



Administration for Community Living

Center for Innovation and Partnership

Senior Medicare Patrol State Project Grants - Pennsylvania

HHS-2026-ACL-CIP-MPPG-0020

04/13/2026

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ACL Center:

Center for Innovation and Partnership

Funding Opportunity Title:

Senior Medicare Patrol State Project Grants - Pennsylvania

Funding Opportunity Number:

HHS-2026-ACL-CIP-MPPG-0020

Primary CFDA Number:

93.048

Due Date for Letter of Intent:

03/03/2026

Due Date for Applications:

04/13/2026

Date for Informational Conference Call:

Applications that fail to meet the application due date will not be reviewed and will receive no further consideration. You are strongly encouraged to submit your application a minimum of 3-5 days prior to the application closing date. Do not wait until the last day in the event you encounter technical difficulties, either on your end or, with <https://www.grants.gov>. Grants.gov can take up to 48 hours to notify you of a successful submission.

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| Executive Summary |
| Additional Overview Content/Executive Summary |
| I. Funding Opportunity Description |
| SMP Mission |

The mission of the SMP program is to empower and assist Medicare beneficiaries to prevent, detect, and report healthcare fraud, errors, and abuse through outreach, counseling, and education. To further this mission, all SMP program activities are organized around four strategic program objectives:

1. Provide group education and one-on-one assistance to Medicare beneficiaries on a statewide basis, with a specific emphasis on those with the greatest economic and social need.
2. Recruit, train, and retain a sufficient, effective, and representative workforce equipped to provide high-quality education and one-on-one support.
3. Monitor and assess SMP results through operational and quality measures.
4. Position SMP to nimbly and effectively respond to changes in the programmatic landscape.

Program History

The Department of Health and Human Services Office of Inspector General (HHS-OIG) estimates that Medicare loses billions of dollars each year due to errors, fraud, and abuse. The 1997 Senate Report 104-368 noted that "senior citizens are our best front-line defense against these losses, but they often don't have the information and experience needed" to recognize and accurately report cases of error, fraud, and abuse. These losses are due, to a considerable extent, to the many ways in which the funds are disbursed as well as to the sheer magnitude surrounding the dynamics of healthcare expenditures. Both factors increase the probability of errors while opening wider opportunities for fraud and abuse.

To address this growing issue the Health Care Fraud and Abuse Control (HCFAC) Program was created to coordinate federal, state, and local law enforcement activities with respect to healthcare fraud and abuse. Now in its 28th year of operation, the HCFAC Program continues to demonstrate its success in protecting beneficiaries by identifying and prosecuting the most egregious instances of healthcare fraud and preventing future fraud and abuse. As partner in these efforts, ACL administers the Senior Medicare Patrol (SMP) program which funds a nationwide network of local community-based partners and team members to provide outreach and education to Medicare beneficiaries about how to prevent, detect, and report healthcare fraud. The SMP program plays an important role in the broader HCFAC Program by focusing on community outreach and Medicare beneficiary empowerment with the goal of stopping fraud before it occurs.

SMP Program Today

ACL funds 54 state SMP projects, including grantees in all 50 states, the District of Columbia, Puerto Rico, Guam, and the US Virgin Islands. The SMP projects use this funding to provide local outreach, education, and assistance to Medicare beneficiaries through a trained volunteer and in-kind workforce. SMP projects teach Medicare beneficiaries to take proactive steps to protect themselves and the Medicare program from potential fraud, errors, and abuse. SMP projects actively disseminate fraud prevention and identification information through the media,

outreach campaigns, community events, and one-on-one beneficiary support. SMPs help individuals and their loved ones understand how to review their healthcare statements and bills for accuracy, as well as how to identify and avoid potential fraud schemes. If suspicious activity is identified or suspected, SMPs can help answer questions, resolve errors, or report suspicious activity for further investigation.

One key role of the SMP projects is to assist beneficiaries by referring potential fraud complaints on to other investigative entities, as appropriate. This process can include facilitating referrals to the Department of Health and Human Services (HHS) - Office of Inspector General (HHS-OIG), the Centers for Medicare & Medicaid Services (CMS), Federal Bureau of Investigations (FBI), Federal Trade Commission (FTC), state Medicaid fraud control units (MFCUs), state attorney generals, and other organizations. Capturing SMP program activity data is also a key function of the projects, including tracking, analyzing, and reporting of beneficiary complaints, referrals, potential savings, and other outcomes.

Annual OIG Report on SMP Program

In previous years, the HHS-OIG completed an annual performance report on the SMP projects. In FY2023, the 54 SMP projects had a total of 5,532 active team members who conducted a total of 22,356 group outreach and education events, reaching an estimated 1,244,697 people. In addition, the projects had 270,348 individual interactions with, or on behalf of, Medicare beneficiaries.

According to a previous OIG Report, the program has educated over 45 million beneficiaries since its inception through 513,000 group education and outreach sessions. The true value of the program and primary focus of SMP grantee work is on education, prevention, and teaching beneficiaries how to protect themselves and avoid fraud in the first place. The impact of these education and prevention activities is extremely difficult to quantify in dollars and cents. As HHS-OIG indicated in their 2023 report on the SMP program:

We note that the projects may not be receiving full credit for recoveries, savings, and cost avoidance attributable to their work. It is not always possible to track referrals to Medicare contractors or law enforcement from beneficiaries who have learned to detect fraud, waste, and abuse from the projects. In addition, the projects are unable to track the potentially substantial savings derived from a sentinel effect whereby Medicare beneficiaries' scrutiny of their bills reduces fraud and errors.

Strategic Program Objectives

This opportunity will fund SMP work done in the state of Pennsylvania only. Applicants must address each of the following strategic program objectives as part of their project narrative to further the goal of preventing Medicare fraud in Pennsylvania:

1. Provide group education and one-on-one assistance to Medicare beneficiaries on a statewide basis, with a specific emphasis on those with greatest economic and social need.
2. Recruit, train, and retain a sufficient, effective, and representative workforce equipped to provide high-quality education and one-on-one support.
3. Monitor and assess SMP results through operational and quality measures.
4. Position SMP to nimbly and effectively respond to changes in the programmatic landscape.

Project narratives should propose specific goals and activities to address each component of the four strategic program objectives as follows:

1. **Provide group education and one-on-one assistance to Medicare beneficiaries on a statewide basis, with a specific emphasis on those in Pennsylvania with the greatest economic and social need.** Applicants must describe a comprehensive plan to achieve statewide SMP coverage. Statewide coverage means the applicant must have the capacity to provide SMP services, including group education and one-on-one assistance, in each county within the state. In the project narrative, applicants must:
 1. Demonstrate knowledge of the geographic service area, including barriers to program access and strategies specifically designed to overcome these barriers.
 2. Identify populations with the greatest historical and current needs within the state, any barriers to program access specific to these populations, and plans for addressing those barriers.
 3. Explain plans to provide one-on-one assistance, both in-person and virtually. Applicants must describe the types and levels of service to be provided as well as the approaches to achieve or enhance services, such as the development of websites and web-based strategies, the use of toll-free lines, ability to flexibly shift to atypical service provision as public need requires, and/or the development of sub-grants, contracts, or partnerships with other local, regional, or statewide organizations.
 4. Explain plans to provide in-person group education sessions to teach beneficiaries to prevent, detect, and report Medicare fraud, errors, and abuse. Applicants must describe the types and levels of service to be provided, as well as the approaches to achieving or enhancing services, such as the development of sub-grants, contracts, or partnerships with other local, regional, or statewide organizations.
 5. Describe plans to build on existing partnerships and the development of new partnerships to establish a strong network to deliver SMP services. Examples of potential partners could include, but are not limited to:
 1. Other local or state programs receiving ACL funding to provide services to older adults and people with disabilities, including but not limited to: State Health Insurance Assistance Programs (SHIPs), Long-Term Care Ombudsman programs, Elder Abuse Prevention programs, Benefits Enrollment Centers, Centers for Independent Living (CILs), Aging and Disability Resource Centers/No-Wrong Door (ADRC/NWD), Assistive Technology programs, Traumatic Brain Injury Programs, State Councils

on Developmental Disabilities, State Protection and Advocacy Systems, Nutrition Services, Falls Prevention and Chronic Disease Self-Management Programs, and Legal Assistance programs.

2. Local, state, and national organizations within the law enforcement and health care networks, which may include state attorneys general, state MFCUs, CMS, HHS-OIG, FBI, and FTC.
3. Partnerships to intentionally focus on reaching those in the greatest economic and social need. This may include organizations or groups who have demonstrated expertise and previous success in focusing on these populations.

6. Outline a statewide media and outreach plan based on a preliminary assessment of state and national healthcare fraud trends and issues, including focus on targeting those in greatest economic and social need of SMP program services and those traditionally underserved.

2. **Recruit, train, and retain a sufficient, effective, and representative workforce equipped to provide high quality education and one-on-one support.** Applicants must provide a plan to ready a nimble workforce to provide high quality service to beneficiaries including, but not limited to, the following:

1. Describe a plan to initially and continually train and certify all SMP team members (staff, in-kind, and volunteers) with the information necessary to perform the work of the SMP program:

1. At the most basic level, including:

- Basic mission and functions of the SMP program;
- Medicare basics; and
- Healthcare fraud, errors, and abuse.

2. At a more advanced workforce training level, including:

- Development of effective skills in conducting educational presentations and outreach;
- Resolution of beneficiary inquiries and complaints;
- Referrals for further action, when appropriate; and
- Understanding and implementation of skills to support serving those in the greatest economic and social need.

3. The training plan should also cite the training materials and resources to be used to achieve the training objectives. **NOTE:** The [SMP National Resource Center](#) develops and provides training materials that are available for use to all successful SMP awardees. Non-incumbent applicants may contact the SMPRC for access to basic training-related material information.

4. Minimum initial and ongoing training requirements, knowledge testing, and certification of all SMP team member roles must be clearly defined by the grantee and consistently applied to all team members.

