

Frequently Asked Questions

Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Funding Opportunity: Measure Development for the Quality Payment

Program

Important Notes:

- CMS has received multiple questions regarding the accreditation ineligibility criteria. Additional clarification will be provided as soon as possible.
- CMS is not allowed to provide advanced eligibility status for individual organizations.
- **CMS has extended the application deadline for the MACRA Funding Opportunity to May 30, 2018. See the updated Funding Opportunity on [Grants.gov](https://www.grants.gov).**
- **On May 3, 2018 we updated the eligibility criteria in order provide further clarification for those that are interested in applying.**

Q: What did CMS announce?

A: On 03/02/2018 CMS published the “Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Funding Opportunity: Measure Development for the Quality Payment Program” on [Grants.gov](https://www.grants.gov). The purpose of this Notice of Funding Opportunity is to provide funding assistance in the form of cooperative agreements to entities to develop, improve, update, or expand quality measures for use in the Quality Payment Program.

Q: Where can I find the Notice of Funding Opportunity for Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Measure Development for the Quality Payment Program?

A: The “Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Funding Opportunity: Measure Development for the Quality Payment Program” was published on [Grants.gov](https://www.grants.gov) on 03/02/2018. Interested applicants can search for the Notice of Funding Opportunity using the title, “Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Funding Opportunity: Measure Development for the Quality Payment Program”, or the Catalog of Federal Domestic Assistance (CFDA) number, 93.986.

Q: Where can I submit questions? Where can I find the answers?

A: Potential applicants and interested entities may submit questions to the following:

- For programmatic questions about this Funding Opportunity please email: MACRA-measure-funding@cms.hhs.gov.
- For administrative questions about this Funding Opportunity please email: grants@cms.hhs.gov.

CMS will update this FAQ periodically with questions sent in by individuals to ensure that answers are made available to all potential applicants.

Q: What are Cooperative Agreements?

A: Cooperative agreements are a type of federal financial assistance. For more information, see [Grants.gov](https://www.grants.gov) and search under the tab ‘Learn Grants’ for additional resources on grants and cooperative agreements.

Q: What is measure development for the Quality Payment Program?

A: The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) mandated CMS to implement the Quality Payment Program. Participation in the Quality Payment Program may be through Advanced Alternative Payment Models (APMs) or the Merit-based Incentive Payment System (MIPS). Both of these require reporting of quality measures. Measure development for the Quality Payment Program includes: developing, improving, updating, and expanding quality measures for use under APMs or MIPS. Information about the Quality Payment Program is on the program's [website](#).

Q: What is included in this Notice of Funding Opportunity?

A: This Notice of Funding Opportunity includes information about these cooperative agreements for Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Measure Development for the Quality Payment Program, including: program purpose, background, authorization, program requirements, technical assistance and information for prospective applicants, federal award information (including funding, periods of performance), applicant eligibility, application and submission process, application review criteria, and application review and selection process.

Q: Are there particular requirements for the measures developed, improved, updated, or expanded under these cooperative agreements?

A: The measures and their development, improvement, updating, or expansion are to be in accordance with the CMS Measure Development Plan. Information about the types of measures CMS will prioritize and measure development requirements are outlined in the Notice of Funding Opportunity.

Q: Who is eligible to apply for a cooperative agreement under this Notice of Funding Opportunity?

A: Clinical specialty societies, clinical professional organizations, patient advocacy organizations, educational institutions, independent research organizations, health systems, and other entities engaged in quality measure development may be eligible for this funding opportunity. Quality measure development technical expertise for the entire measure development lifecycle is required; however, entities without this expertise may be eligible upon partnering with one or more organizations with such expertise. More specific eligibility information is included in the Notice of Funding Opportunity in section C.1. Please see section C.4 (Ineligibility Criteria) of the Notice of Funding Opportunity for ineligibility criteria.

Q: Who is ineligible to apply to apply for a cooperative agreement under this Notice of Funding Opportunity?

A. Per section C.4 (Ineligibility Criteria) of the Funding Opportunity, the following types of entities are not eligible to apply for this Funding Opportunity as a primary applicant:

- (i) entities with active grants, cooperative agreements, and/or contracts from CMS for quality measure development, implementation, maintenance, alignment, and/or public reporting activities where CMS is the measure steward; and
- (ii) entities that are involved in accreditation of health care providers. Applicants must attest they do not meet either of these exclusion criteria in the Cover Letter.

The above statement does not include entities only receiving funding and/or support from CMS for their measures where CMS is not the measure steward. However, all of these entities may be subrecipients on one or more applications. All potential applicants that do not meet these ineligibility criteria may be eligible to apply to this Funding Opportunity.

Q: How much funding is available?

A: The awards will be in an amount of up to \$2,000,000 per year. Applicants may apply for 1 to 3 years of funding depending on measure development status and the number of measures in their application. The total amount of federal funds available is anticipated to be \$10,000,000 per year for 3 years for a total of up to \$30,000,000. It is estimated that up to 20 cooperative agreements will be awarded.

Q: Will CMS provide any technical support for the measure development?

A: Yes. CMS will provide targeted technical assistance in the form of guidance and direction to aid recipients in their work as a part of the cooperative agreement. See Section F.4, Cooperative Agreement Terms and Conditions of Award (Substantial Involvement) for more information.

Q: When is the deadline to apply for this Notice of Funding Opportunity?

A: The deadline to apply is 60 calendar days from the publication of this Notice of Funding Opportunity, 05/30/2018. Applications must be submitted through Grants.gov [Grants.gov](https://www.grants.gov). More information can be found in the Notice of Funding Opportunity section D (Application and Submission Information).

Q: How can I get more information about applying for this Notice of Funding Opportunity?

A: CMS will hold 2 pre-application conference calls for applicants. More information for these calls will be posted on the [website](#). Interested applicants can also refer to the Notice of Funding Opportunity for more information.

Q: Are there specific limitations in the distribution of awards?

A: The distribution of awards is limited by the available funding as designated in Section B5. of the Notice of Funding Opportunity. The distribution is guided by the considerations in E2. Review and Selection Process. In the distribution of awards, CMS reserves the right to seek variation across specialty/subspecialty areas, across domains and across quality measure types as determined in the best interest of the government to meet the objectives of this funding opportunity. There are no other distribution limitations outlined in the Funding Opportunity (ex. no maximum number per state/region and no maximum number per type of entity). An entity may submit only one application under this Funding Opportunity, and therefore, there is a maximum of one award per entity as a primary applicant. However, an entity may be a subrecipient on multiple applications.

