

Department of Health and Human Services  
Centers for Medicare & Medicaid Services  
Office of External Affairs and Beneficiary Services

**STATE HEALTH INSURANCE ASSISTANCE PROGRAM  
(SHIP)**

**FY 2011 SHIP Basic Program Announcement and  
Grant Renewal Application**

*Instructions for Non-competitive Continuation Grants*  
CFDA # 93.779

**Funding Opportunity #HHS-2011-CMS-CONT-SHIP  
Application Due Date: February 16, 2011**

Page is Intentionally Left Blank

# FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

## Table of Contents

Table of Contents .....	3
I. INTRODUCTION .....	5
II. FUNDING OPPORTUNITY DESCRIPTION .....	5
A. Program Purpose .....	5
B. Program Objectives .....	6
C. FY 2011 SHIP Basic Grant Terms and Conditions Grant Period (April 1, 2011 - March 31, 2012)...	9
D. Basic Program Awards .....	10
E. Performance Awards .....	11
III. AWARD INFORMATION .....	11
A. Availability and Duration of Funds for Grants .....	11
B. Number and Size of Awards .....	11
IV. ELIGIBILITY INFORMATION .....	12
A. Eligible Applicants .....	12
V. COST SHARING OR MATCHING .....	15
VI. APPLICATION AND SUBMISSION OF INFORMATION .....	15
A. How to Submit an Application Package .....	15
C. Content and Form of Application Submission .....	16
VII. FY 2010 SHIP YEAR-END PROGRESS REPORT .....	19
VIII. FY 2011 SHIP BASIC GRANT RENEWAL APPLICATION .....	25
IX. SUBMISSION DATES AND TIMES .....	32
X. INTERGOVERNMENTAL REVIEW .....	32
XI. FUNDING RESTRICTIONS .....	32
XII. OTHER SUBMISSION REQUIREMENTS .....	33
XIII. APPLICATION REVIEW INFORMATION .....	33
A. Criteria .....	33
B. Reviews and Selection Process .....	33
C. Anticipated Announcement and Award Dates .....	33
XIV. AWARD ADMINISTRATION INFORMATION .....	34
A. Award Notices .....	34
B. Administrative and Policy Requirements .....	34
C. Reporting .....	34
D. NPR System Enhancements and Data Submission Plans .....	35

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

E. 508 Compliance - Accessibility of Electronic Information Technology .....	36
XV. AGENCY CONTACTS.....	37
XVI. OTHER INFORMATION.....	37
ATTACHMENTS.....	38
ATTACHMENT A.....	39
FY 2011 SHIP Basic Grant Terms and Conditions .....	39
ATTACHMENT B.....	46
FY 2011 SHIP Performance Measures .....	46
<i>(Effective October, 2010)</i> .....	46
ATTACHMENT C .....	48
SHIP Benchmarking Methodology.....	48
Application of Methodology— .....	49
ATTACHMENT D .....	51
Attestation of SHIP Minimum Requirements .....	51

# FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

## I. INTRODUCTION

The Centers for Medicare & Medicaid Services (CMS) is pleased to present the Fiscal Year (FY) 2011 State Health Insurance Assistance Program (SHIP) Grant Announcement and Grant Renewal Application.

This year, CMS has implemented a few new changes to the grant announcement, in the form of content, format, and title. The grant announcement highlights:

- new areas of program focus in response to the Patient Protection and Affordable Care Act of 2010,
- format changes incorporating a new year-end reporting requirement designed to capture SHIP progress during the months September 1, 2010 through January 31, 2011, and
- a title change reflecting that SHIP funding is continuation funding as reflected through a grant renewal application.

## II. FUNDING OPPORTUNITY DESCRIPTION

Section 4360 of the Omnibus Budget Reconciliation Act of 1990 (OBRA) (Public Law 101-508, codified at 42 USC 1395 b-4) authorizes the Centers for Medicare & Medicaid Services (CMS) to make grants to States and Territories to fund State Health Insurance Assistance Programs (SHIPs). This FY 2011 grant is a non-competitive continuation of the SHIP grant from the prior grant period. All States that meet the eligibility requirements, have satisfactory progress, and provide timely submission of a completed application that meets the requirements set forth in this Program Announcement will be eligible to receive grants in this grant period, contingent upon the availability of funds. This Program Announcement provides States and Territories an opportunity to apply for non-competitive continuation funding under this grant program and to receive information concerning application procedures, general funding considerations, eligibility requirements, and criteria that CMS uses in reviewing applications and awarding grants.

### A. Program Purpose

The purpose of the SHIP Grants Program is to strengthen the capability of States to support a community-based, grassroots network of local SHIP offices that provide personalized counseling, education, and outreach to assist Medicare beneficiaries with their Medicare questions.

Grant funds are to be used to support locally accessible counseling services to individual beneficiaries in coordination with CMS and community partners. Services provided by SHIPs are intended for Medicare beneficiaries who prefer or need information, counseling, and enrollment assistance beyond what they are able to receive on their own through the other CMS information channels, including 1-800-MEDICARE, [www.medicare.gov](http://www.medicare.gov) and through other sources such as [www.healthcare.gov](http://www.healthcare.gov). Grant funds from CMS will enhance States' efforts to support a network of local partners, programs, staff, and volunteers that will provide accurate and objective information to help beneficiaries understand and utilize their Medicare benefits.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

In FY 2011, SHIPs will continue to help Medicare beneficiaries make informed healthcare decisions. In addition, SHIPs will support CMS efforts to increase awareness of certain provisions of the Patient Protection and Affordable Care Act of 2010, including the new Medicare prevention benefits; fraud initiatives; changes to the Annual Election Period; and Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS).

The implementation of the Affordable Care Act is already changing the health care marketplace and providing expanded coverage options that may be relevant to people who seek information and counseling services from SHIPs. New sources of information about insurance and new coverage options will continue to emerge as implementation of the Affordable Care Act moves forward. In order to provide complete and accurate counseling services in this changing insurance market, SHIP staff must be aware of these changes and new programs resulting from implementation of the Affordable Care Act. SHIP programs should avail themselves of training opportunities to learn information about the implementation of the Affordable Care Act, assure that counselors are aware of those new programs and information sources that are relevant to the people who seek counseling from SHIPs, and refine their information and outreach efforts to more fully inform people about the changes brought about by the Act.

### B. Program Objectives

In support of the SHIPs' stated purpose, CMS requires States to use SHIP grant funding to pursue four specific program objectives.

***Objective 1 – SHIPs will provide personalized counseling to an increasing number and diversity of individual beneficiaries unable to access other channels of information or needing and preferring locally-based individual counseling services.***

SHIPs will assist beneficiaries to identify, understand, and enroll in programs and plans, when eligible and appropriate, including the Medicare Prescription Drug Coverage, Medicare Prescription Drug Low Income Subsidy (LIS), Medicare Advantage plans, Medicare supplemental insurance policies, Medicare Savings Programs, long-term care insurance and financing, and other public and private health insurance coverage options available to Medicare beneficiaries. SHIPs will provide this assistance and conduct related outreach when appropriate for new Medicare enrollees, Special Enrollment Periods (SEPs), and the Annual Enrollment Period. SHIPs should focus efforts on beneficiaries most in need of community-based, one-on-one counseling, considering the needs created by the diversity of Medicare beneficiaries in the State, including the need for trained counselors who speak languages other than English.

In the FY 2011 Grant Year, CMS expects SHIPs to place significant emphasis on improved outreach and service to beneficiaries:

- with low incomes, and who may be eligible, but who have not yet applied for LIS;
- who are disabled, including Medicare beneficiaries who are under 65 years old; and
- who have limited English proficiency.

CMS also expects SHIPs:

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

- to provide counseling to assist beneficiaries in understanding and using quality of care and cost information;
- to provide counseling on Medicare wellness and preventive benefits including those available under the Patient Protection and Affordable Care Act of 2010; and
- to increase awareness about Medicare fraud, including increasing efforts in detecting and reporting fraud.

CMS will measure States' progress in pursuing this objective through an analysis of SHIP data as submitted in the National Performance Reporting (NPR) data system, including measurements of the number of one-on-one client contacts, the number of contacts during which enrollment was the topic, the number of contacts with people with incomes less than 150% of the Federal Poverty Level, the number of contacts with people with disabilities, and the number of contacts during which fraud/fraud abuse was the topic.

***Objective 2 – SHIPs will conduct targeted community outreach to beneficiaries in public forums under their sponsorship or with community-based partners or coalitions to increase understanding of Medicare program benefits and raise awareness of the opportunities for assistance with benefit and plan selection.***

Because of their historical importance as community-level information intermediaries, CMS considers SHIPs ideally positioned to be leaders in promoting cooperation among diverse State and local programs that are involved in providing outreach and education services to Medicare beneficiaries. SHIPs should actively collaborate with other public and private efforts targeted at helping Medicare beneficiaries learn about and access program benefits and services. Examples of these efforts include, but are not limited to, information and counseling activities supported by the Older Americans Act and CMS local networks.

In FY 2011 Grant Year, CMS expects SHIPs through SHIP Objective 2:

- to partner with organizations that will assist in targeted outreach efforts to low-income Medicare beneficiary populations;
- to continue to foster local partnership efforts, including relationships with the mental health community and mental health organizations, and to engage in outreach to better reach, inform, and assist beneficiaries with disabilities;
- to submit program budgets that demonstrate that at least 5% of Federal SHIP funding will be directed toward one-on-one pharmaceutical benefits counseling to low-income dual eligible persons with mental disabilities; and
- to participate in beneficiary outreach efforts to promote the availability of quality of care and cost information.

SHIPs are highly encouraged to establish formal written agreements, Memorandums of Understanding (MOUs), or contracts with community partners clearly defining the reciprocal benefits or provision of services (e.g., Medicare benefits counseling services, community outreach and promotion, NPR data reporting), funding, facility space, equipment, supplies, staff support to be exchanged or provided one to another.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

CMS will measure States' progress in pursuing this objective through an analysis of SHIP data as submitted in the NPR data system, specifically reviewing Public and Media event reporting, including measurements of the number of events during which enrollment was the topic, the number of events targeting people with incomes less than 150% of the Federal Poverty Level, and the number of outreach events targeting people with disabilities.

CMS also expects SHIPs:

- to increase awareness about changes to the Medicare Annual Election Period (AEP), which in 2011 will be from October 15 through December 7. SHIPs will be expected prior to the AEP, to develop plans which provide for sufficient counseling and outreach capacity to meet beneficiary needs in local geographic areas.

While not required, CMS encourages SHIPs to collaborate with their State Medicaid offices and other partners to increase awareness about the Children's Health Insurance Program (CHIP).

