

NWX-HHS-AOA-1 (US)

Moderator: Joseph Lugo
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Coordinator: Welcome and thank you for standing by. At this time all participants are in a listen only mode until the question and answer session of today's call. Today's conference is being recorded. If you have any objections please disconnect at this time. At that time if you'd like to ask a question please press Star 1. I would now like to turn the meeting over to Mr. Joseph Lugo. You may begin.

Joseph Lugo: Thank you (Lisa) and for all your help. Welcome everyone. Welcome to the Transforming the State LTSS Access Programs and Functions into A No Wrong Door System for All Populations and All Payers.

This is our FOA Informational call.

My name is Joseph Lugo and I am the ACL No Wrong Door System Project Lead. I'd also like to have our partner agencies introduce themselves.

(Jeane Niche): Hi. This is (Jeane Niche). I'm from the Centers for Medicare and Medicaid Services. And I'm the Project Lead over at CMS.

Dan Schoeps: And I'm Dan Schoeps from the Department of Veterans Affairs. And I am the NWD Project Lead for VA.

Joseph Lugo: Thank you both. All right, thank you every one for investing the time to be part of this call.

We're excited about going over some of the key aspects of the funding opportunity. We'd like to use the bulk of the time to answer questions on the phone and take those questions from you.

But I'll provide you just a quick overview of some of the comments that'll be provided upfront, kind of an agenda.

We would like to just briefly talk about some of the background on the No Wrong Door System and some opening remarks on behalf of each of the three agencies. I'll talk a little about some of the vision and goals of the No Wrong Door funding opportunity and trying to highlight the specific things that we were really trying to call out.

We are then going to turn it over and start talking about the application requirements and a little bit about the review criteria and selection process. And Annette Shea, she'll be joining me to talk about that. And then we have our Grants Management Team to kind of provide some technical information in terms of the actual submission. And once we complete all those tasks we will then open it up for Q&A.

So with that I just wanted to start in terms of the ACL background in terms of why we're all here, why is this so important from our agency perspective.

We did take some time in the funding opportunity to walk through this. But I will mention that we know many of us even on a personal level that when individuals try to access Long-Term Services and Supports frequently they find themselves, you know, in a maze and having to make a lot of choices in a very difficult time of their lives. This often results in people making poor decisions, sometimes inaccurate just because they don't have all the information at their disposal.

Unfortunately there's serious consequences with some of these decisions when you don't have that information. And we know that has direct impact on their health and their wellbeing, also the financial status so not only individuals and families but state budgets and federal budgets.

So across the three agencies we've collectively come together recognizing that the Long-Term Services and Supports System will always involve multiple players and providers. And there'll always be to some extent some fragmentation.

But we wanted to lay this funding opportunity out to say how can we create an interface between the public and Long-Term Services and Supports that'll really be able to help streamline and make that access a lot easier for the individual and their family?

So if I could turn it over to (Jeane Niche) to try to get CMS's perspective.

(Jeane Niche): Hi everyone. I just wanted to make a few remarks. A few years ago CMS had had a contractor work on the study looking at ten of our grant programs that we had done. And we kind of synthesized those findings about what did we learn from some of those grant programs about Long-Term Services and Support.

And what was very interesting is one of the key attributes that came out of that study is that if you (pull down) what was most important to having a high functioning long-term care system and one of those attributes is that you have a No Wrong Door System for accessing community-based Long-Term Services and Supports.

And that was one of the findings. And that's why this project and this grant opportunity is so exciting because we're still building on all those lessons learned earlier but that we know that this is key to having this high performing system is that it allows people to obtain services easily no matter where and how they enter the long-term care system.

So we're very excited to be part of this grant opportunity and to be partnering again with ACL and VHA on this opportunity to continue the work that we've already started and the lessons learned and just know that this is really a process that's developing and we're continuing to take lessons learned from the last year's grant or it's almost two years now the first grant program. And we'll continue with lessons learned as we help states go into this next phase.

So thank you and I'll turn it over to Dan.

Dan Schoeps: Thank you (Jeane). And this is Dan Schoeps from VA. We're very pleased to be here and to support this funding opportunity as well.

It has become apparent to us as we look to rebalance our system of Long-Term Services and Supports that increasingly we will need to rely on the aging and disability network to achieve those goals. So anything to the extent that we can support the development of the No Wrong Door System we want to - well we want to be a part of.