Q: What is the Page Limit for the Project Narrative?

A: The Page Limit for the Project Narrative is 50 pages. Table 6: Summary of Total Pages and Points for Application Components listing 60 pages in the table on page 20 was a typo and has been changed to reflect the correct page limit, 50 pages.

Q: What is the total number of evaluation points applicable to the Project Narrative?

A: The total number of evaluation points applicable to the Project Narrative is 235 points. Page 31 should reflect 235 points and has been updated.

Q: What is the role of the National Quality Forum (NQF) and what is the cost we should include in our proposal?

A: The National Quality Forum (NQF) gathers input from stakeholders across the healthcare industry and develops consensus among those stakeholders to endorse quality measures as the “best in class.” As noted on page 11, the measure’s readiness for application under the Quality Payment Program should be interpreted, at a minimum, as having completed the

requirements for a fully developed and tested measure and for consensus-based entity endorsement through

the National Quality Forum (NQF). While NQF endorsement of the measure(s) is not mandatory, it is a key step in the measure development process, and the measure(s) should meet all of the requirements for endorsement. Costs related to NQF may be specific to individual organizational/measure circumstances; therefore costs related to NQF for this opportunity cannot be addressed by CMS. NQF cost questions may be directed to NQF.

Q: How many cooperative agreements will be awarded? Does CMS anticipate giving out mainly multi-million-dollar awards, or more of the smaller (amount) awards?

A: The total amount of federal funds available for all recipients is up to \$30,000,000 for 3 years, subject to the availability of funds. While the Funding Opportunity estimates that up to 20 cooperative agreements will be awarded, the actual number of awards is dependent on how the total available funding is distributed per agreement/per year. There is an estimated minimum of 5 awards (if all successful applicants are awarded the full \$6,000,000 over a 3 year period), however CMS estimates there may be successful applications that request less funding and therefore more than 5 will be able to be awarded. CMS is not weighting applications based on the amount of funding. Each application will be scored against the criteria outlined in the Funding Opportunity. CMS anticipates awarding as many cooperative agreements as the \$30,000,000 over 3 years will allow.

Q: Will the Technical Assistance Contractor be announced before the Cooperative Agreements application deadline of May 2, 2018?

A: Prior to the publication of the Funding Opportunity, there was a separate Request for Proposal for a technical assistance contractor to support the cooperative agreement awardees. At this time, it is estimated that the Technical Assistance Contractor will not be announced before the application deadline. It is important to note, the awardee of the technical assistance contract is not eligible to be a primary applicant or sub-recipient of the cooperative agreements.

Q: Does this grant only apply to measures that would be implemented in MIPS?

A: The cooperative agreements are for entities to develop, improve, update, or expand quality measures for use in the Quality Payment Program (QPP) (Merit-based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (APMs). Applications may propose measures for MIPS and/or APMs. While CMS will support awardees through technical assistance, there is no guarantee that measures developed under/generated from the cooperative agreements will be implemented/used in the QPP.

Q: How does CMS define "quality measure development technical expertise?"

A: Quality measure development technical expertise means the technical knowledge, ability and capacity to develop a measure through all phases of development, within the development period. As resources for general business, development and measurement principles for quality measures, applicants may refer to the following for guidance: the CMS Measures Management System Blueprint and CMS and QPP measurement policy and practice. An eligibility requirement of this Funding Opportunity is that the primary applicant demonstrate quality measure development technical expertise for the entire measure development lifecycle; however, entities without this expertise may be eligible upon partnering with one or more organizations with such expertise.

Q: Do the Cooperative Agreements include pre-award costs?

A: No cooperative agreement funds awarded under this Funding Opportunity may be used to reimburse pre- award costs. See Section D6. Funding Restrictions for additional information. While

development of the measures does not need to stop while applicants await award decisions, pre-award costs will not be reimbursed

Q: Can CMS confirm if applicants can submit letters of support with their grant application for this Funding Opportunity?

A: Yes, applicants may submit letters of support with their grant application. However, these letters will count towards the page limit of the Project Narrative, which is 50 pages.

Q: Can CMS provide more information about the measure development lifecycle and various aspects of measure development? Example: What is meant by “synthetic data” versus real data?

A: For applicants with technical question about the measure development process, CMS recommends utilizing the Measures Management System Blueprint as one source for additional information. The Blueprint can be found here: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/MMS-Blueprint.html>. CMS is unable to answer individual technical questions regarding the measure development process for this competitive funding opportunity.

Q: Must a measure have all of the characteristics outlined in the Funding Opportunity to be considered? Example: lists on pages 10 (starting with seeking measures that meet the following criteria) and page 11 (starting with basic measure development principles).

A: CMS recognizes that not every desired measure characteristic may suitable for every measure. Applicants should focus on the criteria used to score the application in Section E.1 Criteria when developing their applications.

Q: Is testing (i.e., planning to test) the measures using both synthetic and real data necessary for receiving the grant?

A: As stated in the previous question, CMS recognizes that not every desired measure characteristic may suitable for every measure. Applicants should focus on the criteria used to score the application in Section E.1 Criteria when developing their applications.

Q: Does “Patient/caregiver input is equally important to clinician input in the development of measures,” mean that the testing/implementation plan must include equal opportunities for input from the patients/caregivers and the clinicians (e.g., multiple patients/caregivers as members on the TEP)?

A: Stakeholder engagement, especially from patients/caregivers and clinicians, is incredibly important to the measure development process and should be incorporated throughout the measure development lifecycle. As a general CMS principle, patient/caregiver input is equally important to clinician input; however, the specific inclusion/opportunity may not be equal depending on the needs of the measure development. For example, the patient/caregiver input for testing may be less technical (and thus not equal) than for other stakeholders. As outlined in Section E.1 Criteria, the application should describe the process and capacity to incorporate feedback from key stakeholders throughout the measure development process to increase use, usability, and value while also minimizing burden on these stakeholders.

Q: Is there an established definition for “single-piece flow” in measure development? Does this change based on the number of measures that are being developed?