***Objective 3 – SHIPs will increase and enhance beneficiary access to a counselor workforce that is trained, fully equipped and proficient in providing the full range of services including enrollment assistance in appropriate benefit plans, and prescription drug coverage.***

In the FY 2011 Grant Year, CMS expects SHIPs in Objective 3:

- to partner with other public and private organizations to develop a comprehensive and coordinated local network that is capable and accessible to provide the full range of needed information, counseling, and assistance to all beneficiaries;
- to continue development and improvement of local partner organizations, trained and properly monitored counselors, and the information technology required to connect SHIP counselors to CMS counseling tools, including Internet capacity at all local SHIP counseling locations;
- to indicate what quality assurance tools are used and demonstrate how they provide quality assurance measures to assure the accuracy of the information provided by SHIP counselors, including counselor training, certification, and monitoring; and
- to take advantage of training opportunities for paid and volunteer staff, refine their information and outreach efforts, and collaborate with partners to increase awareness about health care changes and other health care programs implemented through the Patient Protection and Affordable Care Act of 2010.

In the FY 2011 Grant Year, SHIPs will demonstrate the use of quality assurance tools, including tools that have been developed in partnerships between SHIPs and CMS. During this grant year, SHIPs will have available at least three quality monitoring tools that may include but are not limited to:

- the program assessment toolkit developed by the Florida SHIP program under a CMS competitive leadership grant,
- the Mystery Shopping Toolkit developed by CMS in partnership with several SHIPs who tested and provided developmental input to the toolkit, and
- the CMS SHIP online certification tool available free to SHIPs through the SHIP Resource Center.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

CMS will measure States' progress in pursuing this objective through an analysis of SHIP data as submitted in the NPR data system, specifically reviewing the total active counselors and counseling hours in the State (both in the State office and in field locations) as well as the percentage of counselors who participate in annual SHIP training.

***Objective 4 - SHIPs will participate in CMS education and communication activities, thus enhancing communication between CMS and SHIPs to assure that SHIP counselors are equipped to respond to both Medicare program updates and a rapidly changing counseling environment and to provide CMS with information about the support and resources that SHIPs need to provide accurate and reliable counseling services.***

CMS funds SHIPs as a vital component to its beneficiary outreach and education efforts. SHIPs are expected to participate in CMS outreach events, providing support for community-based events supported or organized by CMS regional offices. Additionally, CMS provides and expects SHIPs to participate in the numerous opportunities for SHIPs to learn and share information, through regular national and regional teleconference calls, the [www.SHIPTalk.org](http://www.SHIPTalk.org) web site, CMS e-mails and alerts, and the *SHIP Navigator* electronic newsletter.

In the FY 2011 Grant Year, SHIPs are required:

- to participate in community-based events aimed at reaching beneficiaries who may be eligible, but not yet applied for the Low-Income Subsidy (LIS) for Medicare Prescription Drug Coverage;
- to participate in education and outreach activities regarding Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS);
- to participate in education and outreach activities regarding the Medicare Annual Election Period (AEP), and Fraud Awareness Initiatives;
- to participate in other community-based events as part of CMS education campaigns to reach and inform Medicare beneficiaries about their coverage, including preventive services and *Welcome to Medicare* physicals for new enrollees, as well as the availability of quality of care and cost information; and
- to be regular participants in CMS conference calls and to stay informed of coverage issues by reading CMS e-mails and publications circulated through SHIP e-mail lists.

CMS will measure States' progress in pursuing this objective through a review of SHIP activities with CMS regional offices, a review of mid-term SHIP reports, and through conference calls and [www.SHIPTalk.org](http://www.SHIPTalk.org) registration lists.

### **C. FY 2011 SHIP Basic Grant Terms and Conditions Grant Period (April 1, 2011 - March 31, 2012)**

In prior years, the SHIP Basic Grant Terms and Conditions were made available to SHIPs as part of the Basic Grant Award acceptance packet materials prior to release of grant funding. In CMS' attempt to improve the quality of the program and to be responsive to requests made by the SHIP network, included within this grant announcement and renewal application are the 2011 SHIP Basic Grant Terms and Conditions. Please reference Appendix A, review the updated document, complete the last page your State specific information, and ensure the SHIP State Authorized official has signed as an indication of the state's

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

acceptance of the SHIP Terms and Conditions. The signature page signed by the State Official is to be returned electronically with the completed SHIP Basic Grant Application responses and required documents.

***Note: As a condition of the grant renewal and application process, CMS requires that the SHIP review the FY 2011 SHIP Basic Grant Terms and Conditions, complete, sign, and return the last page with your grant application.***

### D. Basic Program Awards

In FY 2011, SHIPs may apply for the Basic Program Award, as follows:

The application requires States to demonstrate how the funds will be used in FY 2011 to continue to enhance the basic program structure through counselor development, training activities, outreach efforts, and partnership building.

CMS values the community-based counseling services that SHIPs deliver and support across the nation, and the greater role of the SHIPs in explaining the program changes resulting from the Medicare Modernization Act of 2003, the Medicare Improvements for Patients and Providers Act of 2008, and Patient Protection and Affordable Care Act of 2010. Accordingly, CMS is continuing to emphasize the distribution of grant funds to support beneficiaries' local access to SHIP services in the FY 2011 grant. SHIPs are required to partner with other public and private organizations and work toward the vision of a comprehensive and coordinated local network to provide the full range of needed information, counseling, and assistance to all beneficiaries. In FY 2011, CMS is particularly interested in partnerships designed to support coordinated, community-wide efforts to help beneficiaries with limited English proficiency and those with disabilities; to support applications for the Low-Income Subsidy (LIS) and Medicare Savings Plans (MSPs) where MSPs are available; and to expand awareness of Medicare preventive services, fraud awareness initiatives, change to the Medicare Annual Election Period, and other aspects of the Affordable Care Act.

The Basic Program Award is intended to fund various strategies that SHIPs may employ to assure that locally accessible health insurance counseling services are available to Medicare beneficiaries. It is important that SHIPs use their knowledge about their communities to enlist other organizations to participate in educational and counseling activities that afford beneficiaries additional opportunities to learn about the Medicare program and receive enrollment assistance. The fostering and growth of both formal and informal partnerships is regarded as a key element of SHIP performance. Funds distributed through this Basic Program Award should be used to support locally accessible counseling services through efforts that include, but are not limited to:

- Recruiting and training counselors in communities across the State;
- Providing support to local organizations that serve as local SHIP counseling locations;
- Conducting quality assurance and improvement initiatives in support of locally-based counselors;
- Funding systems to connect beneficiaries to local counseling assistance; and
- Providing Internet access to local counselors and generally supporting efforts to provide locally accessible counseling services.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

SHIPs should carry out these efforts in partnership with other public and private organizations involved in providing outreach, counseling, and enrollment assistance for Medicare beneficiaries, placing particular emphasis on reaching those individuals with low incomes and others who experience barriers to receiving assistance due to their geographic location, language, and/or culture. CMS also recognizes that locally accessible counseling services established by SHIPs in rural areas are vitally important as they often represent the only local partner involved in Medicare education and assistance. Counseling and outreach to areas of the State, should include, where appropriate, efforts to reach out to American Indian and Alaska Native populations through Area Indian Health Boards and other partnerships with the Indian Health programs operated by the Indian Health Service, Tribes, and urban Indian organizations.

### E. Performance Awards

Later in this fiscal period, CMS will issue Performance Awards. These awards will be competitive and will be issued under a separate notification.

## III. AWARD INFORMATION

### A. Availability and Duration of Funds for Grants

#### 1. Basic Program Awards

Grants will be awarded April 1, 2011 for a period not to exceed 12 months (March 31, 2012).

#### 2. Performance Awards

Grants will be awarded no later than September 30, 2011 as supplemental awards to the FY 2011 SHIP grants. Unobligated Performance Award funds must be reflected in the Financial Status Report (SF-269A) and may be included in the Basic Grant carry over request, if applicable.

### B. Number and Size of Awards

#### 1. Basic Program Awards

All SHIPs that meet the eligibility requirements and submit a complete application that meets the requirements set forth in this Program Announcement will be awarded a Basic Program Award. Basic Program Award funding amounts will be determined based on the SHIP Grant formula funding methodology. The Basic Grant to each State will include a fixed award of \$75,000 (\$25,000 for Guam and the Virgin Islands). In addition, States will receive a variable portion of the grant award based on a formula that considers:

- a. The percentage of nationwide persons with Medicare residing in the State;
- b. The percentage of the State's persons with Medicare in relation to the State's total population; and
- c. The percentage of the State's persons with Medicare who reside in rural areas.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

Following the release of this grant announcement and renewal application, SHIPs will be provided preliminary FY 2011 SHIP Basic Grant funding amount letters forwarded electronically to the SHIP State Authorizing Official and SHIP Director on record. The preliminary funding amount letter will confirm the funding amount the SHIP is to use to prepare the required FY 2011 SHIP Basic Grant budget documents (e.g., SF-424A and budget justification) due on February 16, 2011, as a requirement of the FY 2011 Basic Grant Renewal Application.

### 2. Performance Awards

All SHIPs that meet the eligibility requirements will receive a Performance Award. Approximately \$1.5 million will be designated for the Performance Awards contingent upon the availability of funds. The amount of the individual awards will depend on the number of States eligible. All SHIPs that submit the specified NPR data within the required report deadlines and meet other eligibility requirements included in this grant announcement will receive a performance award.

Any projected award amount for each State is based on an assumption that all States and jurisdictions eligible for the program will apply and receive awards. In the event a State does not apply for or does not satisfy the requirements in this Program Announcement to receive a Basic Program and/or Performance Award, the remaining funds will be allocated among all States receiving awards. States will be required to submit revised budgets and project plans to receive funding under this grant program.

All applicants who meet requirements set forth in this Program Announcement will be awarded both, Basic Program and Performance Awards.

## IV. ELIGIBILITY INFORMATION

### A. Eligible Applicants

#### 1. Basic Program Awards

Grants will be awarded under this program for planning, developing, and implementing programs designed to provide information, counseling, and assistance services to people with Medicare. Only existing SHIP grant recipients and States (see definition of State, Section XVI) without existing SHIP programs are eligible to apply. States applying for renewal of SHIP grants will be required to demonstrate that they will increase the level of activity under this grant as compared to the prior year.

Each application will be screened for completeness and attainment of the basic eligibility requirements contained in this announcement. Each applicant must have an approved Medicare Supplement Insurance regulatory program under Section 1882 of the Social Security Act, as amended, to qualify for funding under this SHIP grant program.

