UMass Medical School Subrecipient Monitoring Guide

UMass Medical School is responsible for monitoring the programmatic and financial activities of its subrecipients in order to ensure proper stewardship of sponsor funds. Subawards are subject to federal and/or agency-specific regulations established by the prime sponsor.

The following collection of documents has been developed to assist administrators at the department and central level with subrecipient monitoring. The use of these tools and scope of monitoring procedures should be determined by the PI and administrators based on the nature of the grant and the perceived risk associated with the subrecipient. All of the following forms are *optional*; however, additional monitoring efforts should always be implemented if there is any question about the subrecipient's ability to ensure proper use and financial management of sponsor funds during any stage of the award.

The UMass Medical School Subrecipient Monitoring Guide includes the following documents:

Reference:

Stages of Subrecipient Monitoring

Initial Award Stage Monitoring:

- Domestic Subrecipient Profile Questionnaire
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- Risk Assessment Matrix
- Subrecipient Audit Information

Ongoing Monitoring:

- Sample Invoice
- Invoice Monitoring Guide
- Subrecipient Monitoring Record
- Problematic Subrecipient Letter

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Provides an overview of the monitoring activities performed at each stage of a subaward.
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The problematic subrecipient letter can be sent when a subrecipient is identified for late billing, communication difficulty, or any other factor related to noncompliance or potential noncompliance.

Initial Award Stage

The initial award stage includes proposal submission through award set-up. The goal of subrecipient monitoring efforts at this stage is to ensure that the subrecipient is capable of **compliantly spending the federal funds** and meeting the project goals.

Compliantly performing a risk assessment: A risk assessment should be performed to assess the potential risk level of a subrecipient. This step is especially helpful for subrecipients with whom UMMS has had no previous experience. A questionnaire relating to the organization's financial and management strength should be completed internally or by the subrecipient in these instances.

Developing a monitoring plan: The results of the risk assessment and a subrecipient's audit documentation should be used to determine the frequency and scope of any subrecipient monitoring. The monitoring plan should include strategies to mitigate potential risks of noncompliance.

Useful tools:

- Risk Assessment Matrix
- Domestic Subrecipient Profile Questionnaire / Foreign Subrecipient Profile Questionnaire
- Subrecipient Audit Documents

Ongoing Monitoring

Ongoing monitoring includes activities undertaken to monitor the subrecipient's administration, billing and scientific progress as well as on-going risk assessments (i.e. review of annual audit findings).

Communication with subrecipient: Frequent communication between the PI, departmental staff and research administrators at UMMS and the subrecipient institution is essential to ensure a compliant and successful collaboration.

Invoices: To ensure proper use of sponsor funds, invoices must be monitored for completeness.

Record of subrecipient monitoring efforts: Best practice dictates documenting all efforts related to subrecipient monitoring, especially if there are issues such as late billing or communication difficulty.

Useful tools:

- Sample Invoice
- Invoice Monitoring Guide
- Subrecipient Monitoring Record
- Problematic Subrecipient Letter

Award Closeout

Award closeout includes activities related to ensuring that the work was performed and properly billed. At the end of the award, the department is responsible for ensuring that all documentation related to project performance and financial obligations are received. Subrecipient monitoring activities that should be performed at award closeout include verifying that the final invoice is marked "final" and reviewing all technical/financial reports to ensure that the subrecipient provided all project deliverables and met project obligations.