2. Describe a plan to recruit, train, retain, and manage paid, volunteer, and in-kind team members throughout the state. The plan should include implementation of ACL's Volunteer Risk and Program Management (VRPM) policies and the ACL Conflict of Interest guidance for the SHIP, SMP, and MIPPA programs. Identifying and appropriately managing risks related to team member involvement and service delivery is an important aspect of effective program management. Proposals should include approaches to ensure team members are:
 1. Appropriately recruited and screened to ensure the ability to perform assigned duties and to identify potential conflicts of interest;
 2. Thoroughly trained to provide effective service, and enhance the quality of the SMP program;
 3. Consistently provided ongoing supervision, management, and support to ensure the safety, integrity, and professionalism of the SMP workforce;
 4. Habitually compliant with procedures and practices to ensure that confidentiality of program information is maintained; and
 5. Supported to ensure retention and continued high morale.

In every case, applicants should propose activities that will effectively employ the unique skills, varied experiences, good will, and availability of team members in assisting beneficiaries to become more educated about Medicare fraud, errors, and abuse.

ACL's VRPM policy and procedure resources are available on ACL's website: <https://acl.gov/programs/senior-medicare-patrol/volunteer-risk-and-program-management-vrpm-policies>. The VRPM policies provide a framework that allows each individual SMP project to have the flexibility and responsibility to develop volunteer risk and program management policies and procedures. NOTE: Any new (non-incumbent) SMP project grantees will receive a reasonable amount of time to implement these policies. Successful non-incumbent applicants will be asked to negotiate this timeline with ACL individually after awards are made.

ACL's Conflict of Interest: Identification, Remedy, and Removal guidance found here: <https://acl.gov/programs/senior-medicare-patrol/managing-conflicts-interest-ship-smp-and-mippa-programs>. This guidance was developed to provide technical assistance to the SMP, SHIP, and Medicare Improvements for Patients and Providers Act (MIPPA) programs and their community-based partners on how to avoid actual and perceived conflicts of interest and mitigate risk.

3. **Monitor and assess SMP results through operational and quality measures.** ACL requires SMP projects to use the SMP data system, known as the SMP Information and Reporting System (SIRS), to collect, track, assess, and measure program performance data. SIRS data is summarized annually in a report titled Performance Data for the Senior Medicare Patrol Projects. Recent reports are available on ACL's website: <https://acl.gov/programs/protecting-rights-and-preventing-abuse/senior-medicare-patrol-smp>

Applicants must describe plans to comply with SMP reporting requirements including:

1. Timely data entry of SMP activities into SIRS, including one-on-one interactions with beneficiaries, group education and outreach events, media education and outreach events, SMP team members, and SMP team member activities.
2. Participation in quality assurance activities:
 1. Successful applicants must participate in an SMP Customer Satisfaction Survey which requires evaluation of both one-on-one interactions and group education events. To satisfy this requirement, SMPs will be asked to:
 - Ensure proper collection and reporting of beneficiary information, so ACL may conduct post-service satisfaction surveys of a random sample of SMP clients.
 - Periodically administer pre- and post- surveys at group education events, as requested by ACL. Each SMP project will be surveyed twice annually.
 2. Describe any additional quality assessment activities proposed outside the required surveys described above.
 3. Ongoing performance management, including regular assessment of progress toward goals and objectives, growth areas and obstacles, and strategies for performance improvement on the SMP performance measures listed below, as well as any other applicant-identified measures of success. Applicants are expected to provide a plan to continually assess gaps in program reach in order to strengthen provided services.

| Performance Measure (PM) | Definition |
|---|--|
| 1.TOTAL NUMBER OF ACTIVE SMP TEAM MEMBERS | Total number of individuals who spent time on the SMP program, including SMP-paid, in-kind paid, and volunteer team members |
| 2. TOTAL NUMBER OF SMP TEAM MEMBER HOURS | Total number of hours contributed by team members while performing SMP work and receiving training to perform SMP work, including time spent by SMP-paid, in-kind paid, and volunteer team members |
| 3. NUMBER OF GROUP OUTREACH AND EDUCATION EVENTS | Total number of community outreach events, education activities, and presentations to educate beneficiaries, family members, caregivers, and others about SMP services and detecting healthcare fraud, errors, and abuse |
| 4. ESTIMATED NUMBER OF PEOPLE REACHED THROUGH GROUP OUTREACH AND EDUCATION EVENTS | Total estimated number of people reached as a result of SMP group outreach and education activities |

| | |
|--|---|
| 5. NUMBER OF INDIVIDUAL INTERACTIONS WITH, OR ON BEHALF OF, A MEDICARE BENEFICIARY | Total number of individual interactions between SMP team members and beneficiaries, family members, caregivers, or others for the purpose of discussing or gathering information about potential health care fraud, errors, or abuse |
| 6. COST AVOIDANCE ON BEHALF OF MEDICARE, MEDICAID, BENEFICIARIES, OR OTHERS | Healthcare expenditures for which the government, a beneficiary, or other entity was relieved of responsibility for payment |
| 7. EXPECTED MEDICARE RECOVERIES | Actual and expected Medicare recoveries from criminal actions, settlements, civil judgments, or over payments that resulted from the referral. Includes recoveries associated with a project's referral that resulted in the opening of an investigation or where the SMP made a meaningful contribution to an existing investigation |
| 8. ADDITIONAL EXPECTED MEDICARE RECOVERIES | Actual and expected Medicare recoveries from criminal actions, settlements, civil judgments, or over payments that resulted from the referral. Includes recoveries associated with a project's referral to an existing investigation where the SMP's information validated existing information |
| 9. EXPECTED MEDICAID RECOVERIES | Actual and expected Medicaid recoveries from criminal actions, settlements, civil judgments, or over payments that resulted from the referral. Includes recoveries associated with a project's referral that resulted in the opening of an investigation or where the SMP made a meaningful contribution to an existing investigation |
| 10. ADDITIONAL EXPECTED MEDICAID RECOVERIES | Actual and expected Medicaid recoveries from criminal actions, settlements, civil judgments, or over payments that resulted from the referral. Includes recoveries associated with a project's referral to an existing investigation where the SMP's information validated existing information |
| 11. ACTUAL SAVINGS TO BENEFICIARIES | Amount of money recouped to beneficiaries |
| 12. OTHER SAVINGS | Amount of money recouped to an entity other than Medicare, Medicaid, or a beneficiary |

4. **Position SMP to nimbly and effectively respond to changes in the programmatic landscape.** Applicants must propose a plan to adapt to changes in the programmatic landscape, such as the increasing Medicare beneficiary population, changes in the geographic distribution of beneficiaries, changes in public health need, varied beneficiary needs by age, and traditionally underserved populations that may need additional

assistance understanding how to prevent, detect, and report Medicare fraud, errors, and abuse. Specifically, applicants must:

1. Identify any anticipated changes in the programmatic landscape and explain how these changes will be addressed by the SMP project;
2. Address readiness to nimbly and effectively shift as unanticipated changes in the programmatic landscape are identified;
3. Describe the target populations to be served, including:
 1. Identifying the target populations and the reasons why the applicant has chosen to target the specific populations;
 2. Addressing barriers in access or provision of program services to the target populations; and
 3. Detailing proposed innovative and collaborative methods to reach the target populations.

Statutory Authority

The statutory authority for the grant under this program announcement is contained in the Health Insurance Portability and Accountability Act (HIPAA) of 1996 (PL 104-191); (Catalog of Federal Domestic Assistance 93.048) and Older Americans Act, Title 42 U.S.C.

II. Award Information

Funding Instrument Type:

CA (Cooperative Agreement)

Estimated Total Funding:

\$1,100,000

Expected Number of Awards:

1

Award Ceiling:

\$1,100,000

Per Budget Period

Award Floor:

\$0

Per Budget Period

Length of Project Period:

24-month project period with two 12-month budget periods

Additional Information on Project Periods and Explanation of 'Other'

III. Eligibility Information

1. Eligible Applicants

Domestic public or private non-profit entities, including state governments; county governments; city or township governments; special district governments; public and state controlled institutions of higher education; Native American tribal governments (Federally recognized); Native American tribal organizations (other than Federally recognized tribal

governments); nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education; Nonprofits without 501(c)(3) status with the IRS, other than institutions of higher education; or private institutions of higher education.

2. Cost Sharing or Matching

Cost Sharing / Matching Requirement:

No

For awards that do not require matching or cost sharing by statute, recipients are not expected to provide cost sharing or matching. However, recipients are allowed to voluntarily propose a commitment of non-federal resources. If an applicant decides to voluntarily contribute non-federal resources towards project costs and the costs are accepted by ACL, the non-federal resources will be included in the approved project budget. The applicant will be held accountable for all proposed non-federal resources as shown in the Notice of Award (NOA). **A recipient's failure to meet the voluntary amount of non-federal resources that was accepted by ACL as part of the approved project costs and that was identified in the approved budget in the NOA, may result in the disallowance of federal funds. Recipients will be required to report these funds in the Federal Financial Reports.**

3. Responsiveness and Screening Criteria

Application Responsiveness Criteria

Applications that do not meet the following responsiveness criteria will be administratively eliminated and will not be reviewed. The successful SMP applicant will be an organization that meets the following basic evaluation criteria:

1. Demonstrated expertise in implementation through collaboration and work with volunteers to achieve program objectives;
2. Technological capacity to implement the SMP web-based data collection, management tracking, and reporting system, known as SIRS; and
3. Organizational capacity to provide statewide virtual and in-person SMP program coverage.

Application Screening Criteria

All applications will be screened to assure a level playing field for all applicants. Applications that fail to meet the three screening criteria described below will not be reviewed and will receive no further consideration.

In order for an application to be reviewed, it must meet the following screening requirements:

1. Applications must be submitted electronically via <http://www.grants.gov>; by 11:59 p.m., Eastern Time, by the due date listed in section IV.3 Submission Dates and Times.
2. The Project Narrative section of the Application must be double-spaced, sized 8 ½" x 11" with 1" margins on both sides, and a standard font size of not less than 11, preferably Times New Roman or Arial.
3. The Project Narrative must not exceed 20 pages. Project Narratives that exceed 20 pages will have the additional pages removed and only the first 20 pages of the Project Narrative will be provided to the merit reviewers for funding consideration. NOTE: The

Project Work Plan, Letters of Commitment, and Vitae of Key Project Personnel are not counted as part of the Project Narrative for purposes of the 20-page limit.

Applicants seeking late submission approval must provide authenticated verification from <http://www.grants.gov> indicating system problems existed at the time of submission. For example, applicants will be required to provide an <http://www.grants.gov> submission error notification and/or tracking number to substantiate missing the application deadline.

IV. Application and Submission Information

1. Address to Request Application Package

Application materials can be obtained from <https://www.grants.gov> or <https://www.acl.gov/grants/applying-grants>.

Please note, ACL requires applications for all announcements to be submitted electronically through <http://www.grants.gov> in Workspace. Grants.gov Workspace is the standard way for organizations and individuals to apply for federal grants in Grants.gov. An overview and training on Grants.gov Workspace can be found here at:

<https://www.grants.gov/web/grants/applicants/workspace-overview.html>

The Grants.gov registration process can take several days. If your organization is not currently registered, please begin this process immediately. For assistance with <https://www.grants.gov>, please contact them at support@grants.gov or 800-518-4726 between 7:00 a.m. and 9:00 p.m. Eastern Time.

- At the <https://www.grants.gov> website, you will find information about submitting an application electronically through the site, including the hours of operation. ACL strongly recommends that you do not wait until the application due date to begin the application process because of the time involved to complete the registration process.
- All applicants must have a UEI and be registered with the System for Award Management (SAM, www.sam.gov) and maintain an active SAM registration until the application process is complete, and should a grant be made, throughout the life of the award. Effective June 11, 2018, when registering or renewing your registration, you must submit a notarized letter appointing the authorized Entity Administrator. Please be sure to read the FAQs located at www.sam.gov to learn more. Applicants should allot sufficient time prior to the application deadline to finalize a new, or renew an existing registration. This action should allow you time to resolve any issues that may arise. Failure to comply with these requirements may result in your inability to submit your application or receive an award. Maintain documentation (with dates) of your efforts to register or renew at least two weeks before the deadline. See the SAM Quick Guide for Grantees at: [SAM.GOV Quick Start Guide for Financial Assistance Registrations](#).

Note: Once your SAM registration is active, allow 24 to 48 hours for the information to be available in Grants.gov before you can submit an application through Grants.gov. This action should allow you time to resolve any issues that may arise. Failure to comply with these requirements may result in your inability to submit your application or receive an award.

- Note: Failure to submit the correct EIN Suffix can lead to delays in identifying your organization and access to funding in the Payment Management System.

- Effective October 1, 2010, HHS requires all entities that plan to apply for and ultimately receive federal grant funds from any HHS Operating/Staff Division (OPDIV/STAFFDIV) or receive subawards directly from the recipients of those grant funds to:
 1. Register in SAM prior to submitting an application or plan;
 2. Maintain an active SAM registration with current information at all times during which it has an active award or an application or plan under consideration by an OPDIV; and
 3. Provide its UEI number in each application or plan to submit to the OPDIV.

Additionally, all first-tier subaward recipients must have a UEI number at the time the subaward is made.

- The Federal Government will transition from the DUNS Number to the New Unique Entity Identifier. As of April of 2022, the federal government stopped using the DUNS number to uniquely identify entities. At that point, entities doing business with the federal government will use a Unique Entity Identifier (SAM) created in SAM.gov. It is entered on the SF-424. It is a unique, nine-digit identification number, which provides unique identifiers of single business entities.
- You must submit all documents electronically, including all information included on the SF424 and all necessary assurances and certifications. In accordance with the Federal Government’s efforts to reduce reporting burden for recipients of federal financial assistance, the general certification and representation requirements contained in the Standard Form 424B (SF-424B) – Assurances – Non-Construction Programs, and the Standard Form 424D (SF-424D) – Assurances – Construction Programs, have been standardized federal-wide. Effective January 1, 2020, the updated common certification and representation requirements will be stored and maintained within SAM. Organizations or individuals applying for federal financial assistance as of January 1, 2020, must validate the federally required common certifications and representations annually through SAM located at SAM.gov.
- After you electronically submit your application, you will receive an automatic acknowledgment from <https://www.grants.gov> that contains <https://www.grants.gov> tracking number. The Administration for Community Living will retrieve your application form from <https://www.grants.gov>.

U.S. Department of Health and Human Services
Administration for Community Living

Rebecca Kinney

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2. Content and Form of Application Submission

Letter of Intent

Number of Days from Publication 21

03/03/2026

Applicants are requested, but not required, to submit a letter of intent to apply for this funding opportunity to assist ACL in planning for the application independent review process. The purpose of the letter of intent is to allow our staff to estimate the number of independent reviewers needed and to avoid potential conflicts of interest in the review. Letters of intent should be sent to:

U.S. Department of Health and Human Services

Administration for Community Living

Rebecca Kinney

Office of Healthcare Information and Counseling

Washington, D.C. (202) 795-7375

Email: rebecca.kinney@acl.hhs.gov

Project Narrative

Project Narrative must be double-spaced, sized 8 ½" x 11" with 1" margins on both sides, and a standard font size of not less than **11**, preferably Times New Roman or Arial. Smaller font sizes to fill in the Standard Forms and Sample Formats can be used. The suggested length for the Project Narrative is 10 to 20 pages; 20 pages is the maximum length allowed. Project Narratives that exceed 20 pages will have the additional pages removed and only the first 20 pages of the Project Narrative will be provided to the merit reviewers for funding consideration. The Project Work Plan, Letters of Commitment, and Vitae of Key Personnel are not counted as part of the Project Narrative for purposes of the 20-page limit, but all other sections noted below are included in the limit.

The Project Narrative is the most important part of the application since it will be used as the primary basis to determine whether the project meets the minimum requirements for grants under the authorizing statutes. The Project Narrative should provide a clear and concise description of the proposed SMP project. ACL recommends that the project narrative include the following components as part of the 20-page limit:

- **Summary/Abstract**
- **Problem Statement**
- **Goal(s) and Objective(s)**
- **Proposed Intervention**
- **Special Target Populations and Organizations**
- **Outcomes**
- **Project Management Evaluation**
- **Dissemination**
- **Organizational Capability**

Summary/Abstract

Include a brief - no more than 265 words maximum - description of the proposed project, including: goal(s), objectives, outcomes, and products to be developed. Detailed instructions for

completing the summary/abstract are included in the "Instructions for Completing the Project Summary/Abstract."

Problem Statement

Describe, in both quantitative and qualitative terms, the nature and scope of the particular problem or issue the proposed intervention is designed to address, including how the project will potentially affect older adults and/or people with disabilities, identified state-specific marginalized communities, their families and caregivers, and the health care and social services systems.

Goals and Objectives

Describe the project's goal(s) and major objectives. Unless the project involves multiple complex interventions, ACL recommends proposing only one overall goal. The proposed project goal(s) and objectives should be reflective of the priority activities discussed in SMP Strategic Program Objectives (see Section I).

Proposed Intervention

Provide a clear and concise description of the proposed intervention to address the problem described in the "Problem Statement." Describe the rationale for using the particular intervention, including factors such as: "lessons learned" for similar projects previously tested in the targeted community(ies) or in other areas of the country; factors in the larger environment that have created the "right conditions" for the intervention (e.g., existing social or economic factors to take advantage of, etc.). Also note any anticipated major barriers, and how the proposed intervention will address those barriers.

Be sure to describe the role and makeup of any planned strategic partnerships in implementing the intervention, including other organizations, supporters, and/or consumer groups. This section should also provide a detailed plan for the management and operation of the SMP project. Plans must address the key elements discussed in Section I - "SMP Mission and Strategic Program Objectives," including:

1. Provide group education and one-on-one assistance to Medicare beneficiaries on a statewide basis.
2. Recruit, train, and retain a sufficient and effective workforce ready to provide high quality education and one-on-one support.
3. Monitor and assess SMP results through operational and quality measures.
4. Position SMP to nimbly and effectively respond to changes in the programmatic landscape.

Special Target Populations and Organizations

Describe plans to involve organizations in a meaningful way in the planning and implementation of the proposed project. This section should also describe whether the proposed intervention will target commonly underserved populations and, if so, how.

Outcomes

Clearly identify the measurable outcome(s) that will result from the project. (NOTE: ACL will not fund any project that does not include measurable outcomes). This section should also

describe how the project's findings might benefit the field at large (e.g., how the findings could help other organizations throughout the nation to address the same or similar problems). List measurable outcomes in the work plan grid ("Project Work Plan-Sample Template") under "Measurable Outcomes" in addition to any discussion included in the narrative along with a description of how the project might benefit the field at large.

A "measurable outcome" is an observable end-result that describes how a particular intervention benefits consumers. It demonstrates the functional status, mental well-being, knowledge, skill, attitude, awareness, or behavior. It can also describe a change in the degree to which consumers exercise choice over the types of services they receive or whether they are satisfied with the way a service is delivered. Additional examples include: a change in the responsiveness or cost-effectiveness of a service delivery system; a new model of support or care that can be replicated in the aging network; new knowledge that can contribute to the field of aging; a measurable increase in community awareness; or a measurable increase in persons receiving services. A measurable outcome is not a measurable "output", such as: the number of clients served; the number of training sessions held; or the number of service units provided.

The focus of this section is describing what outcome(s) will be produced by the project. Use the Evaluation section noted below to describe how the outcome(s) will be measured and reported.

Applications will be scored on the clarity and nature of proposed outcomes, not on the number of outcomes cited. It is appropriate for a project to have only ONE outcome that it is trying to achieve through the intervention reflected in the project's design.

As discussed in Section 1 under "SMP Mission and Strategic Program Objectives," ACL utilizes the SIRS data system to collect data, track, and measure a number of program outcomes. ACL will use program data contained in the SMP data system to assess SMP project progress in reaching SMP Strategic Program Objectives. Hence, applicant's plans should discuss expected outcomes and link these outcomes to the project priorities and activities provided in the "Proposed Intervention" upon which the outcomes are based.

Project Management

Clearly delineate the roles and responsibilities of project staff, consultants, and partner organizations, and how they will contribute to achieving the project's objectives and outcomes. It should specify the key staff with day-to-day responsibility for key tasks such as leadership of project; monitoring the project's ongoing progress; preparation of reports; and communications with other partners and ACL. It should also describe the approach that will be used to monitor and track progress on the project's tasks and objectives.

Evaluation

Describe the method(s), techniques and tools that will be used to: 1) determine whether the proposed intervention achieved its anticipated outcome(s), and 2) document the "lessons learned" - both positive and negative - from the project that will be useful in replicating the intervention, if it proves successful.

