisted with the completion of that application.

9. *Where can we find updated CMS LIS data?

   Answer: CMS is in the process of updating the data. We suggest you use 2010 data until more up dated information is available.

10. *What are the required components of the application for 2013 MIPPA funds?

Answer:
Answer: From Section IV.2. Content and Form of Application Submission, your application should include the following:

- Applicant's Cover Sheet
- the Project Narrative
- the Budget and Budget Justification
- a Work Plan
- Standard Forms:
  - SF 424: Official Application for Federal Assistance
  - SF 424A: Budget Information Non-Construction Programs
  - SF 424B: Assurances – Non-Construction Programs
  - SF LLL: Disclosure of Lobbying Activities
- Additional Assurance Certifications:
  http://apply07.grants.gov/apply/forms/sample/SSA_AdditionalAssurances-V1.1.pdf

11. Are there a minimum or maximum number of pages required for our MIPPA applications?

    Answer: Yes, the project narrative, which is the responses to SHIP/AAA/ADRC questions 1-11, and State Questions 1-4, shall not exceed 20 pages, not including the budget and budget justification. The budget and budget justification shall not exceed 10 pages.

12. Can this year's MIPPA plan be the same as the plan we submitted for MIPPA in 2010?

    Answer: While the 2013 MIPPA plan is in many ways an update of the 2009 and 2010 MIPPA plans and some elements may be similar, the 2013 plan: should include creative **new** approaches to reaching out and enrolling eligible beneficiaries; should reflect lessons learned in the first two MIPPA projects; and may target specific geographic areas or target populations not included in the 2009 or 2010 plan.

13. **Question:** Who are the key contacts noted on the application Cover Page? Are they the project leads or agency officials?

    Answer: The Cover Page should be signed by agency officials who can commit the organization to complete the grant requirements and terms and conditions of the grant.

14. **Question:** Should we separate out application information by LIS, MSP, etc. or just aggregate this data when we report it?

Answer: Please track the applications separately by type.

15. *What is the FFATA?

    Answer: The Federal Funding Accountability and Transparency Act (FFATA) was signed on September 26, 2006. The intent is to empower every American with the ability to hold the government accountable for each spending decision. The end result is to reduce wasteful spending in the government. The FFATA legislation requires information on federal awards (federal financial assistance and expenditures) be made available to the public via a single, searchable website, which is www.USASpending.gov.

    Prime Grant Recipients awarded a new federal grant greater than or equal to $25,000 as of October 1, 2010 are subject to FFATA sub-award reporting requirements as outlined in the Office of Management and Budgets guidance issued August 27, 2010. The prime awardee is required to file a FFATA sub-award report by the end of the month following the month in which the prime recipient awards any sub-grant greater than or equal to $25,000.

    For more information, please visit: https://fsrs.gov/.

16. * The grant announcement has conflicting information. One part states we need a 3 – 5 year Budget/Budget Justification and Work Plan, but page 26 states it is only required if we are applying for a multi-year program. Will we have to complete it since we are not multi-year?

    Answer: The budget and project period is for 12 months (Priority Areas 1, 2 & 3). Please provide a budget and budget narrative for a 12-month period.

Award:

17. If all three Notices of Award (NoA) go to one agency, how will we know which award is for SHIP, which for AAAs and which is for ADRCs?

    Answer: ACL and CMS will be sure to indicate on each NoA which Priority it is funding – 1, 2 or 3. It is the responsibility of the lead agency to disseminate or distribute the funds as indicated in the plan.

18. If one state department is responsible for all three Priorities, will they still receive three awards or one award?

    Answer: They will receive three separate awards.

19. *In states where the SHIP is not located in the SUA, how do we insure that the funds are appropriated to the correct departments in a timely manner? Can each priority area funding be sent to each entity?

Answer: The requirements of the FOA state that one application for all priorities combined shall be submitted by the lead agency. The lead agency is responsible for distributing funds to the other agencies in a timely manner. The timely distribution of funds is a requirement of this cooperative agreement and will be contained in the Terms and Conditions. CMS and ACL expect that an agency will be chosen by each state, to serve as the lead agency and listed on the application cover sheet. The lead agency will also be responsible for submitting combined reports (6 month and final).

