New Requirements

• New DHHS requirement: be able to segregate letter of credit draws on an award-by-award basis
  – Removes ability to “pool” expenses and perform a U of Minnesota drawdown for all our awards at once
  – Enables the government to do award-by-award burn rate calculations (enhance ability to detect fraud, waste and abuse)
NIH Transition

Federal FY 14
• NIH issues competitive awards in “P” accounts
• Each NIH competitive award (new or renewal) will get its own EFS CON number

Federal FY15
• Each NIH non-competing award (except those in their final year) will be divided by NIH into two “mini” competitive segments
  – (1) “Start of original competitive segment – end of budget period awarded in FY14
  – (2) “Type 4” - balance of original competitive segment
    • This mini-competitive segment will gets its own EFS Con Number.

Federal FY 14

- **New (Type 1) and Supplements (Type 3)**
  - No change to departments
  - SFR must change billing practices

- **Renewal (Type 2)**
  - New EFS Con number
  - SFR must change billing practices
  - New subawards issued with new PO

- **Continuation (Type 5)**
  - RPPRs still a “continuation progress report”
  - A Final FFR will be due at the end of this budget period
  - Subawards will show the end of FY14 budget period as the end date
Federal FY 15

• Continuation (Type 4)
  – NIH issues new mini-competitive segment corresponding to the remaining years originally expected, and assigns a new “P” account for the award
  – SFR must adjust billing practices
  – Continuation year will get a new EFS CON number
  – Subawards will be reissued for the remaining years in the segment (with a new PO number)

• Supplement (Type 3)
  – Follows the continuation award
Accommodating Transition of Domestic Awards to PMS Subaccounts: Changes to Continuing Awards in FY15

When the FY15 year award is issued, the project period end date is changed to match budget period end date. This makes the FFR expenditure data for this year the final FFR expenditure data and allows NIH to close the accounting record in the old system. Final Invention Statement and Final Progress Report not required at this time.

Note: Fellowships do not require FFR expenditure data reporting.

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Paid via PMS “G” (pooled) accounts.

Paid through PMS using “P” subaccount, which requires cash quarterly report.

Progress report submitted and reviewed as a type 5. At time of release of the FY15 award, system converts the type 5 to a type 4 and increases document number.

Closeout of original competitive segment (years 1-5) within 90 days after end of the last budget period.
Mini-segment transition

• Creation of new EFS Con number for remaining budget periods (mini segment 2)
  – "Pre-approved" preaward account 60-90 days prior to end of mini segment 1
  – Future payroll distributions changes
  – Open new purchase orders (subaward & regular)
  – ISO chart string changes

• Various tools to use
  – UMReports
  – PI Reports, Budget Period Report, Transaction Detail, Payroll Detail, etc.
Mini-segment transition

• Final Federal Financial Report (FFR) & pooled draw
  – Treated like an end of budget period or final report & final pooled draw (MAYBE)
  – Process HSAs, close POs (subaward & regular)
  – Remove expenses not included in FFR prior to/at same time as final FFR
  – Understand the carryfoward process
Accommodating Transition of Domesitic Awards to PMS Subaccounts: Carryover of Funds on Domestic Awards for FY15 Only*

Does award have unobligated balance available for carryover?

- **No**
  - Grantee submits FFR for FY14 award.
  - No further action required by grantees

- **Yes**

  Does award have carryover authority?

  - **No**
    - Grantee:
      - Submits FFR for FY14 award
      - Submits request to GMS to carryover funds, when applicable
    - OFM reviews FFR.
    - GMS and PO review carryover request.
    - Carryover approved?
      - **No**
        - Unobligated balance used to offset future year award, if applicable.
      - **Yes**
        - OFM reviews FFR. OFM authorizes carryover in PMS and funds become available to grantee in new PMS subaccount.
        - GMS issues revised NoA authorizing carryover in PMS and funds become available to grantee.

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*This diagram reflects the procedure for the carryover of funds from a domestic award issued prior to October 1, 2014 to a domestic award issued after October 1,
Carryforward between mini-segments

- DHHS will automatically carryforward unobligated $$ shown on the FFR from the first mini-segment to the second mini-segment BUT
  - If award requires carryover approval, PI must still make a request countersigned by SPA, and DHHS will issue a new NOA authorizing the carryforward if approved.
  - No DHHS NOA will be issued if carryover approval is not required. DHHS adjusts PMS and SFR adjusts available balance in mini segment 2.
    - In accordance with existing policy, the GMO will review unobligated balance in excess of 25% and may request additional information.
    - Carryover funds will not be available in the PMS subaccount until the FFR for the prior years is approved.
  - Subrecipients will likely need to request carryover approval and UMN will review it, and if approved, increase subaward amount to reflect authorized amount.
Things to remember

• “Financial” segments only
  – Protocols apply to both segments
  – Equipment doesn’t need to be transferred
  – Progress, invention & equipment reports apply to the entire award (both segments)
Modification to UMReports

• Created new business process to identify related contracts in PeopleSoft
• Adding two new run parameters to the Sponsored Award Overview (SAO)
• Allows a report consumer to run the SAO by a “parent” Con number
Business process change for all mini segments & renewals

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<th><strong>Contract Status</strong></th>
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**Description:** Neurological Emergencies Treat

**Contract Admin:** Tonya Knutson

**Region Code:**

**Contract Type:** FIXED_PRICE

**Currency Code:** USD

**Exchange Rate Type:** CRRNT

**Contract Signed:** 08/20/2006

**Processing Status:** Active

**Amendment Status:** Complete

**Business Unit:** Sponsored Projects

**Contract Classification:** Standard

**Last Amended:** 11/19/2013

**Start Date:** 08/20/2006

**End Date:** 08/31/2016

**Last Update Date/Time:** 11/19/2013 1:59:47PM

**Last Update User ID:** LIENX110

**Parent Contract:**

**Master Contract:**

**Legal Entity:** REGENTS

**Purchase Order:**

**Proposal ID:** CON0000000005034
Checkbox to run the report for all related awards or to run report to the screen or PDF.
All contracts with the same parent CON number will display
DHHS Agencies

- Administration for Children and Families (ACF)
- Administration for Community Living (ACL)
- Agency for Healthcare Research and Quality (AHRQ)
- Agency for Toxic Substances and Disease Registry (ATSDR)
- Centers for Disease Control and Prevention (CDC)
- Centers for Medicare and Medicaid Services (CMS)
- Food and Drug Administration (FDA)
- Health Resources and Services Administration (HRSA)
- Indian Health Service (IHS)
- National Institutes of Health (NIH)
- Substance Abuse and Mental Health Services Administration (SAMHSA)
National Front

- COGR & FDP supporting NIH in request to delay the next phase to Federal Fiscal Year 16
  - DHHS declined request, NIH appealing
  - Allows for more planning & system modifications (if necessary)
  - Uniform Guidance implementations
  - Number of impacted awards drops in half
Planning

• SPA & SFR pre-planning
• Develop communication plan
• FAQs
  – Partner with GMUNAC to develop
More information

• NIH Guide Notice NOT-OD-13-120
  – *Note, the timeline in Notice OD-13-120 supercedes that in NOT-OD-13-112*

• NIH Payment FAQs
Questions

Sue Paulson
spaul@umn.edu
612-624-5007