Maternal Opioid Misuse (MOM) Model
Notice of Funding Opportunity (NOFO) and Application Review

Center for Medicare and Medicaid Innovation
Centers for Medicare & Medicaid Services (CMS)
Agenda

• Overview
• Program Requirements
• Application Requirements
• Application and Submission Information
• Federal Award Administration
• Q&A
• Resources
Overview

CMS Innovation Center
MOM Model
The CMS Innovation Center Statute

“The purpose of the [Center] is to test innovative payment and service delivery models to reduce program expenditures…while preserving or enhancing the quality of care furnished to individuals under such titles.”

Three scenarios for success from statute:
1. Quality improves; cost neutral
2. Quality neutral; cost reduced
3. Quality improves; cost reduced (best case)

If a model meets one of these three criteria and other statutory prerequisites, the statute allows the Secretary to expand the duration and scope of a model through rulemaking.
MOM Model

The MOM model is a patient-centered service-delivery model, which aims to improve the quality of care and reduce costs for pregnant and postpartum Medicaid beneficiaries with opioid use disorder (OUD) and their infants through state-driven care transformation.

Goals:

1. Improve quality of care and reduce costs
2. Increase access to treatment, service-delivery capacity, and infrastructure
3. Create sustainable coverage and payment strategies

Up to 12 Cooperative Agreements totaling $64.6 million will be awarded to eligible state Medicaid agency applicants.
Model Requirements
Model Guidelines
Model Timeline
Model Guidelines

• Establish partnership between state Medicaid agency and designated care-delivery partner(s)

• Build sustainable infrastructure and increase evidence-based OUD treatment capacity

• Support coordinated and integrated services for enrolled model population

• Develop a Coverage and Payment Strategy for services to be covered by state Medicaid
State Medicaid Agency

• Develop and implement state Coverage and Payment Strategy
  - Secure State Plan Amendments and/or Medicaid waivers as needed by Year 3
• Ensure timely T-MSIS reporting
• Coordinate with care-delivery partner(s) to support information sharing
• Report required data to CMS Innovation Center
Care-Delivery Partner

- Increase provider capacity and strengthen existing provider collaborations
- Develop and implement information-sharing systems
- Provide integrated and coordinated care to all enrolled model beneficiaries
- Report quality milestones and additional required data to CMS Innovation Center
Model Population

Pregnant and postpartum women who are Medicaid and CHIP beneficiaries and have been diagnosed with OUD

Infants of beneficiaries who are enrolled in the model
Coordination and Integration of Services

Physical Health
Medication assisted treatment (MAT) for OUD, maternity care, and primary care services

Behavioral Health
Mental health services, group therapy, and other appropriate therapies beyond MAT

Wraparound Services
Coordination, engagement and referral services, including intake assessment and treatment plan development
Required Components of Transition Year Services

A once-per-pregnancy intake assessment and once-per pregnancy OUD treatment plan and:

1. Comprehensive care management
2. Care coordination
3. Health promotion
4. Individual and family support
5. Referral to family and social services
Model Timeline

- Pre-Implementation (Year 1)
- Transition (Year 2)
- Full Implementation (Years 3-5)

Funding

Year 1
- Implementation

Year 2
- Implementation
- Transition

Years 3-5
- Implementation
- Milestone
Funding Types

- **Implementation Funding** - Address structural barriers to care transformation by building and expanding capacity as well as infrastructure. Available in Years 1-5 of the model.

- **Transition Funding** - Support wraparound coordination, engagement, and referral activities. Available in Year 2 only of the model.

- **Milestone Funding** - Encourage positive outcomes and sustained care transformation over the last three years of the model and beyond. Available in Years 3-5 of the model.
Care-Delivery Structure and Funding

- Maternity Care
- Behavioral Health and Primary Care
- OUD Treatment

- Labor and Delivery
- Postpartum Care
- Infant Care
- Behavioral Health and Primary Care
- OUD Treatment

**Funding**
- Billed as usual to Medicaid
  - Physical and behavioral healthcare services
- Funded by the Innovation Center in Year 2, State adopts payments in Year 3
  - Patient intake, assessment, and treatment planning
  - Coordination, engagement, and referral services
Application Requirements
Required MOM Model-Specific Materials

- Project Abstract
- Project Narrative
  - Model Context
  - Model Implementation Plan
  - Memorandum of Understanding with Care-Delivery Partner(s)
  - Data-Sharing Capacity and Plan
  - Model Impact Analysis
  - Organizational Capacity of State Medicaid Agency and Care-Delivery Partner(s)
- Model Budget Narrative
- Program Duplication Questionnaire
Project Abstract

• One page summary of proposed project
• Must include:
  • Goals
  • Total budget
  • Description of how funds will be used if awarded
Project Narrative: Model Context

• Statement of the Problem and Gap Analysis
  • Identify current processes for identifying and treating pregnant and postpartum women with OUD
  • Identify gaps in ensuring access to care for model population
  • Explain how participating in the model will address these gaps