A: Single-piece flow (also referred to as one-piece flow) describes an ideal state where products are developed and reviewed one at a time instead of a ‘batch-and-queue’ traditional model. It is not specific to measure development and the general definition can be used here. No, the definition and principles and single-piece flow does not change based on the number of measures being developed.

Q: What are the expectations around submitting multiple measure concepts? Is it assumed to be standard that applicants will submit more than one measure concept? Is there a maximum number of measure concepts you would expect to see submitted?

A: Applications must outline a minimum of one measure concept to develop, improve, update, or expand quality measures for application under the Merit-based Incentive Payment System (MIPS) and/or Advanced Alternative Payment Models (APMs), which are collectively referred to as the Quality Payment Program, in accordance with the CMS Quality Measure Development Plan. There is no maximum number of measure concepts that can be outlined, however, the applicant will be expected to pursue the development of all measures outlined in their application. The applicant cannot propose 5 concepts in the applications and then only pursue 2 once the award is made. It is the expectation that all measure concepts proposed within the grant application will be developed and evaluated for inclusion in the Quality Payment Program by the end of the grantees overall period of performance. CMS is not weighting applications based on more or less measure concepts. Each application will be scored against the criteria outlined in the Funding Opportunity.

Q: Are applicants who meet all of the grant application requirements and request less funding (due to partial development already completed, for example) more likely to receive funding (i.e., is there any advantage to submitting applications for lesser funds)?

A: No, CMS is not weighting applications based on the amount of funding requested or where the measure is in the measure development process. For this Funding Opportunity there must be, at a minimum, an existing measure concept based on evidence of a demonstrated quality gap, variation in performance across clinicians, and opportunity for improvement. Each application will be scored against the criteria outlined in the Funding Opportunity and no preference will be given. This Funding Opportunity requires that measures be developed under generally accepted measure development and scientific principles in order for the measures to meet the following technical requirements:

- Impact, Opportunity, Evidence, Importance to Measure and Report
- Reliability and Validity
- Feasibility
- Usability and Use
- Harmonization
- Stakeholder Engagement (where patient/caregiver input is equally important to clinician input)

Q: Can there be partner organizations on the application (e.g., endorsing organization, data vendor, strategic partner) with whom a MOU is not needed? How should other partners outside of a subrecipient (i.e., the measure developer) be captured/represented in the grant application?

A: Entities without quality measure development technical expertise are required to partner with one or more organization(s), referred to as subrecipients, with that expertise to meet eligibility requirements of the Funding Opportunity related to quality measure development technical expertise. A Memorandum of Understanding (MOU) must be provided for each subrecipient that aids the primary applicant in meeting this eligibility requirement. The applicant may have partnerships that, while important, are not needed to meet the quality measure development technical expertise criteria and as such, do not require a MOU. It is up to the applicant how to represent that partnership in the application. If an MOU is submitted for these other partners, it will not count against the page limit.

Q: Is there an opportunity to receive funding (either through this grant or afterwards) for not just the implementation of the measures into QPP, but the adoption of the measures

into clinical practice (e.g., quality improvement initiatives, technical assistance for participating providers, creation and dissemination of toolkits, etc.)?

A: The purpose of this funding opportunity is to develop, improve, update, or expand quality measures for application under the Merit-based Incentive Payment System (MIPS) and/or Advanced Alternative Payment Models (APMs), (collectively referred to as the Quality Payment Program), in accordance with the CMS Quality Measure Development Plan, which is developed and updated as appropriate by the Secretary in accordance with section 1848(s)(1) of the Act. It does not include the adoption of the measures into clinical practice.

Q: What is the definition of “satisfactory performance” in reference to receiving future funding?

A: Satisfactory performance is the recipient’s ability to continue meeting all requirements laid out in the Funding Opportunity and the terms and conditions of award. Satisfactory performance during the previous budget period(s) will be measured by assessing: (1) the recipient’s ability to meet the performance metrics laid out in their original application; (2) the quality and timeliness of report submissions; (3) the recipient’s compliance with the terms and conditions provided with their Notice of Award, including compliance with all applicable statutory and regulatory requirements; and (4) the recipient’s ability to communicate with and respond in a timely manner to requests from the CMS project officer throughout the project period. For additional information see Section B5. Funding

Q: When would an application or performance/progress report required for a continuation application be due, and would this be above and beyond the quarterly/annual progress reports outlined in Section F.5 Reporting of the Funding Opportunity?

A: The reports outlined in Section F.5 Reporting and regular communications with CMS as a part of the technical assistance provided outlined in Section F4. Cooperative Agreement Terms and Conditions of Award (Substantial Involvement) of the Funding Opportunity will be used to determine the performance, and therefore continuation of funding, of the applicant.

Q: Does this grant require any participation in Alternative payment models (Shared Savings, Bundled payment initiatives etc.)?

A: No, this Funding Opportunity Announcement does not require any participation in Alternative payment models. We are hoping measures will be created for the Alternative Payment model.

Q: Do applicants need to follow the CMS MMS Blueprint?

A: No, applicants do not need to follow the entirety of the measure development life cycle as outlined in the CMS Blueprint. The CMS Blueprint is a resource for CMS-contracted measure developers to describe the processes and decision-making criteria used when to develop, implement, and maintain a high-quality measures for CMS programs. However, the applicants and awardees of this Funding Opportunity are not mandated to follow the Blueprint and CMS encouraged innovative practices.

Q: If an applicant is awarded the funding, must the recipient organization follow the entirety of the measure development life cycle outlined in the CMS MMS Blueprint if they already completed initial steps of the measure development lifecycle using their own process?

A: No, applicants do not need to follow the entirety of the measure development life cycle as outlined in the CMS Blueprint. While it is a Funding Opportunity program requirement that the applicant have an evidence-based measure concept, some applicants may be further along in specification or testing than others. If the applicant is further along in the process, they do not

need to repeat the prior work they have completed and may ask for funding for only the uncompleted steps in the measure development process. Per Sections E.1 Criteria and D2. Content and Form of Application Submission of the Funding Opportunity, applicants will still be scored on their previous progress and should outline the steps taken. As an example, see D2. “If the applicant has already specified their measure concept(s), the applicant should clearly describe their previous progress and outline the steps already taken to develop precise technical specifications, define the data source(s), specify code sets, and construct a data protocol and a summary of the outcome.” As an output of this Funding Opportunity, recipients (i.e., applicants who are awarded a cooperative agreement) will produce one or more fully developed, specified, and tested quality measures for potential use in the Quality Payment Program.

