

RFA 34305-22117
 CMPQI CHECKLIST

Applicants Name:

Page(s) #:	Required Element:	PASS	FAIL
	Cover letter is included and addressed to: Vincent Davis, State Survey Agency Director 665 Mainstream Drive, 2nd Floor Nashville, TN 37243		
	Cover letter is signed by facility administrator if nursing home or signed by project administrator if other.		
	CMS Fillable Application (Attachment 1) is included and is signed by an individual who can legally sign a contract with the State of Tennessee. (Expand up to maximum of 20 pages including all attachments.)		
	All applicable blanks are completed in CMS application including Tax Identification number, and if applicable, Medicare/Medicaid numbers.		
	Submitted the completed Excel budget spreadsheet and budget details page (Attachment 2) for the project, along with a narrative explanation of the costs.		
	Job descriptions for key personnel are included (one page limit).		
	Biographical sketches/Curriculum Vitae for currently employed key personnel are included (one page limit).		
	Project organizational chart is included and significant collaborators are identified.		
	Project Title information is included per CMS application.		
	Required Abstract information is included per CMS application.		
	Statement of Need information is included per CMS application, and addresses possible problems and contingency plan.		
	Project Description information is included per CMS application and includes projected outcomes, the timeline, deliverables, benchmarks, and dates.		
	Results Measurements information is included per CMS application and identifies what data will be measured, how and when it will be measured, and who will measure it.		
	Description of how the nursing home community and governing body will assist and provide support for the project which is included per CMS application.		
	Identification and list of all organizations and subcontractors that will receive funds from this grant are included per CMS application (i.e., specific nursing homes, hospitals, local community agencies, etc.).		

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Letters of commitment/agreement from all organizations and subcontractors that will receive funds from this grant are included per Request for Application.

General Assurances form is included and signed per Request for Application.

Primary Evaluator Signature and Date:
