

BHECN ARPA Invoice/Reimbursement Training Webinar

**Thursday, May 11th
10-11 AM CT**

BHECN

BEHAVIORAL HEALTH
EDUCATION CENTER
OF NEBRASKA



**University of Nebraska
Medical Center™**

Agenda

- Start-up payments
- Invoicing
- Invoice and reimbursement process
- Reporting requirements

Startup Payments

- About 60% of ARPA awardees received “Startup Payments”
 - 10% of total award amount obligated
 - Still need to invoice in order to receive these funds
 - Can be activities that have already occurred or anticipated activities
- You will need to submit monthly invoices for the duration of your award
- Invoices must be highly detailed, including:
 - ✓ Proper time-keeping for personnel
 - ✓ Travel expenses and/or travel report
 - ✓ Receipts or proof of purchase for equipment, software, etc.
- Once startup payment amount has been exceeded, awardees must submit invoices for the cost incurred
 - At this point, it becomes cost-reimbursable

Invoicing

- For those who did not receive startup payments, you must submit invoices at least quarterly and no more than monthly
- Invoices must be highly detailed and include items that are only applicable to your project and scope of work (SOW)
 - ✓ Proper time-keeping/tracking for personnel
 - ✓ Travel expenses and/or travel reports
 - ✓ Receipts or proof of purchase for equipment, software, etc.
- A cost charged to the award must meet the below criteria (link):
 - ✓ Allowable to the award
 - ✓ Necessary and reasonable to execute your project and subcontract
 - ✓ Treated as a direct cost
 - ✓ Determined in accordance with the Generally Accepted Accounting Principles
 - **This applies to startup payments as well**

Invoice Form

- Can be found on the BHECN website
- American Rescue Plan Act Resources
- [“Visit the ARPA Awards Blog”](#)
- Will also be emailed to all awardees after the webinar

A	B	C	D	E	F	G	H	I	J	K
Subrecipient Expenditure Invoice Template										
Invoice Number:					Subaward Number:					
Invoice Date:					Award Number:					
Invoice Period:					Subaward PI Name:					
Invoice Amount:		\$0.00								
Subrecipient Name										
Subrecipient Address										
							<input type="checkbox"/> Check if final invoice			
Expense Categories					Expenditures for Invoice Period	Cumulative Expenditures	Cost Share Expenditures for Invoice Period	Cost Share Cumulative Expenditures		
Project Costs										
Personnel salaries										
Fringe Benefits										
Domestic Travel										
International Travel										
Equipment*										
Supplies & Materials										
Consultants										
Subawards										
Other Direct Costs										
Total Direct Costs					\$0.00	\$0.00	\$0.00	\$0.00		
F&A Costs										
Total Costs					\$0.00	\$0.00	\$0.00	\$0.00		

Invoices Must Include the Following

- ✓ The subrecipient standard invoice
- ✓ Current and cumulative costs
- ✓ Subaward number
- ✓ Application number
- ✓ Certification as required in 2 CFR 200.45(a)

§ 200.415 Required certifications.

Required certifications include:

(a) To assure that expenditures are proper and in accordance with the terms and conditions of the Federal award and approved project budgets, the annual and final fiscal reports or vouchers requesting payment under the agreements must include a certification, signed by an official who is authorized to legally bind the non-Federal entity, which reads as follows: "By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729–3730 and 3801–3812)."

Invoicing Process

1. Submit Invoice

- No more than monthly, and at least quarterly, submit your invoice to Linda Combs Lvondras@unmc.edu
- Awardees receiving startup payments must submit invoices monthly
- This information can be found on Attachment 3A of your subcontract

2. UNMC SPA Review

- Post-award SPA team will provide high-level review for allocable costs and budget comparison

3. BHECN ARPA Review

- BHECN ARPA Financial Analyst will review your invoice against your budget and SOW
- BHECN ARPA and SPA will work with awardees to make corrections, if necessary

4. BHECN ARPA PI Approval

- BHECN Director, Dr. Marley Doyle, will approve all invoices

5. Accounts Payable

- Approved invoices will be sent for payment

Invoice Tracking

- UNMC SPA and BHECN ARPA will be tracking your invoices
- BHECN ARPA will use a file-sharing system in Teams
 - You may view your project invoice/reimbursement tracking there
- You should also keep your own records and compare them against BHECN ARPA's

Payment Paperwork

- Make sure you have the following paperwork submitted to BHECN ARPA:
 - ACH Paperwork
 - W9
 - Voided Check
- This will allow for faster reimbursement of invoices
 - Direct payment to business account
 - Physical checks can take up to 10 weeks (or more)

Reporting Requirements

Two reporting requirements

1. Technical or progress report

- Provided to ARPA Director, Jessie Buche, annually
- This is a narrative of program activities
- What you've accomplished to-date compared to your intended scope of work
- Will also include a financial component
 - What you've spent so far
 - How you plan to spend incumbent funds

2. Quarterly financial reports

- Invoices can be used in lieu of financial reports

Technical Reporting Example

Behavioral Health Education Center of Nebraska American Rescue Plan Act Annual Performance Narrative January-December 2023		
Project Overview		
Application Number:		
Subcontract/WBS Number:		
Organization Name:		
Organization address:		
Project lead:		
Project description:		
Project Category:		
Budget:		
Project initiation date:		
Estimated project completion date:		
Current Expenditures		
Please list your expenditures as of 12/31/2023. The current and cumulative expenditures will be the same in the 2023 award period.		
	Amount	Description
Personnel		
Fringe		
Travel		
Equipment		
Supplies/materials		
Consultants		
Subawards		
Other direct costs		
Current period expenditures		
Total cumulative expenditures		
Unencumbered Balance		
Use the space below to answer the following questions: 1) Do you anticipate spending your award in the timeframe described in your scope of work? Please provide justification. 2) If you do not anticipate spending your award, please indicate how much you anticipate will remain at the end of your award period.		

Project Activities		
Please list up to 10 project activities, the progress you've made toward completing the activity (Not Started, In Progress, or Completed), and a description of the activity.		
Activity	Progress	Description
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
Barriers		
Using the space below, please describe any barriers you have encountered during your project implementation, intended solutions, and needs for technical assistance.		

Questions?