



May 8, 2017

Dear Jeff Fontaine,

As a current grantee of and applicant to FHN, and as an advocate for disability services in Nevada, I would like to share some apprehensions about the recent decisions of the GMAC Disability Subcommittee. I appreciate the intention of the subcommittee to provide funding to all applicants but I am seriously concerned that there was little thought given to the impact of the lowered funds for the high scoring applicants.

I have two serious concerns:

1) In line with the DHHS FHN RFA, applications are published and scores are given based on the following 5 categories: Organizational strength (25 points), Collaborative partnerships (20 points), Service deliver (25 points), Cost-effectiveness (15 points), and Outcomes (15 points). Multiple independent reviewers are asked to score these proposals to ensure that high quality and sustainable services are funded by the state.

On page 17 of your RFA, it clearly states that, "Proposals that achieve a minimum score of 60 become requests and qualify for Step III of the evaluation process. Exceptions to the 60-point rule may be made if necessary to ensure statewide geographic distribution of funds." It seems that this process was created specifically to ensure high quality service delivery and I am curious as to why certain organizations that do not demonstrate organizational strength, partnerships, effectiveness in service delivery, cost-effectiveness, or even worse, potential for high-quality outcomes would be considered for funding.

I would like to know what consideration was given for the 4 proposals that scored less than 60 points that will now be funded beneath "Option 3" and remove money from the other funding priorities and from higher scoring applicants. Based on the wording in your RFA, it is not clear to me how funding those 4 applications will "ensure statewide geographic distribution of funds" when the proposals are for Washoe, Clark and Carson, all of which are geographic areas represented by other programs within the IL category. I urge you and the committee members to consider the impact of this decision on the quality of services provided.

2) The funding priorities for the disability category were pre-determined prior to the release of the RFA and assigned within the 3 disability categories based on the community needs assessment that was conducted by the GMU. I am wondering if the Disability Subcommittee has given much thought to the needs assessment in the decision to recommend that funding allocations are overruled and reassigned based on the sheer number of applications as opposed to the needs of community consumers and their family members. I encourage that the needs assessment is called back into consideration during this decision making process. As I stated in my public comment during the meeting, if "Option 3" is carried forward, there will be a 20% reduction to the PBS category and a 30% reduction to the respite category. The decision for

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those reductions also come with the added drawback of removing funding from the highest scoring applicants to provide funding to the lowest scoring applicants.

As stated in the RFA on page 3, "All of the proposed allocations listed above are subject to the availability of funds as well as any and all changes made by the 2017 Nevada Legislature during the state budgeting process and/or by the United States Congress during the federal budgeting process. If changes occur, amendment(s) to this RFA will be published." I have yet to see the amendments to the RFA published and I am curious as to how the changes made by the Legislature and/or US Congress have impacted the decision to change the proposed allocations.

Thank you for taking the time to read this letter and hear my concerns. If there are any further questions or if I can be of any assistance, please contact me directly.

Sincerely,

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