Signature

Reviewer

Domestic Subrecipient Profile Questionnaire

Subrecipient Name:		Address:	City:		State: Zip:	
Phone:	Fax:	Email:		URL:		
Congressional District:		DUNS Number:		Employer	r ID (EIN)#:	
State of Incorporation:	f Incorporation: Number of Employees:					
Are you registered in SAM? Date last updated: Organization Type:						
Organization Classification (check all that apply to Subrecipient) Large Business Small Business HBCU Woman-Owned HUB Zone Individual Minority Institution/Owned Small Disadvantaged Business Tribal Volunteer Organization Veteran-Owned Does subrecipient have a federal cognizant agency? If yes, please list agency: Does subrecipient have a federally negotiated F&A rate? If yes, please attach or provide URL below:						
Audit Questions Is subrecipient required to comply with Uniform Guidance Subpart F Audit Requirements? If yes, fill in audit information below. Audit Contact Name: Title: Email: (Please enter exact legal name under which your audit report is filed in the online Federal Audit Clearinghouse at http://harvester.census.gov/sac/) Employer ID (EIN)# Audit is filed under (if different from EIN listed above):						
Audit Questions for Entities not required to comply with Uniform Guidance Subpart F Audit Requirements Have annual financial statements been audited by an independent audit firm? Does organization adhere to Cost Accounting Standards Board regulations under the proposed subcontract (FAR Part 30) (Refer to https://www.acquisition.gov/?q=/browse/far/30)						
Does organization have a financial management system that provides records that can identify the source and application of funds for award supported activities? Does the financial system provide for the control and accountability of project funds, property and other assets?						
Do policies exist that address: Pay rates and Benefits? Yes No Conflicts of Interest? Yes No Leave? Yes No Purchasing? Yes No Time and Attendance? Yes No Discrimination? Yes No Travel? Yes No If yes to any of the above, please attach a copy of the relevant policy, or provide the URL. Describe the method used to support labor and benefit charges: Is Government property inventory maintained that identifies purchase date, cost, vendor, description, serial number, location and ultimate disposition data?						



Foreign Subrecipient Profile Questionnaire

Subrecip	ient Name:			Address:			City:			Country:	
Phone:			Fax:		Email:				URL:		
Type of (Is organization incorporated or legally registered within the country of operations? If yes, please supply a copy of the registration certificate with this questionnaire. If no, please attach an explanation to this form.										
•	•		terials that descr	ibe the org	janization,	mission and	histo	y. If this in	formatio	on is available on a w	ebsite,
	ovide the lii		cutive officers of	vour organ	ization Th	nis may inclu	l ide bij	t is not lim	ited to th	he following position	ns•
i icase iis	t the names	or the exec				iis may mere	iac, be			——————————————————————————————————————	13.
Presiden	t/Director:				Oth	er Officer (N	ame &	Title):			
Chief Fin	ancial Office	er:			Oth	er Officer (N	ame &	Title):			
Number	of Full-Time	Employee	s:	Number	of Part-Tim	ne Employee	es:				
(USAID) d	or the Nation	nal Institute		? If yes, ple						nal Development ne name of the U.S.	
Interna	Controls	Questions	S Internal controls	are procedure	s which ensu	re that: 1) finar	ncial trar	sactions are	approved b	by an authorized individu	al and adhere
			licies, 2) assets are ke Ir organization's inter		3) accounting	g records are co	mplete,	accurate, and	d maintaine	ed on a regular basis. Ple	ase complete
			id employee?		ls each em	ployee's sala	ary stat	ed in an ei	mployme	ent letter or contract	?
How ofte	en are equip	ment audit	s performed?								
Accoun	ting Syste	m Questic	Ons (Subrecipients v	vho have curr	ent audit rep	orts performed	by an ir	ndependent a	nuditor do r	not have to complete this	section and
The purpos financial tra while other recorded in	e of an accoun ansactions. The s use a manual an organized	ting system is e type of accor system to rec and consisten	unting system often coord each transaction t manner, consistent	lepends on the in a ledger. It with Cost Acc	ne size of the In either case counting Star	organization. S , award funds n dards (CAS).	Some or nust be	ganizations m properly auth	nay have co orized, use	other documentation suppomputerized accounting sed for the intended purpo	systems,
			accounting polic e recorded, cash							ease explain in an aged.	
Are finan	cial reports	prepared o	n a cash basis or	on an accr	ual basis?						
Do accou	ınting recor	ds separate	the receipts and	payments	of an awa	rd from the	receipt	s and payr	ments of	other activities?	
			ward expendituren n in an attachme				s such	as salaries	, supplies	s, travel and	
								ned? If the	re are cir	rcumstances where	
Will any o	these documents cannot be, or will not be obtained, please explain in an attachment. Will any cash from award funds be kept outside the bank account (e.g., in petty cash funds)? If yes, attach an explanation regarding the amount of funds to be kept and the name and position/title of the person responsible for safeguarding the cash.										
	FOREIGN SU	JBRECIPIENT	'S BANKING INFOR	MATION						current audit reports per	
Name of	Bank:								swer this q	question and may instead	enclose their
last two years of audit reports). Account Number: If organization does not have audited financial statements, please submit a copy of you					copy of your						
Wire ABA	Wire ABA Number: Balance Sheet and Revenue and Expense Statement for the current fiscal or calendar year. UMMS may require an audit of your accounting records. An audit is a review of					r calendar					
ACH ABA	Number:									ting records. An audit is a nt/firm to assess whether	
Swift Cod	de Number:					ormation is cor					
Banking	Contact:									or institutional endent accountant	
Contact I	Email:				circumstances) that would prevent an independent accountant from performing an audit? If yes, please attach an explanation.						