20. If a state that has two or three departments responsible for the SHIPs, AAAs and ADRCs and one of those entities is not interested in the MIPPA funding, how can one of the other state agencies secure that funding?

    Answer: ACL and CMS cannot award funds designated for one program to another, but the program may choose to contract out for services to another program or issue sub-grants to another program. For example, CMS cannot award SHIP funds to an ADRC or to AAAs in a state, simply because the SHIP in that state decides not to apply for the funds. If a state does not apply for all three priorities, funds will be redistributed across all states.

Use of Funding:

21. Page 6 of the FOA states that ADRC funding under Priority area 3 is to provide outreach to individuals regarding the benefits available under Medicare Part D and under the MSP. Can we also require that they use this funding for LIS outreach and enrollment?

    Answer: No, section 119 of Public Law 110–275 (Medicare Improvements for Patients and Providers Act of 2008) outlines what is required of the ADRCs.

22. Can we use MIPPA funding to buy lap tops and other equipment?

    Answer: Yes, but there should be an explanation of how such an expenditure will assist your state in reaching your MIPPA outreach and enrollment assistance targets.

23. If we all agree at the state level to put all of the MIPPA funding into just one of the three programs (SHIP, AAA, or ADRC) can we do that?

    Answer: No, funds are authorized to SHIPs, AAAs, and ADRCs through the Medicare Improvements for Patients and Providers Act of 2008 – Section 119, Public Law (PL) 110-275 as amended by the Patient Protection and Affordable Care Act of 2010 (Affordable Care Act), and reauthorized by the American Taxpayer Relief Act of 2012 (ATRA).

24. Can you give us more direction on how we should use the MIPPA funding directed to ADRCs?

    Answer: We are asking each state to look at the MIPPA funding they are receiving under Priority areas 1, 2, and 3 and decide the best way to use that funding to achieve the goals as specified in the FOA. Our interest is that the ADRC funding will be used in a way that will enhance existing efforts in MSP and Medicare Part D outreach.

25. Did CMS produce consumer outreach materials for the Affordable Care Act that we'll be able to use as part of our outreach and enrollment activities?

    Answer: Yes. A number of ACA publications can be accessed at www.medicare.gov/publications

26. * Do states have to give money to all AAAs or can they decide which AAA's get funding?

    Answer: States may choose how they want to distribute funds. A plan must be outlined in the application as to how funds are distributed and why they are distributed as such.

Performance and Reporting:

27. Do CMS and ACL have specific expectations for enrollment targets?

    Answer: No, we are asking each state to propose appropriate targets for their unique environment under the funding allocated to them.

28. *Will there be guidance on reporting for this grant?

    Answer: Yes, reporting requirements will be outlined in the terms and conditions of the grant sent out with the Notice of Award (NOA).

29. Will the MIPPA Resource Center be setting additional performance goals that we will have to meet?

    Answer: No, but they may be available to assist you in refining your targets as we move into the contract year, should that be needed.

General Questions:

30. * Is this a continuation grant or a new grant?

    Answer: This is a new award.

* Question asked 2013 MIPPA Applicant Teleconference

31. *What is the project period of this cooperative agreement?

    Answer: The period of performance will be for one year from the date of award. The start date will not be later than September 30, 2013.

32. When will the funding for tribes go out? We will want to collaborate with Title VI entities in our state once they've received funding.

    Answer: We currently anticipate that Tribes will receive MIPPA funding around the same time states will receive their funding (on or before September 30, 2013).

33. How does the MIPPA opportunity intersect with the NCOA Benefits Enrollment Center awards?

    Answer: There is no official connection between MIPPA funding and the grants for Benefits Enrollment Centers being issued by NCOA. That said, ACL and CMS hope that states are looking to coordinate all Medicare outreach and enrollment activities regardless of funding source.

34. Are we required to submit letters of support with our application?

    Answer: No, letters of support are not required, but a signed statement of collaboration is required.

35. *Please confirm submission of the application to grants.gov.

    Answer: The application shall be submitted via Grants.gov. The deadline for submission of electronic applications via www.Grants.gov is 11:59 p.m., ET, on June 20, 2013.