

MISSOURI KIDNEY PROGRAM
COST CONTAINMENT RESEARCH AND DEMONSTRATION PROJECT

Instructions for Proposal Preparation

Following is a description and explanation of the various sections and enclosures to be included in your cost-containment proposal.

1. Proposal Abstract

In no more than 250 words, describe the goal of your project and its anticipated cost containment effect.

2. Proposal Plan

A. Goal and Cost Containment Implications of the Proposal.

All supporting figures and sources of information should be included. Make this statement as convincing and complete as possible. Proposals must be designed to have **direct cost-containment application**, with the reasonable expectation that at the conclusion of the study information will have been generated that demonstrates clear cost-reducing potential for MoKP programs and/or participants.

B. Project Objectives

Specify the objectives of your project. Objectives should be measurable and limited to activities intended to have cost containment implications.

3. Proposal Budget

The attached budget sheet provides a monetary overview of the project for the time period. It is divided into three sections. The first column includes the specific MoKP budget request by categories; the second column includes contributed costs other than by Missouri Kidney Program; and the third column is the sum of the first two columns.

Budget categories are defined as follows:

Patient Care: Expenses for ESRD or pre-ESRD patient care not covered by all other sources.

4. Budget Justification

Describe each budget category for which you are requesting funding. Follow standard procedures when justifying each category, i.e., document costs, and justify need.

Category

Justification

Patient Care

Identify exact nature and cost of patient care needs. Document other sources available for this purpose and justify amount requested.

No general miscellaneous categories will be funded. Indirect costs are not allowable. No F&A, Indirect or Overhead can be taken from these funds. **DIRECT COSTS ONLY.**

5. Appendices

- A. Institutional Review Board (IRB) approval (human/animal subjects).
- B. Curriculum vita of project director.

(Project Name)

(Budget Period)

| Budget Categories | MoKP Request | Contributed Costs | Total Costs |
|--|--------------|-------------------|-------------|
| Travel (mileage, vendor transportation, gas reimbursement, Parking) | | | |
| Dental | | | |
| Other Costs Associated (hotel, meals, etc) | | | |
| TOTALS | | | |