
Nursing Home Civil Money Penalty (CMP) Projects Frequently Asked Questions

- 1. Question:** What are CMP Funds?
Answer: CMP stands for civil monetary penalty. These funds are collected by the Centers for Medicare and Medicaid Services (CMS) from nursing facilities (NFs), skilled nursing facilities (SNFs) and dually-participating skilled nursing facilities (SNFs) that have failed to maintain compliance with federal requirements. A portion of the funds are returned to States for use in activities for the protection and benefit of nursing home residents.
- 2. Question:** How must these funds be used?
Answer: Sections [1819](#) and [1919](#) of the Social Security Act specifies that CMP funds paid by nursing homes may only be used for the benefit and protection of nursing home residents.
- 3. Question:** Who may apply for CMP funds?
Answer: States may contract with, or grant funds to, any entity permitted under State law provided the funds are used for CMS approved projects to protect or improve nursing home services for nursing home residents and the responsible receiving entity is:

 - Qualified and capable of carrying out the intended project(s) or use(s);
 - Not in any conflict of interest relationship with the entity(ies) who will benefit from the intended project(s) or use(s);
 - Not a recipient of a contract or grant or other payment from federal or state sources for the same project(s) or use(s);
 - Not paid by a state or federal source to perform the same function as the CMP project(s) or use(s). CMP funds may not be used to enlarge or enhance an existing appropriation or statutory purpose that is substantially the same as the intended project(s) or use(s).
- 4. Question:** Are there prohibited uses?
Answer: Yes. Please see the examples of prohibited uses in the [Survey and Certification memo 12-13-NH](#).
- 5. Question:** How long can a project be?
Answer: There is no minimum requirement; however, projects cannot exceed three years.
- 6. Question:** Is there an approval process?
Answer: Yes. The application and supporting documents must be reviewed by the Agency for Health Care Administration staff for initial compliance with CMS criteria. Then the application, supporting documentation and the Agency's recommendation will be forwarded to CMS for a final decision. CMS will provide feedback within 45 calendar days of receipt.
- 7. Question:** Is there an application or application process?
Answer: Yes. The application and instructions can be found at:
www.ahca.myflorida.com/MCHQ/Health_Facility_Regulation/Long_Term_Care/CMP.shtml

- 8. Question:** Who is the State Agency Director?
Answer: The State Agency Director is Secretary Justin M. Senior.
- 9. Question:** How should the request be submitted?
Answer: The application shall be submitted electronically to marsha.webb@ahca.myflorida.com. Requests will not be accepted by fax, hand delivery or mail. Once the application has been received an email will be sent acknowledging receipt.
- 10. Question:** What type of contract will I enter into with the State of Florida?
Answer: The contract will be a Cost Reimbursement agreement, which means, the recipient is reimbursed, after payment, for allowable and budgeted expenses that are directly related to the project.
- 11. Question:** What is included in the standard contract language for these projects?
Answer: The standard contract language can be found at http://ahca.myflorida.com/MCHQ/Health_Facility_Regulation/Long_Term_Care/CMP.shtml
- 12. Question:** How long does it take to get a contract executed after CMS approval?
Answer: The contract drafting and review process could take 6-8 weeks from final approval by CMS.
- 13. Question:** What is required to execute an agreement with the State of Florida?
Answer: After the project has been approved by CMS, the contract drafting process will begin by the Agency. The vendor will need to do the following:
- Register with the Department of State, Division of Corporations (some entities may be exempt)
 - Register with MyFloridaMarketPlace
 - Register a W9 with the Florida Department of Financial Services
 - Provide a copy of your Liability Insurance Certificate
 - Provide an anticipated invoice schedule of when invoices will be submitted to the Agency
 - Execute a signed agreement (see Standard Contract Language above)
- 14. Question:** Who should I contact if I have additional questions?
Answer: Please contact Marsha Webb, Long Term Care Unit, by email at marsha.webb@ahca.myflorida.com.

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