

STATE OF ALASKA DEPARTMENT OF HEALTH & SOCIAL SERVICES SENIOR AND DISABILITIES SERVICES POLICY & PROCEDURE MANUAL	SECTION: 9 Grants	Number: 9-3	Page: 1
	SUBJECT: Mini-grants for Beneficiaries with Disabilities		
	APPROVED: /s/ <i>Kimberli Poppe-Smart</i> Acting Director		DATE: 12/7/10
	<i>Replaces policy signed 8/25/09</i>		

Purpose

To delineate responsibilities for management of mini-grant funds.

To describe the eligibility requirements and the application process for mini-grant awards.

To clarify the service priorities for which mini-grants are available.

Policy

Senior and Disabilities Services (SDS) administers the Mini-Grants for Beneficiaries With Disabilities program that is funded by the Alaska Mental Health Trust Authority (AMHTA). SDS awards a contract to a single entity to manage the process of funding unmet medical dental, hearing, therapeutic equipment and services, and home improvement needs of individuals with developmental disabilities (DD). The contractor awards mini-grants to qualifying applicants for equipment and services essential to improving quality of life and increasing independent functioning.

Individuals who have been determined to be eligible for DD services by SDS or who are enrolled in an Early Intervention/Infant Learning Program (EI/ILP) may apply for mini-grants. Program participants may apply when sources of current funding cannot be used for needed equipment or services. Applicants may work with a DD provider agency or with a regional STAR agency to complete the application process.

Mini-grant funds are allocated to the regions served by STAR agencies. Funds allocated to one region may not be used to meet the needs of applicants in another without SDS approval. Mini-grants of a maximum of \$2,500 per individual are offered only when no other funding is available.

Authority

AS §47.80.100 Programs for persons with disabilities; AS §47.80.130 (a)(5) Grant programs.
 20 AAC §40.100 AMHTA Mini-grants; 20 AAC §40.530 People with Developmental Disabilities.

Definitions

“DD provider agency” means an agency that provides services to individuals with developmental disabilities, and that is either a non-profit organization that uses grant funding for such purposes or a for-profit agency that has a Medicaid provider agreement with the State of Alaska.

“Early Intervention/Infant Learning Program provider” means an agency that uses grant funding to provide early intervention services for families of special needs children who are under 3 years of age.

Mini-grant contractor: the entity that manages the mini-grant process.

Representative: a parent, guardian, or other individual with legal authority to act on behalf of an applicant or a recipient.

STAR (Short-Term Assistance and Referral) agency: a provider agency that has a grant to manage a regional program to meet short-term needs.

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Responsibilities

1. **SDS** is responsible for
 - a. administering the mini-grants program, and
 - b. providing technical assistance and guidance.
2. The **applicant/representative** is responsible for
 - a. maintaining eligibility for services, and
 - b. working with the provider agency or STAR agency to apply for a mini-grant.
3. The **STAR agency, the DD provider agency or the EI/ILP provider** is responsible for
 - a. verifying applicant eligibility, and
 - b. submitting applications to the mini-grant contractor.
4. The **mini-grant contractor** is responsible for
 - a. providing notice of mini-grant availability,
 - b. managing the grant award process,
 - c. maintaining fiscal oversight of grant funds, and
 - d. submitting required reports to SDS.
5. The **mini-grant advisory committee** is responsible for
 - a. reviewing applications, and
 - b. awarding mini-grants on the basis of the funding priorities.

Procedures

A. Grant Process

1. Notice of availability of mini-grants.
 - a. The mini-grant contractor provides notice of the availability of the grants and application information
 - i. by means of communication which will reach the intended beneficiaries;
 - ii. through outreach to STAR agencies, DD provider agencies, EI/ILP providers, and community organizations; and
 - iii. by advising the regional Aging and Disabilities Resource Centers.
 - b. The mini-grant contractor informs STAR agencies, DD provider agencies, and EI/ILP providers that each agency is limited to five applications per month.
 - c. The mini-grant contractor advises that applications
 - i. may be submitted at any time to the regional STAR agency, DD provider agencies, and EI/ILP providers;
 - ii. are reviewed monthly by the mini-grant advisory board; and
 - iii. must be received by the 15th of the month to be considered for awards that month.

