

Frequently Asked Questions

Hospital to Home Partnership Program (HHP)

GENERAL

1. **Q: What is the Hospital to Home Partnership Program (HHP)**

A: This grant program is designed to strengthen communication and coordination with community organizations and providers, for the purposes of improving hospital discharge rates from hospitals to home and community-based settings by establishing partnerships between hospitals and Aging Services Access Points (ASAPs). Please see the Request for Applications (RFA), posted on [COMMBUYS](#), for more details about the priority criteria and application process.

2. **Q: How are you defining home and community-based services and supports?**

A: Home & Community Based Services are medical and non-medical services and supports that provide opportunities for individuals to receive services in their own home or community rather than institutions or other isolated settings (e.g. home care, electronic monitoring, home delivered meals, day habilitation services, adult day health and transportation)

ELIGIBILITY REQUIREMENTS

3. **Q: Who is eligible to apply?**

A: Aging Services Access points (ASAPs) designated by the Executive Office of Elder Affairs (EOEA), and acute care hospitals are eligible to submit joint applications. The ASAP should be the entity submitting the application on behalf of the partnership.

4. **Q: How is “Acute Care Hospital” defined?**

A: An Acute Care Hospital is a hospital that is licensed by the Department of Public Health (DPH), which contains a majority of medical-surgical, pediatric, obstetric, and maternity beds.

5. **Q: Do ASAP/Hospital partnerships need to be regionally based?**

A: Yes. To ensure geographic distributions, up to two grants will be awarded per Emergency Medical Services (EMS) region. Hospitals and ASAPs should partner with entities within their region. However, EOHHS recognizes that there may be value in partnering with entities in bordering regions. There will be an opportunity to note this within the application which will be taken into consideration. You can find a [map and list of the regions](#) on the mass.gov website

6. **Q: What are the minimum qualification requirements?**

A: ASAPs and Hospitals must submit a joint application, in partnership, that proposes a plan to utilize grant funds to strengthen communication and coordination with community organizations and providers, and to improve hospital discharge rates from Hospitals to home and community-based settings.

7. Q: What is the definition of ‘eligible populations’ for this grant?

A: Individuals who are hospitalized or presenting at an emergency department who can be safely diverted to a community setting with home and community-based services in lieu of a hospital admission and/or nursing facility admission.

8. Q: Can the HCBS hospital liaison spend part of their grant-funded time helping the hospital facilitate discharges to institutional settings (e.g. skilled nursing facilities)?

A: No, the Hospital to Home Partnership Program grant funding can only be used to coordinate and support Hospital to home and community-based settings.

GRANT PRIORITIES

9. Q: Are any of the grant eligible activities prioritized?

A: Priority will be given to applications focused on utilizing grant funding to support the HCBS Hospital Liaison, with further priority given to demonstration of plans to integrate HCBS Hospital Liaison into the hospital discharge planning processes.

10. Q: Can I use the funding to supplement an existing project?

A: Yes, you may propose funding to supplement, but not supplant an existing project.

11. Q: Is there a maximum budget for each proposal?

A: Yes. Each grant will be up to \$300,000, regardless of the number of entities applying in partnership.

GRANT AWARD

1. Q: How much funding will be awarded?

A: This is a two-year grant, up to \$300,000 per grant. Ten \$300,000 grants can be awarded. To ensure geographic distributions, two grants can be awarded per Emergency Medical Services (EMS) region. You can find a [map and list of the regions](#) on the mass.gov website.

2. Q: How will I know if I am chosen to be awarded funds?

A: Grant recipients (or “Awardee”) will be notified via email that their project has been chosen to be funded. The awardee must complete, sign, and return any required forms, and comply with any conditions for receipt of award included in the notice. Upon completion of all required forms and conditions, EOHHS and the Awardee will execute a grant agreement which, accompanied by the Commonwealth Standard Contract Form and Commonwealth Standard Terms and Conditions, will serve as a contract between EOHHS and the awardee. The contract will specify the portion of funds that support the project as well as any proposed and approved reasonable Direct Program Costs.

3. **Q: How soon can I expect award funding to arrive?**

A: EOHHS will make a determination on awards on or before January 12, 2023. Executed contracts and metrics will be due back to EOHHS on January 26th, 2023 for a projected contract start date of February 1, 2023. Provided your spending and metrics plans have been approved by EOHHS, funds will be released when your organization: 1) completes all required documentation, including an executed contract; 2) has an active SAM.gov account; 3) has a MMARS account.

4. **Q: Will our organization receive all funding up front?**

A: Yes, your organization will receive all obligated funding for your project up front.

5. **Q: How will my organization receive funding from this grant?**

A: As stated in the RFA, one ASAP will be the financial agent for the grant. Upon receipt of all required documentation, including the signed and completed grant agreement, funds will be electronically transferred into the ASAP's provided account (vendor code registered through MMARS).

6. **Q: Does our organization have to repay funding if data shows that the funding is not meeting the project purpose? How do we repay funding?**

A: If the data reflects that your program did not produce expected results, you **do not** need to repay the funding from the program. However, funding will need to be repaid if the Awardee does not complete the approved scope of work or does not follow program guidelines, such as failing to comply with reporting requirements. If the Awardee completes their scope of work for less than the obligated amount, the cost underrun would need to be returned. Funding will need to be returned in the manner directed by EOHHS within 4 weeks of a repayment determination.

APPLICATION

1. **Q: How do I submit a grant application?**

A: Fill out the online application which can be found on the [Mass Grants Portal](#). For additional details and step-by-step instructions, please see MASS Grants Portal User Guide beginning on page 8 which can be found on the Hospital to Home Partnership Program website.