Q: Would the applicant retain the intellectual property for the measures developed? In other words would the measures only be able to go into an applicant’s registry if they have one?

A: Per Section F3. Terms and Conditions, the non-Federal entity may copyright any work that is subject to copyright and was developed, or for which ownership was acquired, under a Federal award. The Federal awarding agency reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use the work for Federal purposes, and to authorize others to do so. While the applicant may choose to submit the measures developed under this Funding Opportunity to other programs, including a registry, the sole purpose of this Funding Opportunity is to develop, improve, update, or expand quality measures for application under the Merit-based Incentive Payment System (MIPS) and/or Advanced Alternative Payment Models (APMs), (collectively referred to as the Quality Payment Program), in accordance with the CMS Quality Measure Development Plan.

Q: Does the cooperative agreement funds cover travel for the stakeholders (providers/subject matter experts) to attend Technical Advisory Group meetings?

A: Yes, the cooperative agreement funds can cover travel for the stakeholders (providers/subject matter experts) to attend Technical Advisory Group meetings. See APPENDIX I: Guidance for Preparing a Budget Request and Narrative of the Funding Opportunity.

Q: An applicant has a contract to develop a measure for CMS, but the measure does not exist yet, so there is no steward. Is the applicant eligible?

A: No, the applicant would not be eligible as a primary applicant under this Funding Opportunity because the entity has an active grants, cooperative agreements, and/or contracts from CMS for quality measure development, implementation, maintenance, alignment, and/or public reporting activities where CMS is the measure steward. While the measure is not yet developed, the purpose of the contract is for measure development with CMS stewardship.

However, the applicant is eligible as a sub-recipient.

Q: Can an entity be a prime applicant on one application and a sub applicant on one or more other applications?

A: If the entity is eligible as a primary applicant, then yes a primary applicant can be a prime on one application and a sub-recipient on one or more applications. No preference will be given either way and all applications will be evaluated individually. However, an entity may only submit one application as a primary entity.

Q: Is the expectation that all measure concepts proposed within the grant application

will be included in the Quality Payment Program by the end of the grantees overall period of

performance, or only a subset of those proposed?

A: It is the expectation that all measure concepts proposed within the grant application will be developed and evaluated for inclusion in the Quality Payment Program (QPP) by the end of the grantees overall period of performance. The applicant cannot propose 5 concepts in the applications and then only pursue 2 once the award is made. There is no guarantee that the developed and evaluated measures will be included in the QPP.

Q: Will the specific deliverables required for each grantee be driven by the typical artifacts and documentation specified in the CMS MMS Blueprint, or will the deliverables required under these grants be determined by another method?

A: Cooperative agreements do not require specific deliverables as would a contract; therefore, the typical artifacts and documentation specified in the CMS MMS Blueprint (i.e. deliverables under a contract) will not be required as deliverables under this Funding Opportunity. However, the measurement development process for the cooperative agreements parallels measure development under a contract and as such the typical artifacts and documentation specified in the CMS MMS Blueprint may be applicable under this Funding Opportunity. The reporting requirements are outlined in Section F5. Reporting. However, as outlined in F4. Cooperative Agreement Terms and Conditions of Award (Substantial Involvement), cooperative agreements provide an assistance mechanism in which substantial HHS programmatic involvement with the recipient is anticipated during the performance of the activities. Under each cooperative agreement, HHS' purpose is to support and stimulate the recipient's activities by involvement in, and otherwise working jointly with, the award recipient in a partnership role. Technical assistance is also provided. Awardees may need to provide documentation outside, or along with, their progress reports to successfully receive technical assistance and support the substantial HHS programmatic involvement during the performance of the activities.

Q: Can CMS confirm if Program/Project Director is the only required key personnel to be included explicitly in the grant response?

A: The Program/Project Director's resume is required, however other key personnel, especially those working to establish the entity's quality measure development experience and expertise should also be included.

Q: It appears on Grants.gov that there was an update to the FOA on March 8. Since our organization began its review of the funding program as of the initial posting on March 2, can you clarify what was changed on the 8th?

A: Contact information was updated for our procurement specialist.

Q: Can CMS supply additional details around these "prohibited uses of funds"? Specifically, is the development and/or validation of necessary tools for the implementation of the measure, or the publication of new evidence, considered "independent research"?

A: Funding used under this Funding Opportunity can only be used to develop, improve, update, or expand quality measures for application under the Merit-based Incentive Payment System (MIPS) and/or Advanced Alternative Payment Models (APMs), which are collectively referred to as the Quality Payment Program, in accordance with the CMS Quality Measure Development Plan. All activities outside of these activities are prohibited uses of funding. However, in some situations, development of a collection tool is necessary to further the development of the

measure. Efforts to develop a collection tool may fall within the scope and be funded through this cooperative agreement; the development of underlying evidence supporting the measure concept may be considered independent research. Section D.6 states use of cooperative agreement funds in the following ways will result in termination of the applicant's funding: To pay for the cost of independent research and development, including their proportionate share of indirect costs (unallowable in accordance with 45 CFR 75.476).

Q: If you apply to develop 2 measures could CMS only select 1 of the measures thus changing the budget?

A: No. While negotiations may occur, the application will be reviewed as a whole and most negotiations will be minor in nature and concern resources and periods of performance, not the measure concepts proposed.

Q: May a subcontractor of my application be a prime on another CMS contract?

A: Yes. An applicant may only submit one application as a prime applicant, however they are eligible to be subrecipients/partners/subcontractors on one or more other applications.

Q: Does this grant only apply to measures that would be rolled out under MIPS?

A: Measures developed under this program must be submitted for use to the Quality Payment Program (MIPS or APMs). While the measure steward may submit the measure to other programs, the sole purpose of this Funding Opportunity, and therefore funds administered, may only be used for implementation in the Quality Payment Program. Per Section A.4 of the FOA states: This Funding Opportunity requires active quality measure development work based on measure concepts or measures (that is, developing, improving, updating, or expanding quality measures) for inclusion in MIPS and/or Advanced APMs in accordance with section 1848(s)(2) of the Act. As an output of this Funding Opportunity, recipients (i.e., applicants who are awarded a cooperative agreement) will produce one or more fully developed, specified, and tested quality measures for potential use in the Quality Payment Program.

