

## FY 2013 PCA NCC Frequently Asked Questions

FY 2013 State and Regional Primary Care Association (PCA) Non-Competing Continuation (NCC) instructions are available at the PCA technical assistance (TA) web site, <http://www.hrsa.gov/grants/apply/assistance/pca>. Below are common questions and corresponding answers for the FY 2013 PCA NCC. New FAQs will be added as necessary, so please check <http://www.hrsa.gov/grants/apply/assistance/pca> frequently for updates. The FAQs are organized under the following topics:

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### Submission Development and Attachments

**1. When are the NCC submissions due in the HRSA Electronic Handbook (EHB)?**

Submissions are due in EHB by 5:00 p.m. ET on January 23, 2013.

**2. Is there a page limit for the NCC submission?**

Yes, there is a 40-page limit on the length of the total submission when printed by HRSA. Refer to Table 1 on pages 4-5 of the PCA NCC instructions for more information on what is counted in the page limit.

**3. Does HRSA have formatting guidelines (e.g., font type, font size) for the attachments such as the Program Narrative Update and the Budget Narrative?**

Yes, attachments should be single-spaced narrative documents with 12-point, easily readable font (e.g., Times New Roman, Ariel, Courier) and 1-inch margins. Smaller font (no less than 10-point) may be used for tables, charts, and footnotes.

All attachments should be uploaded in a computer-readable format (i.e., do not upload text as images). To the extent possible, HRSA recommends PDF files but will accept Microsoft Word or Excel files. Limit file names to 100 characters and do not use spaces or special characters when naming files. Avoid Excel

documents with multiple spreadsheets as individual worksheets may not print out in their entirety. Upload the attachments in the appropriate fields in the EHB.

**4. Which forms and attachments are required?**

The SF-PPR, Budget Information: Budget Details Form, Budget Narrative, Project Work Plan, and Attachment 1: Program Narrative Update are required for successful submission. Refer to Table 1 on pages 4-5 of the PCA NCC instructions for more information.

**5. When should Attachments 2-6, noted as *applicable*, be uploaded with the NCC submission?**

A revised Staffing Plan, Position Description for Key Personnel, Biographical Sketches for Key Personnel, and Summary of Contracts/Agreements should be submitted if any information contained within has been added or revised since the FY12 PCA competitive application.

**6. How is the Staffing Plan (Attachment 2) different from the Position Descriptions (Attachment 3) and Biographical Sketches (Attachment 4)?**

The staffing plan is a presentation and justification of **all staff** required to execute the project as opposed to the other attachments that are limited to key personnel. A staffing plan template is provided on the PCA TA web site, <http://www.hrsa.gov/grants/apply/assistance/pca>.

**7. Who in the organization is considered key personnel for Attachment 3 (Position Descriptions) and Attachment 4 (Biographical Sketches)?**

Key personnel includes any individual who will be directly involved in the activities proposed under the cooperative agreement. Key personnel may include the Chief Executive Officer (CEO), Chief Financial Officer (CFO), Chief Operating Officer, (COO), and Program Leads, among others as determined by the organization.

**8. What is the difference between a Position Description (Attachment 3) and a Biographical Sketch (Attachment 4)?**

A position description outlines the key aspects of a position (e.g., position title; description of duties and responsibilities; position qualifications; supervisory relationships; skills, knowledge, and experience requirements; travel requirements; salary range; work hours). A biographical sketch describes the key qualifications of an individual that make him/her qualified for a position (e.g., past work experience, education/training, language fluency, experience working with the cultural and linguistically diverse populations to be served).

**9. Can organizations upload additional attachments?**

Yes, upload additional relevant material in Attachment 6: Other Relevant Documents, as desired.

## **Program Narrative Update**

**10. What is the purpose of the Program Narrative Update when progress will be reported in the Progress Report field of the Project Work Plan?**

The purpose of the Program Narrative Update is to discuss broad issues and changes that have impacted the target audience(s) served and the PCA, as well as progress on the work plan, since September 1, 2012. This section expands on the updates provided in the structured Project Work Plan in EHB. It is important to consider the brief updates provided in the Progress Report field of the Project Work Plan to streamline reporting and avoid duplication.

**11. What are the differences in items 1 through 6 of the Program Narrative Update?**

Item 1 provides an opportunity to describe overarching progress beyond what is captured in the individual activity progress updates in the Work Plan. This item provides applicants with the opportunity to describe big-picture progress and proposed changes. It also provides the opportunity to describe work targeting special populations and summarize plans for upcoming needs assessments.

Item 2 is similar to Item 1, but it focuses on big-picture outcomes as a result of TA activities, including highlighting how challenges have been overcome beyond what is captured in the individual activity progress and key factors updates in the Work Plan.

Item 3 provides an opportunity to examine progress toward the performance measure goals over time through the provision of baseline, current, and goal data. Since the Work Plan does not capture baseline and current data, this is the only place in the NCC where all relevant data points will be captured and discussed.

Item 4 provides an opportunity to describe changes in linkages and/or partnerships. This is the only place in the NCC where this information is requested.

Item 5 provides an opportunity to describe changes and updates to the staffing plan beyond what is captured in Attachment 2. The appointment of a Special Populations Point of Contact should be discussed in this section, as well as challenges experienced in recruiting and retaining key management/project staff.

Item 6 provides the only opportunity in the NCC to describe plans for budget periods beyond FY 2013.

## Budget

### **12. What are the dates of the upcoming budget period?**

The budget period will be April 1, 2013 through March 31, 2014.

### **13. How much can be requested in the budget?**

The budget request must not exceed the recommended level of support found on line 13 of the Notice of Award. The allowable budget value will be pre-populated in your NCC.

