

Executive Order 38 – Waiver

This section will familiarize the user with the methods used to navigate through the Waiver section.

[Logout](#) | [Help](#)



Executive Order #38

Provider Name: EO38 Organization 1
Federal Employer Identification Number: 675849302

1. Information 2. Update Details 3. Submit Disclosure 4. Apply for Waiver

Notes

A separate waiver application must be filed for each executive for whom the Provider/Applicant seeks a waiver. Additionally, a separate waiver application must be filed for an Administrative Expenses waiver application.

View Submitted Waivers

4.1 Waiver Application 4.2 Compensation 4.3 Upload Files 4.4 Affirmation

Note : To add a new CRP, Lead Agency, Other Agencies, Executive or Preparer the user must go to Update Details Tab

*** Required Fields**
+ All fields are required to Submit Affirmation

*+Covered Reporting Period

*+Preparer Information

*+Basis of Calculations Entire Revenue SF/SAP 

Waiver

Log into the Waiver section using your Username and Password, provided by Grants Gateway:



Executive Order #38

HOME | FAQ | GUIDANCE | DETERMINATION | TRAINING | CONTACT

LEGAL NOTICE: Based upon the April 8, 2014 decision in Agencies for Children's Therapy Services, Inc. v. New York State Department of Health, et al. ("ACTS"), covered providers conducting business in Nassau County need not file Executive Order 38 disclosures. For purposes of this notice, "conducting business" means having a place of business within Nassau County, providing program services or administrative services involving the use or receipt of State funds or State-authorized payments within Nassau County, or otherwise conducting business within Nassau County in relation to which executive compensation is paid. Please note that the ACTS' decision is under appeal. Those affected by the ACTS' decision should periodically check the EO 38 website for updates regarding any changes to this notice.

Disclosure - Login

Username * [Request a Grants Gateway Account](#)

Enter your Grants Gateway username.

Password *

Enter the password that accompanies your username.

Forgot your Grants Gateway Username? Contact the Grants Gateway Administrator in your organization or the [Grants Reform Team](#).
Forgot your Grants Gateway [Password](#)?

For technical issues when making a Disclosure, contact the [Technical helpdesk](#).

After logging in, the next screen that is displayed is the Information screen:



Executive Order #38

[Logout](#) | [Help](#)

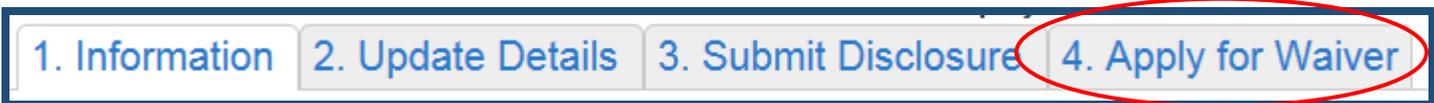
Provider Name: EO38 Organization 2
Federal Employer Identification Number: 184936502

1. Information | 2. Update Details | 3. Submit Disclosure | 4. Apply for Waiver

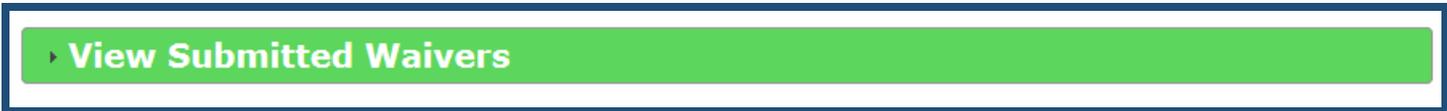
Provider Information

| | |
|--|--|
| Provider Name | EO38 Organization 2 -- 52117 |
| Provider Address | 15-9 GRUMMAN RD WEST, BETHPAGE New York 11714 |
| Provider Phone | (712) 495-0293  |
| Provider Email | No Data |
| Organization's Fiscal Year End Date | 09/30 |
| State Agency With Most Contracts | Office For People with Developmental Disabilities Contact Info |

To get to the Waiver section you must click the **Apply for Waiver** tab.



Below the Notes section there is a section to **View Submitted Waivers**. If there were any Submitted Waivers, you could view them here.