We're perhaps more service oriented in some of our thinking and our activity here. But conceptually we're most supportive of this approach.

Joseph Lugo: Thank you very much Dan and (Jeane) for those comments.

If you find yourself maybe new to this effort or on this call, in the funding opportunity we did take some time to highlight some key markers in the development of the joint partnership that we've just talked about in this initiative and how it's strengthened over time. I'd really encourage you to review that.

I will mention that in that background you'll see that this initiative actually started together in 2003 where AOA at the time, the ACL and CMS came together for a joint funding opportunity. In 2003 we funded 12 states. That initial funding opportunity was really based on the work that we already seen going on in states specifically in Washington, Oregon and Wisconsin who were already successful in some of their rebalancing efforts.

If you haven't had a chance to look at that we really encourage you to do so. We conveyed this background because we really wanted to help illustrate that the vision and funding opportunity that you have in front of you has deep roots and it represents nearly two decades of state and federal experience of working on access issues into LTSS.

So in 2012 as (Jeane) alluded to the collective agencies on the call, we came together and we issued a special funding opportunity called Part A for the ADRC Grant Program. This is where ACL officially adopted the No Wrong Door System as part of the Part A states really to help better align with the

Balancing Incentive Program that CMS was working. Also to respond to the direction that many states were moving towards.

The eight states that were awarded were Connecticut, Massachusetts, Maryland, New Hampshire, Oregon, Vermont, Wisconsin and Washington. Even those states aren't eligible for this particular funding opportunity we just want to recognize the work that they've done.

One of the lessons that has come out of that work and is hopefully one of the messages that comes across strongly is that we really feel that there is no one agency or network that can implement or carry out this No Wrong Door vision, the authority or the capacity and it's really going to require diverse group of organizations working together to pull this off.

So that's a little quick highlight of the background section. I know (Jeane) you had some thoughts on this as well.

(Jeane Niche): Yes. Just that we were excited that the Balancing Incentive Program, the work that was started in that grant program was looked at as a model to help build what is now this No Wrong Door System grant because they were able to take it a step further with the opportunity that came out in 2012 in saying that it's for all populations and all payers and really moving a state in that direction to become collaborative.

What's great is not only do we have some lessons learned from the 2012 Grant Program but we also have lessons learned from the Balancing Incentive Program. So we're going to continue to take what we're learning and help states move forward for the next states that want to get involved with this planning grant and move forward in developing No Wrong Door Systems across the country.

Thank you.

Joseph Lugo: Thank you (Jeane). We also wanted to mention that with the work with the eight states there are some resources that are being developed that we feel really could support not only the work in these states but also the potentially new states that are coming aboard.

And we just wanted to mention some of those deliverables that we are working on across HHS and our federal partners.

The first of those resources is this - the development of national standards for a No Wrong Door System of access for all populations and all payers in terms of what does that look like.

The second resource was a National Training and Credentialing Program for a No Wrong Door workforce conducting person-centered counseling.

The third resource and these are all listed in the funding opportunities, the idea of a management tool to help provide measures and tools for document and strengthening the operational capacity of a state system.

The fourth resource is this idea of collecting a portfolio of best practices and leading models across the country that states will be able to identify and maybe replicate.

Another resource that we're extremely excited about is the official guidelines states will be able to use for claiming Medicaid administrative funding and VHA funding to support their No Wrong Door infrastructure.

And finally our hope is that we'll have eight states that'll be able to showcase across the country as models that are very diverse and they have their own personality but they'll be able to kind of speak and show how this was translated in their state.

So those are some of the resources. One of the things we also wanted to highlight in case you might have missed is that we are looking for the future in terms of No Wrong Door activity. You might have noticed that in the President's 2015 Budget Request it does include \$20 million each for five years for a total of \$100 million to support further development of a No Wrong Door System.

We - our hope is this funding will allow the current eight states to continue and also bring aboard another 35 states to keep this initiative going. And the thinking our hope is that this particular funding opportunity will help states prepare for that potential new dollars so we're very excited about what the future holds for this work.

Wanted to move kind of and just another part of the introduction here and just mention briefly some of the vision and goals of the funding opportunity. And then we'd like to bring your attention to some attachments that were part of the funding opportunity that we want to make sure that you were aware of.

