

VOCA – Frequently Asked Questions

Why are awards distributed by region?

Awards by region helps ensure equitable distribution of funds based on number of victims in a region. The funding regions mirror Missouri Coalition Against Domestic and Sexual Violence (MCADSV) regions with the exception of some counties to keep counties within judicial circuits together.

What data was used to determine the regions?

Data sources used were the crime victimization rates and data from the Missouri State Highway Patrol (MSHP), and the Department Child Abuse and Neglect data.

What if a victim chooses to receive services in another region?

Victims may seek services in any region, regardless of where the victim resides. Agencies should have considered the number of victims and types of services that were anticipated to be provided within each region prior to submitting the bid.

If I am a provider that serves multiple regions, are there contracts for each region, or an overall contract?

Each region will have separate awards and contracts. If you are providing services between regions, you must cost allocate. For example, you have one staff person that serves more than one region. The staff must track their time spent in each region and costs, and these costs would be invoiced for the correct region.

If a provider has an increase in participation in one region and a decrease in another region, the provider can contact their DSS representative.

What is the timeframe of the contracts?

The first contract is six months, or April 1, 2022 – September 30, 2022. There is a possibility of two, one-year renewals. (These renewals are for October 1st – September 30th.)

When do we submit the budget and budget narrative?

Budget and Budget Narrative must be submitted within 10 days after the date the contract is awarded. (Refer to paragraph 3.5.1 of the NFO.)

Are match waivers currently in place?

Yes, per the Office of Victims of Crime, match waivers are currently in place from one year from the end of the Public Health Emergency. These waivers are automatic, and there is no requirement to request a waiver. DSS encourages providers to continue to report match so the processes remain in place, and it is evident that there are supports other than the VOCA grant in place.

How much funding is/was available by year?

- FFY17: \$34.4M
- FFY18: \$61.8M
- FFY19: \$41.7M
- FFY20: \$30.9M
- FFY21: \$19.2M

Will the funding increase?

It is unknown at this time what the impact will be of the “VOCA Fix”. There was a large deposit in September 2021 of \$254M. Then, the deposits from October 2021 through January 2022 (5 months) was approximately \$127M. While the overall fund greatly increased due to the large deposit, it is unknown what future deposits will be. In addition, it is important to note that regardless of the amount of funds in the account, Congress determines the overall amount that can be allocated to States.

If we have funds that we have not spent by September 30th, can we use those funds in the renewal?

No. Future awards will be made by calculation, and remaining funds will be included in the overall amount to be allocated.

Why is the amount of funding based on the current grant and how are the previous year’s balances being used?

DSS receives an award notice from the U.S. Department of Justice around September of the year the funding can begin. For example, the 2021 funding was received in September 2021 and must be obligated by September 30, 2023 and liquidated by December 31, 2023.

Award Methodology

1.) **For previous providers** (before April 1, 2022) **who submitted a bid for only one region.** - This amount is based on the previous award averaged to 12 months divided by 2 (for 6 months). Example:

- The previous award was \$23,000 for 23 months.
- The new award will be \$6,000 ($\$23,000 \div 23 \text{ months} = \$1,000$. $\$1,000 \times 12 \text{ months} = \$12,000$ divided by 2 (for 6 months) = \$6,000).
 - If there are future 1-year renewals, the contract amount will be \$12,000.

2.) **For previous providers who submitted bids for multiple regions,** the amount is based on each region's percent of the total bid, and then multiplied by your previous award. Example:

- The total bid was \$100,000 and there was a bid for Central Region for \$40,000 (40% of total bid) and a bid for the St. Louis Region of \$60,000 (60% of total bid).
- The previous award was \$92,000 and the average for 12 months is \$48,000 ($\$92,000 \div 23 \text{ months} = \$4,000$. $\$4,000 \times 12 \text{ months} = \$48,000$).
- Central Region contract would be \$9,600 ($\$48,000 \times 40\% = \$19,200$. $\$19,200 \div 2 = \$9,600$)
- St. Louis would be \$14,400 ($\$48,000 \times 60\% = \$28,800$. $\$28,800 \div 2 = \$14,400$).
 - If there are future 1-year renewals, the amount will be \$19,200 for Central Region and St. Louis will be \$28,800.

3.) **For new providers,** the amount is based on the average award for the region. Example:

- There were 20 bids for existing providers that will be awarded for \$7,500,000, the average is \$375,000. The bid amount was \$250,000. The contract will be \$125,000 ($\$250,000 \div 2$).
 - If there are future 1-year renewals, the amount will be \$250,000.
- There were 20 bids for existing providers that will be awarded for \$7,500,000, the average is \$375,000. The bid amount was \$500,000. The contract will be \$187,500 ($\$375,000 \div 2$).
 - If there are future 1-year renewals, the amount will be 375,000.

Why was this methodology chosen?

If only the top scores were chosen, there would have been only a few awards by region. This would have impacted services and those seeking services. This methodology allows for distribution based on previous award, or regional average. It provides many service locations throughout Missouri.

Section 4.8.1 states there is no recourse for the determination of funding. Is there no appeal or formal grievance process?

No.

Why is supplanting included, as I did not think it applied to sub recipients/non-profits? This is not in other state contracts.

A sub recipient of federal funds is held to the same standards of the Department and is based on the guidelines of that specific federal grant. Federal guidance for VOCA can be found: [DOJ Financial Guide](#) Section II sub-section 2.3.

If a client has insurance to cover costs that are also provided and funded through VOCA, should the insurance be used?

VOCA is the payer of last resort. If victims have private or public insurance to cover costs, these should be utilized first. VOCA can pay the allowable unreimbursed costs.

How soon will we be notified of the funding available for the next fiscal year/renewal of our contracts?

All agencies are required to report anticipated expenditures through September 30th by June 30th. The notification timeframe for optional renewals will depend on timely agency responses, and funding available.