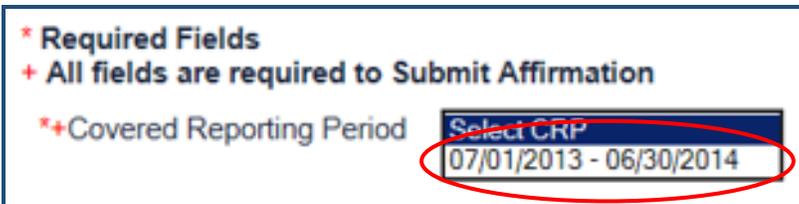
Below the Submitted Waivers section you will notice four tabs. The Waiver Section is broken up into four parts. You will start with the first section **4.1 Waiver Application**:



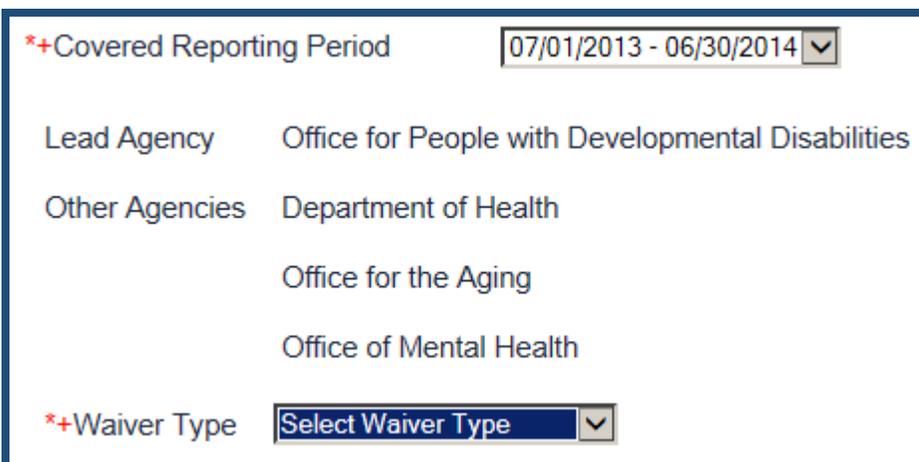
4.1 Waiver Application

Note: The first two fields, **Covered Reporting Period** and **Preparer Information** must be filled out in the Update Details section. If these fields do not have any information, go back to the Update Details section to fill them out.

Choose the **Covered Reporting Period** from the dropdown:



Once you choose the Covered Reporting Period, your **Lead Agency** and **Other Agencies** will display. The Waiver Type question will display as well.



Choose the **Waiver Type** from the list of Waiver types:

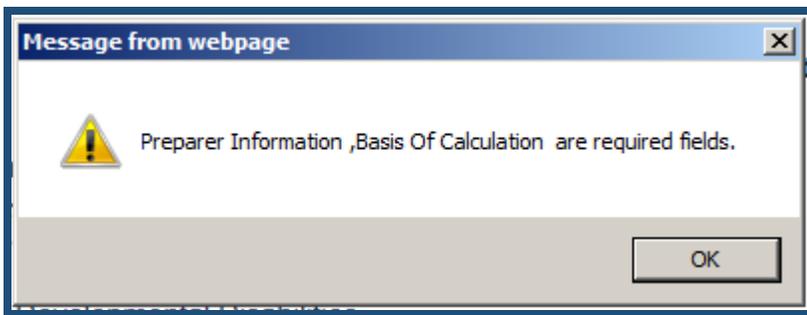


*+Waiver Type

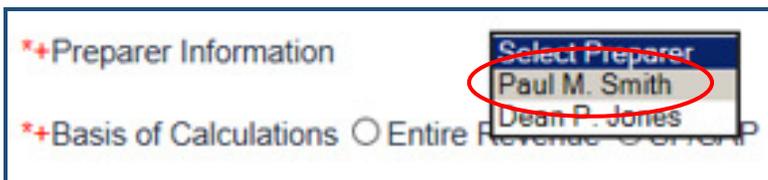
- Select Waiver Type
- Administrative Expenses
- Executive Compensation

Once you fill out the Waiver Type, a **Next**  button will appear at the bottom of the Waiver Application section.

