

**Instructional Guide and FAQ for
BDDS Home-and Community-Based Services Day Services, Residential and Group Home Providers
Relief Grant Program (rev. 03/24/21)**

General Information

- **Background:** The **BDDS HCBS Day Services, Residential and Group Home Relief Grant Program** has been made available by Indiana FSSA's Bureau of Developmental Disabilities Services to support HCBS waiver and Group Home providers in addressing increased COVID-19 related expenses related to the delivery of the following services:
 - Adult Day Service (All Levels and Units)
 - Day Habilitation (Individual and All Group Sizes)
 - Pre-Vocational Services (All Group Sizes)
 - Residential Habilitation and Support Hourly
 - Residential Habilitation and Support Daily
 - Respite
 - Participant Assistance and Care
 - Structured Family Caregiving
 - Transportation
 - Wellness Coordination
 - Workplace Assistance
 - Intermediate Care Facilities for Individuals with Intellectual Disabilities

- **Purpose:** Grants are awarded to eligible providers for the purpose of providing economic support to reimburse for certain expenses related the COVID-19 public health emergency and incurred on a quarterly basis beginning April 1, 2021, until the deadline by which state governments must make expenditures with CARES Act Coronavirus Relief Fund Awards or all available funds are utilized.

- **Eligibility:** HCBS waiver and Group Home providers who provide the services listed above under the Family Support and Community Habilitation and Integration waivers or the group home program.

- **Application Process:** Applicants must apply via the Bureau's online grant application. Application instructions are included below. The application can be accessed through the following link:
<https://forms.office.com/Pages/ResponsePage.aspx?id=ur-ZIQmkE0-wxBi0WTPYje0OYLmwhVJPIxmS0qxDKj9UOFdRQTZaRVNWQjdHQINTRTE1Wjc4OTQ5Ui4u>

- **Application Period:** Interested providers will have an opportunity to apply for grants for expenses incurred in the first quarter of 2021 beginning on April 1, 2021. BDDS will submit approved grants for payment on a rolling basis as grants are received and reviewed. It is anticipated that payments should be received no more than 30 days after the date of application.

- **Grant Length:** Each grant will cover a three-month period beginning January 1, 2021, or later until the end of the crisis or all available funds are utilized.

- **Grant Status / Decision Communications:** All communications pertaining grant applications will be made via email between BDDS and applying providers with the subject line ***BDDS Provider Relief***

Grant Communication. This includes confirmations, application decisions and questions from BDDS. **Please be on the lookout for these communications.**

- **Grant Payments:** The grant amount will be based on the total amount of allowable COVID-19 related expenses claimed by the provider for the grant period claimed by the provider through the grant application.

The total amount of the grant will be capped at 4.2% of average quarterly Medicaid claims processed for the period from March 1, 2019, through December 31, 2019.

Grant payments will be issued through the Medicaid claims processing system.

- **Multiple Locations:** If you are a provider with multiple locations, your application must reflect information relative to all locations.
- **Recent Change in Ownership:** If you are a provider that took over ownership of another approved provider after March 1, 2019, the 4.2% cap computation for purposes of determining your maximum grant amount will include historical paid claims from the acquired organization. However, the provider applying for the grant program should only claim your own expenses for the detailed expense support questions below.
- **Documentation for Audit:** Providers will be expected to maintain documentation of amounts claimed on the grant application as well as expense in these categories. Because these grant funds are federal Coronavirus Relief Funds, additional reporting requirements may be issued in the future and any grant funds received will be considered subject to Federal Single Audit requirements.
- **What to Expect After Application is Submitted:** After completing and submitting the application, providers will receive an e-mail confirming receipt within two business days. If you are missing information or if there are questions on your application, you will be notified by BDDS with a request for additional information.
- **What to Expect After Approval:** When your application is approved, you will receive a second email notification that includes details for the expected grant payment. This email will include a confirmation that your application was approved along with the grant amount to expect. Approved grants amounts will be submitted for payment on a rolling basis.