Q: We understand that there is a separate RFP for a technical assistance contractor whose role would be to support ALL the grantees who receive a cooperative agreement award. Will the contractor be announced before the deadline of 5/2/18?

A: Please check back to our website: [MACRA: MIPS & APMs - Centers for Medicare & Medicaid Services](#) for periodic updates.

Q: How many measures is CMS expecting each development organization to produce?

A: As an output of this Funding Opportunity, recipients (i.e., applicants who are awarded a cooperative agreement) will produce one or more fully developed, specified, and tested quality measures for potential use in the Quality Payment Program. CMS has no expectations or preferences to how many measure concepts are submitted per application.

Q: If an entity is currently receiving funding from CMS as a sub-recipient/sub-contractors for measure development of a measure that CMS will steward, does this make them ineligible to be a prime on a co-op agreement?

A: .No, they would still be eligible. Per section C.4 (Ineligibility Criteria) of the Funding Opportunity, the following types of entities are not eligible to apply for this Funding Opportunity as a primary applicant:

- (i) entities with active grants, cooperative agreements, and/or contracts from CMS for quality measure development, implementation, maintenance, alignment, and/or public reporting activities where CMS is the measure steward; and
- (ii) entities that are involved in accreditation of health care providers. Applicants must

attest they do not meet either of these exclusion criteria in the Cover Letter.

The above statement does not include entities only receiving funding and/or support from CMS for their measures where CMS is not the measure steward. However, all of these entities may be sub-recipients on one or more applications. If the entity is not a prime on a CMS contract and are only a sub-contractor, they would be eligible to be a primary applicant for this Funding Opportunity.

Q: Are measures within the Co-op award required to be eCQMs?

A: No, while eCQMs are preferred, the quality measures developed through this Funding Opportunity are not required to be eCQMs.

Q: I understand the grant requires submission of an evidence-based measure concept, what is the expectation of how well defined that concept should be? Typically, the measure development process incorporates measure conceptualization by a technical expert panel (TEP). So, does this grant essentially begin after the TEP input into conceptualization?

A: The application needs to have a well-developed concept supported by evidence that the proposed measure(s) supports a quality gap, captures the variation in performance across health care providers, and the opportunity for improvement. CMS realizes conceptualization is part of development process and the concept is continually revisited throughout the development process based on feedback from the TEP, specification details, testing analysis, etc. Having TEP input prior to the application is not a requirement, but the concept should be well-defined.

Q: Is it expected that this will be a one-time opportunity?

A: This NOFO is the only opportunity at this time. Information regarding potential future opportunities is not available.

Q: Is this opportunity specifically geared towards those currently participating in MIPS?

A: As an output of this Funding Opportunity, recipients (i.e., applicants who are awarded a cooperative agreement) will produce one or more fully developed, specified, and tested quality measures for potential use in the Quality Payment Program. This opportunity is not specifically geared towards or only for those currently participating in MIPS, but also APMs.

Q: Does the partner organization that needs to have the measure development technical expertise need to be a sub-recipient or can it be a contractor/vendor?

A: Entities without quality measure development technical expertise for the entire measure development lifecycle are required to partner with one or more organizations, referred to as sub-recipients, with such expertise, to meet the requirements of this Funding Opportunity. The partner organization is termed the sub-recipient, and may be a contractor/vendor. All requirements for a sub-recipient apply regardless of the type of partner organization (e.g. contractor).

Q: Is the application deadline too aggressive?

A: Please note that the deadline has been extended to May 30, 2018.

Q: Could you provide information or factors regarding application success and grant viability?

A: As this opportunity is competitive, we are unable to provide specific information concerning application choices. Applicants should follow the program requirements and guidance provided in Section D2. Content and Form of Application Submission.

Q: What is CMS definition of Quality Measure Development Life Cycle? Is this similar to the MUC Life Cycle and the QCDR Life Cycle?

A: No, all of these ‘lifecycles’ are distinct and serve a different purpose. Information regarding the measure-development lifecycle is found in the CMS Measures Management System Blueprint at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/MMS-Blueprint.html>.

Q: Are those with Qualified Registry status eligible as a primary applicant/grantee?

A: Since this opportunity is competitive, we are unable to provide eligibility information regarding specific organizations or circumstances. Please see the complete eligibility and ineligibility criteria and other requirements in the NOFO regarding primary applicants and sub-recipients. The ineligibility criterion of: entities with active grants, cooperative agreements, and/or contracts from CMS for quality measure development, implementation, maintenance, alignment, and/or public reporting activities where CMS is the measure steward may be applicable depending on the Qualified Registries’ grant, cooperative agreement and/or contract with CMS; however, this ineligibility criterion is not meant to preclude a Qualified Registry that is solely providing collection and submission functions from applying to this funding opportunity.

Q: Will pediatric measures be considered? Are the priority areas the same for Pediatrics?

A: Yes. Although pediatrics is not specifically listed as a gap area, we will accept applications for development of other quality measures (such as specialty/subspecialty) that fill an existing gap or need and are high impact. The CMS Quality Measure Development Plan (identified) initial priority areas for measure development remain applicable (the same) for pediatrics.

Q: What is "readiness for application" with regard to measures that are fully specified, tested and submitted to the MUC list, but unable to be included in the Quality Payment Program due to external timeline constraints specific to QPP rule-making cycles and/or applicable NQF standing/steering committee availability? (i.e., will measures in this situation be considered "ready for application"?)

A: The measure’s readiness for application under the Quality Payment Program should be interpreted, at a minimum, as having completed the requirements for a fully developed and tested measure and for consensus-based entity endorsement through the National Quality Forum (NQF). While NQF endorsement of the measure(s) is not mandatory, it is a key step in the measure development process, and the measure(s) should meet all of the requirements for endorsement. The measure’s readiness for application under the Quality Payment Program should also be interpreted as meeting the requirements for submission to the MUC List, participation in the MAP, submission to a peer-review journal, and measure stewardship, as these are also key steps in the measure development process. Timeline and budget should include this minimum requirement. CMS will need a sufficient documentation (ex. testing data) to support its inclusion in the rulemaking cycle. The documentation must support the measure’s Impact, Opportunity, Evidence, Importance to Measure and Report; Reliability and Validity; Feasibility; Usability and Use; and Harmonization.