#### 2. Performance Awards

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

Performance Awards will provide funding opportunities for SHIPs that reflect demonstrated achievement in providing services to Medicare beneficiaries. Performance Awards will be determined based on the Overall Performance Scores (OPS) calculated for SHIPs based on weighted performance measures using data reported by SHIPs to CMS through the National Performance Reporting (NPR) system. The methodology used to calculate the OPS is included in the Benchmarking Methodology found in Attachment C.

a. Eligibility--To be eligible for a Performance Award in FY 2011:

- A SHIP must have submitted NPR data on time, within all reporting deadlines for each of the performance measures listed below (Performance Measures are also found in Attachment B).
- The Overall Performance Scores will be based on the NPR data submitted through quarterly submission of the Client Contact and Public and Media Activity (PAM) data to CMS through the NPR data system for the reporting period July 1, 2010 through June 30, 2011, and annual Resource Report data submitted for the period April 1, 2010 through March 31, 2011.
- A State must have an Overall Performance Score of at least 10% to be eligible for a Performance Award.
- States using a proprietary system on or before April 1, 2009 (and all proprietary agencies operating within a State) to submit NPR data must have a fully compliant data system reflecting new NPR system specifications released in December 2009 and operating on or before January 01, 2011 with no unresolved preprocessor or upload errors as a condition of eligibility for the annual performance award.
- States using the SHIPTalk web-based data system to enter NPR client contact and public and media records must have begun data entry using the revised Client Contact and Public and Media Activity Report Forms by August 1, 2010.
- Prior to entering data into the enhanced NPR system, all states (those using proprietary systems and those using direct web-based entry) must register all SHIPTalk and NPR users in the User table; register all agencies in the Agency table; and should train all users in the new system.

b. Performance Measures--The following performance measures and their associated weights will be used in determining Performance Awards:

**PM1** Number of total client contacts (in-person office, in-person home, telephone [all durations], and contacts by e-mail, postal, or fax) per 1,000 Medicare beneficiaries in the State. (20% weight)

**PM2** Number of persons reached through presentations, plus reached through booths/exhibits at health/senior fairs, plus enrolled at enrollment events per 1,000 Medicare beneficiaries in the State. (10% weight)

**PM3** Number of substantial, personal, direct client contacts (telephone calls of duration 10 minutes or more, in-person office, in-person home) per 1,000 Medicare beneficiaries in the State. (15% weight)

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

**PM4** Number of contacts with Medicare beneficiaries coded as in the CMS-defined Disabled program (under age 65 rule enforced during data entry) per 1,000 Medicare beneficiaries in the CMS-defined Disabled program. (10% weight)

**PM5** Number of unduplicated low-income (below 150% FPL, regardless of Asset coding) Medicare beneficiary contacts and/or contacts that discussed low-income subsidy (LIS) per 1,000 low-income Medicare beneficiaries in the State. (15% weight)

Qualifying LIS Topics: Any of the following 3 LIS topics discussed (unduplicated) - Part D Low Income Subsidy (LIS/Extra Help): Topic 11 LIS Eligibility/Screening, Topic 12 LIS Benefit Explanation, Topic 13 LIS Application Assistance (Topics are from the new Client Contact Form.)

**PM6** Number of unduplicated enrollment contacts (contacts with one or more qualifying enrollment topics) discussed per 1,000 Medicare beneficiaries in the State. (10% weight)

Qualifying Enrollment Topics: Any of the following 20 Enrollment Topics (unduplicated): Topic 1 - Medicare Prescription Drug Coverage (Part D) Eligibility/Screening, Topic 2 - Medicare Prescription Drug Coverage (Part D) Benefit Explanation, Topic 3 - Medicare Prescription Drug Coverage (Part D) Plans Comparison, Topic 4 - Medicare Prescription Drug Coverage (Part D) Plan Enrollment/Disenrollment, Topic 10 - Medicare Prescription Drug Coverage (Part D) Plan Non-Renewal, Topic 21 - MEDICARE (Parts A & B) Eligibility, Topic 22 - MEDICARE (Parts A & B) Benefit Explanation, Topic 27 - MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost) Eligibility/Screening, Topic 28 - MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost) Benefit Explanation, Topic 29 - MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost) Plans Comparison, Topic 30 - MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost) Plan Enrollment/Disenrollment, Topic 36 - MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost) Plan Non-Renewal, Topic 46 MEDICAID Medicare Savings Programs (MSP) Screening (QMB, SLMB, QI), Topic 47 MEDICAID MSP Application Assistance, Topic 48 MEDICAID (SSI, Nursing Home, MEPD, Elderly Waiver) Screening, Topic 49 MEDICAID Application Assistance, Topic 37 MEDICARE SUPPLEMENT/SELECT Eligibility/Screening, Topic 38 MEDICARE SUPPLEMENT/SELECT Benefit Explanation, Topic 39 MEDICARE SUPPLEMENT/SELECT Plans Comparison, Topic 45 MEDICARE SUPPLEMENT/SELECT Plan Non-Renewal (Topics are from the new Client Contact Form.)

**PM7** Number of unduplicated Part D enrollment contacts (contacts with one or more qualifying Part D enrollment topics) discussed per 1,000 Medicare beneficiaries in the State. (10% weight)

Qualifying Part D Enrollment topics: Any of the following 5 Part D Enrollment Topics (unduplicated): Topic 1 - Medicare Prescription Drug Coverage (Part D) Eligibility/Screening, Topic 2 - Medicare Prescription Drug Coverage (Part D) Benefit Explanation, Topic 3 - Medicare Prescription Drug Coverage (Part D) Plans Comparison, Topic 4 - Medicare Prescription Drug Coverage (Part D) Plan Enrollment/Disenrollment, Topic 10 - Medicare Prescription Drug Coverage (Part D) Plan Non-Renewal. (Topics are from the new Client Contact Form.)

**PM8** Total counselor hours (from client contact form) per 1,000 Medicare beneficiaries in the State. (10% weight)

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

- c. Eligible SHIPs will be ranked into tiers based on their Overall Performance Score and will receive awards based on a methodology that uses a cost per Medicare beneficiary rate (based on the number of beneficiaries in a state).
- d. Awards will be issued no later than September 30, 2011.
- e. Awards may be used to develop, enhance, or expand State or local program components consistent with the four SHIP Program Objectives.

### V. COST SHARING OR MATCHING

While the commitment of State resources to the SHIP program is encouraged, there is no cost sharing, cost matching, or cost participation requirements associated with this grant.

### VI. APPLICATION AND SUBMISSION OF INFORMATION

#### A. How to Submit an Application Package

All applicants must submit their applications electronically through <https://www.grantsolutions.gov>. Applications cannot be accepted through any email address. Full applications cannot be accepted through any website other than <https://www.grantsolutions.gov>. Full applications cannot be received via paper mail, courier, or delivery service unless a waiver is granted.

All grant applications must be submitted electronically and be received through <https://www.grantsolutions.gov> by 11:59 p.m. Eastern Daylight Time on 02/16/2011. To obtain User Support assistance with <https://www.grantsolutions.gov>, contact [help@grantsolutions.gov](mailto:help@grantsolutions.gov) or (866) 577-0771 during the hours of 8:00 a.m. – 6:00 p.m. (Eastern Standard Time) Monday thru Friday.

To be considered on time, applications must be submitted on or before the published deadline date (02/16/2010). However, a general extension of a published application deadline that affects all applicants or only those applicants in a defined geographical area when justified by circumstances such as acts of God (e.g., floods or hurricanes), widespread disruptions of mail service, or disruptions of electronic (e.g., application receipt services) or other services, such as a prolonged blackout, that affect the public at large may be authorized. No other deadline extensions are permitted.

Grantees will receive a login username and password from GrantSolutions. When entering the <https://www.grantsolutions.gov> website, you will login and access the online forms, enclosures, instructions, program, and budget narrative templates. Grantees will upload the required documents and fill out the required online forms. Grantees can review and submit applications and can check on the status of their applications. We strongly recommend that you do not wait until the application due date to begin the application process through <https://www.grantsolutions.gov>.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

Grantees will not receive notification of application submission. However they will be able to view the application status at all time in GrantSolutions.

### B. CCR & DUNS

To use <https://www.grantsolutions.gov>, you, as the applicant, must have a Dun and Bradstreet Number (DUNS) and register in the Central Contractor Registry (CCR). (See Section XII below, Other Submission Requirements, for information on obtaining a DUNS number). States that received SHIP grants in the previous period should already have a DUNS number.) To register for the CCR, go to <http://www.ccr.gov> and click on the appropriate option. You should allow a minimum of five days to complete the CCR registration process.

### C. Content and Form of Application Submission

A complete application consists of the following required materials organized in the following sequence:

- Standard Forms (SF)

The following standard forms must be completed with an original signature and enclosed as part of the proposal:

SF-424: Application for Federal Assistance  
SF-424A: Budget Information Non-Construction  
SF-424B: Assurances—Non-Construction Programs  
SF-LLL: Disclosure of Lobbying Activities

- Other Forms
  - Additional Assurances Certifications
  - 2010 Year-end Progress Report Questions
  - 2011 Basic Grant Renewal Application Questions
  - Signed Acceptance of SHIP Basic Grant Terms and Conditions
  - Signed SHIP Attestation of Minimum Requirements
- Applicant's SF-424A Budget

The applicant is required to provide a detailed budget on the SF-424A for the proposed grant budget period. The budget must include the following:

- a. Estimated Budget Total. Provide the budget broken down by the requested Federal SHIP grant funding. The applicant should assume level funding for the amount received from the FY 2010 Basic Program Award, noting that adjustments may be made based on SHIPs whose funding was re-allocated in FY 2010.
- b. Total estimated funding requirements for each of the following line items, and a break down for each line item - provide estimated funding requirements for:
  - Personnel

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

- Fringe benefits
- Contractual costs, including consultant contracts. Please identify all contracts; do not lump funding in this category. Budgets for each sub-grantee must be included.
- Indirect charges, by Federal regulation (Indirect Cost Share Rate Agreement required)
- Travel, including a breakdown of costs for mileage reimbursement (including rate), overnight lodging, per diem payments, and other costs.
- Supplies
- Equipment, including detailed descriptions of the kinds of equipment and unit costs being contemplated.
- Other costs- If a cost does not clearly fit under another category, and it qualifies as an allowable cost. Provide a reasonable explanation for items in this category. Do not lump funding in this category.

**Budgets that do not meet the above criteria must be negotiated with CMS prior to receiving the award.**

Completion of the SF-424A remains a requirement for consideration of your application. This estimated budget presentation is an important part of your grant application and will be reviewed carefully by CMS staff. If requesting indirect costs in the budget, a copy of the indirect cost rate agreement is required.

- c. Written Budget justification for the above itemized line items is required. Each line item listed on the SF-424A must be clearly justified in a separate budget narrative. This narrative should be written in a "Word" document.
- d. Basic Program Award Narrative (including Attestation of SHIP Minimum Requirements – See Attachment D). For FY 2011, the SHIP program application narrative will consist of the State responses to the following questions in Sections VII and VIII.

# FY 2010 SHIP YEAR-END PROGRESS REPORT

## VII. FY 2010 SHIP YEAR-END PROGRESS REPORT

The Office of Acquisition and Grants Management requires an annual report from SHIPs. To that end, and in an effort to continue to monitor SHIP performance, CMS has introduced in this FY 2011 Basic Program Grant Announcement and Grant Renewal Application, a requirement to complete the FY 2010 SHIP Year-End Progress Report.

The purpose of the FY 2010 SHIP Year-End Progress Report is to ensure that CMS has provided sufficient monitoring of CMS grantees throughout the grant year beginning April 1, 2010, and has assessed SHIP progress made during the months of September 1, 2010 through January 2011. (Note: The SHIP Mid-Term Progress Report covered the period April 1 through August 31.)

### Instructions:

Below is a list of questions similar to those included in the 2010 SHIP Mid-Term Progress Report. As a requirement of this grant announcement and grant renewal application process, SHIPs are required to provide complete and detailed responses to the following questions below, in order for CMS to fully assess your progress and performance throughout the specified time period.