2. **Q: What is the deadline to submit the grant application?**

A: Grant applications will be accepted until 5:00 p.m. on December 2, 2022.

3. **Q: Will there be another application in the future?**

A: Grant applications will be accepted until 5:00 p.m. on December 2, 2022. If all funds are not allocated, the application may open again for additional applicants. We expect all funds to be distributed during this first round.

4. **Q: How will I know if my application was received?**

A: The persons designated as the primary and secondary points of contact on your partnership's application should receive a confirmation email which states that your application was received. If you did not receive a confirmation email, please contact MassGrantsSupport@mtxb2b.com or (866) 406-2170.

5. Q: How do I find my MMARS vendor code?

A: Vendor codes begin with "VC" followed by 10 digits. Your vendor code is the same code that you use to login to [VendorWeb](#). If you do not know, or are unable to remember your vendor code, please contact the Commonwealth agency you are currently doing business with and ask them for your VC (vendor code) number. The department will ask for your TIN number which was provided on the businesses W9 form or 1099 form.

6. Q: What information do we need to provide within the application?

A: Each application must include, at a minimum:

- Name and contact information for a primary and secondary contact at the ASAP(s) and hospital(s) applying for the grant;
- A detailed budget outlining the direct and indirect costs associated with how the grant funds are to be used;
- An attestation as to whether any applicants are submitting additional HHPP grant applications with other partners;
- Detailed description of the current relationship between the ASAP(s) and hospital(s)
- Implementation plan. The application form will include specific questions as it relates to the partnerships' plan for implementation. Requirements will differ dependent upon the proposed project. Minimum requirements are outlined below:
 - For the HCBS Hospital Liaison Project: Overview of ASAP and Hospital roles and responsibilities as well as an overview of how the hospital(s) will incorporate the new HCBS Hospital Liaison into the hospital workflow, in addition to details on implementation as it pertains to the ASAP worker's responsibilities, including but not limited, time commitment and access to Hospital resources (e.g. participation in rounds, access to medical records, collaboration with other case managers and designated workspace).
 - For Innovation Projects: Overview of proposed "innovation plan", which should include a description of the proposed investment, process towards implementation/key milestones and outline of Hospital and ASAP roles and responsibilities in executing implementation plan.

7. Q: What documentation do we need to provide during the application and award process?

A: We will use your MMARS number to verify that you are eligible to apply for grant funding under this initiative.

You will also need to upload:

1. Letter of executive approval/demonstration of commitment from the partnering Hospital's Chief Medical Officer, Chief Nursing Officer and/or the Chief Case Manager
2. Letter of executive approval/demonstrated commitment from the ASAPs Executive Director, Director of Clinical Services and/or Chief Operating Officer

You will also have the option to upload any additional documentation that supports or bolsters your application

8. Q: How many organizations can partner on an application?

A: If the partnership includes more than one ASAP, more than one hospital and/or other additional agencies, only one application should be submitted by the ASAP(s) and the additional partnering agencies. The role of each entity in the partnership, and their contact information should be identified in the “partnership form” in the application. On the project application, you will be asked to identify and describe any partnerships or working relationships with other organizations and to identify points of contact at each partner institution.

REPORTING

9. Q: What are the reporting requirements?

A: Grantees will be required to provide an initial baseline, interim and final reports across an established set of metrics. A sample reporting template is included in the RFA but is not required to be submitted as part of the application. Additional details can be found in the program guidelines document.

Initial baseline report: Submission of the baseline report will be required upon execution of the contract. The initial baseline report will include reporting across an established set of metrics from the prior year, beginning October 2021-October 2022. In addition to baseline metrics, awardees will be required to report on additional evaluation metrics. Additional evaluation metrics will be required to be identified within the baseline report, however, reporting will not begin on these metrics until 1 year after the receipt of funds.

Interim report: An interim report will be required 1 year after the receipt of funds for the first year of the grant period. The interim report will include comparative reporting of data from the first year of the grant period compared to the baseline metrics submitted in the initial baseline report. The interim report will also include reporting on evaluation metrics as identified by the grantee.

Final report: A final report will be required at the end of the grant period. The final report will include comparative reporting of data from first and second year of the grant program compared to the baseline metrics submitted in the initial baseline report. The final report will also include reporting on evaluation metrics as identified by the grantee for both the first and second year.

10. Q: Who is responsible for submitting the reports, the Hospital or the ASAP?

A: The Hospital and the ASAP are responsible for compiling data collaboratively. The Hospital then is responsible for submitting all reports to EOHHS.

11. Q: If more than one hospital is participating in partnership with one ASAP, is each hospital required to submit an individual report?

A: If more than one hospital is partnering with an ASAP, each hospital is required to submit an individual report.

12. Q: Will EOHHS be collecting qualitative feedback at any point during the duration of the grant program?

A: Yes, Grantees will also be required to participate in a facilitated focus group convened by EOHHS, one year after the receipt of grant funds and again at the end of the grant period. The purpose of these focus groups is to collect qualitative information on what worked, what didn't work and ways to further enhance and improve coordination and communication.

13. Q: How long does our organization have to retain program documents?

A: Per the Commonwealth Terms and Conditions, grant recipients are required to retain program documents and records for six years from the date of submission of the final expenditure report.

CONTACT

14. Q: Who should I contact if I need technical assistance with the Grant Portal?

A: For technical assistance, please contact MassGrantsSupport@mtxb2b.com or (866) 406- 2170

15. Q: Who should I contact if I have questions about the program and eligible uses of funds?

A: For questions about the program and eligible use of funds, please email MAHCBSGrants@pcgus.com.