Q: In what situations would funds not be available, and what is the likelihood of additional funds not being awarded because of this?

A: Under this Funding Opportunity, up to \$30,000,000 of the funding authorized by Section 1848(s)(6) of the Act has been set aside for the cooperative agreement awards over 3 years. In the event that funds become directed to another effort that was allowable under this funding source, they may not be available. That is not anticipated at this time.

Q: Can CMS clarify if the use of synthetic data is limited to eCQMs? If so, is the use of Bonnie required to create the synthetic data?

A: Synthetic data can be used on non-eCQMs, however it is not required. However, Bonnie, an established tool used to develop eCQMs is used in the development of all eCQMs by CMS.

Applicants should focus on the criteria used to score the application in Section E.1 Criteria when developing their applications.

Q: Is a Practice Transformation Network within the Transforming Clinical Practices Initiative eligible?

A: We cannot confirm eligibility as this is a competitive funding opportunity. Please see the eligibility and ineligibility criteria; however, a Practice Transformation Network whose work is solely directed to practice transformation (and not measure development) would not necessarily be an entity that would be developing, implementing, maintaining, or aligning specific quality measures per the ineligible criteria.

Q: Can you provide examples of quality measure development technical expertise?

A: Quality measure development technical expertise means the technical knowledge, ability and capacity to develop a measure through all phases of development, within the development period. As resources for general business, development and measurement principles for quality measures, applicants may refer to the following for guidance: the CMS Measures Management System Blueprint and CMS and QPP measurement policy and practice. An eligibility requirement of this Funding Opportunity is that the primary applicant demonstrate quality measure development technical expertise for the entire measure development lifecycle; however, entities without this expertise may be eligible upon partnering with one or more organizations with such expertise. See the MMS Blueprint as an example of the processes involved in measure development.

Q: Can payors apply?

A: Per section C.4 (Ineligibility Criteria) of the Funding Opportunity, the following types of entities are not eligible to apply for this Funding Opportunity as a primary applicant:

- (i) entities with active grants, cooperative agreements, and/or contracts from CMS for quality measure development, implementation, maintenance, alignment, and/or public reporting activities where CMS is the measure steward; and
- (ii) entities that are involved in accreditation of health care providers. Applicants must attest they do not meet either of these exclusion criteria in the Cover Letter.

The above statement does not include entities only receiving funding and/or support from CMS for their measures where CMS is not the measure steward. However, all of these entities may be subrecipients on one or more applications. If an organization does not meet these criteria, including payors, they may be eligible to apply to this Funding Opportunity.

Q: What does "developed in rapid cycle fashion" mean?

A: Rapid-cycle improvement is a quality-improvement concept that facilitates identification, implementation, and measurement of changes made to improve a process or a system. For example, a rapid-cycle improvement may imply that testing takes six months instead of two years.

Q: You stated during the presentation that ACOs were eligible, however, it appears from the ineligible criteria that due to the funding relationship with CMS this would not be possible. Can you please clarify?

A: Per section C.4 (Ineligibility Criteria) of the Funding Opportunity, the following types of entities are not eligible to apply for this Funding Opportunity as a primary applicant:

- (i) entities with active grants, cooperative agreements, and/or contracts from CMS for quality measure development, implementation, maintenance, alignment, and/or public reporting activities where CMS is the measure steward; and
- (ii) entities that are involved in accreditation of health care providers. Applicants must attest they do not meet either of these exclusion criteria in the Cover Letter.

The above statement does not include entities only receiving funding and/or support from CMS for their measures where CMS is not the measure steward. However, all of these entities may be subrecipients on one or more applications. If an organization has an active grant, cooperative agreement, and/or contract with CMS that does not cover quality measure development, implementation, maintenance, alignment, and/or public reporting activities where CMS is the measure steward they may be eligible to apply to this Funding Opportunity.

Q: We have developed some measures but need to test them. Could this funding be used for testing?

A: Yes, the funding and resources offered through this Funding Opportunity may be used to test measures intended to go into the Quality Payment Program. The starting point for an application can start as early as immediately after the measure is conceptualized. However, if a measure developer has already conceptualized and specified the measure, the measure developer can start at the testing period. As outlined in the Funding Announcement, the applicant will still need to describe the steps already taken to conceptualize and specify the measure.

Q: Would you award a one year award of \$250,000? Or is that too low?

A: CMS recognizes that different organizations are at different points in the measure-development life cycle and may have different financial and technical needs. No application amount is too low.

Q: Please give examples of partners with measure development expertise (are you referring to organizations like PCPI?)

A: CMS cannot provide examples of examples of partners with measure development expertise. Primary applicants seeking partners with measure development expertise should look to the eligibility criteria and information needing to be outlined in the application to determine if a potential partner is appropriate.

Q: Are applicants who meet all of the grant application requirements and request less funding (due to partial development already completed, for example) more likely to receive funding? I.e., is there any advantage to submitting applications for lesser funds?

A: No, the amount of funding will not be taken into account when selecting awardees. Applications will be reviewed by objective review panels/committees that will use evaluation criteria outlined in the funding opportunity notice and score the applications accordingly. CMS will use that information to identify the strongest applications and make awards accordingly.

Q: Is there an opportunity to receive funding (either through this grant or afterwards) for not just the implementation of the measures into QPP, but the adoption of the measures into clinical practice (e.g., quality improvement initiatives, technical assistance for participating providers, creation and dissemination of toolkits, etc.)?

A: No, the funding from the Funding Opportunity is solely for the purpose of developing, improving, updating, or expanding quality measures for application under the Merit-based Incentive Payment System (MIPS) and/or Advanced Alternative Payment Models (APMs), which are collectively referred to as the Quality Payment Program, in accordance with the CMS Quality Measure Development Plan

Q: Can you clarify: are organizations barred from being a primary applicant if they have any contract with CMS for measurement-related work?