First, in terms of the vision we did want to emphasize that this No Wrong Door System really is designed for all populations meaning everyone regardless of person's age, income or disability. And also you'll hear all payers and that's really meant to help explain in terms of any state administered program to the populations that we serve the No Wrong Door System.

If a state is successful in competing for a grant award as FOA the main deliverable of this grant will be a 12 month planning period for developing a 3 year plan.

And I will emphasize that it is pending the availability of additional federal support that we just mentioned.

We also - you'll notice that there is some state agencies that'll be part of the requirement that I think you'll be hearing more later about as well as some of the key stakeholders that should be included.

Our hope is that the state would start to begin to model and mirror the collaboration that is occurring, you're seeing now at the federal level. That's why we had that in there.

So we would like to bring your attention to five key attachments that were part of the funding opportunity. We're going to speak to each one of them at different lengths. But we wanted to make sure that you saw them.

The first of those attachments was a No Wrong Door schematic. And I'll be speaking to that one and then I'll turn it over to other staff to speak to the others.

But in that schematic that's kind of our framework in terms of how we see this full No Wrong Door vision in terms of what it looks like. There are four key functions you'll see in that schematic. Those are represented by four arrows on the left side. You'll see public outreach and links with key referral sources. You'll see persons that are counseling. You'll see streamlined access to public LTSS Programs and then finally state governance and administration.

We attempted to use this funding opportunity as a way to collectively present a unified vision across the three agencies in terms of what the system would look like.

I won't go into detail because I think funding opportunity does a wonderful job of doing that. I'll mention just a couple of quick, quick items on each of the functions that we were trying to call out.

In terms of the first one in terms of public outreach and links of key referral sources I think the main takeaway there is that we really do see this responsibility in No Wrong Door System to be a visible and trusted source, really trying to help create awareness to the general public is critical.

You'll also see that we really tried to call out that a number of access points in this first function need to be diverse but there are four specifically that we really see formal relationships being developed with. Those include information referral entity, nursing homes and other institutions, acute care systems and our VA Medical Centers. We really feel that a formal relationship needs to be kind of involved in and directed with them.

The next function is a person-centered counseling. This is probably the most descriptive of all the functions. We really see this kind of function as the heartbeat of the entire system

I won't go into too detail because you'll hear about it a little bit more. But we really feel that this is a chance, person-centered counseling. Helps empower individuals to make informed choices in terms of based on their person goals, their preferences and their desires. And also to help them navigate the system and maze of organizations that might be out there.

We do see it's different and different skillsets than traditional case management might have. But we think there's some basic steps that make up person-centered counseling. These steps include conducting a personal interview, developing a person-centered plan, facilitating access to private service and support, facilitating streamline access to public programs and finally conducting ongoing follow-up.

We recognize that these components have a fluid process and individuals would dictate high level of engagement in individual and a person-centered counseling might work.

We also recognize that we're not starting from scratch that many states are going to be building upon existing work that they've done especially around options counseling to try to carry out this function.

Real quickly the last two functions are streamline access to public programs. A couple of things I just want to call out. First, we really want to recognize the value of preliminary functional and financial (flexibility) and how important it is to have those camera ready applications to some of the Medicaid office.

And also we want to emphasize there really is - there can only be one No Wrong Door System. You'll see on Page 9, we didn't bold it but it is a critical point that it is expected that a state will fully integrate its ADRC activities, their Balancing Incentive Program if applicable and other state administered LTSS Programs into a single statewide No Wrong Door Long-Term Services and Supports System for all populations and all payers. It's a critical point we wanted to convey.

And then finally one of the questions we get a lot is well how is this system going to be administered or run and that's the last function. I just wanted to

mention that we do see that a number of agencies would be required to kind of help carry this out. We think a No Wrong Door System governing body should be responsible for kind of coordinating the ongoing development, the implementation, financing, evaluation and finally continuous quality improvement.

That's a quick high level overview of that first schematic but it is a very important one and the whole funding opportunity is based on that.

I'll turn it over to Shawn Terrell to talk about the second important attachment, person-centered schematic.

Shawn Terrell: Thanks Joseph. So you'll see a sort of a breakout schematic called, the Appendix 2 called Person-centered Counseling Competencies in a No Wrong Door System. Joseph went through the box on the left which is essentially the same. It's the same list of functions that are in the larger schematic.

What this schematic - I'll go through some of these other areas. I just want to point out generally there's two really key implications of the schematic. One is that it implies that there's a set of skills that people are going to need in order to do effective person-centered planning within the No Wrong Door System.

