FY24 SUB-VENDOR MEETING

Administrative Orientation for Sub-Vendors & Consultants
OVERVIEW

Welcome & Introductions
• Introduction of BHSB team members

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- BHSB contract team roles
- Contracting
- BHSB contract types
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- Budget process
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- Final fiscal reporting and reconciliation (Annual Reports 440)
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Questions & Open Discussion
BHSB TEAM INTRODUCTIONS
WHO IS BHSB?

Behavioral Health System Baltimore (BHSB) is the local behavioral health authority for Baltimore city. BHSB is responsible for managing grant funds for behavioral health services and providing general system oversight and management.
BHSB ADMINISTRATIVE PRACTICES

Contracting with BHSB
BHSB CONTRACTING PROCESS OVERVIEW

Program Lead develops the Attachment A (scope & deliverables)

- Letter of Award (LOA) emailed to sub-vendor
- Sub-vendor submits budget into CMS and uploads supporting documents
- Budget reviewed and approved
- Contract issued for execution
- Programmatic and fiscal reporting/monitoring throughout the contract term
- Final fiscal reporting and reconciliation
- Payments
- Accountability Compliance Audit is conducted
| Role                                      | Department                        | Contact Administrator Lead (CAL) – works in the Finance Department under the Director of Contracts | Grants Accountant Lead (GAL) – works in the Finance Department under the Director of Grants Accounting | Quality Coordinator Lead (QCL) – works in the Accountability Department under the Associate Director of Quality | Program Lead (PL) – usually works in the Programs, Policy & Communications, or Operations Departments at various levels within the organizational structure | Responsible for coordinating contract documentation and timelines | Responsible for financial management and oversight of contracts | Responsible for conducting compliance audits, retrospectively to review if service delivery met contractual requirements and relevant federal, state, and local regulations | Responsible for the programmatic management and oversight of contracts |
1. Letter of Award (LOA) is emailed to the sub-Vendor
2. Supporting documents (W-9, Certificate of Insurance, CMS Registration Form, Pre-Award Risk Assessment, etc.) are required to be emailed to the assigned Contract Administrator Lead within 10 business days of receiving the LOA
3. Contract Management System (CMS) users identified on the completed CMS Registration Form will be added to CMS to allow access to the system
4. The purpose of the CMS Registration Form is to identify staff members who are assigned to perform specific functions related to the contract
BHSB CONTRACT TYPES

Cost Reimbursement
CMS USERS

The contract management system (CMS) is BHSB’s online application for submitting Budgets, fiscal and programmatic reports.

**Administrator User**
- access to view and submit fiscal and programmatic reports related to the specific contract
- can assign other staff members access to CMS functions throughout the contract term

**Fiscal Report User**
- access to view and submit budgets and fiscal reports related to the specific contract

**Program Report User**
- access to view and submit programmatic reports related to the specific contract
BUDGET PROCESS

➢ Budget instructions can be found by clicking on the SUPPORT button on the sign-in page of CMS or going to the BHSB Website under For Providers > Forms for Providers > Budget Forms.
➢ Budget is entered into CMS: https://bhsb.onlinereporting.org/.
➢ Budget must be entered into CMS within 2 weeks (10 business days) of receiving the Letter of Award (LOA).
➢ Depending on the instructions, funding, contract type, or Statement of Work, additional documentation may be required to be uploaded when submitting the budget.
➢ Budget is reviewed and approved by the assigned Program Lead and Grants Accountant Lead with a final approval given by Director, Grants Accounting.
➢ If the budget entered is incorrect, the budget will be returned with notes via CMS for corrections and resubmission within 4 business days.
➢ Once the budget receives final approval, the assigned Contract Administrator Lead will issue a contract for signature via Adobe E-signature to the designated signatory.
➢ All parties will receive an electronic copy of the fully executed contract via email.
➢ Budget modification is a process by which changes are made to the budget, but not to the award amount. A Budget modification can be requested and entered into CMS for review and approval anytime during the contract period after a fully executed contract is received, but no later than March 15th of the current fiscal year.
   1. Before submission of the budget modification, reach out to the Program Lead (identified on the LOA) to discuss the proposed changes.
   2. Reach out to the Grants Accountant Lead (identified on the LOA) for modification instructions and documentation.
➢ A reminder notification is sent out approximately three weeks prior to the March deadline by the Grants Accounting team.
➢ Once the budget modification receives final approval, the assigned Contract Administrator Lead will issue a contract amendment for signature via Adobe E-signature to the designated signatory.
FISCAL REPORTING IN CMS