Note: You must still fill out the other fields before moving on to the next section of the Waiver. If you try to click **Next** before filling out the rest of the Section, you will receive an error message:



Choose the preparer from the list of **Preparer Information**:

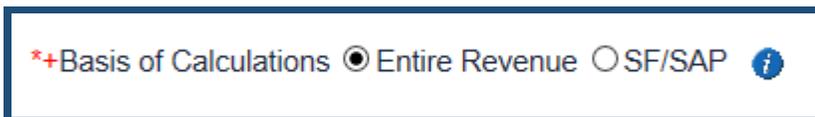


*+Preparer Information

- Select Preparer
- Paul M. Smith
- Dean P. Jones

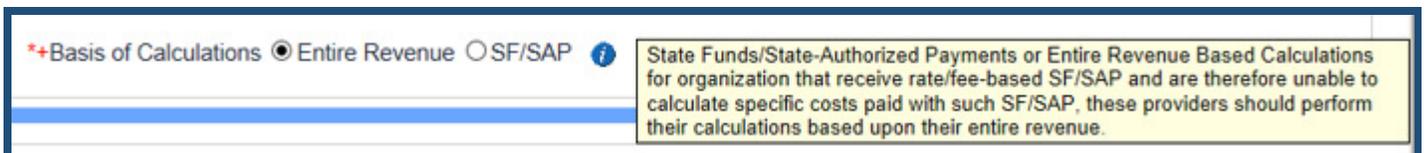
*+Basis of Calculations Entire Revenue SF/SAP

For **Basis of Calculation**, click the radio button for either **Entire Revenue** or **SF/SAP**:



*+Basis of Calculations Entire Revenue SF/SAP 

Note: You will notice that next to the answers for Basis of Calculation there is an  Information bubble. Hover over the Information bubble to view more information about this field.



*+Basis of Calculations Entire Revenue SF/SAP 

State Funds/State-Authorized Payments or Entire Revenue Based Calculations for organization that receive rate/fee-based SF/SAP and are therefore unable to calculate specific costs paid with such SF/SAP, these providers should perform their calculations based upon their entire revenue.

Once you have completed Section **4.1 Waiver Application**, click the Next button.

You will then move on to section **4.2 Compensation**.



4.2 Compensation

Fill in the **Administrative** and **Program Services Expenses**. As you fill these fields out, **Covered Operating Expenses** populates automatically.

Administrative Expenses

* Required Fields
+ Required Fields To Submit Affirmation

| | | |
|--|---|---|
| *+Administrative Expenses | <input type="text" value="\$1000000"/> (Numbers Only) | Program Services & Admin Expenses Calculation worksheet |
| *+Program Services Expenses | <input type="text" value="\$200000"/> (Numbers Only) | |
| *+Covered Operating Expenses | <input type="text" value="\$1200000"/> (Numbers Only) | |
| *+Administrative Expenses Percentage % | <input type="text"/> <input type="button" value="Calculate"/> | |
| *+Program Services Expenses Percentage % | <input type="text"/> <input type="button" value="Calculate"/> | |

Note: If you would like to fill out the Program Services & Admin Expenses Calculation worksheet, you can do so at this time by clicking the link.



Click the **Calculate** button to calculate the **Administrative Expenses Percentage %** and **Program Services Expenses Percentage %**.

| | |
|--|--|
| *+Administrative Expenses Percentage % | <input type="text" value="83"/> <input type="button" value="Calculate"/> |
| *+Program Services Expenses Percentage % | <input type="text" value="17"/> <input type="button" value="Calculate"/> |

The next Five sections are free text fields with a 4,000 character limit. They are required in order to Submit the Waiver.

| | | |
|-------------------------------------|---------------------------------|---|
| +Rationale for Exceeding the Limits | <input type="text"/> | i |
| | Maximum 4000 characters. | |
| +Unavoidability | <input type="text"/> | i |
| | Maximum 4000 characters. | |
| +Impact | <input type="text"/> | i |
| | Maximum 4000 characters. | |
| +Control Process | <input type="text"/> | i |
| | Maximum 4000 characters. | |
| +Alternative Funding | <input type="text"/> | i |
| | Maximum 4000 characters. | |

As you type in a field you will be told how many characters remain.

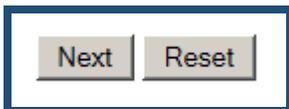
| | | |
|-------------------------------------|--|---|
| +Rationale for Exceeding the Limits | <input type="text" value="The rationale for Exceeding the Limits is"/> | i |
| | 3959 characters remaining. | |

Remember: Every section has an Information bubble. If you hover over the Information bubble additional information will display, explaining the field.