UMMS SUBRECIPIENT RISK ASSESSMENT MATRIX

	Category	Lower Risk	Medium Risk	Higher Risk
1.	Foreign vs.	Domestic (US only)	Canada, US territories	All other international
2.	Domestic Facilities and	Work occurs in adequate,	Some work done at UMMS	locations Subrecipient's lab
۷.	Infrastructure	established space at	facilities	resources are
		subrecipient's facility		inadequate, requiring
				that work occur on
3.	Maturity of	Mature (e.g. more than	Mature, but not research	UMMS campus Start-up, no fiscal
	Organization	10 years)	oriented	controls in place yet
4.	Organization Type	University or Non-profit (Collegial Terms and	University or Non-profit with more restrictive T&Cs (e.g. state	Industry organization
		Conditions (T&Cs)	regulations)	
5.	Award Type	Grant from federal or	Coop agreement or grant with	Contracts and contracts
	A	non-commercial source	special conditions	with subcontracts
6.	Amount/ Percentage of	Lower funding levels or percentage of total funds	Funding is a large part of smaller award	Funding level>\$500K or >49% of award
	Award	allocated to subrecipient		1370 01 411414
	Subcontracted	(e.g. <\$100k)		
7.	Accounting/	Systems have been	Systems less qualified to handle	No systems are in place,
	Procurement Systems	approved (existing audit is an indicator)	large amounts of federal money (Financial audit conducted but	or systems are new
	-,		not required by Uniform	
			Guidance Audit Requirements)	
8.	Negotiated	Has detailed negotiated	Has simple rate agreement	Does not have
	Indirect Cost	rate agreement		negotiated rate
9.	Rate Agreement Audit Report	Has annual audit as	Has annual third-party financial	agreement Has not had an annual
	- 10 and 110 por 0	required by Uniform	audit	financial audit
		Guidance Subpart F		
10.	Prior experience	Previous positive	Previous experience as UMMS	New subrecipient or
	with UMass Medical School	experience as UMMS subrecipient	subrecipient but may have some minor concerns	previous negative experience with
	333 231100			subrecipient.
11.	ITAR/EAR	No export controlled	Collaborative agreements with	Organization or project
		activity involved	potential for ITAR control needed	involves ITAR (e.g.
				satellites, biological warfare)
12.	Compliance	No compliance issues	Animal Subjects or Human	Animal/human subject
	(animal/human	involved, or exempt per	Subjects involved, but non-	or other compliance
	subjects, DNA,	IRB	medical or non-invasive	issues involved, higher
13.	stem cells) Scientific	Subrecipient PI is a		risk activities No previous
13.	Relationship	familiar collaborator		collaboration
	between UMMS			
	PI and			
	Subrecipient PI			