In addition, describe a plan for evaluating the effectiveness of the proposed SMP project in achieving project outcomes. As discussed, ACL utilizes SIRS to collect data, track, assess, and measure program outcomes. In addition, ACL will use data to assess SMP project progress in

reaching SMP Strategic Program Objectives. Hence, applicant plans must discuss priorities, activities, and staff capacity to capture project performance data accurately and timely.

Dissemination

Describe the method that will be used to disseminate the project's results and findings in a timely manner and in easily understandable formats. Recipients could include parties interested in using the results of the project to inform practice, service delivery, program development, and/or policymaking; especially those parties who would be interested in replicating the project.

Dissemination examples should include sharing information with ACL, the National SMP Resource Center, fellow SMP projects, and other national, state, and local partner organizations.

Budget Narrative/Justification

The Budget Narrative/Justification can be provided using the format included in the document, “Budget Narrative/Justification – Sample Format.” Applicants are encouraged to pay particular attention to this document, which provides an example of the level of detail sought. A detailed Budget Narrative/Justification for year 1 of the grant funding is required.

Work Plan

The Project Work Plan should reflect and be consistent with the Project Narrative and Budget. It should include a statement of the project’s overall goal, anticipated outcome(s), key objectives, and the major tasks / action steps that will be pursued to achieve the goal and outcome(s). For each major task / action step, the work plan should identify timeframes involved (including start-and end-dates), and the lead person responsible for completing the task. Please use the “Project Work Plan - Sample Template” format as a reference and resource, if desired.

Letters of Commitment from Key Participating Organizations and Agencies

Include confirmation of the commitments and key activities/work (not just lending support to the application) to the project (should it be funded) made by key collaborating organizations and agencies in this part of the application. Any organization that is specifically named to have a significant role in carrying out the project should be considered an essential collaborator. For applications submitted electronically via <http://www.grants.gov>, signed letters of commitment should be scanned and included as attachments. Applicants unable to scan the signed letters of commitment may email them to Rebecca Kinney at rebecca.kinney@acl.hhs.gov. In your email, be sure to include the funding opportunity number and your agency name in the subject line.

3. Unique Entity Identifier and System for Award Management (SAM)

The Grants.gov registration process can take several days. If your organization is not currently registered, please begin this process immediately. For assistance with <https://www.grants.gov>, please contact them at support@grants.gov or 800-518-4726 between 7:00 a.m. and 9:00 p.m. Eastern Time.

- At the <https://www.grants.gov> website, you will find information about submitting an application electronically through the site, including the hours of operation. ACL strongly

recommends that you do not wait until the application due date to begin the application process because of the time involved to complete the registration process.

- All applicants must have a UEI number and be registered with the System for Award Management (SAM, www.sam.gov) and maintain an active SAM registration until the application process is complete, and should a grant be made, throughout the life of the award. Effective June 11, 2018, when registering or renewing your registration, you must submit a notarized letter appointing the authorized Entity Administrator. Please be sure to read the FAQs located at www.sam.gov to learn more. Applicants should allot sufficient time prior to the application deadline to finalize a new, or renew an existing registration. This action should allow you time to resolve any issues that may arise. Failure to comply with these requirements may result in your inability to submit your application or receive an award. Maintain documentation (with dates) of your efforts to register or renew at least two weeks before the deadline. See the SAM Quick Guide for Grantees at: [SAM.GOV Quick Start Guide for Financial Assistance Registrations](#).

Note: Once your SAM registration is active, allow 24 to 48 hours for the information to be available in Grants.gov before you can submit an application through Grants.gov. This action should allow you time to resolve any issues that may arise. Failure to comply with these requirements may result in your inability to submit your application or receive an award.

- Note: Failure to submit the correct EIN Suffix can lead to delays in identifying your organization and access to funding in the Payment Management System.
- Effective October 1, 2010, HHS requires all entities that plan to apply for and ultimately receive federal grant funds from any HHS Operating/Staff Division (OPDIV/STAFFDIV) or receive subawards directly from the recipients of those grant funds to:
 1. Register in SAM prior to submitting an application or plan;
 2. Maintain an active SAM registration with current information at all times during which it has an active award or an application or plan under consideration by an OPDIV; and
 3. Provide its UEI number in each application or plan to submit to the OPDIV.

Additionally, all first-tier subaward recipients must have a UEI number at the time the subaward is made.

- The Federal Government will transition from the DUNS Number to the New Unique Entity Identifier. As of April of 2022, the federal government stopped using the DUNS number to uniquely identify entities. At that point, entities doing business with the federal government will use a Unique Entity Identifier (SAM) created in SAM.gov. They will no longer have to go to a third-party website to obtain their identifier. This transition allows the government to streamline the entity identification and validation process, making it easier and less burdensome for entities to do business with the federal government. If your entity is registered in SAM.gov today, your Unique Entity ID (SAM) has already been assigned and is viewable in SAM.gov. This includes inactive registrations. The Unique Entity ID is currently located below the DUNS Number on your entity registration record. Remember, you must be signed in to your SAM.gov account to view entity records. To learn how to view your Unique Entity ID (SAM) go to this help [article](#).

- You must submit all documents electronically, including all information included on the SF424 and all necessary assurances and certifications. In accordance with the Federal Government’s efforts to reduce reporting burden for recipients of federal financial assistance, the general certification and representation requirements contained in the Standard Form 424B (SF-424B) – Assurances – Non-Construction Programs, and the Standard Form 424D (SF-424D) – Assurances – Construction Programs, have been standardized federal-wide. Effective January 1, 2020, the updated common certification and representation requirements will be stored and maintained within SAM. Organizations or individuals applying for federal financial assistance as of January 1, 2020, must validate the federally required common certifications and representations annually through SAM located at SAM.gov.
- After you electronically submit your application, you will receive an automatic acknowledgment from <https://www.grants.gov> that contains <https://www.grants.gov> tracking number. The Administration for Community Living will retrieve your application form from <https://www.grants.gov>.

4. Submission Dates and Times

Number Of Days from Publication 60

04/13/2026

Date for Informational Conference Call:

Applications that fail to meet the application due date will not be reviewed and will receive no further consideration. You are strongly encouraged to submit your application a minimum of 3-5 days prior to the application closing date. Do not wait until the last day in the event you encounter technical difficulties, either on your end or, with <http://www.grants.gov>. Grants.gov can take up to 48 hours to notify you of a successful submission.

In addition, if you are submitting your application via Grants.gov, you must (1) be designated by your organization as an Authorized Organization Representative (AOR) and (2) register yourself with Grants.gov as an AOR. Details on these steps are outlined at the following Grants.gov web page: <http://www.grants.gov/web/grants/register.html>.

After you electronically submit your application, you will receive from Grants.gov an automatic notification of receipt that contains a Grants.gov tracking number. (This notification indicates receipt by Grants.gov only)

If you are experiencing problems submitting your application through Grants.gov, please contact the Grants.gov Support Desk, toll free, at 1-800-518-4726. You must obtain a Grants.gov Support Desk Case Number and must keep a record of it.

If you are prevented from electronically submitting your application on the application deadline because of technical problems with the Grants.gov system, please contact the person listed under For Further Information Contact in section VII of this notice and provide a written explanation of the technical problem you experienced with Grants.gov, along with the Grants.gov Support Desk Case Number. ACL will contact you after a determination is made on whether your application will be accepted.

Note: We will not consider your application for further review if you failed to fully register to submit your application to Grants.gov before the application deadline or if the technical problem you experienced is unrelated to the Grants.gov system.

If for any reason (including submitting to the wrong funding opportunity number or making corrections/updates) an application is submitted more than once prior to the application due date, ACL will only accept your last validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application

Unsuccessful submissions will require authenticated verification from <http://www.grants.gov> indicating system problems existed at the time of your submission. For example, you will be required to provide an <http://www.grants.gov> submission error notification and/or tracking number in order to substantiate missing the cut off date.

Grants.gov (<http://www.grants.gov>) will automatically send applicants a tracking number and date of receipt verification electronically once the application has been successfully received and validated in <http://www.grants.gov>.

5. Intergovernmental Review

This program is not subject to Executive Order (E.O.) 12372, Intergovernmental Review of Federal Programs.

6. Funding Restrictions

The following activities are not fundable:

- *Construction and/or major rehabilitation of buildings*
- *Basic research (e.g. scientific or medical experiments)*
- *Continuation of existing projects without expansion or new and innovative approaches*

Note: *A recent Government Accountability Office (GAO) report has raised considerable concerns about grantees and contractors charging the Federal Government for additional meals outside of the standard allowance for travel subsistence known as per diem expenses. Executive Orders on Promoting Efficient Spending (E.O. 13589) and Delivering Efficient, Effective and Accountable Government (E.O. 13576) have been issued and instruct Federal agencies to promote efficient spending. Therefore, if meals are to be charged in your proposal, applicants should understand such costs must meet the following criteria outlined in the Executive Orders and HHS Grants Policy Statement:*

- *Meals are generally unallowable except for the following:*
 - *For subjects and patients under study (usually a research program);*
 - *Where specifically approved as part of the project or program activity, e.g., in programs providing children's services (e.g. Head Start);*
 - *When an organization customarily provides meals to employees working beyond the normal workday, as a part of a formal compensation arrangement,*
 - *As part of a per diem or subsistence allowance provided in conjunction with allowable travel; and*
 - *Under a conference grant, when meals are necessary and integral part of a conference, provided that meal costs are not duplicated in participants' per diem*

or subsistence allowances. (Note: conference grant means the sole purpose of the award is to hold a conference.)

The following updated sections 2 CFR 200.216 “Prohibition on certain telecommunications and video surveillance services or equipment” became **effective on or after August 13, 2020**.

Recommended Actions for any recipient that has received a loan, grant, or cooperative agreement **on or after August 13, 2020**:

- Develop a compliance plan to implement 2 CFR 200.216 regulation.
- Develop and maintain internal controls to ensure that your organization does not expend federal funds (in whole or in part) on covered equipment, services or systems.
- Determine through reasonable inquiry whether your organization currently uses “covered telecommunication” equipment, services, or systems and take necessary actions to comply with the regulation as quickly as is feasibly possible.