The screenshot shows a form section with a label "+Unavoidability" on the left. To its right is a text input field with a placeholder "Maximum 4000 characters." At the end of the input field is a blue information icon (a lowercase 'i' inside a circle), which is circled in red. A yellow tooltip bubble is positioned to the right of the icon, containing the text: "Describe the extent to which the Administrative Expenses that are the subject of this waiver are necessary or unavoidable."

Once you have completed the Required fields to move on to the next section click the **Next** button:

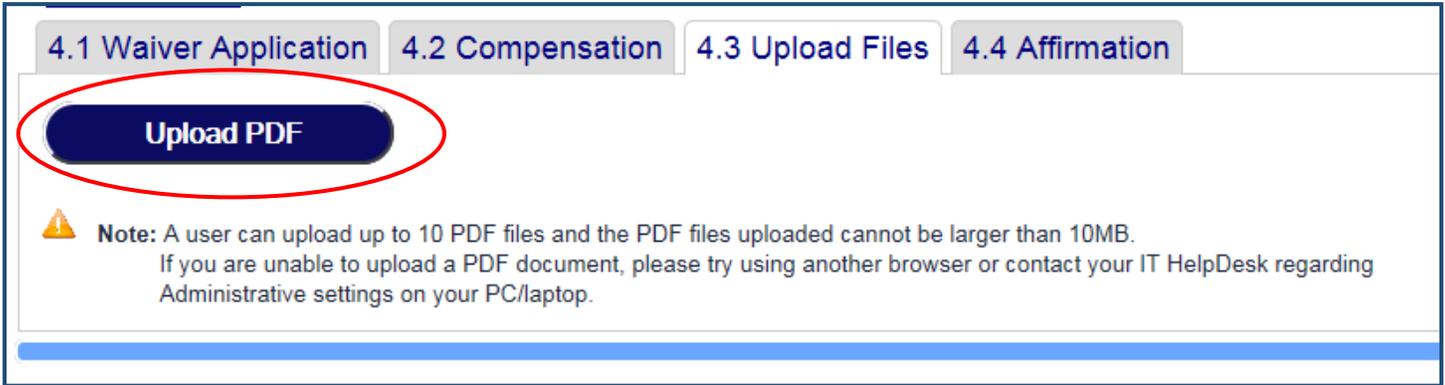


The screenshot shows two buttons side-by-side: "Next" and "Reset". Both buttons are light gray with dark text and are enclosed in a blue rectangular border.

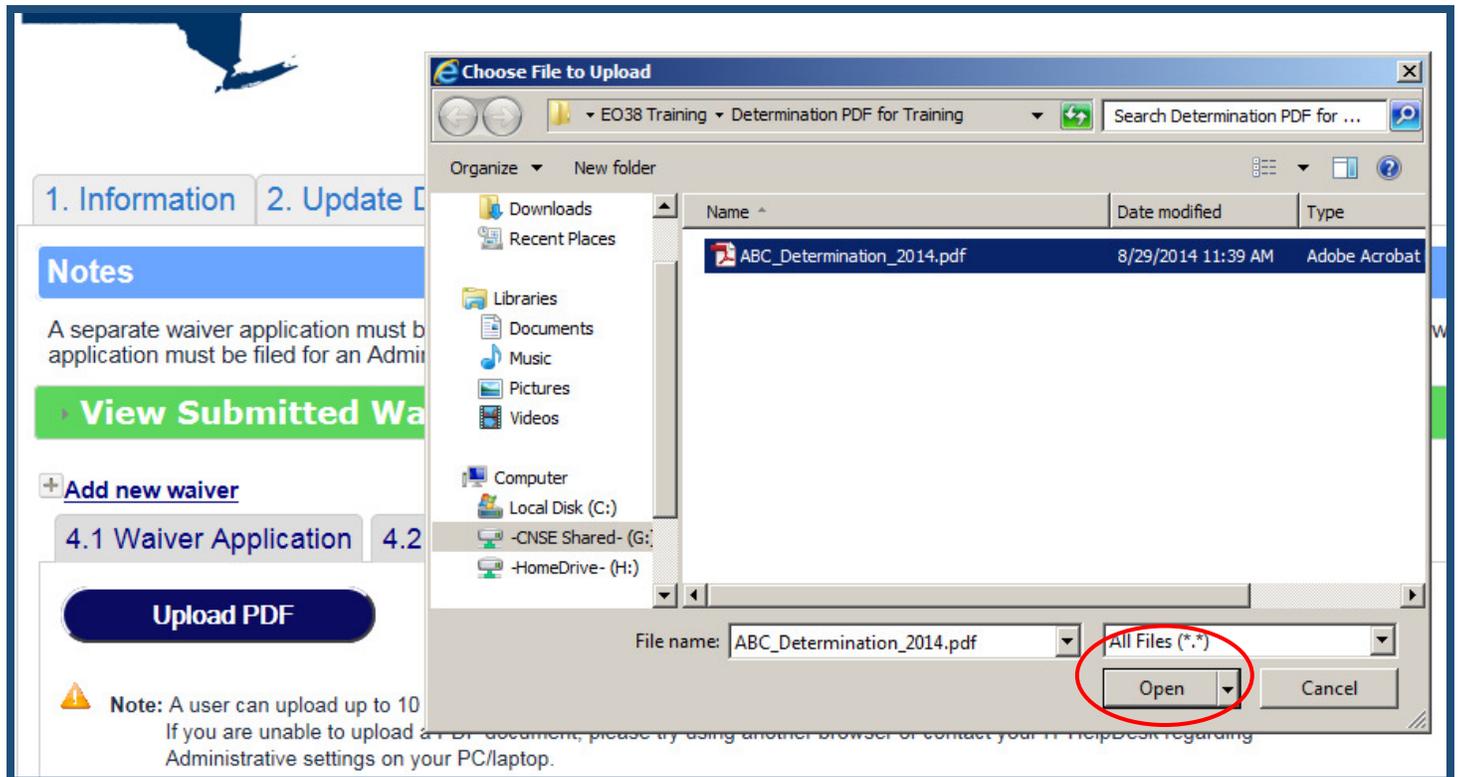
Note: To clear the form, click the **Reset** button.