- Please reference your most recent performance data packet (December, 2010).
- Please begin each response with your current score for each performance measure (PM) and slice. Your responses should be based upon your approved **2010** grant application submission activities and progress during the months of September 1, 2010 through January 31, 2011. Responses should build upon those that were submitted in your Mid-Term Progress Report that was submitted September 30, 2010. (Note: Activities not captured in the period covered in the data packet should be included.)
- Appropriate responses should include a brief but detailed narrative highlighting accomplishments and activities completed relative to the CMS approved SHIP 2010 Basic Grant application submission. Responses determined as unacceptable would include, but not be limited to the following:
  - Unanswered questions,
  - "OK" or "Activities are on target".
- Within the 2010 Basic Grant Announcement, CMS highlighted several special areas of focus and targeted Medicare populations. SHIPs are required to address these areas of focus and targeted Medicare populations in your responses to the questions in Section VII.
- If you have experienced any barriers to improving performance or anticipate a decline in PM scores through the end of the grant period (March 31, 2011), please describe. Please indicate actions or contingency plans developed to overcome barriers or decline.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

- The completed 2010 Year-End Progress Report must be uploaded as an attachment to your completed 2011 Basic Grant Application required documents.

FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

FY 2010 SHIP Year-End Progress Report Questions	SHIP Response
<p>1. What actions have your State taken to expand your outreach and counseling efforts to improve your PM 1 rating?</p> <p><i>2010 PM1 - Number of total client contacts per 1,000 Medicare beneficiaries in the State.</i></p>	
<p>2. What actions have your State made to expand your outreach and counseling efforts to improve your PM 2 rating?</p> <p><i>2010 PM2 - Number of persons reached through presentations/booths/exhibits at health/senior fairs, enrollment events per 1,000 Medicare beneficiaries in the State.</i></p>	
<p>3. What actions have your State made to expand your outreach and counseling efforts to improve your PM 3 rating?</p> <p><i>2010 PM3-Number of substantial, personal, direct client contacts (telephone, in-person office, in-person home) per 1,000 Medicare beneficiaries in the State.</i></p>	
<p>4. What actions have your State made to expand outreach and serve Medicare beneficiaries with disabilities as defined by CMS (including beneficiaries with a disability who are under 65 years old) designed to improve your PM 4 rating?</p> <p><i>2010 PM4- Number of contacts with Medicare beneficiaries in the CMS defined Disabled program per 1,000 Medicare beneficiaries in the CMS defined Disabled program in the State.</i></p>	
<p>5. What actions have the State made to reach low income beneficiaries and potential eligibles (LIS) designed to improve your PM 5 rating?</p> <p><i>2010 PM5 -Number of unduplicated low-income Medicare beneficiary contacts and/or contacts that discussed low-income subsidy (LIS) per 1,000 low-income Medicare beneficiaries in the State.</i></p>	

FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

FY 2010 SHIP Year-End Progress Report Questions	SHIP Response
<p>6. What actions have your State made to increase the number of beneficiaries provided enrollment assistance and improve your PM6 rating?</p> <p><i>2010 PM6 – Number of unduplicated enrollment contacts discussed per 1,000 Medicare beneficiaries in the State.</i></p>	
<p>7. What actions have your State made to reach and enroll Medicare Part D beneficiaries designed to improve your PM7 rating?</p> <p><i>2010 PM7 - Number of unduplicated Part D enrollment contacts discussed per 1,000 Medicare beneficiaries in the State.</i></p>	
<p>8. What actions have your State made to increase your available volunteer and/or paid staff resources designed to improve your PM 8 rating?</p> <p><i>2010 PM8 -Total number of counselor FTEs per 100,000 Medicare beneficiaries in the state.</i></p>	
<p>9. What actions have your State made to increase your available volunteer and/or paid staff resources designed to improve your PM 9 rating?</p> <p><i>2010 PM9 - Number of local and field counselor hours (SHIP-paid, in-kind paid, and volunteer counselor hours) as a proportion of the total State and Local field counselor hours (SHIP-paid, in-kind paid and volunteer counselor hours) in the State.</i></p>	

**FY 2011 SHIP Basic Program Announcement and Grant Renewal Application**

FY 2010 SHIP Year-End Progress Report Questions				SHIP Response		
10. Have any additions or deletion been made to your 2010 partnership and counseling sites chart since your 2010 SHIP Mid-Term Progress report? If so, please provide the updated chart(s) with responses to the information below, as a requirement of this grant application.						
Counseling Sites Chart Template						
Name of Local Counseling Organization	Is this organization paid by the state to provide counseling? (Y/N)	Is there a written grant, contract, memorandum of understanding, or other written agreement in place with this local counseling organization? (Y/N)	What is the service area of this local organization (provide county, city, or other local identification of service area)?	What are the responsibilities of this local program (example – counselor recruitment and training, local counseling services, local outreach coordination)?	Addition	Deletion
Partnership Chart Template						
Partner Organization Name	What target population or geographic areas will the SHIP reach or serve through this partnership?	What specific activities do you plan to undertake with this partner during the coming grant year? Do you have a Memorandum of Understanding/Contract/other written Agreement with this partner?	Is this a current partnership or is it a new partnership planned during the grant year?	Addition	Deletion	Performance Outcome
11. Do you anticipate having a carryover of unobligated funds by March 31, 2011? If so, indicate why the funds were not used during the 2010 Grant Year and what activities were not completed.						
12. Please provide CMS any additional important information not previously provided pertaining to your program operations and highlights.						

# FY 2011 SHIP Basic Grant Renewal Application

VIII. FY 2011 SHIP BASIC GRANT RENEWAL APPLICATION

*Commitment to Complete Basic Grant Requirements and  
Achievement of Basic Performance Levels*

- A. CMS requires States to use SHIP grant funding to pursue the four SHIP Program objectives identified in Section II. B. Program Objectives.
- B. In September 2009, the 2007 – 2009 SHIP Performance Assessment Workgroup (PAW) submitted recommendations for revised and new performance measures to CMS. Nine performance measures and a new benchmarking methodology were approved by CMS for implementation in the FY 2010 grant year beginning April 1, 2010.

In October 2010, the nine performance measures were reviewed by the SHIP Performance Assessment Workgroup, the SHIP Steering Committee, CMS (Central Office and Regional Office staff), and its SHIP data contractor to assess for consistency with the new data elements that became effective 8/1/2010, and to reduce redundancy amongst the measures given the high correlations between some of them.

The resulting recommendations, which were approved by CMS, were to delete the old PM 9. This PM measured the number of counselor hours at the local level. PM 8 only will be used and will include counselor hours vs. counselor FTEs. The new PM 8 will be given a weight of 10% vs. the 5% that PM 8 and PM 9 each had respectively in FY 2010. The source of data for this PM will be the Client Contact Report vs. the Resource Report. Thus, in FY2011, there will be eight performance measures instead of nine, and new data elements from the new National Performance Reporting (NPR) forms will be applied as indicated in PMs 5,6,7, and 8. These are found in Attachment B.

In several of the questions below, SHIPs will be required to respond with information based upon their current level of performance related to the objectives and as measured by the performance measures data as reported by SHIPs and distributed in a data packet to each SHIP from CMS in December 2010.

Based on the results of your performance data, please indicate your plans for improving your scores for each performance measure and slice and your Overall Performance Score in grant year 2011.

- C. As a result of system enhancements to the National Performance Reporting (NPR) system database that were recently implemented, and CMS' system security requirements, the grantee must comply with all CMS security requirements regarding the NPR administrative accounts associated with their program. All administrative accounts must be reviewed every 14 days to ensure that no unauthorized accounts have been created and all inactive accounts are deleted from NPR. Every 180 days, the SHIP Director must review all NPR user accounts to identify and delete all accounts that are no longer needed. Every 365 days, the State Director must conduct an annual certification review of all active NPR user accounts to ensure that all accounts are valid and necessary. All reviews must be documented and maintained and be made available for inspection by CMS auditors or its agents. SHIPs will be trained on these procedures by CMS.
- D. Within this 2011 Basic Grant Announcement, CMS has highlighted several special areas of focus and targeted Medicare populations. These areas have been discussed in detail throughout Section II.B.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

Program Objectives. SHIPs are required to address these areas of focus and targeted Medicare populations in your responses to the questions in Section VIII.

- E. Appropriate responses to the following FY 2011 SHIP Basic Grant Renewal Application questions should be in a detailed narrative format highlighting proposed program activities to be addressed in the FY 2011 SHIP Grant Year.
- F. The completed responses to the FY 2011 SHIP Basic Grant Renewal Application questions must be uploaded as an attachment to your completed FY 2011 SHIP Basic Grant Renewal Application required documents.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

**Part I. The following questions are related to the requirements outlined in the FY 2011 SHIP Basic Grant Renewal Application narrative to pursue those objectives and will commit the State to fulfill those requirements as part of this grant application:**

1. Will the State use SHIP funds to support a counseling network and related outreach program that will assist Medicare beneficiaries to identify, understand, and enroll in programs and plans when eligible and appropriate, including the Medicare Prescription Drug Coverage, Medicare Prescription Drug Low Income Subsidy (LIS), Medicare Advantage plans, Medicare Supplemental Insurance policies, Medicare Savings Programs, Long-term care insurance and financing, and other public and private health insurance coverage options available to Medicare beneficiaries? *(Yes or No – note that an answer of Yes is required to be eligible to receive SHIP grant funds.)*
2. Relating to the counseling topics described in Question 1, will the State use SHIP funds to build or support a comprehensive and coordinated local network that is capable to provide a full range of needed information and is accessible to provide counseling and assistance to beneficiaries in local communities across the state? *(Yes or No – note that an answer of Yes is required to be eligible to receive SHIP grant funds.)*
3. Will the State focus the funding and related efforts on beneficiaries who are most in need of community-based, one-on-one counseling, considering the needs created by the diversity of Medicare beneficiaries in the State (example – beneficiaries who speak languages other than English, beneficiaries with literacy challenges, beneficiaries in intensely urban or frontier rural areas, etc)? *(Yes or No – note that an answer of Yes is required to be eligible to receive SHIP grant funds.)*
4. Will the State place significant emphasis on reaching beneficiaries with low incomes, focusing specifically on those beneficiaries who are likely to be eligible, but who have not yet applied for Medicare Prescription Drug Low Income Subsidy (LIS)? *(Yes or No – note that an answer of Yes is required to be eligible to receive SHIP grant funds.)*
5. Will the State make specific efforts to reach and assist Medicare beneficiaries who are disabled, specifically beneficiaries who are under 65 years old? *(Yes or No – note that an answer of Yes is required to be eligible to receive SHIP grant funds.)*
6. Will the State use SHIP funds for activities to build and expand partnerships to help Medicare beneficiaries learn about and access program benefits and services? *(Yes or No – note that an answer of Yes is required to be eligible to receive SHIP grant funds.)*
7. Will the SHIP program participate in CMS outreach events, including providing support for community-based events supported or organized by CMS Regional Offices? *(Yes or No – note that an answer of Yes is required to be eligible to receive SHIP grant funds.)*
8. Will the State maintain the capacity of SHIP to perform the following functions *(Yes or No – note that an answer of Yes is required to be eligible to receive SHIP grant funds.)*
  - a. Recruit and train counselors (paid and/or volunteer) in communities across the state?
  - b. Provide support, including day-to-day technical assistance to local organizations that serve as local SHIP counseling sites?