A: Yes. Per section C.4 (Ineligibility Criteria) of the Funding Opportunity, the following types of entities are not eligible to apply for this Funding Opportunity as a primary applicant:

- (iii) entities with active grants, cooperative agreements, and/or contracts from CMS for

quality measure development, implementation, maintenance, alignment, and/or public reporting activities where CMS is the measure steward; and

- (iv) entities that are involved in accreditation of health care providers. Applicants must attest they do not meet either of these exclusion criteria in the Cover Letter.

The above statement does not include entities only receiving funding and/or support from CMS for their measures where CMS is not the measure steward. However, all of these entities may be sub-recipients on one or more applications.

Q: Is there a way to get a determination of eligibility for being a primary applicant that is based on an organization's specific situation?

A: No, CMS is not allowed to provide advanced eligibility status for individual organizations.

Q: Will CMS potentially award funding for some but not all activities proposed, or will the award be an all-or-none based on the activities proposed?

A: Applications will be reviewed by objective review panels/committees that will use evaluation criteria outlined in the funding opportunity notice and score the applications, in their entirety, accordingly. CMS will use that information to identify the strongest applications. Per Section E2. Review and Selection Process, HHS, here CMS, reserves the right to conduct pre-award negotiations with potential awardees as needed. While negotiations may occur, the application will be reviewed as a whole and most negotiations will be minor in nature and concern resources and periods of performance, not the measure concepts proposed.

Q: Does CMS anticipate in-person meetings during the course of the project - e.g., kickoff meeting in Baltimore, site visits by CMS, conferences of cooperative agreement recipients, etc.?

A: No in-person CMS meetings during the course of the project are planned at this time.

Q: Have you issued any guidance on how CMS will manage overlap in measures (harmonization)? (e.g. 2 different entities both submit to work on similar diabetes measures).

A: As outlined in Section E2. Review and Selection Process, while multiple cooperative agreements may be awarded within one specialty/sub-specialty area/domain/measure type, CMS reserves the right to seek variations across specialty/sub-specialty area/domain/measure type if it is in the best interests of the government to meet the objectives of this Funding Opportunity. If multiple applications submit very similar measure concepts, the strongest application will move forward.

Q: Does a measure need to be feasible today, or is a 2-5 year timeline for technical and industry feasibility acceptable?

A: Measures submitted through this Funding Opportunity will need to be submitted for potential use in the Quality Payment Program by the end of the period of performance, maximum of 3 years. Feasibility is a key criteria in measure evaluation and will be a key factor in assessing the appropriateness of the measure for use during the implementation phase of the measure development lifecycle. At a minimum this includes review to be on the Measures Under Consideration (MUC) List and review by the Measures Applications Partnership (MAP) as a part of the pre-rulemaking process and rulemaking, but may also include NQF endorsement.

Q: Has CMS defined how many overall measures (new or updated) you'd like to see come out of this round of cooperative funding?

A: No, CMS has not defined the number of measures to be developed from this Funding Opportunity. CMS will award up to \$30 million in funding to successful applicants. While the Funding Opportunity estimates that up to 20 cooperative agreements will be awarded, the actual

number of awards, and therefore the number of quality measures, is dependent on how the total available funding is distributed per agreement/per year.

Q: Can an entity receive more than one award? Say there are multiple quality measures like PROM's for different procedures say total knee surgery, and total knee surgery and you need \$6M for each 3 year quality development proposal. Can an organization receive \$12M to fund both.

A: An entity or an organization is only allowed to submit one application as the primary applicant. However, they can be a sub-recipient on multiple awards. An organization cannot be a primary on two and thus cannot receive \$12 million in funding. They can only receive up to the \$6 million in a single award if selected. However, if they wanted to partner with another organization as a sub-recipient to submit a second application for the other set of measures they are allowed.

Q: Are indirect costs allowed on travel?

A: Travel is considered an indirect cost. Travel costs are allowed as necessary for the completion of activities related to the proposal. See the Funding Opportunity for specific guidance on travel documentation.

Q: Are we able to have multiple Project Directors/Principle Investigator?

A: There is no restrictions number of Project Directors/Principal Investigators during the application process. The minimum requirement regarding a Project Director must however be met. It is recommended CMS is updated on any major changes in staffing post award.

Q: Should measures be fully developed at the time of submission?

A: No. For the submission of application, applicants must have a minimum requirement of an evidence-based measure concept, some applicants may be further along in specification or testing than others. An applicant proposing measure concepts that need to be fully specified may request more resources over a longer period of time under this Funding Opportunity than a measure that is ready or in the middle of the measure-testing phase. Alternatively, if the applicant is proposing to update an existing quality measure, the applicant may request less time and funding. The applicant must also demonstrate the applicant's capability and capacity to develop a quality measure(s) to be included in the MUC list, supported through the MAP process, and suitable for inclusion in Quality Payment Program.

For measure submission at the end of the cooperative agreement, recipients (i.e., applicants who are awarded a cooperative agreement) will produce one or more fully developed, specified, and tested quality measures for potential use in the Quality Payment Program. Technical expertise in the full measure development lifecycle from measure conceptualization through implementation is required.

Q: If we plan to risk adjust an outcome measure but do not have a vendor identified, do we need to include them in the proposal?

Disclosure of vendors in development of risk adjusted measures is not a requirement for this proposal. A Project Narrative which articulates in detail the design and implementation work required to meet the goals of the Funding Opportunity as described in the project narrative is however required.

Q: How should other partners outside of a subrecipient be captured/represented in the grant application?

A: A Memorandum of Understanding (MOU) is not required and will not count towards page limits in the application for partners identified as the subrecipient. However, significant partners

outside of a subrecipient should be reflected in the project narrative, implementation plan, and budget narrative as appropriate.

Q: Regarding strategic partners: would a data vendor (such as a registry) be someone you would need an MOU with?

A: MOUs are only required for subrecipient(s) that provide the measure development technical expertise to aid the primary applicant in fulfilling the eligibility criteria. Although an MOU for a partnership with a data vendor is not a requirement, they will be accepted. A description of the partnership is important but not required.

Q: Who will be the reviewers of the applications? (CMS staff? or volunteers? or??)

Applications will be reviewed by objective review panels/committees that will use the evaluation criteria outlined in the Funding Opportunity and score the applications. CMS will use that information to identify the strongest applications. For more information see Section E2. Review and Selection Process.