UMMS SUBRECIPIENT RISK ASSESSMENT MATRIX

	Category	Lower Risk	Medium Risk	Higher Risk
14.	Difficulty of Scope of Work & Deliverables	Report only - easily met objectives	Possibility of change in scope or collaborative work scope	Tangible products, deliverables necessary in order to achieve project success
15.	Transparency / Frequency of Reporting	Frequent reporting or easily assessed progress based on milestones or observable outcomes		No reporting until the end of the project, no measurable or observable milestones or outcomes
16.	Audit restrictions	Auditors are able to perform testing on all awards	Auditors can perform testing only on part of portfolio, but other auditing or audit reports are provided	Subrecipient places restriction on auditors due to status as Federally Funded Research and Development Center
17.	Is Auditablity restricted (e.g., FFRDC)? Is it a sub on an award with built in audit fees?	Work occurs in a geographic location with reliable power and communication capacity. The location is readily accessible and subcontract expenses include fees for independent audit		Work occurs in remote, inaccessible location that experiences extended or frequent unexpected power outages that impede communication in a non-English speaking environment
18.	Cost Sharing	Subrecipient has made no commitment to share costs		Subrecipient has committed to fund project costs not paid by the UMMS subaward
19.	Existing UMMS Monitoring	The subaward is made from an award operating within a UMMS department with an established research infrastructure		The subaward is made from an award operating within a UMMS department without an established research infrastructure
20.	Rate of Subrecipient Spending on Award	Pace of spending is consistent with budgeted amounts per year	Pace of spending slightly accelerated compared to budgeted amount per year	Spending far outpaces that which was contemplated in the submitted budget

Using the Risk Assessment Matrix

The Risk Assessment Matrix is used to assess the level of risk posed by a prospective subrecipient. If UMMS is issuing a subaward to an organization with whom it has no previous relationship, it is advised to perform a risk assessment at the award stage to determine if a monitoring plan is needed.

Sample Invoice

How to use: The sample invoice demonstrates the elements required for a complete invoice when billing UMass Medical School.

To: UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL

	GRANT ACCOU	INTING & COMP	LIANCE, ATTN: A	MY MIARECKI	
	333 SOUTH ST	REET			
	SHREWSBURY	, MA 01545			
SUBAWARD NUMBER:			INVOICE DATE:		
GRANT NUMBER:					
REIMBURSAB	LE COSTS FOR PERIOD:		TO:		
CATEGORY	BUDGET	PREVIOUSLY BILLED	Current Period to	BILLED TO DATE	BALANCE REMAINING
Personnel					
Name & Title					
	\$0.00	\$0.00		\$0.00	\$0.00
Fringe	\$0.00	\$0.00		\$0.00	\$0.00
Travel	\$0.00	\$0.00		\$0.00	\$0.00
Supplies/Printing	\$0.00	\$0.00		\$0.00	\$0.00
Honoraria *	\$0.00	\$0.00		\$0.00	\$0.00
Program Training Costs					
(Itemize)	\$0.00	\$0.00		\$0.00	\$0.00
Other Expenses (Itemize)	\$0.00	\$0.00		\$0.00	\$0.00
Subtotal Direct Costs	\$0.00	\$0.00		\$0.00	\$0.00
Indirect costs	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
* Must provide detail of n	ame and amount	BY:			
			(Signature)		
		NAME:			
		TITLE:			
		DATE:			
******Invoice detail shoul	d be in accordance w	vith the line items i	n your Subaward Agi	reement, Attachment #	5, Budget******

UMMS SUBAWARD INVOICE MONITORING GUIDE

How to Use: The guide is a list of 11 questions for departments to consider when monitoring subaward invoices for completeness and compliance with UMMS's policies.