Application Overview:

The application includes a series of questions to gather key information used to

- Confirm your eligibility for a grant payment
- Determine your grant amount for the grant period, and
- Confirm your agreement to a set of stipulations and attestations

The following information describes the questions included in the application. We encourage providers to use this guide to gather the information needed prior to beginning the application. The application includes skip logic so that you only answer questions relevant to your organization.

IMPORTANT – once you begin the application, there is no way to save it and return to your work. We encourage providers to use this instructional guide to assist in gathering the information needed prior to beginning the application. Assuming you have completed this step, the application should take no more than 15 minutes to complete.

- **Section One – Provider Information**
 - Your provider name (including DBA, if applicable),
 - Waiver and/or group home provider number(s), including provider numbers for operations acquired after March 1, 2019
 - Provider Number to use when issuing grant payment
 - Address for primary office location, and
 - Phone number for primary office location
- **Section Two – Provider Contact Information**
 - Provider Executive Director/CEO Contact Information
 - name,
 - email address, and
 - phone number
 - If the application is being completed by someone other than the Provider Executive Director/CEO, the name and email for the individual completing the application.
- **Section Three – Information on Other Federal Aid Received**
 - Note: this information is being gathered for informational purposes only and will not be utilized in determining the grant amount.
 - Provide the amount, if any, your organization received during the grant period from:
 - The [Federal Emergency Management Agency in relation to the COVID-19 Public Health Emergency](#)
 - The [CARES Act Provider Relief Fund](#) administered by the U.S. Department of Health and Human Services
 - The [COVID-19 Claims Reimbursement to Health Care Providers and Facilities for Testing, Treatment and Vaccine Administration for the Uninsured](#) administered by the U.S. Department of Health and Human Services; and/or
 - The [Small Business Administration and Department of Treasury's Paycheck Protection Program \(PPP\)](#)
- **General Note Regarding Sections Four through 12:**
 - Allowable expenses as described below may only be claimed if they have not been reimbursed by another source including but not limited to the Federal Emergency Management Agency, the CARES Act Provider Relief Fund, the COVID-19 Claims Reimbursement to Health Care Providers and Facilities for Testing, Treatment, and Vaccine

Administration for the Uninsured, and the Small Business Administration and Department of Treasury's Paycheck Protection Program that offset the healthcare related expenses. In addition, you may not claim as allowable expenses items or services that have been donated to your organization.

- You may claim an expense that has been reported to these other programs listed above but that has not been reimbursed. For example, if your application for PPP Loan Forgiveness includes \$50,000 of overtime as a part of a total of \$750,000 in wages but the amount of the loan forgiven is only \$600,000, you may claim the \$50,000 of overtime for this grant.
- If during a grant period you identify an allowable expense for the period beginning January 1, 2021, or after that has not been previously claimed on a prior grant application, you may claim it on the current grant application. For example, if you complete the application for the First Quarter of 2021 period but Second Quarter you receive an invoice related to the First Quarter period for PPE, you may claim this expense on the Second Quarter grant application.

- **Section Four – Compensation Related Expenses**

- Note: Allowable compensation only includes services provided to deliver a waiver service covered by this grant or group home setting. Appropriate documentation is payroll registers supporting amounts claimed. If an employee works only part time providing a covered service, documentation should be maintained for hours worked in those settings. Compensation earned for work in services not covered by this grant is not allowable.
- Provide the expense amount incurred for the following compensation related expenses:
 - Total Overtime Premium (50%) paid during the grant period for the covered waiver and group home services.
 - The overtime premium portion is typically a 50% premium to the regular pay rate. For example, if a DSP has a base wage rate of \$10 per hour and they are entitled to \$15 per hour for every hour worked over 40 hours, the overtime premium is the \$5 per hour difference between their overtime hourly rate and the regular hourly rate.
 - If your payroll register includes the entire \$15 in the overtime pay category, you would divide the total of overtime pay by 3, to arrive at the allowable overtime premium for the grant.
 - Total Incremental Shift Differential earned during the grant period
 - Defined as new shift differential program implemented on or after January 1, 2020 to provide adequate DSP coverage to provide covered waivers services and in group home settings.
 - Hazard Pay earned during the grant period
 - Defined as additional payments to employees for working in the defined waiver settings and group homes related to COVID-19.
 - Note: Across the board bonuses or wage increases are not considered allowable.
 - Other additional compensation not included in the above for covered services rendered during the grant period and was newly incurred after the declaration of the Public Health Emergency and the expenses were necessary to secure and maintain adequate personnel (e.g. offering hiring bonuses or provider incentive payments for staff quarantining with individuals in a residential setting)
 - You will be asked to include a description of the other additional compensation, if you are claiming expenses in this category