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

- c. Conduct quality assurance and improvement initiatives in support of locally-based counselors?
  - d. Fund systems to connect beneficiaries to local counseling assistance (state hotlines, web sites, and referral systems)?
  - e. Provide Internet access to local counselors?
9. Will the State submit SHIP National Performance Reporting data within the deadlines and in accordance to the format outlined in the FY 2011 SHIP Basic Grant Announcement? (*Yes or No – note that an answer of Yes is required to be eligible to receive SHIP grant funds.*)
10. Does the State have a current and accurate (with any updated information) Data Use Agreement on file at CMS relative to the State's access to the SHIP National Performance Reporting system? (Please answer Yes or No) If No, the State must submit a completed and original signed copy of a Data Use Agreement on or before the due date of this grant application in order for the application to be complete. Any changes in personnel including the SHIP Director or State Official require the submission of a new Data Use Agreement. Data Use Agreements must be filed with the current CMS representative, Mimi Parvis at CMS, Mail Stop S1-13-05, 7500 Security Boulevard, Baltimore, MD 21244.
11. Will the State implement National Performance Reporting (NPR) data system security procedures required by CMS that are designed to secure and to protect the confidentiality of data submitted into the SHIP NPR database? This includes regularly confirming the status of SHIP users who access the database, confirmation of users with Unique IDs, and any other procedures that may be required to maintain a secure system. (*Yes or No – note that an answer of Yes is required to be eligible to receive SHIP grant funds.*)

FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

Part II. FY 2011 SHIP Basic Grant Renewal Application Questions	SHIP Response
<p>1. What specific and significant changes will your State enact during the FY 2011 grant year to expand your outreach and counseling efforts, resulting in an improved performance score for performance measure 1?</p> <p><i>2011 PM1 - Number of total client contacts per 1,000 Medicare beneficiaries in the State.</i></p>	
<p>2. What specific and significant changes will your State enact during the FY 2011 grant year to expand your outreach and counseling efforts, resulting in an improved performance score for performance measure 2?</p> <p><i>2011 PM2 - Number of persons reached through presentations/booths/exhibits at health/senior fairs, enrollment events per 1,000 Medicare beneficiaries in the State.</i></p>	
<p>3. What specific and significant changes will your State enact during the FY 2011 grant year to expand your outreach and counseling efforts, resulting in an improved performance score for performance measure 3?</p> <p><i>2011 PM3- Number of substantial, personal, direct client contacts (telephone, in-person office, in-person home) per 1,000 Medicare beneficiaries in the State.</i></p>	
<p>4. What specific and significant changes will your State enact during the FY 2011 grant year to expand outreach and serve Medicare beneficiaries with disabilities as defined by CMS (including beneficiaries with a disability who are under 65 years old.), resulting in an improved performance score for performance measure 4?</p> <p><i>2011 PM4- Number of contacts with Medicare beneficiaries in the CMS defined Disabled program per 1,000 Medicare beneficiaries in the CMS defined Disabled program in the State.</i></p>	

FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

Part II. FY 2011 SHIP Basic Grant Renewal Application Questions (continued)	SHIP Response
<p>5. What specific and significant changes will your State enact during the FY 2011 grant year to expand outreach and serve Medicare beneficiaries with limited incomes, resulting in improved performance score for performance measure 5?</p> <p><i>2011 PM5 -Number of unduplicated low-income Medicare beneficiary contacts and/or contacts that discussed low-income subsidy (LIS) per 1,000 low-income Medicare beneficiaries in the State.</i></p>	
<p>6. What specific and significant changes will your State enact during the FY 2011 grant year to expand the number of beneficiaries provided enrollment assistance, resulting in an improved performance score for performance measure 6?</p> <p><i>2011 PM6 – Number of unduplicated enrollment contacts discussed per 1,000 Medicare beneficiaries in the State.</i></p>	
<p>7. What specific and significant changes will your State enact during the FY 2011 grant year to expand the number of beneficiaries provided enrollment assistance for Part D benefits, resulting in an improved performance score for performance measure 7?</p> <p><i>2011 PM7 - Number of unduplicated Part D enrollment contacts discussed per 1,000 Medicare beneficiaries in the State.</i></p>	
<p>8. What specific and significant expansion of your available volunteer and/or paid staff counselor resources will you pursue during the FY 2011 grant year that will result in an improved performance score for performance measure 8?</p> <p><i>2011 PM8 -Total counselor hours (from Client Contact Form) per 1,000 Medicare beneficiaries in the State.</i></p>	

FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

Part II. FY 2011 SHIP Basic Grant Renewal Application Questions	SHIP Response
<p>9. Are there any performance measures that the State anticipates that the SHIP will decline in performance during the FY 2011 grant year? (<i>Yes or No</i>) For any element of SHIP performance that the State anticipates that performance may decline during the FY 2011 grant year, please provide an explanation of the decline and the plan that the State will initiate to mitigate the expected decline in services.</p>	
<p>10. Does the SHIP currently have a website? If so, indicate whether the website and the posted electronic products are accurate, current and 508 compliant. If not, indicate whether a plan has been submitted to CMS clarifying the issues and when the website will be compliant?</p>	
<p>11. Please describe the training program that is currently in place for SHIP counselors including who conducts the training provided to counselors (ex. state or local), number of initial counselor training hours. Indicate if plans are in place to revise the training program in FY 2011. Please also describe the quality assurance tools that the SHIP will use (examples – mystery shopping, counselor certification, program effectiveness assessments).</p>	
<p>12. Please provide a description on any innovative or successful efforts that the SHIP has undertaken during the FY 2010 grant year or which it plans to undertake during the FY 2011 grant year that the program wishes to highlight as part of this grant application?</p>	
<p>13. Based upon your 2010 AEP experience, describe in detail your plans to prepare for the 2011 AEP and the new dates for the AEP (i.e., increase in staff, increase partners, telephone strategy, pre-planning, training, etc.)</p>	

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

### IX. SUBMISSION DATES AND TIMES

#### A. Basic Program Awards

Grant applications are due by **February 16, 2011**. Applications submitted through <https://www.grantsolutions.gov> until 11:59 p.m. Eastern Time on February 16, 2011, will be considered "on time."

CMS may not release FY 2011 continuation grant funds awarded in April 2011 and supplemental/performance funds awarded in September 2011, if the grant recipient is delinquent in submitting progress narratives and financial reports as required in the previously accepted and signed Terms and Conditions of the grant.

#### B. Performance Awards

SHIPs eligible to receive Performance Awards will receive notification from CMS of their eligibility and the amount of the Performance Award through a Notice of Award on or about **September 30, 2011**.

1. If the Performance Award is accepted, the SHIP must expressly state via a Letter of Interest to the Grants Officer and Project Officer listed in this Program Announcement, that it will use the funds to develop, enhance, or expand services to beneficiaries as set forth in the *Attestation of SHIP Minimum Requirements (Attachment D)*. The services provided with funds from this award must be over and above services provided with the Basic Program Award for this grant period and must be consistent with the FY 2011 Program Objectives.
2. A budget describing the planned use of the funds must be submitted along with the Letter of Interest referenced in Section IX.B.1.

### X. INTERGOVERNMENTAL REVIEW

This grant is not subject to Executive Order 12372 concerning "Intergovernmental Review of Federal Programs."

### XI. FUNDING RESTRICTIONS

Grant funds must be used to provide information, counseling, and assistance to persons with Medicare. A State that receives a grant under this program may use the award for any allowable expenses incurred in planning, developing, implementing, and/or operating the program for which the award is made.

## XII. OTHER SUBMISSION REQUIREMENTS

Beginning October 1, 2003, applicants were required to have a Dun and Bradstreet (DUNS) number to be awarded a grant or cooperative agreement from the Federal Government. The DUNS number is a nine-digit identification number, which uniquely identifies business entities. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access the following website: [www.dunandbradstreet.com](http://www.dunandbradstreet.com) or call 1-866-705-5711. This number should be entered in the block with the applicant's name and address on the cover page of the application (Item 8c on the Form SF-424, Application for Federal Assistance), with the annotation "DUNS" followed by the DUNS number that identifies the applicant. The name and address in the application should be exactly as given for the DUNS number.

## XIII. APPLICATION REVIEW INFORMATION

### A. Criteria

The Basic Program Award applications will be subject to a non-competitive review for completeness of information and documentation required in this Announcement. States must complete all grant application requirements described in Section IV, Application and Submission of Information, to receive a grant award.

### B. Reviews and Selection Process

The review will be in two parts. Upon receipt by CMS, all applications will be screened to assure that the application is complete and the State has met the basic eligibility requirements, including State assurances. States will be notified of any problems with the completeness of the application or the lack of assurances or basic eligibility requirements and will have the opportunity to correct the application by submitting the missing element(s) or revising the necessary section(s). These corrections must be received by CMS prior to the second stage of the review for the application to be considered viable.

A panel of experts from within the Government will conduct the second stage of the review. The panelists will review the different parts of the applications to determine if the proposed SHIP programs meet the requirements of the Program Announcement. The panel will be convened during February 2011. The Basic Program Award applications will be scored on a pass/fail basis; the applications will not be ranked according to numerical criteria.

### C. Anticipated Announcement and Award Dates

CMS Grant Review Schedule:

Initial Screening Review – February 2011  
Technical Panel Review – February 2011  
CMS Decisions – March 2011  
Issuance of Awards – April 2011  
Grant Implemented – April 1, 2011

#### XIV. AWARD ADMINISTRATION INFORMATION

##### A. Award Notices

Successful applicants will receive an official Notice of Award (NoA), signed by the CMS Grants Management Officer (GMO) that will set forth the amount of the award, Terms and Conditions, and other pertinent information for fulfillment of the grant specific to the individual award. The NoA is the legal document issued to notify the grantee that an award has been made and that funds may be requested from the Department of Health and Human Services (DHHS) designated payment system or office. This NoA will be sent through the U.S. Postal Services.

Please note, a recipient indicates acceptance of an award and its associated terms and conditions by drawing down or requesting funds from the designated DHHS payment system or office. Once the award is accepted by the recipient, the contents of the NoA are binding on the recipient unless and until modified by a revised NoA signed by the GMO.

##### B. Administrative and Policy Requirements

The State must also assure that:

- The SHIP Program will comply with the Terms and Conditions of the grant award;
- SHIP Program and staff (including volunteers) will have no conflict of interest;
- SHIP staffing resources (including volunteers) will be adequate to support program activities;
- SHIP staff (including volunteers) will receive appropriate training; and
- SHIP staff (including volunteers) will provide enrollment assistance to beneficiaries as appropriate.