And person-centered counseling comprises person-centered planning, thinking and (practice). And so we're developing a training program for that. That'll be hopefully ready for action in another year or so. It's taken us a good amount of time to do it. It's very complex.

But in any case that's in the process. The second piece that this schematic I think really implies is that there's a systems component to it that this is implemented within the context of this larger system.

And you'll see if you move over to the right where it says specialties for instance that's the first step in this is, you know, who's going to be doing this skillset once we get clarity about what that all is.

Well that there's a lot of people already in these systems doing this work, right. We - there are people obviously who have been working in these sort of ADRC No Wrong Door System for a number of years engaging with people. They may need to have some additional skills to do person-centered planning well. There are people who are doing, you know, transitions out of hospitals and out of long-term care institutional settings. There are people working with specific populations and have extensive experience with those populations.

What we're trying to get to here is that every one of those folks who are doing anything related to the No Wrong Door work needs to have a basic set of skills in person-centered planning and needs to be integrated into this in the context of a larger system.

And that's sort of as we work our way down there's this linking question, how do we link people to services once we have a decent set of understanding of what the - their interest, needs, (unintelligible) goals might be.

How - and then there's a question of applying for public programs for Long-Term Services and Supports such as Medicaid and others. And that again those systems exist in states. The question is how are these things put together in a way that's effective, seamless to the person and maintains this person-centered approach.

And that is basically this schematic.

Joseph Lugo: All right.

Shawn Terrell: If there's any questions we can address them.

Joseph Lugo: Thank you so much Shawn.

Shawn Terrell: Yes.

Joseph Lugo: So that's excellent. So the third schematic, if I can make - share one major takeaway with that is we were really trying to respond to this idea and that one of the lessons we learned is that no one agency or network can carry this out. It really does require multiple agencies and organizations at the state and local level with formal relationships to really actualize the full vision of a No Wrong Door System. And Appendix 3 attempts to kind of capture that.

Appendix 4, Shawn did you want to mention briefly Appendix 4?

Shawn Terrell: Oh sure, right. So the KSAs these are - the KSA stands for Knowledge, Skills and Ability. What this - was a - you'll see that in the appendix. There's a whole list of different, you know, columns with different details about what we mean by Knowledge, Skills and Abilities. That has been actually the basis for what we are putting into our training model to help people learn what they need to do to be effective at person-centered thinking and planning.

It's significant amount of detail in that but I think it's worth taking a look at and thinking about how in the work that you are doing, this would be both

applied to things you're already doing and challenges that you may need to take a look at.

Joseph Lugo: Thank you Shawn; and finally (Jeane, if you could talk a little about the fifth attachment, it's the person-centered planning provision.

(Jeane Niche): Sure.

Joseph Lugo: Okay thank you.

(Jeane Niche): In January CMS published the final rule for the Home and Community-Based Services and that the rule implements important features of the Affordable Care Act and clarifies the types of settings in which Medicaid funded HCBS may be delivered. But it really also emphasizes the ability of people receiving HCBS to exercise choice about where they live and the services they receive.

And what you have here is this part of the regulation really shows how person-centered planning is a vital part of the Home and Community-Based Services regs.

But what's really important to note here is why is it part - an attachment to this funding opportunity and that's really the exciting part is to say to you that the three agencies believe in this and again were moving together. And we want states to see that this is really important because we want state policies to ensure individualized services.

So that's why you see this as one of the attachments.

Joseph Lugo: Thank you (Jeane). So we really encourage to look at those and if you haven't looked at those already, they really help kind of round out the story that we are trying to present.

So we're going to move a little bit more to the (submitting) the application and then we're going to turn it over to - for questions and answers.

Just some quick housekeeping items in terms of the funding opportunity. This would be a cooperative agreement. The award ceiling is \$185,000. It'd be a 12 month project and budget period.

The due date for the Letter of Intent is June 10. Letters of Intent aren't required but we ask if you could submit those.

And the applications are due July 15.

There - only one application can be submitted for a given state and you'll notice in the response of criteria that there has to be a state governmental entity applying.

And there are only eight states that are not eligible to apply. This is a national and open competition.

I will then turn - I'll turn it over to Annette Shea to kind of give us a little more perspective in terms of our expectations of what you'll be submitting.