7. Other Submission Requirements

Letters of intent should be emailed to:

Rebecca Kinney

rebecca.kinney@acl.hhs.gov

US Department of Health and Human Services

Administration for Community Living

Office of Healthcare Information and Counseling

Washington, DC

V. Application Review Information

1. Criteria

Applicants must document all source material. If any text, language and/or materials are from another source, the applicant must make it clear the material is being quoted and where the text comes from. The applicant must also cite any sources when they obtain numbers, ideas, or other material that is not their own. If the applicant fails to comply with this requirement, regardless of the severity or frequency of the plagiarism, the reviewers shall reduce their scores accordingly even to the degree of issuing no points at all. Applications are scored by assigning a maximum of 100 points across five criteria:

1. Project Relevance & Current Need (10 points)
2. Approach (40 points)
3. Budget (10 points)
4. Project Impact (25 points)
5. Organizational Capacity (15 points)

Project Relevance & Current Need

Maximum Points: 10

1. Does the proposal provide a detailed description in both quantitative and qualitative terms, of the nature and scope of the health care fraud control problems or issues within the state or territory that the proposed plan is designed to address? (3 points)
2. Does the application include a focus on those with greatest economic and social need to continually ensure that program services are accessible and that beneficiaries' needs are being met? (3 points)
3. Does the problem statement include a description of the demographics of the population(s) to be served and a discussion of potential barriers to program access? (4 points)

Approach

Maximum Points: 40

Strategic Program Objective 1 (10 points)

Provide group education and one-on-one assistance to Medicare beneficiaries on a statewide basis, with a specific emphasis on those in Pennsylvania with the greatest economic and social need.

1. Does the applicant demonstrate knowledge of the geographic service area and its populations of greatest economic and social need, including barriers to program access and strategies specifically designed to overcome these barriers? (3 points)
2. Does the proposal include a detailed description of how statewide program coverage will be implemented? (2 points)
3. Does the applicant thoroughly describe plans to provide one-on-one assistance, group education, and media outreach, as well as any plans to build on existing partnerships and the development of new partnerships to establish a strong network to deliver SMP services? (3 points)
4. Has the applicant described how they will ensure that program services will be accessible to all Medicare beneficiaries in their state/territory including those that have been historically hard-to-reach? (2 points)

Strategic Program Objective 2 (10 points)

Recruit, train, and retain a sufficient, effective, and representative workforce equipped to provide high quality education and inquiry resolution.

1. Does the proposal include a description of plans to recruit, train, retain, and manage a team of volunteers, paid staff, and in-kind partners throughout the state? (4 points)
2. Does the proposed plan include an approach for implementing and managing the Volunteer Risk and Program Management (VRPM) policies and procedures as outlined by ACL? (2 points)
3. Does the proposal detail a training plan to equip all team members with the information necessary to perform **SMP** work in a culturally appropriate and accessible manner? (2 points)
4. Does the application target partnerships with groups focusing on those with greatest economic and social need to continually ensure that program services are accessible and that beneficiaries' needs are being met? (2 points)

Strategic Objective 3 (10 points)

Monitor and assess SMP results through operational and quality measures.

1. Does the proposal include plans to monitor and assess ongoing SMP results through operational and quality measures? (3 points)
2. Does the proposal include plans to ensure timely data entry of SMP activities into SIRS? (2 points)
3. Does the applicant include plans for ongoing performance management, including regular assessment of progress toward goals and objectives, growth areas and obstacles, and strategies for performance improvement based on the SMP performance measures? (3 points)
4. Does the application include a plan to continually assess gaps in program reach to strengthen provided services? (2 points)

Strategic Objective 4 (5 points)

Position SMP to respond nimbly and effectively to changes in the programmatic landscape.

1. Does the proposal include plans to position SMP to nimbly and effectively respond and react to unanticipated changes in the programmatic landscape? (3 points)
2. Does the applicant identify target populations to be served and innovative methods to reach those populations? (2 points)

Work Plan (5 points)

1. Is the project work plan clear, comprehensive, and for the appropriate time frame? Does it include key task leaders, roles of staff/partners, and feasible timeframes for the accomplishment of tasks presented? (3 points)
2. Does the work plan include specific goals and tasks that are linked to measurable outcomes? (2 points)

Budget

Maximum Points: 10

1. Is the budget justified with respect to the adequacy and reasonableness of resources requested? Is the time commitment of the proposed director and other key project personnel sufficient to assure proper direction, management, and timely completion of the project? Does the budget include funding for program services that ensure accessibility to those in greatest economic and social need for services? (6 points)
2. Did the applicant provide a clear budget justification for Budget Year 1? Are strategies clearly outlined under each without duplication? Are budget line items clearly delineated and consistent with work plan objectives? (4 points)

Project Impact

Maximum Points: 25

1. Does the proposal clearly identify the measurable program outcome(s) that will result from the project? Are the expected outcomes linked to the priorities of the SMP Strategic Program Objectives? (10 points)
2. Does the proposal include measurable outcomes that follow the provided definition, as opposed to simply including measurable outputs? (5 points)
3. Does the proposal contain a plan for evaluating the effectiveness of the proposed activities in achieving project outcomes? Does the plan discuss the method(s) to be used

to disseminate the project's results to the National SMP Resource Center and the SMP network? (5 points)

4. Does the proposal include measurement of impact targeting those in greatest economic and social need? (5 points)

Organizational Capacity

Maximum Points: 15

1. Are the roles and responsibilities of project staff, contractors and key partners delineated, including how they will contribute to implementation of the proposed project? Do the brief vitae of the proposed project director, key staff, and consultants reflect the background, experience, and other qualifications required to carry out designated SMP roles and responsibilities, particularly project direction, team member management, data tracking and reporting, and SMP outreach and education? (5 points)
2. Do letters of commitment document roles of key partners, including strategies to reach identified target populations and the specific role, commitment, and resources/activities in support of the project's effort from each collaborating organization? (5 points)
3. Has the applicant demonstrated capability to manage a statewide program? Has the organization demonstrated that they are fiscally stable? (5 points)

2. Review and Selection Process

3. Anticipated Announcement Award Date

Award notices to successful applicants will be sent out prior to the project start date.

The anticipated project period start date for this announcement is: 06/01/2026

VI. Award Administration Information

1. Award Notices

Successful applicants will receive an electronic Notice of Award. The Notice of Award is the authorizing document from the U.S. Administration for Community Living authorizing official, Office of Grants Management. Acceptance of this award is signified by the drawdown of funds from the Payment Management System. Unsuccessful applicants are generally notified within 30 days of the final funding decision and will receive a disapproval letter via e-mail. Unless indicated otherwise in this announcement, unsuccessful applications will not be retained by the agency and will be destroyed.

2. Administrative and National Policy Requirements

The award is subject to HHS Administrative Requirements, which can be found in 45 CFR Part 75 and the Standard Terms and Conditions, included in the Notice of Award as well as implemented through the HHS Grants Policy Statement.

If you receive an award, you must follow all applicable nondiscrimination laws. You agree to this when you register in SAM.gov. You must also submit an Assurance of Compliance ([HHS-690](#)). To learn more, see the [HHS Office for Civil Rights website](#).

A standard term and condition of award will be included in the final notice of award; all applicants will be subject to a term and condition that applies the terms of 48 CFR section 3.908

to the award and requires the grantees inform their employee in writing of employee whistleblower rights and protections under 41 U.S.C. 4712 in the predominant native language of the workforce.

Applicants may follow their own procurement policies and procedures when contracting with Project Funds, but You must comply with the requirements of 2 C.F.R. §§ 200.317-200.326. Additionally, when using Project Funds to procure supplies and/or equipment, applicants are encouraged to purchase American-manufactured goods to the maximum extent practicable. American-manufactured goods are those products for which the cost of their component parts that were mined, produced, or manufactured in the United States exceeds 50 percent of the total cost of all their components. For further guidance regarding what constitutes an American manufactured good (also known as a domestic end product), see 48 C.F.R. Part 25.

As of October 1, 2024, 2 CFR 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards updated to a new version. The eCFR is currently updating its site with the newly adopted content. Until that time, the links below to 2 CFR 200 will not include the changes. If you need to see specific changes while they complete that work, see [78 FR 78608](#).

Also as of October 1, 2024, HHS adopted several provisions in the new 2 CFR 200 that affect your application. These new provisions supersede those previously used in 45 CFR 75. The changes include:

Indirect costs

De minimis rate

If you use the de minimis rate to calculate indirect costs:

- When you calculate this rate, you will now use 15% of modified total direct costs (MTDC) rather than 10%. See [2 CFR 200.414\(f\)](#).
- Additionally, when you calculate MTDC, you can now use up to \$50,000 of subawards and subcontracts rather than \$25,000. See [2 CFR 200.1](#).

Training awards

If your application is for a training award, your indirect cost rate remains capped at 8% of MTDC. However, when calculating MTDC, you can now use up to \$50,000 of subawards and subcontracts rather than \$25,000. See [2 CFR 200.1](#).

Budget

When planning your budget, HHS now uses the definitions for [equipment](#) and [supplies](#) in 2 CFR 200.1. The new definitions change the threshold for equipment to the lesser of the recipient's capitalization level or \$10,000 and the threshold for supplies to below that amount.

All changes

HHS adopted all the following superseding provisions on October 1, 2024:

- [2 CFR 200.1](#), Definitions, Modified Total Direct Cost.
- [2 CFR 200.1](#), Definitions, Equipment.

- [2 CFR 200.1](#), Definitions, Supplies.
- [2 CFR 200.313\(e\)](#), Equipment, Disposition.
- [2 CFR 200.314\(a\)](#), Supplies.
- [2 CFR 200.320](#), Methods of procurement to be followed.
- [2 CFR 200.333](#), Fixed amount subawards.
- [2 CFR 200.344](#), Closeout.
- [2 CFR 200.414\(f\)](#), Indirect (F&A) costs.
- [2 CFR 200.501](#), Audit requirements.

3. Reporting

Reporting frequency for performance and financial reports, as well as any required form or formatting and the means of submission will be noted within the terms and conditions on the Notice of Award.