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2. Funding criteria.

- a. The mini-grant contractor verifies that the requested equipment and services
 - i. cannot be funded through another program or source;
 - ii. fall within the funding priorities categories; and
 - iii. are essential to improving quality of life and increasing independent functioning.
- b. The mini-grant contractor funds requests for the following categories (in order of priority):
 - i. medical equipment and services;
 - ii. dental equipment and services;
 - iii. vision equipment and services, including corrective lenses;
 - iv. hearing equipment and services, including hearing aids;
 - v. physical, occupational, or speech therapy equipment and services when prescribed by a licensed health care professional with expertise regarding the need for such therapy; and
 - vi. home improvements, including environmental modifications or items which will enable the applicant to function with greater independence or to access the community.

3. Application.

- a. The applicant/representative
 - i. completes the *AMHTA Mini-grants for Beneficiaries with Disabilities Application* (Attachment A); and
 - ii. submits the application and required documentation to the regional STAR agency, or
 - iii. requests that the STAR agency, the DD provider agency or the EI/ILP provider assist with the application and collection of documentation to support the request.
- b. The STAR agency, the DD provider agency or the EI/ILP provider, before submitting applications to the mini-grant contractor,
 - i. verifies that the applicant is
 - A) receiving or eligible for DD services, or
 - B) enrolled in EI/ILP;
 - ii. determines whether the specific equipment and services requested meet the criteria for mini-grants; and
 - iii. when eligibility or request criteria are not met, returns the application materials to the applicant/representative or the assists him/her as needed.
- c. The STAR agency, the DD provider agency or the EI/ILP provider submits the application and supporting documentation, including
 - i. proof of DD eligibility or EI/ILP enrollment:
 - A) SDS DD eligibility approval letter,
 - B) SDS care coordination assignment notice, or
 - C) EI/ILP Individualized Family Service Plan;

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- ii. materials showing the cost of equipment and services (including tax and shipping, if applicable):
 - A) written, itemized quote or estimate from a vendor, or
 - B) catalog page showing item and completed order form; and
 - iii. for physical, occupational or speech therapy, a prescription from a licensed health care professional.
4. Selection.
- a. The mini-grant contractor forms an advisory committee which
 - i. consists of
 - (A) the contractor employee responsible for managing the mini-grant process,
 - (B) an employee of the Alaska Mental Health Trust Authority, and
 - (C) an employee of the Governor’s Council on Disabilities and Special Education or an employee of Senior and Disabilities Services;
 - ii. is trained regarding the funding criteria and eligibility requirements for mini-grants;
 - iii. reviews all applications received by the 15th of the month; and
 - iv. award mini-grants in consideration of
 - A) the needs of the applicant,
 - B) the priorities regarding categories of equipment and services, and
 - C) the possibilities of improving quality of life and increasing independent functioning with the requested equipment and services.
 - b. The advisory committee
 - i. reviews monthly applications received by the 15th, and
 - ii. considers any applications received after the 15th in the next monthly review.
 - c. The advisory committee may develop a method for ranking applications by assigning points to need, to the priority categories, and to the possibilities of improving quality of life or increasing independent functioning if the requested equipment and services are provided.
 - d. The advisory committee
 - i. approves mini-grants, up to a maximum of \$2,500, per year for an individual
 - A) as a one-time lump sum grant, or
 - B) if the initial grant was less than \$2,500 for a medical or dental evaluation, another mini-grant may be awarded when the second request is for medical or dental treatment recommended as a result of the evaluation, provided the total granted does not exceed \$2,500; or
 - iii. elects to not approve a request.

