



Strong Start for Mothers and Newborns: Budget July 18, 2012







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Required Budget-Related Documents

All applicants must submit a SF424A and a Budget Narrative

- SF424A
 - Report all direct and indirect costs (for the four years of the program).
 - If requesting indirect costs, a currently effective Indirect Cost Rate Agreement will be required.
- **Budget Narrative**
 - Breakdown of costs for the 4-year program period, including direct and indirect costs.
 - Description of the services that would be furnished with Strong Start funds.
 - Applicant should clearly justify the funding needs and why the applicant's approach is the most cost-effective way to implement the model.
- FOA pages 39-41



SF424A: Direct Costs

Direct costs are the costs of furnishing enhanced prenatal care services, start up costs, administrative costs, and the costs of collecting required monitoring and evaluation data.

- Applicants should include costs for reporting data on mothers and their infants during the four year performance period.
- Grant Information for Current and Prospective HHS Grantees (<u>http://dhhs.gov/asfr/ogapa/aboutog/grantsnet.html</u>)



SF424A: Indirect Costs

Indirect costs (also known as facilities and administrative costs) are costs incurred for common or joint objectives that cannot be identified specifically with a particular project, program, or organizational activity.

- Examples include: Facilities operation and maintenance costs, depreciation, and administrative expenses.
- If requesting indirect costs, a currently effective Indirect Cost Rate Agreement will be required.
- Applicants with an effective Indirect Cost Rate Agreement may modify their request to lower their total proposed budget.
- If an indirect cost rate has never been established, the budget should include a provisional amount up to a maximum of 10 percent of direct salaries and wages.



Administrative Costs for Program Management, Monitoring and Evaluation

Strong Start funding will be used primarily for the provision of services rather than for overhead and administrative costs.

However, budgets may include administrative costs, such as:

- Generating reports for quarterly reporting requirements.
- Collecting and reporting gestational age and birthweight for mothers and infants participating in proposed intervention.
- Collecting and reporting gestational age and birthweight for at least 2 years of baseline data.
- Collecting and reporting gestational age and birthweight on a comparison population during the intervention period.
- Collecting and reporting on continuous quality improvement activities and other measures that provide quality assurance, and demonstrate excellence in achieving clinical guidelines and nationally accepted standards for prenatal care.

Program Start Up Costs

- Program Start Up and capacity-related activities should be completed within three months of the award.
- Service delivery of enhanced prenatal care should be implemented as rapidly as possible.
- Funding for training programs for clinical staff may be requested but should be intensive, brief programs.
- All activities should be built into the applicant's work plan and timeline.



Cost Per Beneficiary Served

- The Strong Start program must fund enhanced prenatal care service interventions for at least 90,000 women (30,000 in each of the 3 approved delivery approaches).
- Applicants should propose an aggregate funding request for enhanced prenatal services that covers the cost of the specific proposal in the application.
- Applicants should specify the cost of each specific service included in the aggregate funding request.
- The total amount of this request should be described as a total payment per expected beneficiary served.
- The total amount should include total costs for the enhanced service delivery, administration, and data collection and submission.



Strong Start Funding Restrictions

- Funds awarded through the Strong Start funding opportunity may not supplant or supplement funding for services that are currently authorized through the Medicaid and/or CHIP State Plan, waivers, and other grants.
- Strong Start funds awarded through this funding opportunity may not be used for linking Vital Records to Medicaid and/or CHIP claims and encounter data.
- Strong Start funding may not be used to furnish services to patients who are not enrolled in Medicaid or CHIP.
- Strong Start funding may only be used for enhanced prenatal services within one of the 3 approved prenatal care approaches.
- See pages 42-44 of the FOA.





The Funding Opportunity Announcement (FOA) is available on the Innovation Center website: <u>http://innovations.cms.gov/Files/x/Strong-Start-for-Mothers-and-Newborns-Funding-Opportunity-Announcement.pdf</u>

Additional information about the Strong Start program is available on the Innovation Center website: <u>http://innovation.cms.gov/</u>

Email: <u>StrongStart@cms.hhs.gov</u>