- **1.** Are the expenses allowable per the subaward and the prime award? Remember the prime award requirements and budget restrictions flow down to the subrecipient.
- **2.** Are the invoiced expenses included in the subaward budget? The subrecipient should only invoice for approved expenses per the subaward or ask for approval of budget changes when necessary to modify the original terms/budget.
- **3.** Are the expenses in the agreement consistent with the programmatic plan or work completed to date? The expenses invoiced should agree with the work incurred.
- **4.** Obtain Principal Investigator's (PI) approval and signature on the subrecipient invoice.
- **5.** Were all the expenses incurred within the subaward start and end dates? Ensure that the dates on the invoice are within the subaward dates.
- **6.** Are the cumulative expenses within the overall approved budget amount? Ensure that subrecipients are not invoicing for amounts over the approved budget.
- **7.** Are the invoice expenses per budget category in agreement with the budgeted amount per line item category?
- **8.** Do expenses appear to be based on actual expenses? Cost reimbursable subcontracts require invoicing **based on actual expenses only**.
- **9.** Does the invoice total correctly?
- **10.** Are the Facilities & Administration (F&A) costs calculated correctly with the correct and agreed upon rate for the subrecipient? Ensure the calculated F&A agrees with the methodology in the budget and applies the appropriate base (e.g., Modified Total Direct Cost) for F&A recovery.
- **11.** Does the invoice have an **institutional official signature** <u>and</u> contain the following statement: "I certify that all expenditures reported (or payment requested) are for appropriate purposes and in accordance with the provisions of the application and award documents."

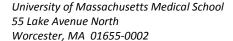
REMEMBER: Most invoices do not include a large amount of detail. Ask the subrecipient for back-up documentation on specific budget line items if something does not appear correct.

IF THERE ARE ANY QUESTIONS ON THE INVOICES, DO NOT APPROVE UNTIL ALL ITEMS ARE APPROPRIATELY RESOLVED.

UMass Medical School Subrecipient Monitoring Record

How to use: The Subrecipient Monitoring Record is used by departments to document subrecipient monitoring efforts and maintain an audit trail. Use of the tracking record is encouraged at all risk levels but is strongly encouraged for medium and high risk subrecipients.

UMa	ss Medical School	Subrecipient			
UMMS PI Name: UMMS PS Award#: UMMS Subaward#: Subrecipient Period of Performance		Subrecipient Na Subrecipient PI Subrecipient Co	:		
		Pro	ct Invoicing Frequency		
Start Date:	End Date:	Mo	onthly Quarterly		
Name:	Individual Responsible for Mai Title:	ntaining this Monito	_ ·		
	Scheduled Reporting Dates (based	d on the terms of the	grant award)		
DATE	COMMENTS		ACTUAL DATE*		
Inform	al Progress Reports Completed (these		*dates entered as each report is submitted e place at least quarterly)		
DATE	METHOD		COMMENTS		
	Other Com	munications			
DATE	METHOD		COMMENTS		





Ms. Jane Doe Grants and Contracts Specialist XXXX University 123 Main Street Anywheresville, USA 12345

Problematic Subrecipient Letter

How to use: The Problematic Subrecipient Letter is sent to subrecipients when a subrecipient is identified for late billing, communication difficulty, or any other factor related to noncompliance or potential noncompliance.

Re: Subaward No. xxxxx between UMMS and XXXX University under NIH Prime Award No. XXXXXX UMMS PI: Dr. XXXXX

Dear XXXXX:

The UMass Medical School (UMMS) employs a risk-based approach to subrecipient monitoring to ensure that subawards are in compliance with UMMS policy and federal regulations.

Your institution has been identified as requiring further inquiry due to inconsistent invoicing. Invoices are not being received in a timely fashion and do not reflect the degree of completeness that we require in order to submit our financial reports. (specific wording inserted here depending on the problem identified)

Please note that your invoices should include a breakdown of expenses incurred by category for the period being invoiced and a total of the expenses incurred for the project period. Invoices must be submitted within <u>XX</u> days of the period covered by the invoice. The final invoice is due within <u>XX</u> days after the end date of the Period of Performance.

We value our collaboration with your organization; however, late and/or incomplete invoices can cause financial reports to be submitted late to sponsors, which is a high area of audit scrutiny. It is extremely important that we receive invoices from your institution/organization in a timely manner. UMMS also welcomes the opportunity to resolve any administrative problem or clarify any miscommunication.

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Your attention and	COODOCATION	ragarding th	aic mattar i	~ ~~~~+1	V annraciatad
TOUL ALLEHINOH AND	COODELATION	TERALUIUR II	ns manerr	\ PI Eali	v audieualeu.

Sincerely,

XXXXX