- Increased/additional Nursing Compensation cost incurred during the grant period due to COVID-19 including conducting additional training of staff, increased oversight needs, responding to family concerns, etc.
 - Increased non-billable training to address infection control, proper use of PPE, and other COVID-19 related issues paid during the grant period.
 - Unreimbursed family leave or sick pay paid during the period to employees who have to quarantine due to COVID-19 as a result of a positive test for COVID-19 including positive tests of family or other members of their household that require the employee to quarantine, net of any payroll tax or other credits received.
 - Additional payments to employees who receive COVID 19 vaccines including paid time away from work to receive the vaccine or as a result of receiving the vaccine and any additional payments to encourage employees to receive the vaccine.
 - As a reminder, any expenses claimed as part of this section should only be net unreimbursed amounts and exclude expenses covered by other sources of relief reported in Section Three and/or through donated items, services, or financial resources.
 - NOTE: Allowable Payroll Taxes are 7.65% of the Allowable compensation computed for the period. This amount will be computed by DDRS as a part of the grant review process.
- **Section Five and Six – Unemployment Claims for Non-Profit Entities**
 - You will be asked whether you are a non-profit organization as recognized by the Internal Revenue Service. If so, you will also be asked if you are considered a reimbursable employer by the Indiana Department of Workforce Development.
 - If a not-for-profit is considered a “reimbursable employer” by the Indiana Department Workforce Development, they may be allowable to claim additional unemployment claims expense.
 - “Reimbursable employer” means the employer reimburses the unemployment insurance Trust Fund for benefit payments to their former employees instead of making regular quarterly contributions (referred to as payment in lieu of contribution).
 - Reimbursable employers are charged for all UI benefits, including extended benefits not reimbursed by a federal program, benefits expended in error, and benefits under appeal.
 - Reimbursable employers do not receive credit for benefit overpayments made by DWD for any reason until and unless DWD is successful in securing repayment from the claimant.
 - To claim expenses in this section, you will be required to report unemployment claims expense each month of the grant period as described below for the grant period.
 - Under the CARES Act, the federal government is paying 50% of the unemployment claims incurred by providers beginning March 13, 2020.
 - Unemployment claims due and payable by providers for the period beginning January 1, 2021, are allowable expenses for the grant, net of the federal credit.
- **Sections Seven and Eight - Increased Employee Benefits and Workers Compensation**
 - You will be asked if your organization has increased employee benefits or incurred increased Workers Compensation expense because of the COVID-19 public health emergency to ensure adequate staff availability, they may report the increased expense associated with these programs.