Annette Shea: Hi everyone. Beginning on Page 17 of the FOA, the instructions for the content and form of the application are described. Under the Project Narrative Section the key areas that need to be included in the application are listed with

detailed instructions about the information that should be contained in the application.

Please note that in each key area there is standard language that is included in every FOA and in key areas titled problem statement, proposed intervention, special target population and organizations, outcomes, evaluation, dissemination and organizational capacity there is information that provides specific language about this FOA.

This information is noted with the phrase specifically. Be sure to include that information in your application using this guidance.

In regard to the application review criteria, applications are scored by assigning a maximum of 100 points across five criteria. Project relevance and current need is worth 20 points, approach is worth 40 points, budget is worth 10 points, project impact is worth 20 points, organizational capacity is worth 10 points.

Applicants should pay attention to the questions provided in the Review Criteria Section of the FOA.

In regards to the review and selection process an independent review panel of at least three individuals will evaluate applications that pass the screening and meet the responsiveness criteria if applicable based on the questions noted in the review criteria.

These reviewers are experts in their field and are drawn from academic institutions, nonprofit organizations, state and local government and federal government agencies.

Final award decisions will be made by the Administrator at ACL. In making these decisions the Administrator will take into consideration recommendations of the review panel, reviews for programmatic and grants management compliance, the reasonableness of the estimated cost to the government considering the available funding and anticipated results and the likelihood that the proposed project will result in the benefits expected.

Anticipated announcement award date is September of this year.

Joseph Lugo: Excellent. Thank you very much for that overview Annette.

We're also very fortunate to have with the - from Office of Grants Management (Karen Malena) just to give us some little tips and recommendations in terms of the actual submission of your application.

(Karen Malena): Hi. This is (Karen Malena). Well so basically I'll be doing the review of the application documents that you need to submit, whatever is required and also I'll be checking the budget sheets for accuracy.

So basically what I would suggest is for the 424 or the 424(a) the budget justification, just make sure that all the numbers match, that they're all the same numbers on all the forms and that you include all the forms that we will require, the 424(b), the work plan, the Indirect Cost Rate Agreement if that's applicable to your application.

We're also looking for - I'm sorry, I was going to say budget justification but I already mentioned that. So just make sure that on your budget justification everything is broken down properly. If you have something under other break that down, give an explanation to what other is. For personnel make sure that all the salary is broken out. And that's about it really.

Joseph Lugo: Okay, thank you very much.

(Karen Malena): Sure.

Joseph Lugo: For being part of our team and helping with (their V) process.

(Karen Malena): Thank you.

Joseph Lugo: (Lisa) I think we're going to go ahead and now open it up for Q&A.

Coordinator: Thank you. To begin our Q&A session if you'd like to ask a question please press Star 1 and record your first and last name when prompted. Your name is required to introduce your question. To withdraw your question you may press star 2. Once again, please make sure your line is unmuted before doing so, press 1 to ask a question. Give us one moment please for our first question to queue.

Joseph Lugo: While we have this moment I will mention we will do our best to answer your question right here on the spot in terms of the knowledge we have on the phone and across the room. But just to let you know we will be posting our official FAQ next on our ACL web site.

So we will give our response but the artificial response in terms of the language will be part of that FAQ so make sure you look to that to get the final word in terms of what we're supposed to do. And it helps compensate if we say anything that might be wrong.

(Lisa) any questions yet?

Coordinator: None so far.

Joseph Lugo: Okay, we'll just give them a second. Once they get started they usually get rolling.

Coordinator: We have one showing up. Give us one second please.

Joseph Lugo: Okay.

Coordinator: Our first question comes from (Romaine Shurin). Your line is now open.

(Romaine Shurin): Thank you. Hi there. We are - the State of Maine is in our first year of a BIP grant.

And much of what we're doing with our BIP plan is to focus on the No Wrong Door System.

And we're just struggling since we're in the first year of that grant, what we would do with these funds to take it a little bit beyond what we're doing with BIP so that we're not duplicating efforts since we're already starting that whole process.

Joseph Lugo: Thank you (Romaine) for your question. I think it's only just courteous we'll have - if (Jeane) if you want to respond first to that or any thoughts.

(Jeane Niche): Just first let me just point out that being a Balancing Incentive Program grantee does not mean you can't be part of this grant opportunity. Let me point that out. The only people who aren't able to apply are the original eight states from the 2012 grant. So you're not precluded from applying.