➢ Fiscal reports are used by BHSB to monitor fiscal compliance with the approved budget, track year-to-date spending and variances, and facilitate oversight.
➢ Follow fiscal reporting schedule in CMS for frequency and due dates for your contract.
  
  EXAMPLE*:  Fiscal Reporting  (Due Dates)  10/15/2023  01/15/2024  04/15/2024  07/30/2024
  
  * This could vary based upon the funding source. Thus grants/contracts for HIDTA, Expanded School Behavioral Health (ESBH), Early Childhood Mental Health (ECMH), Head Start, and U-Choose may have an earlier date than the 15th.
  
➢ Fiscal reports are entered into CMS and need to reflect actual incurred expenditures for the period being reported.
➢ Fiscal reports may require additional documents to be uploaded depending on the contract type and funding requirements.
➢ Fiscal reports must be submitted for each period of the contract even if there were no expenditures incurred in which case fiscal reports need to be completed and submitted with zero amounts and a comment added as to the reason for no expenditures reported.
➢ Fiscal report’s report dates can not be outside of the contract term, be duplicated, or overlap.
➢ Incorrect or incomplete fiscal reports will be sent back to the sub-vendor for correction and resubmission.
➢ All required fiscal reports and fiscal documents need to be submitted correctly and timely to avoid a fiscal non-compliance status.
FINAL FISCAL REPORTING AND RECONCILIATION

- Behavioral Health System Baltimore (BHSB) is responsible for reconciling all grants administered by this organization during each fiscal year with budgetary period ending on or before June 30th.
- Reconciliation is a fiscal resolution of the grant/contract's expenditures and incomes and determination of net balances and disposition of those balances, subject to final audit determination.
- Sub-recipients of BHSB, in addition to the final interim report submitted in CMS, must also submit an Annual Report Form (BHSB 440) and report all fiscal year income, inclusive of any interest, expenditures and performance measures related to human services agreements no later than 30 days after the end of the contract term or the BHSB fiscal year whichever is earliest. The forms also include an Equipment page to list details of equipment purchased and an Explanation page for variances.
- Forms and instructions for completion and submission of the Annual Report 440 can be found on BHSB website under For Providers > Forms for Providers > Budget Forms.
- An email requesting the report after the year's end is sent to sub-vendors the first week of July.
- At the end of the reconciliation process, each sub-vendor receives a 440-reconciliation letter informing them of the results.
FINANCIAL AUDITS

• Sub-vendors who receive Advance Base Cost Reimbursement contracts $750,000 or more in federal funds must submit a Uniform Requirements audit (aka Single Audit).

• The financial audit is due 9 months (March 30) after the end of the fiscal year in which the contract was issued and must be supported by a Management letter from a certified Accounting firm or CPA.

• Sub-vendors with contracts up to $100,000 in the aggregate shall be required to obtain and submit an annual audit upon request by BHSB within a reasonable amount of time and shall submit report forms required by the MDH Manual.

• Sub-vendors are also required to submit an audit relative to the end of the year 440.

• Furthermore, such sub-vendors (a) may be requested by BHSB to submit within a reasonable amount of time their current Form 990 (for non-profit sub-vendors) or current Corporate Tax Return (for profit sub-vendors); and (b) if such audits are obtained, sub-vendors are required to submit their audits to BHSB upon completion of the audits.

• Payments for services may be withheld in BHSB’s sole discretion if required audit reports, Form 990, or Corporate Tax Returns are not submitted in a timely manner.
Payments are processed net 30 after all documentation has been submitted correctly.

BHSB generates checks on the 1st and 15th of every month. If the 1st and 15th are on a holiday or weekend, generation of checks will be on the next business day.