- Employee benefits may include expenses incurred by providers to secure and maintain adequate personnel, such as, childcare, transportation, temporary co-payment assistance, and temporary housing, if the activity generating the expense was newly incurred after the declaration of the Public Health Emergency and the expenses were necessary to secure and maintain adequate personnel
 - Increased premiums for workers compensation paid directly attributable to the COVID-19 public health emergency.
 - To claim expenses in this section, you will be required to:
 - report expenses for each month of the grant period, and
 - for employee benefits, provide an explanation of the new benefit(s) and their relation to and impact on addressing COVID-19 needs and/or ensuring adequate staff availability.
 - As a reminder, any expenses claimed as part of this section should only be net unreimbursed amounts and exclude expenses covered by other sources of relief reported in Section Three and/or through donated items, services, or financial resources.
- **Sections Nine and 10 – Unreimbursed COVID-19 Testing Expense**
 - You will be asked if, as part of the delivery of services, your organization has incurred unreimbursed expenses for the testing of individuals and/or staff including serological testing, they may claim those unreimbursed expenses for this grant.
 - To claim expenses in this section, you will be required to report expense for each month of the grant period including expenses for test administration, third party labs, reimbursements to employees, increases in self-insured claims for COVID-19 Testing, etc.
 - As a reminder, any expenses claimed as part of this section should only be net unreimbursed amounts and exclude expenses covered by other sources of relief reported in Section Three and/or through donated items, services, or financial resources.
- **Section 11 - Personal Protective Equipment Expense**
 - Unreimbursed costs incurred for PPE may be claimed as allowable expenses for this grant.
 - These may include costs to create a reserve of personal protective equipment, costs to address an increase in solid waste as a result of the public health emergency, and costs related to the disposal of used personal protective equipment would be allowable expenditures.
 - To claim expenses in this section, you will be required to report the total amount on unreimbursed costs incurred for PPE for the grant period.
 - As a reminder, any expenses claimed as part of this section should only be net unreimbursed amounts and exclude expenses covered by other sources of relief reported in Section Three and/or through donated items, services, or financial resources.
- **Section 12 - Other COVID-19 Related Expense**
 - Other COVID-19 related expenses not specified in one of the above categories may also be claimed as allowable expense of this grant.
 - To claim expenses in this section, providers will be required to
 - report the total amount on unreimbursed costs incurred for other COVID-19 related expenses for the grant period, and
 - indicate which of the following expenses are reflected in the claimed amount for this category, including:
 - thermometers (including thermal scanners and related equipment);
 - plates, cups, silverware, trays, hot plates, etc. necessary to adhere to non-communal dining restrictions;

- additional tables, chairs, etc. necessary to adhere to social distancing restrictions for communal dining;
- outdoor furniture/materials necessary to construct outdoor visitation areas;
- technology that allows individuals to connect with their families in lieu of in-person visitation including the increased cost (whether paid directly by the provider or reimbursed to the individuals) of internet access to allow use of virtual platforms to facilitate visits by individuals;
- technology that allows individuals to connect with the community in lieu of traveling to activities outside of the home including the increased cost (whether paid directly by the provider or reimbursed to the individuals) of internet access to allow streaming of classes, telehealth services, day services, etc. by individuals.
- indoor furniture/materials necessary to construct private indoor visitation areas;
- sanitizing equipment and supplies;
- infection control signage and other materials;
- materials, supplies and equipment necessary for isolation, quarantine rooms/areas;
- air scrubbers and air filtration systems;
- Plexiglass or other materials for constructing separation panels/protective barriers or room sealing materials;
- commercially sanitizing all or part of the building;
- contract services including infection control training, sanitation, training, etc.;
- additional general liability insurance expenses specific to the residential site/group home; and
- medical waste disposal.
- As a reminder, any expenses claimed as part of this section should only be net unreimbursed amounts and exclude expenses covered by other sources of relief reported in Section Three and/or through donated items, services, or financial resources.
- **Section 13 – Stipulations of Provider Relief Grant**
 - Applicants will be asked to agree to the following statements:
 - Enter accurate information in this application detailing expenses incurred during the grant period and related specifically to COVID-19.
 - Maintain records that support the expenses reported in this application and make those records available upon request and/or audit.
 - Follow COVID-19 related guidance published by DDRS/BDDS.
 - Ensure your response to the public emergency, including service changes, re-opening policies, and back-up planning, are communicated to individuals served, their families, and our staff in a timely and accessible manner.
 - *All statements must be checked for the application to be processed.*
- **Section 14 – Attestation**
 - Applicants will be asked to “sign” their application by typing their full legal name into the designated area.
 - In signing the application, providers will attest to the following:
 - By submitting this grant application, your organization is subject to audit by the State of Indiana. With this in mind, your agency should maintain documentation and

any records to support any amounts that you are providing within this application, so that it can be available upon audit.