But really if you think about - if you look hard at the applications they are similar in thinking and theory but there are some slight differences in some of the deliverables. But really thinking that this takes you - helps you take it a little bit further in planning to make it all - for all payers and all populations which moves beyond what just the Medicaid Balancing Incentive Program Grant requires.

But will just give you another opportunity to help you move everything forward as a state and take advantage of the lessons learned from the original Part A grantees for the 2012 grant opportunity and also some of the tools available from both programs.

Joseph Lugo: That's excellent (Jeane). Thank you very much.

I would also add just for those states that might have an ADRC Grant that might be thinking along the same lines as (Romaine) that the vision is that this new funding opportunity is be - it goes beyond in terms of the expectations that we have provided before.

So a lot of things that you mentioned...

(Jeane Niche): Yes.

Joseph Lugo: ...they could apply directly to a state that has an ADRC Grant.

Does that help (Romaine)?

(Romaine Shurin): Yes, it does. Thank you so much.

Coordinator: It looks as if we'll have one more question coming in. Give us one moment please.

Joseph Lugo: Okay.

Coordinator: Our next question comes from (Trish Farnham). Your line is now open.

(Trish Farnham): Hi. This is (Trish Farnham) in North Carolina. And we have multiple questions. Would you prefer to take one and then go to another person or would you prefer I ask them all at once?

Joseph Lugo: Assuming you're not talking a dozen questions, why don't we take them all upfront?

(Trish Farnham): Sure. So our first question is will there be access to technical assistance and will we have any access to the Part A grantees and the BIP Technical Assistance and Learning?

Joseph Lugo: I can answer that confidently. Yes, you will both across - through the agencies. You will be receiving technical assistance as well as have access to everything that's been shared with the party of states.

(Trish Farnham): Fantastic. So the next question is that and I think you alluded that this would be coming, but is there any guidance around CMS's current commitment to provide admin match on options (unintelligible) to non-Medicaid individuals?

Joseph Lugo: That's one of the things that we're working with CMS on the Claiming Guide.

(Trish Farnham): Okay.

Joseph Lugo: We have a draft. We're working with CMS on the language. We're making sure it matches and aligns with the schematic that we walked through. And we'll share all that information with you if you happen to apply and are awarded and whatever goes public we'll share.

(Jeane), did you have any additional thoughts?

(Jeane Niche): No. That was it. Great, thanks.

(Trish Farnham): And then - thank you. And then a couple of final questions, are there any restrictions about entities who can provide the person-centered counseling or assessment functions? If we are exploring different models related to ACOs will ACOs be authorized to provide these functions?

Joseph Lugo: So yes, really there's no restrictions in terms of the vision of what we laid out. It really will rest with the states and that kind of governing body that's established so they would make those decisions.

But from our perspective there would be no restrictions.

(Trish Farnham): Okay. And then the final one and then I'll be quiet is we anticipate that the long range measurable outcomes will probably need to be refined a bit through the planning process itself.

Will there be an opportunity to revise the outcomes that we propose in the application?

Joseph Lugo: Yes, there would be.

(Trish Farnham): Okay.

Joseph Lugo: And we'll add all four of those questions to the FAQ. Thank you very much.

(Trish Farnham): Thank you all.

Coordinator: Once again if you'd like to ask a question please press Star 1. Give us one moment please.

I'm showing no further questions in queue at this time.

Joseph Lugo: One of the things I might do (Lisa) is I might share with you some questions that we have received via email that you'll see part of the FAQ and maybe it'll trigger some additional questions.

One of the questions that we have received from a couple of states is do states have to apply and be awarded a planning grant under this opportunity in order to apply for any future No Wrong Door funding?

So it was a good question. So our response is that it would really depend on the type of funding opportunity that's created. If it's a full and open competition then no, you would not have to apply for this particular funding opportunity.

But we felt it was important to note that ACL and CMS we have issued a number of competitive continuations for previous ADRC No Wrong Door funding opportunities since the inception of the program. So by definition of competitive continuation only those state entities with an active grant would be eligible to apply in these situations.

So for example in 2013 and '14 those were competitive continuations based on the original 2009 funding opportunity. So if the state did not apply or would not have an active 2009 grant there was a five year period where they wouldn't have been able to apply. So it really just depends on the type of funding opportunity whether you'd be eligible or not.

