FY 2025 Annual Contract Evaluation and Recommendation for Continuation Funding

FINAL

Agency:		Progra	am:											
Contract/Program Manager:		Contra	act is a	Lead A	Agenc	y with	Colla	borativ	e Subc	contrac	tors 🗌	Yes [] No	
Contract Activities												Max	Pts	Rater
	Comme	nts/Exp	lanati	ons: N	ote be	st pra	ctices	and p	lans to	impro	ove	Pts	Awarded	Initials
1. Service Level Achievement:	Performance on each contracted outcome is scored separately and summed.									12				
(# of participants samued follow #	Comments/Explanations: Note best practices and plans to improve Pts Awarded Initials													
Contract/Program Manager: Contract Activities	% of target	1	2	3	4	5	6	7	8	9	10			
	95%-100%	12.00	6.00	4.00	3.00	2.40	2.00	1.71	1.50	1.33	1.20			
Number of outcomes used to score:	93%-94%	10.00	5.00	3.33	2.50	2.00	1.67	1.43	1.25	1.11	1.00			
	91%-92%	8.00	4.00	2.67	2.00	1.60	1.33	1.14	1.00	0.89	0.80			
	89%-90%	6.00	3.00	2.00	1.50	1.20	1.00	0.86	0.75	0.67	0.60			
	87%-88%	4.00	2.00	1.33	1.00	0.80	0.67	0.57	0.50	0.44	0.40			
	85%-86%	2.00	1.00	0.67	0.50	0.40	0.33	0.29	0.25	0.22	0.20			
	Below 85%	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
	Outcome					Contract Achieved Points				Points				
	Enter Comm	ents Hei	re:											

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Contract Activities												Max	Pts	Rater
	Comme	ents/Ex	planati	ions: N	ote bes	st pra	ctices a	ınd pl	ans to i	impr	ove	Pts	Awarded	Initials
2. Outcomes or Contract												28		
Deliverables:	Performance	on eac	h contr	acted o	utcome	e is sco	ored se	parate	ly and s	summ	ned.			
(% of contracted outcome results achieved)	Outcome Level				‡	of Out	comes							
(acnievea)	% of target	1	2	3	4	5	6	7	8	9	10			
Number of outcomes used to score:	95%-100%	28.00	14.00	9.33	7.00	5.60	4.67	4.00	3.50	3.11	2.80			
	93%-94%	23.33	11.67	7.78	5.83	4.67	3.89	3.33	2.92	2.59	2.33			
	91%-92%	18.67	9.33	6.22	4.67	3.73	3.11	2.67	2.33	2.07	1.87			
Check here if baseline data	89%-90%	14.00	7.00	4.67	3.50	2.80	2.33	2.00	1.75	1.56	1.40			
Completed by: Research	87%-88%	9.33	4.67	3.11	2.33	1.87	1.56	1.33	1.17	1.04	0.93			
Representative Rated on: Final year-end data	85%-86%	4.67	2.33	1.56	1.17	0.93	0.78	0.67	0.58	0.52	0.47			
	Below 85%	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
	Outcome					Ben	chmarl	k A	chieved	%	Points			
	Enter Comm	nents He	ere:											

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Contract Activities		Max	Pts	Rater
	Comments/Explanations: Note best practices and plans to improve	Pts	Awarded	Initials
3. Data Integrity Check	Score One:	15		
Check Date:	(Accuracy of Sample = # Correct Data Elements/Total # Data Elements) 95% - 100% accuracy (12 points)			
Check here if data was corrected Date:	90% -94% accuracy (8 points) Less than 90% accuracy (0 points)			
Completed by: Contract/Program Manager Rated on: Data Integrity Check report	Score 1 point for each: Administration of all measures follows measurement tool protocol/guidelines or program evaluation procedures Completed measures contain all necessary information for participant identification			
	Completed measures contain all necessary information including documentation for accurate scoring			
	Enter Comments Here:			
4. Fiscal Reporting: (Deduct from total points allowable the % of budget to actual reports received without accurate information and budget to actual reports not received on time by total number of reports received). Completed by: Fiscal Representative Rated on: Q1, Q2 & Q3 reports	Budget to actual reports were received by the deadline. (0, 1, or 2 points) Budget to actual reports contain accurate information. (0, 1, or 2 points) Enter Comments Here:	4		
5. Fiscal Reimbursements: (Deduct from total points allowable the % of those reimbursement forms received without accurate information by total number of reports received). Completed by: Fiscal Representative Rated on: Completed activities through Q3 Reimbursement Request.	Reimbursement requests contain accurate information. (0, 1, 2 or 3 points) Score One: The provider is consistently more than one month behind in submitting reimbursement requests. (0 points) The provider consistently submits a reimbursement request for a given month by the last day of the following month. (1 point) The provider consistently submits a reimbursement request for a given month by the 15 th day of the following month. (2 points) Enter Comments Here:	5		