4.3 Upload Files

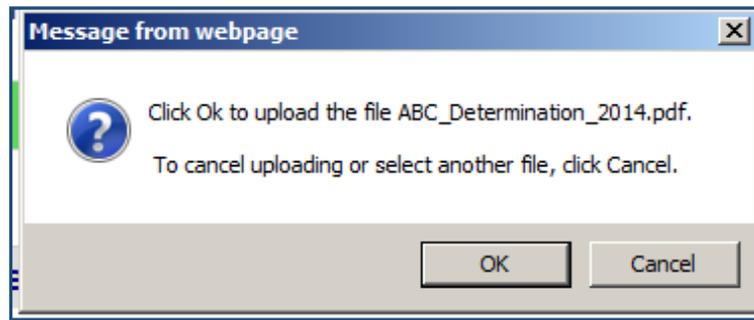
Click the **Upload PDF** button to upload a file, such as the pdf copy of the Compensation Survey or the Worksheets.



On your Network or Computer's Hard Drive, find the pdf that you would like to upload and click **Open**:



You will get a message telling you the pdf's name that you are uploading and to Click OK if this is the correct document. Click **OK**.



You will get a message that the PDF was successfully uploaded.

4.1 Waiver Application 4.2 Compensation 4.3 Upload Files 4.4 Affirmation

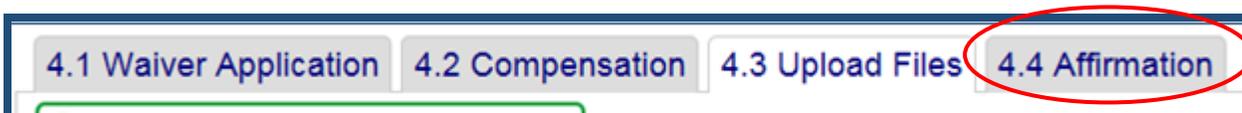
 The PDF was successfully uploaded.

| Document Name | User Name | Uploaded Date | Action |
|----------------------------|-----------|------------------------|---|
| ABC_Determination_2014.pdf | GR EO38 | 01/09/2015 02:15:22 PM |   |

Upload PDF

 **Note:** A user can upload up to 10 PDF files and the PDF files uploaded cannot be larger than 10MB. If you are unable to upload a PDF document, please try using another browser or contact your IT HelpDesk regarding Administrative settings on your PC/laptop.

Click the 4.4 Affirmation tab to complete the Waiver process and Affirm the information that you have entered on the form



4.4 Affirmation

Read the information for Section A. and B. and then check the corresponding boxes to say that you agree with those statements.

