

**Regional Partnership Catalyst Grant Program
Supplemental FAQ
2/27/2020**

Our hospital is interested in submitting proposals for both funding streams. Can the Regional Partnership hospital composition be different for each funding stream?

- As mentioned in the FAQs released January 30, 2020, Regional Partnerships have flexibility to change their composition for the new program. Regional Partnership composition may vary for each funding stream given differences in hospital interests and different governance needs based on the demands of each program.

When will scale targets be finalized?

- Regional Partnerships will be able to review the final scale targets once award determinations are issued in September. Regional Partnerships will have the opportunity to decline funding if they do not agree with the final scale targets before award recommendations are presented to Commissioners.

Does the 0.75 percent cap on hospital funding for proposals include any potential money that may be distributed from the third funding stream (TBD)?

- No. A hospital may reach its 0.75 percent cap during this round and still be eligible for additional funding from the third priority area once announced.

Will non-HSCRC grants be considered acceptable forms of sustainable funding during the evaluation process?

- The following items will be considered acceptable sources of sustainable funding
 - Global budgets
 - Care Transformation Initiatives
 - Billable services
 - Non-HSCRC grants

Appendix G lists examples of expenses not covered, such as care delivery and communication tools (unless specifically for diabetes or behavioral health activities) or investments to improve coding or documentation. However, can funding be used to train community partners on these items?

- Yes, funds can be used to train community partners on using care delivery and communication tools and/or providing coding and documentation support.

Can grant funds be used to cover costs associated with obtaining accreditation for DPP and/or DSMT?

- Yes. Grant funds are intended to cover any start-up costs associated with DPP and DSMT development, including training and accreditation.
- However, Regional Partnerships should note that Medicare precludes double payment for services. That is, if a Regional Partnership is currently billing for DPP or DSMT services they cannot use grant funds to account for the service provision.

The year one scale target for the Diabetes Management stream indicates that ADA accreditation is required, will my organization qualify if it has American Association of Diabetic Educators (AADE) accreditation to provide DSMT services?

- Yes. The year one target will be met if organizations provide that they are ADA or AADE accredited to provide DSMT services. These accreditations are essential components to billing Medicare and meeting following year targets.