- Before you submit this application, you must type your name and attest to the statements below. Please carefully read the following statement and type your name as indicated.
- By typing my name and submitting my application, I attest that, with the exception of unemployment expenses which apply to all employees, I have reported only those expenses related to the delivery of the following services:
 - Adult Day Service (All Levels and Units)
 - Day Habilitation (Individual and All Group Sizes)
 - Pre-Vocational Services (All Group Sizes)
 - Residential Habilitation and Support Hourly
 - Residential Habilitation and Support Daily
 - Respite
 - Participant Assistance and Care
 - Structured Family Caregiving
 - Transportation
 - Wellness Coordination
 - Workplace Assistance
 - Intermediate Care Facilities for Individuals with Intellectual Disabilities
- By typing my name and submitting my application, I attest that I am an agent of the provider whose name and information is set forth in this application. I further attest that all of the answers I have provided in this application are true and accurate. I understand that making false statements on this application is unlawful and that I could be subject to penalties including criminal prosecution for making a false statement on this application.

- **Submitting Your Application:** Once you have completed all sections of the application, select the Submit button located at the bottom of Section Fourteen – Attestation

The screenshot shows a web-based application form titled "Application for 8005 HCBS Residential and Group Home Relief Grant Program". The form is in the "Attestation" section, which is marked as "Required". The text in the form reads: "By submitting this grant application, your organization is subject to audit by the State of Indiana. With this in mind, your agency should maintain documentation and any records to support any amounts that you are providing within this application, so that it can be available upon audit." It then asks the user to type their name and attest to the statements below. A list of services is provided: a. Residential Habilitation and Support Hourly, b. Residential Habilitation and Support Daily, c. Respite, d. Participant Assistance and Care, e. Structured Family Caregiving, f. Transportation, g. Wellness Coordination, h. Workplace Assistance, i. Intermediate Care Facilities for Individuals with Intellectual and Developmental. Below this, the user is asked to type their full legal name and affirm that they have read and agree to the attestation listed above. A text box contains the name "John D. Doe". At the bottom of the form, there are two buttons: "Back" and "Submit". A large green arrow points from the bottom right towards the "Submit" button.

Frequently Asked Questions

Are we eligible for this funding if our organization has already received provider relief funding (assuming we have enough expenses to justify both)?

Response: Yes but be sure not to include any expenses covered by other grant sources as discussed in the instructions.

Does the BDDS Day Service Sustainability Grant money need to be included?

Response: No, DDRS has record of the amounts of the BDDS Day Service Sustainability Grants received by each provider.

Do we include funds received from the state (Indiana and Michigan) as CARES PRF funding?

Response: Only include CARES Act funds for your Indiana operations, which should be 2% of Net Patient Service Revenue reported for your Indiana operations, or you may allocate the total CARES Act funds received between Indiana and Michigan based on the total Net Patient Service Revenue of each state.

We have not received the Provider Relief Fund Phase 3 distribution yet and we are uncertain of that amount. Does the phase 3 distribution amount need to be reported also?

Response: Only include CARES Act funds received as of the date of application.

Do expenses include bonuses and wage incentives that we had to implement to sustain enough DSPs?

Response: Across the board bonuses and wage increases are ineligible expenses per US Treasury guidelines for these funds. However, "payroll and benefits of a substantially dedicated employee may be covered using payments from the Fund" per the guidelines, to the extent incurred during the grant period. Thus, increased pay for personnel providing direct care in the waiver services specified in the instructions and in group homes would be eligible.

Many PPP Loans have not been processed by the SBA and are on back log. What if we do not have an answer about the amount of our PPP loan being forgiven?

Response: Please report the total amount of the PPP loan you have received.

We have had to hire a nurse to do our COVID screenings and contact tracing. Would that be an eligible expense?

Response: Yes, this additional nursing time would be eligible in Section four.