4.1 Waiver Application4.2 Compensation4.3 Upload Files4.4 Affirmation

Application Requested of Non-Disclosure

A. The Applicant/Covered Provider hereby requests that, pursuant to Public Offices Law 87(2)(d) and 89(5), any and all State agencies receiving this Waiver Application or copies thereof except such information from public disclosure pursuant to paragraph (d) of subdivision two of section eighty-seven of the Public Officers Law. Below (or in the additional information box below), please find a statement of reasons why the information contained here should be exempted from disclosure on the basis that, if disclosed, such information would cause substantial injury to the competitive position of the subject Covered Provider.

Additional Information

Maximum **4000** characters.

B. Yes It is further requested that, to the fullest extent permitted by applicable law(including the New York State Freedom of Information Law and Personal Privacy Protection Law), any and all State agencies receiving this Disclosure Form for copies there of not publically disclose the statements, representation , and other information submitted herein.

Applicant Affirmation

I affirm, under the penalties of perjury, that all statements, dates, and representations continued in this application are true and correct. I, on behalf of the applicant/covered provider, understand and agree to fully and timely cooperate with any requests by the state for supporting documentation or additional information in relation to this application. I further affirm, under the penalties of perjury, that I am duly authorized by the governing body of the Covered Provider named herein to submit this request on its behalf. I affirm that the waiver application is being submitted based on a good faith belief that the Covered Provider named is (or is projected to be) out of compliance with the applicable regulatory limitations on Administrative Expenses and/or Executive Compensation for the Covered Reporting Period referenced herein I agree and it I my intent, to sign this form by electronically submitted the form to the State of New York. I understand that my signing and submitting this form electronically is the legal equivalent of having placed my handwritten signature on the form.

If there is any Additional Information that you wish to include in section A. you can use the **Additional Information** text field to enter that information.

A. The Applicant/Covered Provider hereby requests that, pursuant to Public Offices Law 87(2)(d) and 89(5), any and all State agencies receiving this Waiver Application or copies thereof except such information from public disclosure pursuant to paragraph (d) of subdivision two of section eighty-seven of the Public Officers Law. Below (or in the additional information box below), please find a statement of reasons why the information contained here should be exempted from disclosure on the basis that, if disclosed, such information would cause substantial injury to the competitive position of the subject Covered Provider.

Additional Information

Maximum **4000** characters.

Once you have completed the Waiver, click the **Submit** button.

Submit

You will be sent back to section 4.1 Waiver Application and there will be a message letting you know that the Waiver has been successfully created.

The screenshot shows the 'Executive Order #38' application interface. At the top right, there are links for 'Logout' and 'Help'. The main header includes a map of New York and the title 'Executive Order #38'. Below this, the provider information is displayed: 'Provider Name: EO38 Organization 1' and 'Federal Employer Identification Number: 675849302'. A navigation bar contains four tabs: '1. Information', '2. Update Details', '3. Submit Disclosure', and '4. Apply for Waiver'. A blue 'Notes' section contains a message: 'A separate waiver application must be filed for each executive for whom the Provider/Applicant seeks a waiver. Additionally, a separate waiver application must be filed for an Administrative Expenses waiver application.' Below the notes is a green bar with a minus sign and the text 'View Submitted Waivers'. Underneath is a '+ Add new waiver' link and a sub-navigation bar with four tabs: '4.1 Waiver Application', '4.2 Compensation', '4.3 Upload Files', and '4.4 Affirmation'. A red arrow points from the '4.4 Affirmation' tab to a green-bordered success message box that reads: 'Waiver has been successfully created. Contact your agency representative to modify this waiver.'

Remember: To view any Submitted Waivers, click the **View Submitted Waivers** section:

This screenshot shows the 'View Submitted Waivers' section of the application. It features the same navigation tabs as the previous screenshot. The 'Notes' section is present. The 'View Submitted Waivers' section is highlighted with a red oval. Below it is a table with the following data:

| Covered Reporting Period | Waiver Type | Executive Name | Preparer's Name | Submitted Date | Status | Action |
|--------------------------|-------------------------|----------------|-----------------|----------------|-----------|---|
| 07/01/2013 - 06/30/2014 | Administrative Expenses | N/A | Paul M Smith | 01/09/2015 | Submitted |   |

Under the **Action** column you will notice that there are some icons for the Waiver:



Logout – To logout of the Executive Order 38 application, click the Logout link.



Delete – Allows you to Delete the Waiver.



View – Allows you view the Waiver.