Any other questions (Lisa) come in?

Coordinator: There are no further questions in queue at this time.

Joseph Lugo: All right. Let's just give them - we'll give them another minute.

Coordinator: I think one's coming in. Give us one moment please.

Joseph Lugo: Okay.

Coordinator: The next question comes from (Mary Beth Ribary). Your line is now open.

(Mary Beth Ribary): Yes. Hi. Hi everybody. Two quick questions, in the application are the states - should they also provide information on how - what they're asking for to spend their grant money on, does not duplicate what they're using grant funds and (MFP) and (ICK)? So let me ask that one first.

Joseph Lugo: We would want to see how their activities would be coordinating with existing activities. I mean keeping with the spirit of (previous) grant announcements we would not want to see these funds being used to duplicate previous efforts. So we'd like to see how the coordination would occur.

(Jeane Niche): And this is...

(Mary Beth Ribary): Okay.

(Jeane Niche): ...(Jeane) from CMS. Just - also just to see the leveraging. We want states to leverage grant opportunities but we should be able to see from applications how you're building upon with this new opportunity, other grant opportunities that exist in the state.

(Mary Beth Ribary): Okay, thank you. And I have one more. It sounds like (unintelligible) funding will be used for admin and (IT) building processes and systems between agencies and building what's already been done in the state.

Is there any requirements for how much money needs to be toward any one thing like training individuals to (build up) person-centered planning or the state just provides the rationale on how they're going to use the grant funds?

Joseph Lugo: Yes. Really the focus is that this is a planning grant, a planning effort with the state agencies working together. So we wouldn't have specifications in terms of how those dollars were spent. That would be the state presenting that to us through their work plan.

(Mary Beth Ribary): Okay, thank you.

Joseph Lugo: Thank you.

Coordinator: Once again if you'd like to ask a question please press Star 1. Give us one moment please.

Joseph Lugo: While we wait (Lisa) one - another question that did come in from a state was asking about the No Wrong Door Management Tool. In that funding

opportunity we do indicate that states can volunteer to participate in this process.

And they just wanted to know can you just provide us any more description in terms of what that tool would look like or the purpose.

So in the FAQ you'll see a response to that. I'll read that to you now. The purpose of the tool is to assist states to help create a baseline to compare where they are right now to the full vision of the Now Wrong Door System. Through this tool states will be able to capture which organizations are included in their No Wrong Door System, what functions are being performed and by which organization, to what extent is the No Wrong Door System serving all populations and the ability to assess capacity and demand as it relates to some of the functions especially person-centered counseling.

We feel like this tool can - this can be achieved by having state and local organizations provide input and data to eventually a web-based platform. We're currently testing the elements and the definitions and the entire process with the party of states before we'll be rolling this out.

And so you'll see that as part of the FAQs.

Coordinator: There are no further questions in queue at this time.

Joseph Lugo: Okay. Well we'll pause for maybe 30 seconds and then we'll see where we are.

Coordinator: We do have another question come in from (Mary Beth Ribary). Your line is now open.

(Mary Beth Ribary): Yes. Hi Joseph. I just was wondering when the FAQs will be posted.

Joseph Lugo: We're going to attempt to post those within this week and just keep - continue to update that as questions come in. It's a good question. If for some reason a question comes up in the actual writing or later you can email those to me. My contact information is in the announcement. And we'll put - add those to the FAQ.

(Mary Beth Ribary): Thank you.

Coordinator: We have another question from (Trish Farnham). Your line is now open.

Joseph Lugo: Great.

(Trish Farnham): Hi. I'm just going to go for broke and ask another one. Is there any requirement (he) needs to sign a Letter of Intent?

Joseph Lugo: No there is not.

(Trish Farnham): Okay. Thank you.

Joseph Lugo: Thank you.

Coordinator: There are no further questions in queue at this time.

Joseph Lugo: Well I think I would close. Just a reminder of two important dates, first is June 10. That's when Letter of Intents are due. If you could email those to me, an email would suffice. And also the actual due date of the application is July 15.

Other than that if you have any other questions feel free to email me. Thank you for taking the time to be part of this call. It is being recorded and it'll be posted with the Funding Opportunity ACL web site along with the text, the script and narrative of our discussion as well as the FAQs.

So thank you very much. Bye now.

Coordinator: Thank you for joining. This now concludes today's conference. All lines may disconnect at this time.

END