These assurances are included in the *Attestation of SHIP Minimum Requirements* (Attachment D) in this Program Announcement. The *Attestation of SHIP Minimum Requirements* document should be signed and submitted as part of the electronic application submission through <https://www.GrantSolutions.gov>.

***Failure to include the signed Attestation of SHIP Minimum Requirements will preclude CMS from completing its review and making an award to the affected State.***

##### C. Reporting

As a condition of accepting funding under this Grant Program, States will be required to comply with the following reporting requirements:

1. Awardees will be required to submit:

- Quarterly non-aggregated contact-level and event-level data regularly in full compliance with National Performance Reporting (NPR) requirements developed by CMS. These data will capture relevant information on each beneficiary contact and outreach event conducted or participated in by the program.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

- An annual resource report that includes information about the State program, such as staffing, training activity, etc. The Resource Report will be submitted annually on May 31<sup>st</sup> covering the period April 1, 2011-March 31, 2012.
- An annual Financial Status Report, and
- A mid-term narrative progress report. The report shall include both a description of the progress made toward meeting each of the four objectives outlined in this Program Announcement and objectives related to the performance measures as described in each SHIP grant application. The mid-term progress report will cover the period from date of grant award through August 31, 2011. The report itself will be due to CMS on September 30, 2011.

Required dates for submitting these reports are also included in the General Terms and Conditions that will be attached to the Notice of Award.

2. CMS will continue to measure SHIPs' progress toward program objectives. States shall:

- Be in compliance with National Performance Reporting (NPR) standards, including submitting encounter-level data on client contacts and public events, and aggregate data in resource reports, submitting all data reports **on time** in accordance with the requirements of the Grant Terms and Conditions, and assuring that all data reporting fields are completed fully and accurately. In the FY 2011 grant year, data must be submitted on time for all quarters for the Client Contact data and the Public and Media Activity data and annually for the Resource Report data.
- Submit full registration of State and local programs on [www.SHIPtalk.org](http://www.SHIPtalk.org) to include the name of the organization, address, and contact information.
- Submit and maintain registration of State and local users of SHIPtalk and NPR via the [www.SHIPtalk.org](http://www.SHIPtalk.org) website.
- Implement National Performance Reporting (NPR) data system security procedures required by CMS that are designed to secure and to protect the confidentiality of data submitted into the SHIP NPR database. This includes regularly confirming the status of SHIP users who access the database, confirmation of users with Unique IDs, and any other procedures that may be required to maintain a secure system.
- Provide Internet access in all local counseling centers and train volunteers to use Internet-based counseling and enrollment tools.

### D. NPR System Enhancements and Data Submission Plans

Enhancements to the NPR system were made during the FY 2010 grant year. SHIPs that use the SHIPtalk web-based direct data entry system started using the revised forms August 1, 2010. States that enter data into SHIPtalk as a file upload from their state proprietary systems must start using the forms in their up-graded systems (based on CMS systems specifications issued in December 2009 and updated thereafter) no later than January 1, 2011.

## FY 2011 SHIP Basic Program Announcement and Grant Renewal Application

1. All states must be compliant with current reporting requirements. Data that is rejected because it does not meet the reporting and submission requirements will not count towards a state's performance award.
2. CMS will be accessible to train states on enhancements to the NPR system before and during the FY 2011 grant year.
3. CMS will not allow States to use SHIP federal funding for the development or enhancements to state or local proprietary systems.
4. CMS will continue to work with SHIPs to capture information about their collaborations and partnerships with the Aging Network and CMS local networks in order to better demonstrate the extent of SHIP activity in this important area.
5. Awardees must agree to make all records relevant to this program available to DHHS and the Comptroller General, and to cooperate fully with the Federal government and its agents concerning any potential evaluation of the SHIP grants program.
6. Awardees must provide additional information and data requested by CMS.
7. States may choose to submit additional information describing their SHIP program and activities with the required reports to CMS.

### **E. 508 Compliance - Accessibility of Electronic Information Technology**

All electronic documents and work products produced for CMS must comply with the federal government's Section 508 requirements (Section 508 of the Rehabilitation Act of 1973 (29 U.S.C. 794D) as amended by the workforce Act of 1998 (P.L. 105-220). 508 Compliance requirements are found at: <http://www.section508.gov>.

Specifically, Subsection 508(A)(1) requires that when the Federal Government procures electronic and information technology (EIT), the EIT must allow federal employees and individuals of the public with disabilities comparable access to and use of information and data that is provided to federal employees and individuals of the public without disabilities.

Each electronic and information technology (EIT) product or service furnished under this grant shall comply with the Electronic and Information Technology Accessibility Standards (36 CFR 1194), as specified above, If the Grants Management Specialist determines any furnished product is not in compliance with the grant, the Grants Management Specialist will promptly inform the Grantee in writing (includes e-mail), The Grantee shall repair or replace the noncompliant products or services within the time to be specified by the Government in writing.

Each SHIP shall confirm with CMS that its website and posted electronic products are accurate, current and 508 compliant, and if not submit plans to CMS clarifying the issues and when the website will be compliant.

**XV. AGENCY CONTACTS**

For additional information regarding the grant program or guidance in completing the application forms, please contact:

Programmatic:  
Gwendolyn Green  
SHIP Grants Project Officer  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, S1-13-05  
Baltimore, Maryland 21244  
(410) 786-7812; FAX: (410) 786-8530  
[Gwendolyn.Green@cms.hhs.gov](mailto:Gwendolyn.Green@cms.hhs.gov)

Administrative:  
Frederick Filberg  
Grants Management Specialist  
Centers for Medicare & Medicaid Services  
7500 Security Blvd., C2-18-24  
Baltimore, Maryland 21244  
(410) 786-4570; FAX: (410) 786-9088  
[Frederick.Filberg@cms.hhs.gov](mailto:Frederick.Filberg@cms.hhs.gov)

**XVI. OTHER INFORMATION**

**Definitions**

**State**

This grant solicitation uses the same definition of "State" as used for approval of State Medicare supplemental insurance regulatory programs under Section 1882 of the Social Security Act, as amended. Thus, "State" includes the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, and American Samoa and the Pacific Islands.

**ATTACHMENTS**

- Attachment A: Basic Grant Terms and Conditions
- Attachment B: SHIP Performance Measures
- Attachment C: Benchmarking Methodology
- Attachment D: Attestation of SHIP Minimum Requirements

**ATTACHMENT A**  
**FY 2011 SHIP Basic Grant Terms and Conditions**

The State Health Insurance Assistance Program (SHIP) Grant Terms and Conditions collectively form a body of requirements to be followed by the SHIP programs while operating under CMS SHIP grant funds. The State, through express acceptance of the grant award, agrees to abide by the SHIP Grant Terms and Conditions as written and assumes responsibility for breach of these Terms and Conditions by any employee, agent or contractor of the State, excluding civil or criminal liability. In addition, this grant is subject to 45 C.F.R. Part 92. The State, through express acceptance of the grant award, also agrees to abide by all requirements in the Basic Grant Announcement, and Renewal Application HHS-2011-CMS-CONT-SHIP.

**Grant Receipt and Acceptance**

**Upon receipt of the FY 2011 SHIP Basic Grant Notice of Award (NoA) released from CMS' Office of Acquisition and Grants Management (OAGM), the act of drawing down SHIP grant funds by the grantee is an indication of formal acceptance of the FY 2011 SHIP Basic Grant Terms and Conditions.**

Furthermore, the grantee shall:

1. By May 1, 2011, please return via email an electronic copy of the signed last page of the enclosed 2011 SHIP Terms and Conditions to the attention of:

Ms. Gwendolyn Green, SHIP Grants Project Officer  
Centers for Medicare & Medicaid Services  
Office of External Affairs and Beneficiary Services/SRCMG  
7500 Security Boulevard, S1-06-04  
Baltimore, Maryland 21244  
Email address: [Gwendolyn.Green@cms.hhs.gov](mailto:Gwendolyn.Green@cms.hhs.gov)

Mr. Frederick Filberg  
Grants Management Specialist  
Centers for Medicare & Medicaid Services  
7500 Security Blvd., C2-18-24  
Baltimore, Maryland 21244  
(410) 786-4570; FAX: (410) 786-9088  
Email address: [Frederick.Filberg@cms.hhs.gov](mailto:Frederick.Filberg@cms.hhs.gov)

2. CMS may not release FY 2011 continuation grant funds awarded in April 2011 and supplemental/performance funds awarded in September 2011 if the grant recipient is delinquent in submitting progress narratives and financial reports as required in the previously accepted and signed Terms and Conditions of the grant.

**Reporting Requirements**

The grantee shall:

3. Submit through the National Performance Reporting (NPR) System:
  - A. On a quarterly basis, data from the **Client Contact Form** of the SHIP NPR.

**ATTACHMENT A**  
**FY 2011 SHIP Basic Grant Terms and Conditions**

All quarterly reports shall be submitted by the end of the month following the close of the reporting period, as follows:

Quarterly Report	Reporting Period	Report Due Date
First	April 1, 2011 – June 30, 2011	July 31, 2011
Second	July 1, 2011 – September 30, 2011	October 31, 2011
Third	October 1, 2011 – December 31, 2011	January 31, 2012
Fourth	January 1, 2012 – March 31, 2012	April 30, 2012

- B. On an annual basis, the Resource Report Form of the NPR -- shall be submitted within 60 days of the close of the reporting period, as follows:

Annual Report	Reporting Period	Report Due Date
	April 1, 2011 - March 31, 2012	May 31, 2012

4. As set forth in these SHIP Grant Terms and Conditions, submit all required NPR data accurately, complete, and on time, and in the format specified by CMS. All reports shall be completed according to instructions distributed by CMS for grantees that directly enter data into [www.SHIPtalk.org](http://www.SHIPtalk.org) and for grantees with proprietary systems that submit data through a batch file upload. Contact-level encounter-data must be submitted for client contacts and event-level data for public and media activities. Only resource report data shall be submitted in an aggregate form. Technical consultation on report completion will be available through the CMS SHIP NPR Project Officer or designee. All requested information shall be submitted unless arrangements are made otherwise with the CMS SHIP Grants Project Officer or designee.
5. States using a proprietary system on or before April 1, 2009 (and all proprietary agencies operating within a State) must submit NPR data into a fully compliant data system reflecting new NPR system specifications and must be operating on or before January 1, 2011 with no unresolved preprocessor or upload errors as a condition of eligibility for the annual performance award.
6. Submit full registration of State and local programs on [www.SHIPtalk.org](http://www.SHIPtalk.org) to include the name of the organization, address, and contact information.
7. Submit and maintain registration of State and local users of SHIPtalk and NPR via the [www.SHIPtalk.org](http://www.SHIPtalk.org) website.
8. As a result of system enhancements to the National Performance Reporting (NPR) system database that were recently implemented, and CMS' system security requirements, the grantee must comply with all CMS security requirements regarding the NPR administrative accounts associated with their program. All administrative accounts must be reviewed every 14 days to ensure that no unauthorized accounts have been created and all inactive accounts are deleted from NPR. Every 180 days, the SHIP Director must review all NPR user accounts to identify and delete all accounts that are no longer needed. Every 365 days, the State Director must conduct an annual certification review of all active NPR user accounts to ensure that all accounts are valid and necessary. All reviews must be documented and maintained and be made available for inspection by CMS auditors or its agents. SHIPs will be trained on these procedures by CMS.