4. FFATA and FSRS Reporting

The Federal Financial Accountability and Transparency Act (FFATA) requires data entry at the FFATA Subaward Reporting System (<http://www.FSRS.gov>) for all sub-awards and sub-contracts issued for \$30,000 or more as well as addressing executive compensation for both grantee and sub-award organizations.

For further guidance please follow this link to access ACL's Terms and Conditions:
<https://www.acl.gov/grants/managing-grant#>

VII. Agency Contacts

Project Officer

First Name:

Rebecca

Last Name:

Kinney

Phone:

202-795-7375

Office:

Office of Healthcare Information and Counseling (OHIC)

Grants Management Specialist

First Name:

Rasheed

Last Name:

Williams

Phone:

(xxx)-xxx-xxxx

Office:

Office of Grants Management: Rasheed.Williams@acl.hhs.gov

VIII. Other Information

The Paperwork Reduction Act of 1995 (P.L. 104-13)

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The project description and Budget Narrative/Justification is approved under OMB control number 0985-0018. Public reporting burden for this collection of information is estimated to average 10 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed and reviewing the collection information.

Appendix

Accessibility Provisions for All Grant Application Packages and Funding Opportunity Announcements

Should you successfully compete for an award, recipients of federal financial assistance (FFA) from HHS will be required to complete an HHS Assurance of Compliance form (HHS 690) in which you agree, as a condition of receiving the grant, to administer your programs in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, age, sex and disability, and agreeing to comply with federal conscience laws, where applicable. This includes ensuring that entities take meaningful steps to provide meaningful access to persons with limited English proficiency; and ensuring effective communication with persons with disabilities. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See <https://www.hhs.gov/civil-rights/for-individuals/nondiscrimination/index.html>.

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. HHS provides guidance to recipients of FFA on meeting their legal obligation to take reasonable steps to provide meaningful access to their programs by persons with limited English proficiency. Please see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> and <https://www.lep.gov>. For further guidance on providing culturally and linguistically appropriate services, recipients should review the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care at <https://minorityhealth.hhs.gov>.
- Recipients of FFA also have specific legal obligations for serving qualified individuals with disabilities. Please see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>.
- HHS funded health and education programs must be administered in an environment free of sexual harassment. Please see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/harassment/index.html>; <https://www2.ed.gov/about/offices/list/ocr/docs/shguide.html>; and <https://www.eeoc.gov/sexual-harassment>.
- Recipients of FFA must also administer their programs in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws. Collectively, these laws prohibit exclusion, adverse treatment, coercion, or other discrimination against persons or entities on the basis of their consciences, religious beliefs, or moral convictions. Please see

<https://www.hhs.gov/conscience/your-protections-against-discrimination-based-on-conscience-and-religion/index.html>.

- Please contact the HHS Office for Civil Rights for more information about obligations and prohibitions under federal civil rights laws at <https://www.hhs.gov/ocr/about-us/contact-us/index.html> or call 1-800-368-1019 or TDD 1-800-537-7697.

If you receive an award, HHS may terminate it if any of the conditions in [2 CFR 200.340\(a\)\(1\)-\(4\)](#) are met. No other termination conditions apply.

Instructions for Completing Required Forms

This section provides step-by-step instructions for completing the four (4) standard Federal forms required as part of your grant application, including special instructions for completing Standard Budget Forms 424 and 424A. Standard Forms 424 and 424A are used for a wide variety of Federal grant programs, and Federal agencies have the discretion to require some or all of the information on these forms. ACL does not require all the information on these Standard Forms. Accordingly, please use the instructions below in lieu of the standard instructions attached to SF 424 and 424A to complete these forms.

a. Standard Form 424

1. **Type of Submission:** (REQUIRED): Select one type of submission in accordance with agency instructions.

- Preapplication
- Application
- Changed/Corrected Application – If ACL requests, check if this submission is to change or correct a previously submitted application.

2. **Type of Application:** (REQUIRED) Select one type of application in accordance with agency instructions.

- New
- Continuation
- Revision

3. **Date Received:** Leave this field blank.

4. **Applicant Identifier:** Leave this field blank

5a **Federal Entity Identifier:** Leave this field blank

5b. **Federal Award Identifier:** For new applications leave blank. For a continuation or revision to an existing award, enter the previously assigned Federal award (grant) number.

6. **Date Received by State:** Leave this field blank.

7. **State Application Identifier:** Leave this field blank.

8. **Applicant Information:** Enter the following in accordance with agency instructions:

a. **Legal Name:** (REQUIRED): Enter the name that the organization has registered with the System for Award Management (SAM), formally the Central Contractor Registry. Information

on registering with SAM may be obtained by visiting the Grants.gov website (<https://www.grants.gov>) or by going directly to the SAM website (www.sam.gov).

b. Employer/Taxpayer Number (EIN/TIN): (REQUIRED): Enter the Employer or Taxpayer Identification Number (EIN or TIN) as assigned by the Internal Revenue Service. In addition, we encourage the organization to include the correct suffix used to identify your organization in order to properly align access to the Payment Management System.

c. Organizational UEI (REQUIRED): If your entity is registered in SAM.gov today, your Unique Entity ID (SAM) has already been assigned and is viewable in SAM.gov. This includes inactive registrations. The Unique Entity ID is currently located below the DUNS Number on your entity registration record. Remember, you must be signed in to your SAM.gov account to view entity records.

d. Address: (REQUIRED) Enter the complete address including the county.

e. Organizational Unit: Enter the name of the primary organizational unit (and department or division, if applicable) that will undertake the project.

f. Name and contact information of person to be contacted on matters involving this application: Enter the name (First and last name required), organizational affiliation (if affiliated with an organization other than the applicant organization), telephone number (Required), fax number, and email address (Required) of the person to contact on matters related to this application.

9. Type of Applicant: (REQUIRED) Select the applicant organization “type” from the following drop down list.

A. State Government B. County Government C. City or Township Government D. Special District Government E. Regional Organization F. U.S. Territory or Possession G. Independent School District H. Public/State Controlled Institution of Higher Education I. Indian/Native American Tribal Government (Federally Recognized) J. Indian/Native American Tribal Government (Other than Federally Recognized) K. Indian/Native American Tribally Designated Organization L. Public/Indian Housing Authority M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education) N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education) O. Private Institution of Higher Education P. Individual Q. For-Profit Organization (Other than Small Business) R. Small Business S. Hispanic-serving Institution T. Historically Black Colleges and Universities (HBCUs) U. Tribally Controlled Colleges and Universities (TCCUs) V. Alaska Native and Native Hawaiian Serving Institutions W. Non-domestic (non-US) Entity X. Other (specify)

10. Name of Federal Agency: (REQUIRED) Enter U.S. Administration for Community Living

11. Catalog of Federal Domestic Assistance Number/Title: The CFDA number can be found on page one of the Program Announcement.

12. Funding Opportunity Number/Title: (REQUIRED) The Funding Opportunity Number and title of the opportunity can be found on page one of the Program Announcement.

13. Competition Identification Number/Title: Leave this field blank.

14. **Areas Affected by Project:** List the largest political entity affected (cities, counties, state etc.)

15. **Descriptive Title of Applicant's Project:** (REQUIRED) Enter a brief descriptive title of the project (This is not a narrative description).

16. **Congressional Districts Of:** (REQUIRED) 16a. Enter the applicant's Congressional District, and 16b. Enter all district(s) affected by the program or project. Enter in the format: 2 characters State Abbreviation – 3 characters District Number, e.g., CA-005 for California 5th district, CA-012 for California 12th district, NC-103 for North Carolina's 103rd district. If all congressional districts in a state are affected, enter "all" for the district number, e.g., MD-all for all congressional districts in Maryland. If nationwide, i.e. all districts within all states are affected, enter US-all. See the below website to find your congressional district:

<https://www.house.gov/>

17. **Proposed Project Start and End Dates:** (REQUIRED) Enter the proposed start date and final end date of the project. **If you are applying for a multi-year grant, such as a 3 year grant project, the final project end date will be 3 years after the proposed start date.** In general, all start dates on the SF424 should be the 1st of the month and the end date of the last day of the month of the final year, for example 7/01/2014 to 6/30/2017. The Grants Officer can alter the start and end date at their discretion.

18. **Estimated Funding:** (REQUIRED) If requesting multi-year funding, enter the full amount requested from the Federal Government in line item 18.a., as a multi-year total. For example and illustrative purposes only, if year one is \$100,000, year two is \$100,000, and year three is \$100,000, then the full amount of federal funds requested would be reflected as \$300,000. The amount of matching funds is denoted by lines b. through f. with a combined federal and non-federal total entered on line g. Lines b. through f. represents contributions to the project by the applicant and by your partners during the total project period, broken down by each type of contributor. The value of in-kind contributions should be included on appropriate lines, as applicable.

NOTE: Applicants should review cost sharing or matching principles contained in Subpart C of 45 CFR Part 75 before completing Item 18 and the Budget Information Sections A, B and C noted below.

All budget information entered under item 18 should cover the total project period. For sub-item 18a, enter the federal funds being requested. Sub-items 18b-18e is considered matching funds. For ACL programs that have a cost-matching requirement (list here), the dollar amounts entered in sub-items 18b-18f must total at least 1/3 of the amount of federal funds being requested (the amount in 18a). For a full explanation of ACL's match requirements, see the information in the box below. For sub-item 18f (program income), enter only the amount, if any, that is going to be used as part of the required match. Program Income submitted as match will become a part of the award match and recipients will be held accountable to meet their share of project expenses even if program income is not generated during the award period.

There are two types of match: 1) non-federal cash and 2) non-federal in-kind. In general, costs borne by the applicant and cash contributions of any and all third parties involved in the project, including sub-grantees, contractors and consultants, are considered **matching funds**. Examples

of **non-federal cash match** includes budgetary funds provided from the applicant agency's budget for costs associated with the project. Generally, most contributions from sub-contractors or sub-grantees (third parties) will be non-federal in-kind matching funds. Volunteered time and use of third party facilities to hold meetings or conduct project activities may be considered in-kind (third party) donations.