• Characteristics of Proposed Model Service Area and Population
  • Define proposed model service area
  • Provide requested data on model population residing in the model service area
Project Narrative: Model Implementation Plan

• Intervention Design
  • Indicate how many beneficiaries are expected to be enrolled in Years 2-5
  • Outline identification, enrollment, and screening strategies
  • Describe services that would be available to enrolled beneficiaries
  • Provide timeline for postpartum coverage

• Coverage and Payment Strategy
  • Identify Medicaid SPAs/waivers needed
  • Outline financing strategy for postpartum coverage
  • Outline proposed beneficiary engagement incentives

• Sustainability Plan
  • Provide plan for sustaining model intervention after the model performance period
Project Narrative: Memorandum of Understanding with Care-Delivery Partner(s)

- Must include an explanation of the roles of both the state Medicaid agency and care-delivery partner(s) during Year 1 of the model

- Other key components
  - Transfer of funds (payment timeline to the care-delivery partner)
  - Data-sharing plan
  - Reporting requirements
Project Narrative: Data-Sharing Capacity and Plan

• Data-Sharing Capacity
  • Identify T-MSIS status and provide plan to achieve monthly T-MSIS data reporting
  • Confirm ability to link maternal and infant claims data
  • Outline data-sharing plan to support delivering coordinated and integrated care to model beneficiaries

• Reporting Plan
  • Detail steps to meet quarterly and annual progress-reporting requirements, as well as data submission for performance milestones

• Evaluation Plan
  • Provide confirmation that partners will participate in all aspects of the CMS Innovation Center’s model evaluation, as applicable
Project Narrative: Model Impact Analysis

• Impact on Quality of Care
  • Outline goals for quality improvement that can be met through the proposed intervention
  • Outline how the proposed intervention will reach quality milestones

• Cost Savings Projection
  • Provide financial model for model population, including:
    • Current Medicaid/CHIP costs for the model population and their infants
    • Projected Medicaid/CHIP costs in the absence of the proposed model intervention
    • Projected Medicaid/CHIP costs if model is implemented
Project Narrative: Organizational Capacity of State Medicaid Program

• Demonstrate the capacity of the applicant, together with the care-delivery partner(s), to organize and manage all aspects of the proposed model intervention and coverage and payment strategy.

• Should include details on:
  • Structure of state Medicaid program, identifying leaders who will be responsible for model operations
  • Evidence that state Medicaid agency and Care-Delivery partner(s) have experience implementing programs or initiatives similar to the MOM model
Model Budget Narrative

• Outline in detail the use of each model funding source, including specific proposed activities by the state Medicaid agency and care-delivery partner(s) for the entire model performance period

• Highlight specific activities that will occur using Implementation, Transition and Milestone Funding
Program Duplication Assessment Questionnaire

• Form listed under Appendix F in NOFO

• Consider all current programs (funded by Federal, state, or local monies) that serve the model population in the proposed model service area
Postpartum Continuity of Care

• Sustainable postpartum coverage plans that address the period beyond 60 days after birth will earn a priority on application scoring

• Applicants are not required to extend postpartum Medicaid eligibility, but must propose a strategy for continuing to meet enrolled beneficiaries’ physical and behavioral health needs after the immediate postpartum period
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<th>Required Application Sections and Point Values</th>
<th>Value</th>
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<tbody>
<tr>
<td>Project Abstract</td>
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<tr>
<td>Project Narrative: Model Context</td>
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<td>Project Narrative: Model Implementation Plan</td>
<td>55 points</td>
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<td>Project Narrative: Data-Sharing, Reporting and Evaluation</td>
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<td>Model Budget Narrative</td>
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<td>Program Duplication Questionnaire</td>
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<td><strong>Total Points</strong></td>
<td><strong>200 points</strong></td>
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<tr>
<td>Additional Preference for Postpartum Continuity of Care</td>
<td>Up to 5 points</td>
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Application Formatting

• All files attached to the application in Grants.gov must be uploaded as PDFs
• Font size 12
• Project Narrative must be no more than 60 double-spaced pages (Memoranda of Understanding are limited to five pages each, but do not count toward the overall Project Narrative page limit)
• Budget Narrative must be no more than 10 single-spaced pages
• Program Duplication Questionnaire must be no more than 10 single-spaced pages
## Application Timeline

<table>
<thead>
<tr>
<th>Event</th>
<th>Date/Time</th>
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<tbody>
<tr>
<td>NOFO Release</td>
<td>February 8, 2019</td>
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<tr>
<td>Application Period Open</td>
<td>February 8- May 6, 2019</td>
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<tr>
<td>Cooperative Agreement Applications Due</td>
<td>May 6, 2019, 3pm E.T.</td>
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<tr>
<td>Notices of Award Issuance (anticipated)</td>
<td>Fall 2019</td>
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Application and Submission Information
Application and Submission Procedures

• Search by the CFDA number: 93.687

• Application must be submitted in the required electronic PDF format at [http://www.grants.gov](http://www.grants.gov) no later than the established deadline (insert here once established)

• Application deadline is a date and time (May 6, 2019; 3pm E.T).