Are newly created shifts that resulted from COVID (example = weekday coverage due to day program closures) eligible for inclusion, even if they didn't create OT or involve a shift differential?

Response: No, these additional shifts are not eligible as they would be covered by Budget Modification Requests for individuals in waiver services or replace previous day service expense included in group home rates. The BMR timeline during COVID is a 60-day submission timeline from the date of the status change, and the BMR effective date can be effective the date of the status change, so the BMR process is the most appropriate means to address these shifts.

Are the unemployment claims limited to just employees that work in our residential programs or all agency employees?

Response: Unemployment claims, net of the federal credit for any employee, may be reported.

If an employee worked overtime but had both Rh20 and CHIO hours worked, how do we determine which part is overtime on a large scale?

Response: Allocate their overtime between the service categories based on the hours worked in each category, or alternatively, divide the residential hours by total hours paid and multiply by the overtime to determine the allowable overtime.

If an organization gave raises to a portion of DSPs to keep them working, can you count that amount over this period?

Response: Across the board bonuses and wage increases are ineligible expenses per US Treasury guidelines for these funds. However, "payroll and benefits of a substantially dedicated employee may be covered using payments from the Fund," per the guidelines, to the extent incurred during the grant period. Thus, increased pay for personnel providing direct care in the eligible waiver services as specified in the instructions and in group homes would be eligible.

Am I correct in understanding that if our PPP loan covered 14 of 24 weeks, eligible OT in the remaining 10 weeks would be covered?

Response: Regardless of the weeks claimed, if your application for PPP Loan Forgiveness includes \$50,000 of overtime as a part of a total of \$750,000 in wages but the amount of the loan forgiven is only \$600,000, you may claim the \$50,000 of overtime for this grant. However, if the total wages on your application for forgiveness is \$750,000 including overtime, and all \$750,000 is forgiven, the overtime claimed on the forgiveness application would not be eligible.

We entered a lease for extra residence to prepare if we isolate clients after COVID started. Are these expenses eligible?

Response: Yes, these expenses would be allowable under the other COVID-19 expenses in section 12.

I am working on the calculations of overtime for the residential BDDS grant submission. Is this limited to just DSPs working in those programs? If there is OT for other non-DSP staff, do you think I should remove it? I don't recall in the webinars there being any discussion on if we were allowed to submit for just specific employees.

Response: Overtime is not limited to only DSPs. A provider can claim allowable compensation for any employee who provided services (e.g. nursing, QIDP, temporary staff, etc.) in a residential waiver service covered by this grant or group home. Appropriate documentation is payroll registers supporting amounts claimed. If an employee works only part time in a residential waiver setting and/or group home, documentation should be maintained for hours worked in those settings. Compensation earned for work in services not covered by this grant or outside the group home is not allowable.

In order to have adequate staff capacity to provide services and keep people healthy and safe, we had some DSP staff temporarily move to other communities to provide emergency supports. We had to provide these staff members with hotel, meals and/or mileage for their time out of town when they were working shifts outside their normal service area. Are these costs allowable?

Response: Yes, these travel and other costs are allowable if they are related to employees who were temporarily providing services in a service covered by this grant or group home.

One of our strategies to deal with COVID positive situations has been to ask direct support personnel to quarantine in the setting with the affected individuals. Normally, in our waiver settings, employees do not receive meals or have other supply expense. When these employees have stayed in the setting due to the quarantine, we have incurred increased food, personal care and other supplies for these employees who normally do not stay in the setting. Can we claim these additional expenses for the grant?

Response: Yes, these increased food, personal care and other supply costs are allowable if they are related to employees who were quarantining in a waiver service covered by this grant or group home.

NEW If a salary-exempt employee received additional pay for working shifts due to staffing shortage, can we submit those wages? Basically, what would have been OT if worked by an hourly non-exempt employee.

Response: If a salary-exempt employee received additional pay for working shifts due to a staffing shortage, you may include 1/3 of this additional compensation as an overtime premium equivalent. This pay must be for work performed outside of their regular duties for which their salary is paid.