NOTE: **Indirect charges** may only be requested if: (1) the applicant has a current indirect cost rate agreement approved by the Department of Health and Human Services or another federal agency; or (2) the applicant is a state or local government agency. State governments should enter the amount of indirect costs determined in accordance with HHS requirements. **If indirect costs are to be included in the application, a copy of the approved indirect cost agreement or cost allocation plan must be included with the application. Further, if any sub-contractors or sub-grantees are requesting indirect costs, a copy of the latest approved indirect cost agreements must also be included with the application, or reference to an approved cost allocation plan.**

19. Is Application Subject to Review by State Under Executive Order 12372 Process?

Please refer to IV. Application and Submission Information, 4. Intergovernmental Review to determine if the ACL program is subject to E.O. 12372 and respond accordingly.

20. Is the Applicant Delinquent on any Federal Debt? (Required) This question applies to the applicant organization, not the person who signs as the authorized representative. If yes, include an explanation on the continuation sheet.

21. Authorized Representative: (Required) To be signed and dated by the authorized representative of the applicant organization. Enter the name (First and last name required) title (Required), telephone number (Required), fax number, and email address (Required) of the person authorized to sign for the applicant. A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain federal agencies may require that this authorization be submitted as part of the application.)

Standard Form 424A

NOTE: Standard Form 424A is designed to accommodate applications for multiple grant programs; thus, for purposes of this ACL program, many of the budget item columns and rows are not applicable. You should only consider and respond to the budget items for which guidance is provided below. Unless otherwise indicated, the SF 424A should reflect a multi-year budget.

Section A - Budget Summary

Line 5: Leave columns (c) and (d) blank. Enter TOTAL Federal costs in column (e) and total non federal costs (including third party in-kind contributions and any program income to be used as part of the grantee match) in column (f). Enter the sum of columns (e) and (f) in column (g).

Section B - Budget Categories

Column 1: Enter the breakdown of how you plan to use the Federal funds being requested by object class category.

Column 2: Enter the breakdown of how you plan to use the non-Federal share by object class category.

Column 5: Enter the total funds required for the project (sum of Columns 1 and 2) by object class category.

Section C - Non-Federal Resources

Column A: Enter the federal grant program.

Column B: Enter in any non-federal resources that the applicant will contribute to the project.

Column C: Enter in any non-federal resources that the state will contribute to the project.

Column D: Enter in any non-federal resources that other sources will contribute to the project.

Column E: Enter the total non-federal resources for each program listed in column A.

Section D - Forecasted Cash Needs

Line 13: Enter Federal forecasted cash needs broken down by quarter for the first year only.

Line 14: Enter Non-Federal forecasted cash needs broken down by quarter for the first year.

Line 15: Enter total forecasted cash needs broken down by quarter for the first year.

Note: This area is not meant to be one whereby an applicant merely divides the requested funding by four and inserts that amount in each quarter but an area where thought is given as to how your estimated expenses will be incurred during each quarter. For example, if you have initial startup costs in the first quarter of your award reflect that in quarter one or you do not expect to have contracts awarded and funded until quarter three, reflect those costs in that quarter.

Section E – Budget Estimates of Federal Funds Needed for Balance of the Project (i.e. subsequent years 2, 3, 4 or 5 as applicable).

Column A: Enter the federal grant program

Column B (first): Enter the requested year two funding.

Column C (second): Enter the requested year three funding.

Column D (third): Enter the requested year four funding, if applicable.

Column E (forth): Enter the requested year five funding, if applicable.

Section F – Other Budget Information

Line 21: Enter the total Indirect Charges

Line 22: Enter the total Direct charges (calculation of indirect rate and direct charges).

Line 23: Enter any pertinent remarks related to the budget.

| |
|--|
| <p>Separate Budget Narrative/Justification Requirement</p> <p>Applicants requesting funding for multi-year grant programs are REQUIRED to provide a combined multi-year Budget Narrative/Justification, as well as a detailed Budget</p> |
|--|

Narrative/Justification for each year of potential grant funding. A separate Budget Narrative/Justification is also REQUIRED for each potential year of grant funding requested.

For your use in developing and presenting your Budget Narrative/Justification, a sample format with examples and a blank sample template have been included in these Attachments. In your Budget Narrative/Justification, you should include a breakdown of the budgetary costs for all of the object class categories noted in Section B, across three columns: Federal; non-Federal cash; and non-Federal in-kind. Cost breakdowns, or justifications, are required for any cost of \$1,000 or for the thresholds as established in the examples. The Budget Narratives/Justifications should fully explain and justify the costs in each of the major budget items for each of the object class categories, as described below. Non-Federal cash as well as, sub-contractor or sub-grantee (third party) in-kind contributions designated as match must be clearly identified and explained in the Budget Narrative/Justification. The full Budget Narrative/Justification should be included in the application immediately following the SF 424 forms.

Line 6a: **Personnel:** Enter total costs of salaries and wages of applicant/grantee staff. Do not include the costs of consultants, which should be included under 6h Other.

In the Justification: Identify the project director, if known. Specify the key staff, their titles, and time commitments in the budget justification.

Line 6b: **Fringe Benefits:** Enter the total costs of fringe benefits unless treated as part of an approved indirect cost rate.

In the Justification: If the total fringe benefit rate exceeds 35% of Personnel costs, provide a breakdown of amounts and percentages that comprise fringe benefit costs, such as health insurance, FICA, retirement, etc. A percentage of 35% or less does not require a breakdown but you must show the percentage charged for each full/part time employee.

Line 6c: **Travel:** Enter total costs of all travel (local and non-local) for staff on the project. NEW: Local travel is considered under this cost item not under Other. Local transportation (all travel which does not require per diem is considered local travel). Do not enter costs for consultant's travel - this should be included in line 6h.

In the Justification: Include the total number of trips, number of travelers, destinations, purpose (e.g., attend conference), length of stay, subsistence allowances (per diem), and transportation costs (including mileage rates).

Line 6d: **Equipment:** Enter the total costs of all equipment to be acquired by the project. For all grantees, "equipment" is nonexpendable tangible personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. If the item does not meet the \$5,000 threshold, include it in your budget under Supplies, line 6e.

In the Justification: Equipment to be purchased with federal funds must be justified as necessary for the conduct of the project. The equipment must be used for project-related functions. Further, the purchase of specific items of equipment should not be included in the submitted budget if those items of equipment, or a reasonable facsimile, are otherwise available to the applicant or its subrecipient.

Line 6e: **Supplies:** Enter the total costs of all tangible expendable personal property (supplies) other than those included on line 6d.

In the Justification: For any grant award that has supply costs in excess of 5% of total direct costs (Federal or Non-Federal), you must provide a detailed break down of the supply items (e.g., 6% of \$100,000 = \$6,000 – breakdown of supplies needed). If the 5% is applied against \$1 million total direct costs (5% x \$1,000,000 = \$50,000) a detailed breakdown of supplies is not needed. Please note: any supply costs of \$10,000 or less regardless of total direct costs does not require a detailed budget breakdown (e.g., 5% x \$200,000 = \$10,000 – no breakdown needed).

Line 6f: **Contractual:** Regardless of the dollar value of any contract, you must follow your established policies and procedures for procurements and meet the minimum standards established in the Code of Federal Regulations (CFR's) mentioned below. Enter the total costs of all contracts, including (1) procurement contracts (except those which belong on other lines such as equipment, supplies, etc.). Note: The 33% provision has been removed and line item budget detail is not required as long as you meet the established procurement standards. Also include any awards to organizations for the provision of technical assistance. Do not include payments to individuals on this line. Please be advised: A subrecipient is involved in financial assistance activities by receiving a sub-award and a subcontractor is involved in procurement activities by receiving a sub-contract. Through the recipient, a subrecipient performs work to accomplish the public purpose authorized by law. Generally speaking, a sub-contractor does not seek to accomplish a public benefit and does not perform substantive work on the project. It is merely a vendor providing goods or services to directly benefit the recipient, for example procuring landscaping or janitorial services. In either case, you are encouraged to clearly describe the type of work that will be accomplished and type of relationship with the lower tiered entity whether it be labeled as a subaward or subcontract.

In the Justification: Provide the following three items – 1) Attach a list of contractors indicating the name of the organization; 2) the purpose of the contract; and 3) the estimated dollar amount. If the name of the contractor and estimated costs are not available or have not been negotiated, indicate when this information will be available. The Federal government reserves the right to request the final executed contracts at any time. If an individual contractual item is over the small purchase threshold, currently set at \$100K in the CFR, you must certify that your procurement standards are in accordance with the policies and procedures as stated in 45 CFR Part 75 for states, in lieu of providing separate detailed budgets. This certification should be referenced in the justification and attached to the budget narrative.

Line 6g: **Construction:** Leave blank since construction is not an allowable costs for this program.

Line 6h: **Other:** Enter the total of all other costs. Such costs, where applicable, may include, but are not limited to: insurance, medical and dental costs (i.e. for project volunteers this is different from personnel fringe benefits), non-contractual fees and travel paid directly to individual consultants, postage, space and equipment rentals/lease, printing and publication, computer use, training and staff development costs (i.e. registration fees). If a cost does not clearly fit under another category, and it qualifies as an allowable cost, then rest assured this is where it belongs.

Note: A recent Government Accountability Office (GAO) report number 11-43, has raised considerable concerns about grantees and contractors charging the Federal government for

additional meals outside of the standard allowance for travel subsistence known as per diem expenses. If meals are to be charged towards the grant they must meet the following criteria outlined in the Grants Policy Statement:

Meals are generally unallowable except for the following:

For subjects and patients under study(usually a research program);

Where specifically approved as part of the project or program activity, e.g., in programs providing children's services (e.g., Headstart);

When an organization customarily provides meals to employees working beyond the normal workday, as a part of a formal compensation arrangement;

As part of a per diem or subsistence allowance provided in conjunction with allowable travel; and

Under a conference grant, when meals are a necessary and integral part of a conference, provided that meal costs are not duplicated in participants' per diem or subsistence allowances (Note: the sole purpose of the grant award is to hold a conference).

In the Justification: Provide a reasonable explanation for items in this category. For example, individual consultants explain the nature of services provided and the relation to activities in the work plan or indicate where it is described in the work plan. Describe the types of activities for staff development costs.

Line 6i: **Total Direct Charges:** Show the totals of Lines 6a through 6h.

Line 6j: **Indirect Charges:** Enter the total amount of indirect charges (costs), if any. If no indirect costs are requested, enter "none." Indirect charges may be requested if: (1) the applicant has a current indirect cost rate agreement approved by the Department of Health and Human Services or another federal agency; or (2) the applicant is a state or local government agency. **State governments should enter the amount of indirect costs determined in accordance with DHHS requirements.** An applicant that will charge indirect costs to the grant must enclose a copy of the current rate agreement. Indirect Costs can only be claimed on Federal funds, more specifically, they are to only be claimed on the Federal share of your direct costs. Any unused portion of the grantee's eligible Indirect Cost amount that are not claimed on the Federal share of direct charges can be claimed as un-reimbursed indirect charges, and that portion can be used towards meeting the recipient match.

Line 6k: **Total:** Enter the total amounts of Lines 6i and 6j.

Line 7: **Program Income:** As appropriate, include the estimated amount of income, if any, you expect to be generated from this project that you wish to designate as match (equal to the amount shown for Item 15(f) on Form 424). **Note:** Any program income indicated at the bottom of Section B and for item 15(f) on the face sheet of Form 424 will be included as part of non-Federal match and will be subject to the rules for documenting completion of this pledge. If program income is expected, but is not needed to achieve matching funds, **do not** include that portion here or on Item 15(f) of the Form 424 face sheet. Any anticipated program income that will not be applied as grantee match should be described in the Level of Effort section of the Program Narrative.

c. Standard Form 424B – Assurances (required)

This form contains assurances required of applicants under the discretionary funds programs administered by the Administration for Community Living. Please note that a duly authorized representative of the applicant organization must certify that the organization is in compliance with these assurances.

d. Certification Regarding Lobbying (required)

This form contains certifications that are required of the applicant organization regarding lobbying. Please note that a duly authorized representative of the applicant organization must attest to the applicant’s compliance with these certifications.

Proof of Nonprofit Status (as applicable)

Non-profit applicants must submit proof of non-profit status. Any of the following constitutes acceptable proof of such status:

- A copy of a currently valid IRS tax exemption certificate.
- A statement from a State taxing body, State attorney general, or other appropriate State official certifying that the applicant organization has a non-profit status and that none of the net earnings accrue to any private shareholders or individuals.
- A certified copy of the organization’s certificate of incorporation or similar document that clearly establishes non-profit status.

Indirect Cost Agreement

Applicants that have included indirect costs in their budgets must include a copy of the current indirect cost rate agreement approved by the Department of Health and Human Services or another federal agency. This is optional for applicants that have not included indirect costs in their budgets.

Budget Narrative/Justification- Sample Format

NOTE: Applicants requesting funding for a multi-year grant program are REQUIRED to provide a detailed Budget Narrative/Justification for EACH potential year of grant funding requested.

| Object Class Category | Federal Funds | Non-Federal Cash | Non-Federal In-Kind | TOTAL | Justification |
|-----------------------|---------------|------------------|---------------------|----------|---|
| Personnel | \$47,700 | \$23,554 | \$0 | \$71,254 | <p>Federal</p> <p>Project Director (name) = .5 FTE @ \$95,401/yr = \$47,700</p> <p>Non-Fed Cash</p> |

| | | | | | |
|-----------------|----------|---------|-----|----------|---|
| | | | | | Officer Manager (name) = .5FTE @ \$47,108/yr = \$23,554 Total 71,254 |
| Fringe Benefits | \$17,482 | \$8,632 | \$0 | \$26,114 | Federal Fringe on Project Director at 36.65% = \$17,482 FICA (7.65%) Health (25%) Dental (2%) Life (1%) Unemployment (1%) Non-Fed Cash Fringe on Office Manager at 36.65% = \$8,632 FICA (7.65%) Health (25%) Dental (2%) Life (1%) Unemployment (1%) |
| Travel | \$4,707 | \$2,940 | \$0 | \$7,647 | Federal Local travel: 6 TA site visits for 1 person Mileage: 6RT @ .585 x 700 miles \$2,457 Lodging: 15 days @ \$110/day \$1,650 Per Diem: 15 days @ \$40/day \$600 Total \$4,707 Non-Fed Cash Travel to National Conference in (Destination) for 3 people Airfare 1 RT x 3 staff @ \$500 \$1,500 |

| | | | | | |
|-------------|----------|---------|-----|----------|---|
| | | | | | Lodging: 3 days x 3 staff @ \$120/day \$1,080 Per Diem: 3 days x 3 staff @ \$40/day \$360 Total \$2,940 |
| Equipment | \$10,000 | \$0 | \$0 | \$10,000 | No Equipment requested OR: Call Center Equipment Installation = \$5,000 Phones = \$5,000 Total \$10,000 |
| Supplies | \$3,700 | \$5,670 | \$0 | \$9,460 | Federal 2 desks @ \$1,500 \$3,000 2 chairs @ \$300 \$600 2 cabinets @ \$200 \$400 Non-Fed Cash 2 Laptop computers \$3,000 Printer cartridges @ \$50/month \$300 Consumable supplies (pens, paper, clips etc...) @ \$180/month \$2,160 Total \$9,460 |
| Contractual | \$30,171 | \$0 | \$0 | \$30,171 | (organization name, purpose of contract and estimated dollar amount) Contract with AAA to provide respite services: 11 care givers @ \$1,682 = \$18,502 |

| | | | | | |
|------------------|------------------|-----------------|----------------|------------------|--|
| | | | | | <p>Volunteer Coordinator = \$11,669</p> <p>Total \$30,171</p> <p><i>If contract details are unknown due to contract yet to be made provide same information listed above and:</i></p> <p>A detailed evaluation plan and budget will be submitted by (date), when contract is made.</p> |
| Other | \$5,600 | \$0 | \$5,880 | \$11,480 | <p>Federal</p> <p>2 consultants @ \$100/hr for 24.5 hours each = \$4,900</p> <p>Printing 10,000 Brochures @ \$.05 = \$500</p> <p>Local conference registration fee (name conference) = \$200</p> <p>Total \$5,600</p> <p>In-Kind</p> <p>Volunteers</p> <p>15 volunteers @ \$8/hr for 49 hours = \$5,880</p> |
| Indirect Charges | \$20,934 | \$0 | \$0 | \$20,934 | <p>21.5% of salaries and fringe = \$20,934</p> <p>IDC rate is attached.</p> |
| TOTAL | \$140,294 | \$40,866 | \$5,880 | \$187,060 | |

Budget Narrative/Justification - Sample Template

NOTE: Applicants requesting funding for a multi-year grant program are REQUIRED to provide a detailed Budget Narrative/Justification for EACH potential year of grant funding requested.

| Object Class Category | Federal Funds | Non-Federal Cash | Non-Federal In-Kind | TOTAL | Justification |
|-----------------------|---------------|------------------|---------------------|-------|---------------|
| Personnel | | | | | |
| Fringe Benefits | | | | | |
| Travel | | | | | |
| Equipment | | | | | |
| Supplies | | | | | |

| | | | | | |
|------------------|--|--|--|--|--|
| Contractual | | | | | |
| Other | | | | | |
| Indirect Charges | | | | | |
| TOTAL | | | | | |

Project Work Plan - Sample Template

NOTE : Applicants requesting funding for a multi-year grant program are REQUIRED to provide a Project Work Plan for EACH potential year of grant funding requested.

Goal:

Measurable Outcome(s):

* Time Frame (Start/End Dates by Month in Project Cycle)

| Major Objectives | Key Tasks | Lead Person | 1* | 2* | 3* | 4* | 5* | 6* | 7* | 8* | 9* | 10* | 11* | 12* |
|------------------|-----------|-------------|----|----|----|----|----|----|----|----|----|-----|-----|-----|
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| 6. | | | | | | | | | | | | | | |
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NOTE: Please do not infer from this sample format that your work plan must have 6 major objectives. If you need more pages, simply repeat this format on additional pages.

Instructions for Completing the Project Summary/ Abstract

- All applications for grant funding must include a Summary/Abstract that concisely describes the proposed project. It should be written for the general public.
- To ensure uniformity, limit the length to 265 words or less, on a single page with a font size of not less than 11, doubled-spaced.
- The abstract must include the project's goal(s), objectives, overall approach (including target population and significant partnerships), anticipated outcomes, products, and duration. The following are very simple descriptions of these terms, and a sample Compendium abstract.

Goal(s) - broad, overall purpose, usually in a mission statement, i.e. what you want to do, where you want to be.

Objective(s) - narrow, more specific, identifiable or measurable steps toward a goal. Part of the planning process or sequence (the "how") to attain the goal(s).

Outcomes - measurable results of a project. Positive benefits or negative changes, or measurable characteristics among those served through this funding (e.g., clients, consumers, systems, organizations, communities) that occur as a result of an organization's or program's activities. These should tie directly back to the stated goals of the funding as outlined in the funding opportunity announcement. (Outcomes are the end-point)

Products - materials, deliverables.

- A model abstract/summary is provided below:

The Delaware Division of Services for Aging and Adults with Physical Disabilities (DSAAPD), in **partnership** with the Delaware Lifespan Respite Care Network (DLRCN) and key stakeholders will, in the course of this two-year project, expand and maintain a statewide coordinated lifespan respite system that builds on the infrastructure currently in place. The **goal** of this project is to improve the delivery and quality of respite services available to families across age and disability spectrums by expanding and coordinating existing respite systems in Delaware. The **objectives** are: 1) to improve lifespan respite infrastructure; 2) to improve the provision of information and awareness about respite service; 3) to streamline access to respite services through the Delaware ADRC; 4) to increase availability of respite services. Anticipated **outcomes** include: 1) families and caregivers of all ages and disabilities will have greater options for choosing a respite provider; 2) providers will demonstrate increased ability to provide specialized respite care; 3) families will have streamlined access to information and satisfaction with respite services; 4) respite care will be provided using a variety of existing funding sources and 5) a sustainability plan will be developed to support the project in the future. The expected **products** are marketing and outreach materials, caregiver training, respite worker training, a Respite Online searchable database, two new Caregiver Resource Centers (CRC), an annual Respite Summit, a respite voucher program and 24/7 telephone information and referral services.

Instructions for Completing the "Supplemental Information for the SF-424" Form

1. Project Director.

Name, address, telephone and fax numbers, and e-mail address of the person to be contacted on matters involving this application. Items marked with an asterisk (*) are mandatory.

2. **Novice Applicant**. Select "Not Applicable To This Program."