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B. Fiscal Oversight

1. Grant Management.

- a. The mini-grant contractor manages the mini-grant awards by
 - i. purchasing all equipment and services directly from vendors,
 - ii. retaining receipts, and
 - iii. documenting all expenditures.
- b. The mini-grant contractor manages the mini-grant process by
 - i. awarding mini-grants on the basis of highest need, and
 - ii. at the end of the third quarter, identifying unexpended funds and unfunded applications.

2. Third quarter review and reallocation.

- a. The mini-grant contractor
 - i. reports to SDS the amount of unexpended funds, or
 - ii. sends to SDS copies of applications for requests which are appropriate for funding, but which were not awarded because of
 - A) ranking low in terms of need and priority, or
 - B) depletion of mini-grant funds in a specific region.
- b. SDS
 - i. evaluates and prioritizes the unfunded requests, and
 - ii. redistributes the unexpended funds to meet the requests.

3. Reports.

- a. The mini-grant contractor reports expenditures quarterly in the Cumulative Fiscal Report, the Program Narrative, and the DD On-line Census.
- b. The mini-grant contractor sends to SDS, within 30 days of the end of the fiscal year, the *AMHTA Mini-grants for Beneficiaries with Disabilities Annual Report* (Attachment B) indicating
 - i. numbers of grants and dollar amounts by region;
 - ii. numbers of items and dollar amounts by category;
 - iii. numbers and dollar amounts of applications received, awarded and denied; and
 - iv. if requests were denied, the reasons for denials.

4. Records.

The mini-grant contractor retains all applications and supporting documentation, and makes these materials available for SDS review upon request.

Attachments

1. Attachment A: AMHTA Mini-grants for Beneficiaries with Disabilities Application
2. Attachment B: AMHTA Mini-grants for Beneficiaries with Disabilities Annual Report

State of Alaska • Department of Health and Social Services • Senior and Disabilities Services
Alaska Mental Health Trust Authority Mini-grants for Beneficiaries with Disabilities

Application

Applicant:		Date of Birth:
Address:		
City:	State:	Zip code:
Telephone:	Email address:	
Eligibility: <input type="checkbox"/> Developmental Disabilities <input type="checkbox"/> Early intervention/Infant Learning Program		
Current funding sources for services:		
<input type="checkbox"/> Community Development Disabilities Grants <input type="checkbox"/> Core Services <input type="checkbox"/> Early Intervention/Infant Learning Program <input type="checkbox"/> Home and Community Based Waiver Services <input type="checkbox"/> Indian Health Service <input type="checkbox"/> Medicaid <input type="checkbox"/> Medical insurance <input type="checkbox"/> Other (Please specify): _____		
Amount requested (Maximum \$2,500): \$_____ for equipment and/or services to meet the following needs: <input type="checkbox"/> Medical <input type="checkbox"/> Dental <input type="checkbox"/> Vision <input type="checkbox"/> Hearing <input type="checkbox"/> Physical/occupational/speech therapy <input type="checkbox"/> Home improvements		
Describe equipment/services requested. <i>Attach supporting documentation, e.g., estimate from a vendor, catalog page/order, or prescription from a licensed health care professional.</i>		
Describe the need which the equipment/services will address.		
Describe how the equipment/services will improve quality of life and increase independent functioning.		
Person completing form:		Telephone:
Relationship to applicant:		
Referring provider agency:		
Agency contact:		Telephone:

State of Alaska • Department of Health and Social Services • Senior and Disabilities Services
Alaska Mental Health Trust Authority Mini-grants for Beneficiaries with Disabilities

Annual Report

Fiscal Year:
Agency:
STAR Program Administrator:
Telephone:

Grant awards by region	Number	Total dollar amount
Anchorage		
Southcentral		
Southwest		
Southeast		
Northwest		
Interior		
Total		
Grant Awards by category	Number	Total dollar amount
Medical services and supplies		
Dental services and supplies		
Vision services and supplies		
Hearing services and supplies		
Physical/occupational/speech therapy		
Home improvements		
Other (please specify)		
Total		
Applications	Number	Total dollar amount
Applications Received		
Applications Awarded		
Applications Denied		
Reasons for Denial	Number	Total dollar amount
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		