• Specific, detailed instructions are available on the Grants.gov website.
Application and Submission Procedures, Part 1

• All applications must:
  • Register in the System for Award Management (SAM) database to be able to submit an application. **DO THIS IMMEDIATELY.**
  • Have a valid Employer Identification Number (EIN) / Taxpayer Identification Number (TIN).
  • Have a Dun and Bradstreet (D&B) Data Universal Number System (DUNS) number to apply.

• The Authorized Organizational Representative (AOR) who will officially submit an application on behalf of the organization must register with Grants.gov for a username and password.
Application and Submission Procedures, Part 2

• All applications are submitted via Grants.gov and must include the following standard forms:
  • Project Abstract Summary
  • SF424: Official Application for Federal Assistance
  • SF424A: Budget Information Non-Construction
  • SF LLL: Disclosure of Lobbying Activities
  • Project Site Location
Application and Submission Procedures, Part 3

• HHS strongly recommends that you do not wait until the application due date to begin the process
• Please visit Grants.gov to begin the registration process.
• Please review the application format and content requirements in Section D2 to ensure that you have an eligible application.
Federal Award Administration
CMS Grants Management Process

HHS Grant Management Process
1. Planning
2. Announcement
3. Application Evaluation
4. Negotiation
5. Award
6. Post-award Monitoring
7. Closeout
Funding Mechanism

What is a grant or cooperative agreement?

• Grants and cooperative agreements are defined as a transfer of money, property, services, or anything of value to a recipient in order to accomplish a public purpose through support or stimulation that is authorized by federal statute.

• A grant or cooperative agreement is used when the principal purpose of the award is to provide assistance for public good or benefit.

• The MOM model award is a Cooperative Agreement.
Grants.gov: The Application Process

Steps to Obtaining a Federal Grant

1. Registration
   a. Step 1: Obtain DUNS Number
   b. Step 2: Register with CCR
   c. Step 3: Username & Password
   d. Step 4: AOR Authorization
   e. Step 5: Track AOR Status

2. Learn Grants – [Grants 101]
A Short Summary of Federal Grants

What is a grant? A grant is a way the government funds your ideas and projects to provide public services and stimulate the economy. Grants support critical recovery initiatives, innovative research, and a litany of other programs. On Grants.gov you will find all the funding opportunities from the 26 federal agencies that award grants.

The grant process follows a linear lifecycle that includes creating the funding opportunity, applying, making award decisions, and successfully implementing the award. The specific actions along the lifecycle are grouped into three main phases:

- Pre-award Phase: Funding Opportunities and Application Submission
- Award Phase: Application Review and Award Decisions
- Post-Award: Implementation, Reporting, and Closeout

Check out the grant lifecycle page to find out what you, the applicant, and the award-making agency do in the lifecycle. Each phase has a help page that provides a more detailed look at the process.

As you move through the grant lifecycle, you will need to use several different grants systems to apply, manage, and report on your grants. For detailed information on the variety of grant systems, check out the Grants.gov section.
Notice of Funding Opportunity (NOFO)

• Read, Read, Read – Please carefully read the NOFO.
• Registration is key! SAM, CCR, EIN, DUNS
• Start Early – AOR / eBiz POC must be known and registered.
• Questions to ask to ensure you are not disqualified:
  • Are we an eligible entity?
  • Did we stay within the page limits?
  • Did we use the appropriate font size? Spacing? Page size? Consistency with special characters?
  • Did we include ALL required forms as attachments?
Roles and Responsibilities

- Grants Management Specialists (Federal)
- Grants Management Officer (Federal)
- Program or Project Officer (Federal)
- Program Authorizing Official (Federal)
- Authorized Organizational Representative (non-Federal)
- Principal Investigator/Project Director (non-Federal)
Grants Management: Grant Solutions

Once applications are submitted to Grants.gov, all applications are:

- Downloaded to Grant Solutions (GS), the CMS grants management system. GS is managed by the Grants Center.
- The Grants Center of Excellence
- Official Grant File in electronic file format

Accessible to OAGM/CMMI/Application

- Issue Notices of Award (NOA)
- Grant notes
- Amendments (budget reallocations, carryovers, no-cost extensions, closeouts)
- FFR Reporting modules and ultimately Closeout
Live Q&A
The MOM model team will now answer questions submitted through the green Q&A chat box
Resources
MOM Model Resources and Contact Info

Email: MOMmodel@cms.hhs.gov

Visit: MOM model website

Grants.gov Resources and Contact Info (Application TA)

Phone: (800) 518-4726

Visit: Grants.gov Customer Support
Grant Policy

- Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards
  - HHS has implemented 45 CFR Subpart 75 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards
- HHS Grant Policy Statement
- Beta.Sam.gov
  - Excluded Parties List System (EPLS)
  - Central Contractor Registration (CCR)
- Federal Awardee Performance & Integrity Information System – initiated January 2016
Thank you for attending our webinar!

Slides and related materials will be posted on the MOM model website