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Contract Activities		Max	Pts	Rater
	Comments/Explanations: Note best practices and plans to improve	Pts	Awarded	Initials
6. Fiscal Compliance with	Timely notification of loss of other Program funds. (0 or 1 point)	6		
General Terms and	CBHC prior approval for spending outside of the budget. (0, 1, or 2 points)			
Conditions:	CBHC obtained contract notifications or pre-approved contract changes.			
Completed by: Fiscal Representative	(0, 1, or 2 points)			
Rated on: Completed activities through Q3 Reimbursement Request	Most current agency audit submitted on time (0 or 1 point).			
or activity.	Enter Comments Here:			

Score Summary	Additional Comments	Max	Pts	Rater
		Pts	Awarded	Initials
Total Score from Initial	Initial Score	30		
Total Points Final	Enter Additional Comments Here:	70		
Total Score	Initial + Final	100		

Final Recommendation

Continue funding effective October 1 (<i>Total score result is 85 points or higher</i>)
Continue funding effective October 1 – may include contract modification(s) (<i>Total score is between 70 and 84 points</i>)
Continue funding effective October 1 – may include Provider Improvement Plan process (<i>Total score is less than 70 points</i>)
Other Determination

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	Comments/Explanations should reflect best practices and plans to improve
7. Agency Audit (for direct contracts and lead agencies only) Completed by: Fiscal Representative Rated on: Year-end audit	Check one (If opinion status not selected, comments required): Unmodified opinion with no comments or findings Unmodified opinion with findings Qualified opinion Other (specify in comments) Enter Comments Here:
8. ASO Provider Monitoring Check here if not applicable Completed by: Contract/Program Manager (in conjunction with ASO team) Rated on: Data from ASO monitoring	Indicate "yes" or "no" for each item: Adherence to ASO Policies and Procedures Service or support tied back to a family support plan. Indicate % Documentation found in client file to substantiate ASO expenditures Funds returned if any. Indicate \$ amount If any of these objectives were not met describe in comments Enter Comments Here:
9. Provider Improvement Plan Completed by: Contract/Program Manager Rated on: Completed activities through September 30.	Check one: Not Applicable Completed Successfully Not Completed Successfully In Progress (continuing into next fiscal year)
Continue funding effective Octo Continue funding effective Octo	r Improvement Plan results change the continuation funding recommendation? Yes No ber 1 ber 1 — may include contract modification(s) ber 1 — may include Provider Improvement Plan process

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Projected Funding Allocation

FY 2025 Contract Amount: \$	ASO Allocation: \$
FY 2026 Continuation Contract Amount: \$	ASO Allocation: \$
Explain any amount difference including impact to program or if contract is e	nding (i.e. changes to service levels, outcomes and/or ASO allocations)
Enter Comments Here:	
Type of Recommended Contract: Investment (more than \$800,000)	Uniting (\$200,000 – \$799,999)
Contract/Program Manager Signature and Date:	
Director of Finance Signature and Date:	
Director of Programs Signature and Date:	
Director of Strategic Initiatives Signature and Date:	

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	For Lead Agent with funded sub-contracts only (calculate separately from final score):							
Collaborative Functioning / Lead Agent Compliance: Check if not applicable Completed by: Contract/Program Manager Rated on: Completed activities through September 30.	Score 0 or 1 for each: Programmatic Subtotal: Cooperation – Evidence that partnership improves service delivery. Enter Example Here: Coordination – Combined resources to maximize operational efficiencies. Enter Example Here: Collaboration – Collectively applying a pool of seamless resources to meet family outcomes (including but not limited to collaborative staff training). Enter Example Here: Sharing staff across partnership to meet program needs and goals. Enter Example Here: Subcontractor personnel included in CBHC contract negotiations. Score 5 if yes for ALL items, 0 if not. Place "X" if done. Contractual Subtotal: Lead informs subcontractors of CBHC notifications, requests or meeting notices Lead agent and subcontractor representatives attend CBHC training and/or meetings Subcontract agreements were executed and included all applicable special conditions and CBHC General Terms and Conditions as an attachment Subcontract agreements submitted to CBHC within 30 days of contract execution Lead agent completed sub-contractor(s) fiscal site visits.	Max 10	Pts Awarded	Rater Initial				
Maintain Lead Agency St.	Enter Comments Here: atus: YES NO if no, explain: Maintain All Sub-Contract Status: YES The second status is a second status in the	NO if r	no, explain:					
Enter Comments Here:								
Score of 7 -10 indicates Score of 6 or below	ates good standing indicates need to address areas of improvement with a collaborative action plan							