Q: Looking at the priorities, would an application that improves care coordination in a substance abusing population that improves the successful transfer from ER to rehabilitation OR a population health project that provides patient/caregiver support and care coordination in order to reduce preventable hospitalizations in patient with delirium or dementia be more responsive?

A: CMS cannot comment on specific measure areas and concepts. Applicants should seek guidance from the Funding Opportunity to learn CMS' top priorities, however applicants can apply for the development of any measure concept.

Q: Please clarify-with the plethora of existing measures across different domains, must the measures submitted for the grant be all new and not known to yet exist?

A: The Funding Opportunity must be used to develop, improve, update, or expand quality measures for application under the Merit-based Incentive Payment System (MIPS) and/or Advanced Alternative Payment Models (APMs), which are collectively referred to as the Quality Payment Program, in accordance with the CMS Quality Measure Development Plan. The measures do not have to be de novo, they can be adapted or updated from an existing measures. However, the measure development work must be new and the updates must reflect the priorities of this Funding Opportunity.

Q: You said that developing a measure under contract to CMS would be an eligibility exclusion, even if the measure does not yet exist. Does that apply if the contract is with a CMS Center other than CCSQ?

A: Yes. Entities with active grants, cooperative agreements, and/or contracts from CMS for quality measure development, implementation, maintenance, alignment, and/or public reporting activities where CMS is the measure steward are not eligible to apply.

Q: Are the measures for all medical specialties? Can the measures can be for one specialty or should the new measures include broad multiple specializations?

A: Measures can be for a single specialty or for multiple specialties in the QPP program.

Q: Can a patient advocate partner with a hospital in applying for this grant?

A: Yes, so far as they meet the eligibility criteria and do not fall in the ineligible category. Please refer to Section C.4 of the Funding Opportunity.

Q: Does it matter if the measure cannot be clearly attributed an individual doc? I.e., if you

are measuring MRI for low back pain, it can be difficult to know if the PCP or orthopedist is driving the decision.

A: The purpose of this Funding Opportunity is to develop, improve, update, or expand quality measures for application under the Merit-based Incentive Payment System (MIPS) and/or Advanced Alternative Payment Models (APMs), which are collectively referred to as the Quality Payment Program. Applicants should ensure their measures meet the various policy aspects and policy requirements of MIPS and APMs, for example, in regard to the attribution of the measure.

Q: Can measures that are already used and approved as QCDR current 2018 measures be used to apply for the grant to improve and further harmonize the QCDR measures, or should new measures be developed that have never been used before in order to qualify in the application?

A: Both approved QCDR measures and new measures can be used to apply for the Funding Opportunity. Existing QCDR measures can be improved, updated, or expanded as a part of the application. However, they must then follow the implementation requirements of the Funding Opportunity, [ex. Submission to Measures under Consider (MUC) List and Measure Application Partnership (MAP)], which may require additional testing.

Q: How are the developed measures used?

A: Quality measures are tools that help us measure or quantify healthcare processes, outcomes, patient perceptions, and organizational structure and/or systems that are associated with the ability to provide high-quality health care and/or that relate to one or more quality goals for health care. As an output of this Funding Opportunity, the developed measures will be submitted for potential use in the Quality Payment Program.

Updated on May 14, 2018

Q: It appears on Grants.gov that there was an update to the FOA on May 3rd. Can you clarify what was changed?

A: We updated the eligibility criteria in order provide further clarification for those that are interested in applying. Please see the table below for previous changes made.

March 2, 2018	Contact information was updated for our procurement specialist.
April 12, 2018	The new application due date for the “Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Funding Opportunity: Measure Development for the Quality Payment Program” is May 30, 2018 at 3:00 p.m. ET
May 3, 2018	<u>Ineligibility Criteria</u> (iii) entities that have Medicare- deeming authority granted by CMS denoted at : https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Accrediting-Organization-Contacts-for-Prospective-Clients-.pdf (Page 16 of the Funding Opportunity Announcement)

Q: Does the partner organization that needs to have the measure development technical expertise need to be a sub-recipient or can it be a contractor/vendor?

A: Entities without quality measure development technical expertise for the entire measure

development lifecycle are required to partner with one or more organizations, referred to as sub-recipients, with such expertise, to meet the requirements of this Funding Opportunity. The partner organization is termed the sub-recipient. All requirements for a sub-recipient apply.

Q: Can the Program/Project Director be staffed by either the prime or sub-recipient applicant?

A: No. As responsible for the project with regard to the terms and conditions in the Notice of Funding Opportunity, the Principal Investigator/Project Director must be from the primary (applicant) organization.

Q: Can a sub-recipient, (acting as the technical expert in the measure development process), earn a profit for their work with the primary applicant? What are the distinctions between sub-recipient and contractor designation?

A: No. A sub-recipient is prohibited from earning a profit under this opportunity, and applicants must adhere to **45 CFR §75.352 Requirements for pass-through entities** if the entity is determined to be a sub-recipient. Applicants should review HHS regulation **45 CFR §75.351 Sub-recipient and contractor determinations** for information regarding the distinctions between a sub-recipient and a contractor. Also, see **45 CFR §75.216 Special provisions for awards to commercial organizations as recipients, (b) Prohibition against profit.**

Q: Is there a salary cap required for this funding opportunity? Should we use the Guidance on Salary Limitation for Grants and Cooperative Agreements FY2018 (NOT-OD-18-137) when preparing our budget?

A: The applicant should adhere to the published executive level II salary cap. Part of the initial review by CMS is to make sure all the applications adhere to this cap. If grantees request more than the cap, CMS request that the applicant revise the amounts during budget negotiations.
<https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2018/EX.pdf>

Q: In reviewing the “workspace” on grants.gov and I don’t see where we would upload the cover letter-should we use the “other attachments” link to upload this document? Also, is this where we would upload MOUs, etc.?

A: The response is yes, you may use the other attachments link.

Q: Who will be providing technical assistance for measure development to specialty societies, patient advocacy organizations, providers, and other stakeholders that are selected as a grantee of the Funding Opportunity Announcement for the purpose of supporting their efforts to develop quality measures for the Quality Payment Program (QPP)?

A: Health Services Advisory Group Inc., has been selected to provide expert technical to the selected grantees.