Implement National Performance Reporting (NPR) data system security procedures required by CMS that are designed to secure and to protect the confidentiality of data submitted into the SHIP NPR database. This

**ATTACHMENT A**  
**FY 2011 SHIP Basic Grant Terms and Conditions**

includes regularly confirming the status of SHIP users who access the database, confirmation of users with Unique IDs, and any other procedures that may be required to maintain a secure system.

9. An annual Financial Status Report, (due no later than June 30, 2011), reflecting FY 2010 expenditures and any unobligated funds from the previous budget year must be submitted directly to the Office of Acquisitions and Grants Management before a carryover request can be considered by CMS staff. The request should be signed by the Project/Program Director, the Business/Finance Office of the organization.

The written carryover request must also include:

- A. Project narrative detailing plans for use of carryover.
  - B. Completed 424A indicating the total amount of funds requested for carryover. *Include line-item budget and budget narrative (in text format) of requested direct and indirect costs. If other than a one-time cost, please explain future year implications.*
  - C. If unobligated balance is significant (25% of the FY 2010 budget period's total costs), please provide an explanation as to why available funds were not used.
10. SHIP assumes responsibility for the accuracy and completeness of the information and data contained in all technical documents, and reports submitted by its grantees, partners, and agents on behalf of the SHIP.
  11. Cooperate with the SHIP Resource Center in cataloguing SHIP publications and training materials.
  12. At any phase of the grant period, deliver to CMS upon request, any materials, systems, or other items developed, refined, or enhanced under the grant award. The grantee agrees that CMS shall have royalty-free, nonexclusive, and irrevocable rights to reproduce, publish, or otherwise use and authorize others to use the items for Federal Government purposes.
  13. Include references within the FY 2011 budget and budget narrative submission indicating how at least 5% of Federal SHIP Basic funding will be used to provide one-on-one pharmaceutical benefits counseling to dual eligible beneficiaries with mental illness. CMS encourages SHIPs to partner with community mental health centers and other providers to assist the centers in providing Medicare and Medicaid counseling for their clients.
  14. Submit a mid-term narrative progress report to CMS. The report shall include: a description of the progress made toward meeting each of the objectives outlined in the 2011 SHIP grant application and objectives related to the performance measures as described in the SHIP grant application. As part of the 2011 mid-term narrative progress report, SHIPs must also describe their specific plans and any progress on efforts to enhance one-on-one pharmaceutical benefits counseling to dual eligible beneficiaries with mental illness and other activities targeted to the Low-Income Subsidy (LIS) population. The questions for the mid-term report will be forwarded to SHIPs from the SHIP mailbox. The mid-term narrative progress report will cover the period from date of grant award through August 31, 2011. The mid-term narrative progress report is due to CMS on September 30, 2011.
  15. All electronic documents and work products produced for CMS must comply with the federal government's Section 508 requirements (Section 508 of the Rehabilitation Act of 1973 (29 U.S.C. 794D) as amended by the workforce Act of 1998 (P.L. 105-220). 508 Compliance requirements are found at: <http://www.section508.gov>.

In order to ensure that information is accessible to individuals with disabilities, all SHIPs are responsible to ensure that each electronic and information technology (EIT) product or service furnished under this grant shall comply with the Electronic and Information Technology Accessibility Standards (36 CFR 1194) and is 508 compliant. If the CMS determines any furnished product is not in compliance with the grant, CMS will promptly

**ATTACHMENT A**  
**FY 2011 SHIP Basic Grant Terms and Conditions**

inform the Grantee in writing (includes emails). The Grantee shall repair or replace the non-compliant products or services within the time to be specified by the Government.

All products submitted to the SHIP Resource Center for posting should be made 508 compliant by the SHIP.

**Performance Requirements**

The grantee is required to:

16. Fulfill the purpose of the SHIP grant to strengthen the capability of states to provide information, counseling, and assistance that will help Medicare beneficiaries in their understanding and access to program benefits, including Medicare preventive services as well as improve the value of their health care coverage. Through counseling, education, and outreach, SHIPs should continue to help beneficiaries identify, understand, and enroll in programs and plans, when eligible and appropriate, including providing enrollment assistance in prescription drug coverage, as well as Medicare Advantage plans, Medicare supplemental insurance policies, Medicare Savings Programs, long-term care insurance and financing, and other public and private health insurance coverage options available to Medicare beneficiaries.
17. Provide counseling to individual beneficiaries unable to access other channels of information or needing and preferring locally based individual counseling services.
18. Perform targeted outreach to counsel low-income, dual-eligible, and hard-to-reach populations.
19. Manage and oversee local operations to promote the delivery of high quality SHIP services to meet the needs of the State's Medicare population.
20. Participate in CMS education and communication activities, thus enhancing communication between CMS and SHIPs. The grantee is expected to participate with the CMS Regional Office on outreach, education, and partnering efforts.
21. Attend the Annual SHIP Directors' Conference and up to two other events (e.g., New SHIP Director's Training, Volunteer trainings and conference) designated by CMS as critical to SHIP training and informational needs. A portion of the grant award shall be designated for travel expenses to these events. Attendee may be the Program Director and/or a designee.
22. Ensure that a newly-appointed Program Director attends the CMS-sponsored New SHIP Director Training. A portion of the grant award may be designated for travel expenses to this event.
23. Maintain capabilities to send and receive e-mail communications and other information through the Internet, including expanding/maintaining Internet capability at the local levels of the State SHIP program, where applicable. Counselors should have access to Internet-based enrollment and other counseling tools at the time and place of counseling.
24. Participate in all CMS teleconferences, provided that the CMS SHIP Grants Project Officer or designee provides reasonable notice of the subject, date, and time of the teleconference.
25. Maintain a customer-oriented and user-friendly toll-free telephone number for use by Medicare eligible individuals for SHIP-related inquiries. In states where a toll-free telephone number is not practical, an exemption may be sought from the CMS SHIP Grants Project Officer.

**ATTACHMENT A**  
**FY 2011 SHIP Basic Grant Terms and Conditions**

26. Assure full accessibility of SHIP services to all categories of Medicare eligible individuals, including the aged, disabled, and end stage renal disease patients. SHIP services are to be provided without discrimination on the basis of race, color, national origin, disability, age, sex, or income. Reasonable efforts must be made to accommodate eligible individuals with existing barriers that limit their access to information, e.g., language, visual, hearing or speech impairments, physical accessibility, literacy, and location.
27. Include the express acknowledgement on all SHIP developed public information materials, "this publication has been created or produced by [the State] with financial assistance, in whole or in part, through a grant from the Centers for Medicare & Medicaid Services, the Federal Medicare agency," on all new publications funded solely or in part by the SHIP grant. (HHS Policy Statement: <http://www.hhs.gov/grantsnet/adminis/gpd/index.htm>). The grantee is also expected to use the SHIP Logo and Tagline on all SHIP publications.
28. Monitor contractor activities and contractor use of SHIP grant funds (in states where independent contractors are utilized to perform specific grant functions). The grantee shall include with its budget the purpose of the contract, the amount of the contract, and to whom it was awarded.

**Notification Requirements**

The grantee is required to notify the CMS SHIP Grants Project Officer, CMS Grants Management Specialist, the SHIP Resource Center, and the appropriate CMS Regional Office:

29. Changes in program name, key personnel (State Official or SHIP Program Director), addresses, and telephone numbers immediately upon learning of the change, but not later than 30 days after a change in contact information occurs. These changes include e-mail addresses, website URLs, State toll-free numbers, and any other significant administrative changes, and must be posted on the SHIP Website, [www.shiptalk.org](http://www.shiptalk.org).
30. In accordance with the HHS Policy Statement, the grantee is required to notify the CMS Grants Management Officer in writing if the SHIP Program Director specifically named in the Notice of Award (NoA) will withdraw from the project entirely, or be absent from the project during any continuous period of 3 months or more.

CMS must render **prior** approval of any alternate arrangement proposed by the grantee, including any replacement of the Program Director or key personnel named in the NoA.  
[http://www.hhs.gov/grantsnet/docs/HHSGPS\\_107.doc](http://www.hhs.gov/grantsnet/docs/HHSGPS_107.doc).

Prior to making an offer of employment to a candidate for the position of SHIP Program Director, the grantee is to provide CMS with the candidate's resume or curricula vitae for review and be approved by the CMS SHIP Grants Project Officer.

**Administrative Terms and Conditions**

31. All records pertaining to the SHIP grant including NPR data shall be retained for a period of 3 years, after notification of award closeout, as set forth and described in 45 C.F.R. §92.42. Copies or other facsimiles of program records, such as electronic media, are acceptable substitutions for original documents.
32. The CMS SHIP Grants Project Officer does not have the authority to issue any technical direction that constitutes an assignment of additional work outside the general scope of the grant, or in any manner causes an increase or decrease in the total estimated cost of maintaining the State SHIP program.
33. In accordance with procedures contained in 45 C.F.R. §92.43, CMS may suspend or terminate the grant in whole or in part at any time before the date of expiration, whenever it determines that the grantee has materially failed to comply with the terms of the grant. CMS will promptly notify the grantee in writing of the determination

**ATTACHMENT A**  
**FY 2011 SHIP Basic Grant Terms and Conditions**

and the reasons for the suspension or termination, the effective date of such action, and the opportunity for appeal.

34. CMS reserves the right to impose specially modified SHIP Grant Terms and Conditions on states determined to have materially failed to comply with the SHIP Grant Terms and Conditions. CMS will notify the grantee in writing when any such changes are made.

**ATTACHMENT A**  
**FY 2011 SHIP Basic Grant Terms and Conditions**

I, \_\_\_\_\_, represent that I am authorized to  
[Name of Authorized Grantee Official]

accept CMS Grant No. \_\_\_\_\_ on behalf of \_\_\_\_\_.  
[Name of State]

\_\_\_\_\_ accepts Grant No. \_\_\_\_\_  
[Name of Grantee]

and agrees to comply with the foregoing SHIP Grant Terms and Conditions and with all applicable laws, regulations, and policies of the United States, the United States Department of Health and Human Services, and the Centers for Medicare & Medicaid Services.