BHSB offers direct deposit/ACH for ease of receiving funds. Funding for direct deposit/ACH vendors is deposited within 72 hours of BHSB check generation. ACH form is sent out to Sub-Vendors with the Letter of Award (LOA) for completion and return.

For Consultants, a fiscal report with a detailed invoice uploaded with the fiscal report will be required to process for payment.

For Fee-For-Service and Actual Expenditures Cost Reimbursement contracts, a fiscal report with supporting documentation, as applicable, will be required to process payments.

For Advance Basis Cost Reimbursement contracts, BHSB will advance payments monthly at the beginning of each month within the contract term and will require quarterly fiscal reporting. Payments after the first quarter will be deferred if fiscal reporting is not received when due. In addition, subsequent quarterly payments will be reduced if warranted by an analysis of the expenses reported and advances already paid. All payments are subject to BHSB cash management practices and funding will be advanced only upon availability of funds from the funder. Advance payments will be generated by BHSB after a contract has been fully executed, or in cases when the award is issued with significant delays past July, after the two conditions are met:

1. LOA to sub-vendor has been issued and
2. A complete and accurate budget application from the sub-vendor has been received in CMS.
The Program Lead is responsible for the programmatic development, management, and oversight of the contract. Program Leads review sub-vendor budgets for compliance with staffing pattern, scope of work, and funding agreement and provides programmatic approval of budgets. Reviews and approves selected invoices in accordance with Attachment A of the contract. Program Leads considers the funder’s requirements, scopes of service, and relevant regulations to determine what service delivery items should be contractually required. Deliverables are service delivery items that are contractually required of a sub-vendor or consultant. Deliverables are essential for BHSB to measure and/or track contract compliance and to ensure that performance and goals are being met. The sub-vendor or consultant is required to submit programmatic reports in CMS to track the progress of those required deliverables. BHSB develops **standard deliverables** each contract year that may apply to many, but not all contracts.
Sub-vendors should thoroughly review the scope of work and deliverables as soon as the documentation is provided by BHSB.

Program report due dates are listed in CMS. Sub-vendors should review reports prior to the first reporting period due date and consult the Program Lead with any questions.

Program reports should be completed and submitted in CMS by the due date. Sub-vendors should ensure all questions are answered completely and accurately and, if applicable, upload required documents to CMS to submit along with your report.

Contact Program Lead in advance of reporting deadlines to discuss any questions and concerns related to the program report or general expectations of contract performance.

Program Leads can provide technical assistance as needed.
PROGRAM REPORTING IN CMS QUARTERLY SCHEDULE

Reporting Schedule

➢ Q1: October 15th
➢ Q2: January 15th
➢ Q3: April 15th
➢ Q4: July 15th

*Some Sub-Vendors are required to report monthly.

Access CMS support by clicking on the CMS Support button located on the top-right corner of each page in the CMS application. It can also be found on the sign-in page of the application.
AUDITING PRACTICES

➢ A BHSB Quality Coordinator Lead will contact the sub-vendor to schedule an audit after the end of the fiscal year (retrospective audit)
➢ The Quality Coordinator Lead is responsible for conducting retrospective Accountability Compliance Audits (ACAs) to review if service delivery met contractual requirements and relevant federal, state, and local regulations
➢ The BHSB Accounting Monitor will contact the sub-vendor to schedule a virtual financial audit review if applicable (all contracted sub-vendors are required to submit an annual financial audit per contract terms)
➢ The Accounting Monitor assesses compliance with financial regulations and controls by executing audit program steps
➢ Applicable contracts will require, in addition to any single audit requirement, an annual MDH reconciliation of reported expenditures known as a 440 Report
➢ Audits will review Attachment A requirements (policies, staffing patterns, licenses, deliverables, etc.)
➢ All audits (unless otherwise noted) will be virtual
➢ Audits will result in a determination of COMPLIANT or NON-COMPLIANT
➢ Non-compliance can require additional technical assistance and/or a Performance Improvement Plan (PIP)
QUESTIONS & OPEN DISCUSSION
CONTACT US

Envisioning a city where people live and thrive in communities that promote and support behavioral health

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