Dated: \_\_\_\_\_

\_\_\_\_\_ [Signature of Authorized Grantee Official]

**ATTACHMENT B**  
**FY 2011 SHIP Performance Measures**  
*(Effective October, 2010)*

7. **PM1** Number of total client contacts (in-person office, in-person home, telephone [all durations], and contacts by e-mail, postal, or fax) per 1,000 Medicare beneficiaries in the State. (20% weight)
8. **PM2** Number of persons reached through presentations, plus reached through booths/exhibits at health/senior fairs, plus enrolled at enrollment events per 1,000 Medicare beneficiaries in the State. (10% weight)
9. **PM3** Number of substantial, personal, direct client contacts (telephone calls of duration 10 minutes or more, in-person office, in-person home) per 1,000 Medicare beneficiaries in the State. (15% weight)
- PM4** Number of contacts with Medicare beneficiaries coded as in the CMS-defined Disabled program (under age 65 rule enforced during data entry) per 1,000 Medicare beneficiaries in the CMS-defined Disabled program. (10% weight)
- PM5** Number of unduplicated low-income [below 150% FPL] (regardless of Asset coding) Medicare beneficiary contacts and/or contacts that discussed low-income subsidy (LIS) per 1,000 low-income Medicare beneficiaries in the State. (15% weight)

Qualifying LIS Topics: Any of the following 3 LIS topics discussed (unduplicated) - Part D Low Income Subsidy (LIS/Extra Help): Topic 11 LIS Eligibility/Screening, Topic 12 LIS Benefit Explanation, Topic 13 LIS Application Assistance

- PM6** Number of unduplicated enrollment contacts (contacts with one or more qualifying enrollment topics) discussed per 1,000 Medicare beneficiaries in the State. (10% weight)

Qualifying Enrollment Topics: Any of the following 20 Enrollment Topics (unduplicated): Topic 1 - Medicare Prescription Drug Coverage (Part D) Eligibility/Screening, Topic 2 - Medicare Prescription Drug Coverage (Part D) Benefit Explanation, Topic 3 - Medicare Prescription Drug Coverage (Part D) Plans Comparison, Topic 4 - Medicare Prescription Drug Coverage (Part D) Plan Enrollment/Disenrollment, Topic 10 - Medicare Prescription Drug Coverage (Part D) Plan Non-Renewal, Topic 21 - MEDICARE (Parts A & B) Eligibility, Topic 22 - MEDICARE (Parts A & B) Benefit Explanation, Topic 27 - MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost) Eligibility/Screening, Topic 28 - MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost) Benefit Explanation, Topic 29 - MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost) Plans Comparison, Topic 30 - MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost) Plan Enrollment/Disenrollment, Topic 36 - MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost) Plan Non-Renewal, Topic 46 MEDICAID Medicare Savings Programs (MSP) Screening (QMB, SLMB, QI), Topic 47 MEDICAID MSP Application Assistance, Topic 48 MEDICAID (SSI, Nursing Home, MEPS, Elderly Waiver) Screening, Topic 49 MEDICAID Application Assistance, Topic 37 MEDICARE SUPPLEMENT/SELECT Eligibility/Screening, Topic 38

MEDICARE SUPPLEMENT/SELECT Benefit Explanation, Topic 39 MEDICARE SUPPLEMENT/SELECT Plans Comparison, Topic 45 MEDICARE SUPPLEMENT/SELECT Plan Non-Renewal

**PM7** Number of unduplicated Part D enrollment contacts (contacts with one or more qualifying Part D enrollment topics) discussed per 1,000 Medicare beneficiaries in the State. (10% weight)

Qualifying Part D Enrollment topics: Any of the following 5 Part D Enrollment Topics (unduplicated): Topic 1 - Medicare Prescription Drug Coverage (Part D) Eligibility/Screening, Topic 2 - Medicare Prescription Drug Coverage (Part D) Benefit Explanation, Topic 3 - Medicare Prescription Drug Coverage (Part D) Plans Comparison, Topic 4 - Medicare Prescription Drug Coverage (Part D) Plan Enrollment/Disenrollment, Topic 10 - Medicare Prescription Drug Coverage (Part D) Plan Non-Renewal.

**PM8** Total counselor hours (from client contact form) per 1,000 Medicare beneficiaries in the State. (10% weight)

## ATTACHMENT C SHIP Benchmarking Methodology

The new benchmarking methodology became effective April 1, 2010. The new benchmarking methodology improves the methods of comparing “like-to-like” geographic areas, particularly at the sub-state level. The methodology:

- Measures Attainment —Assesses whether a state is improving its performance in relation to various expected “performance attainment ranges”;
- Measures Improvement – Gives the States credit for each State’s improvement over its own past performance;
- Rewards States – that either attains high levels of performance and/or rewards States that improve their own performance over time.
- Derives benchmarks and minimal performance expectations for the current year from the system’s own demonstrated performance in the previous year.
- Automatically updates benchmarks and thresholds each year, driving continued improvement;
- Provides performance results and performance credit at the sub-state level so that States can better target improvement efforts and identify exemplary performance; and,
- Is an improved management tool for SHIPs and for CMS.

### Benchmarking Methodology

- The benchmarking methodology is based on sub-state comparisons of similar county groupings across states and is based on improvements within a given state’s sub-state county groupings over time.
- All of the counties (and county-equivalents) within each state will be grouped into any of six county groups (“slices”) based on population size, population density, metropolitan status, and typical commuting patterns of residents. The six county slices are termed: Large Central Metro County Group, Large Fringe Metro County Group, Medium Metro County Group, Small Metro County Group, Micropolitan County Group, and Outside Metro-Micro County Group. Each State has received their particular grouping of counties into the six slices.
- Once all of the US counties are grouped into slices, then the performance in California “Large Fringe Metro” counties for example will be compared to the performance in North Carolina’s “Large Fringe Metro” counties and to Ohio’s “Large Fringe Metro” counties, and so on, comparing similar groupings of Large Fringe Metro counties across all states that have such a slice. The same within slice comparisons will be made for the other five slices as well.
- Each state will have two opportunities to score performance points within each slice on each performance measure: 1) each state can get “points” for performance better than the average in, for example, the Medium Metro slice as compared to the Medium Metro performance among all other states with such a county grouping, and 2) each state can get “points” for improving its own Medium Metro performance over time. Further, each State will automatically get the better of these two scores per county grouping slice per measure.

## ATTACHMENT C

### SHIP Benchmarking Methodology

- The performance of each group of counties in each state will be compared to the performance of similar county groups in other states (“attainment score”) (0-10 scale) and compared to the state’s own performance in each county group the prior year (“improvement score”) (0-10 scale).
- Each year, CMS will establish two performance thresholds per slice for each performance measure. The performance thresholds each year will be based on the documented achieved performance of the states and county groupings the prior year. Thus, for each county grouping in each state on each performance measure:
  - The mid-point performance of all states the prior year (the performance level at which half the states performed better and half the state performed worse) will be used to set the “Minimal Attainment Threshold” [MAT] for next year; and
  - The average performance of the top-performing states the prior year will be used to set the “Exemplary Benchmark” [EB] for the next year.

#### **Application of Methodology—**

For the current grant period, the prior performance of the states and county groupings in the period from July 01, 2009 through June 30, 2010 will be used to set the target MATs and EBs for each slice and measure to evaluate performance in the following 12-month period (from July 1, 2010 through June 30, 2011) so that the most recent performance can be used to evaluate eligibility and award amount for the performance awards to be distributed in September 2011.

During the actual evaluation process, CMS will assess the data submitted for each state, each county grouping, and each performance measure for the period July 1, 2010 through June 30, 2011 against the MATs and EBs established from the previous years’ performance.

For each state and slice and performance measure, CMS will establish an attainment range (Minimal Attainment Threshold to the Exemplary Benchmark). The current year performance of each state-slice will be assessed within this range, and each state slice will receive 0-10 attainment points, depending upon degree of attainment within this range. To receive points on the Attainment Score, the state-slice current year performance must be at least above the MAT.

Similarly, for each state and slice and performance measure, we will establish an improvement range (each state’s performance value from Prior Year up to the Exemplary Benchmark). The current year performance of each state-slice will be assessed within this range and each state slice will receive 0-10 improvement points, depending upon degree of performance within this range. To receive points on the Improvement Score, the state-slice current year must be at least better than the prior year.

Then for each state-slice on each measure, the state will automatically be awarded the better of the attainment score or improvement score as a “final score” for the measure-slice.

Finally, for each measure, after determining the final score for each slice, CMS will weigh the slice scores by the proportion of the state’s Medicare beneficiaries that reside in each slice to derive a Final Score for the measure for the State.

## ATTACHMENT C SHIP Benchmarking Methodology

This process is repeated for each of the 8 performance measures. At the last stage, a weighted Overall Performance Score (OPS) is calculated which provides an overall assessment of a state's performance across all 8 measures.

The weighted OPS is calculated using the weights described in the body of this document (20% for PM1, 10% for PM2, etc.). The final score for each performance measure is weighted by its corresponding weight and the weighted scores are summed across the 8 performance measures and divided by the total weighted maximum number of possible points to yield the final weights OPS (0%-100%).

**ATTACHMENT D**  
**Attestation of SHIP Minimum Requirements**

The State Health Insurance Assistance Program (SHIP) grant is intended to strengthen the capability of States to provide all Medicare eligible individuals information, counseling, and assistance on health insurance matters. The grant from the Centers for Medicare & Medicaid Services (CMS) helps ensure that States have a network of staff and volunteers to provide accurate and objective health insurance information and assistance in making informed health coverage decisions and understanding related rights and protections. Although States have adopted a variety of methods to provide such services to individuals, Section 4360 of the Omnibus Budget Reconciliation Act of 1990 requires that each State program must encompass all of the following activities:

1. Counseling and assistance to eligible individuals in need of health insurance information including:
  - a. Information that may assist individuals in obtaining benefits and filing claims under Titles XVIII and XIX of the Social Security Act.
  - b. Policy comparison information for Medicare supplemental policies (as described in section 1882(g)(1) of the Social Security Act, as amended) and information that may assist eligible individuals with filing claims under such Medicare supplemental policies.
  - c. Information regarding long-term care insurance.
  - d. Information regarding Medicaid programs, including Medicare Savings Programs.
  - e. Information regarding other types of health insurance benefits that may be provided to eligible individuals in the State.
  - f. Information regarding all Medicare health insurance coverage options.
2. Outreach programs, other than one-on-one counseling, to provide health insurance information, counseling, and assistance to eligible individuals.
3. Systems of referral to appropriate Federal or State departments or agencies that provide assistance with problems related to health insurance coverage (including legal problems).
4. Establishing a sufficient number of staff positions (including volunteers) necessary to provide the services of a health insurance information, counseling, and assistance program.

**Attachment D**  
**Attestation of SHIP Minimum Requirements**

5. Assuring that SHIP staff members (including volunteers) have no conflict of interest in providing health insurance information, counseling and assistance, and abiding by the *SHIP Security Plan Guidelines* for safeguarding confidential beneficiary information.
6. Collecting and disseminating timely and accurate health insurance information to staff members (including volunteers).
7. Training programs for staff members (including volunteers).
8. Coordinating the exchange of health insurance information between the staff of departments and agencies of the State government, other pertinent federal agencies including CMS, and SHIP staff (including volunteers).
9. Making recommendations concerning consumer issues and complaints related to the provision of health care to agencies and departments of the State and Federal government responsible for providing or regulating health insurance.

As the duly authorized representative of the applicant, I certify that the applicant will fulfill the minimum requirements as stated above.

\_\_\_\_\_  
Signature of Authorized Certifying Official

\_\_\_\_\_  
Title

\_\_\_\_\_  
Applicant Organization

\_\_\_\_\_  
Date