### **14. Is a Budget Details Form required for each subsequent budget year?**

Yes, a Budget Details Form is required for each budget year within the project period; however, a Budget Narrative is only required for the upcoming budget period.

### **15. Is the Budget Narrative the same as a budget justification?**

Yes, for the purpose of the PCA NCC submission, they are the same. The sample Budget Narrative provided at the PCA TA web site, <http://www.hrsa.gov/grants/apply/assistance/pca>, includes a box for providing any narrative explanation of costs necessary beyond what is provided in the line-item descriptions.

### **16. What should be included in the Budget Narrative?**

The Budget Narrative must detail the costs of each line item within each object class category from the Budget Details Form. It is important to ensure that the Budget Narrative contains detailed calculations explaining how each line-item expense is derived. The narrative explanation should highlight the changes from the last PCA submission or clearly indicate that there are no substantive budget changes during the project period.

### **17. Should the Budget Information: Budget Details form or the Budget Narrative include non-federal funding (e.g., grant funding, program income)?**

No, budget requests should only identify federal section 330 funding. Do not identify other program income. Organizations can provide information on other program income and resources in the Program Narrative Update, if appropriate.

**18. Does HRSA require organizations to have an indirect cost rate?**

No, organizations are only required to have an indirect cost rate agreement if indirect costs are budgeted. If an organization does not have an indirect cost rate agreement, costs that would fall into such a rate (e.g., administrative salaries) may be charged as direct line-item costs. If an organization wishes to apply for an indirect cost agreement, more information is available at <http://rates.psc.gov>.

**19. If an organization has an indirect cost rate, what needs to be included in the submission?**

Organizations must include a copy of the indirect cost agreement in Attachment 6: Other Relevant Documents.

**20. Where can an organization find more information about costs pertaining to conferences and publications?**

The following resources are recommended to facilitate development of an appropriate budget.

- The HHS Policy on Promoting Efficient Spending: Use of Appropriated Funds for Conferences and Meetings, Food, Promotional Items, and Printing and Publications, available at [http://www.hhs.gov/asfr/ogapa/acquisition/effspendpol\\_memo.html](http://www.hhs.gov/asfr/ogapa/acquisition/effspendpol_memo.html).
- The BPHC Primary Care Association Guide 2012 – 2013, available at <http://www.hrsa.gov/grants/apply/assistance/pca>, provides clarification of information about publications and conferences as they pertain to PCA Cooperative Agreements.

**Project Work Plan (includes New items)****21. What are the requirements of the Project Work Plan?**

The table on the following page summarizes the minimum and maximum number of key components for each section of the Project Work Plan.

Project Work Plan Key Components	Section A		Section B (Clinical)		Section B (Financial)		Section C		Character Limit
	Min	Max	Min	Max	Min	Max	Min	Max	
Goal	1	1	2	2	2	2	N/A	N/A	N/A
Key Factor	3	5	3	5	3	5	N/A	N/A	500
T/TA Focus Area	3	5	1	3	1	3	7	9	200
Activity	2	5	2	5	2	5	2	5	200

Project Work Plan Key Components	Section A		Section B (Clinical)		Section B (Financial)		Section C		Character Limit
	Min	Max	Min	Max	Min	Max	Min	Max	
Person/Area Responsible	1	5	1	5	1	5	1	5	200
Time Frame	1	5	1	5	1	5	1	5	200
Expected Outcome	1	5	1	5	1	5	1	5	200
Comments	This is an optional field and can be left blank for new activities that are proposed in this NCC or if no changes were made to the field. Comments are required for any edits or deletions made to a pre-populated activity.								500
Progress Report	This is a required field.								1,000
Narrative for Deletions	This is a required field when pre-populated activities are deleted.								1,000

**22. Should the Project Work Plan cover 1 year or all years of the project period?**

The Project Work Plan activities should cover the upcoming budget period (1 year) and address ONLY activities to be supported under the HRSA PCA cooperative agreement. The Project Work Plan goals should be projections for the end of the project period.

**23. What are the required performance goals?**

The five performance goals include:

**Required Performance Measures**

Program Requirements Goal	
A1	XX% of Health Center Program grantees with no program conditions on their Notice of Awards. (Notice of Award).
Clinical Performance Improvement Goals	
B1.a	XX% of Health Center Program grantees in the state/region that meet or exceed performance on one or more Healthy People 2020 performance measure goal(s).
B1.b	XX% of Health Center Program grantees with Patient-Centered Medical Home (PCMH) recognition.
Financial Performance Improvement Goals	
B2.a	XX% of Health Center Program grantees with cost increase less than National average.
B2.b	XX% of Health Center Program grantees without going concern issues.

**24. Can organizations propose additional performance goals to the Project Work Plan?**

No; however, as desired, organizations can add T/TA Focus Areas for the existing performance goals. Ensure that all proposed activities align with the existing goals.

**25. How should organizations develop their target percentage goals?**

Target percentage goals should reflect projections for the end of the project period. Consult with your Project Officer before changing the goal percentages.

**26. Can organizations conduct activities under two or more of the same T/TA Focus Area in the Project Work Plan?**

No, organizations may not propose duplicate T/TA Focus Areas in the Project Work Plan. A maximum of two Other T/TA Focus Areas may be added in each section, but only the pre-defined T/TA Focus Areas will count toward the requirement.

**27. What is the minimum and maximum number of Activities that can be proposed for each T/TA Focus Area?**

Identify 2 to 5 major Activities for each T/TA Focus Area. For each Activity, identify at least 1 Person/Area Responsible, 1 Time Frame, and 1 Expected Outcome.

**28. How should Expected Outcomes be developed?**

Identify at least one quantifiable outcome that will result directly from the T/TA activity. Since this is a 12-month Project Work Plan, short-term expected outcomes must be measurable by the end of the budget period (e.g., number of health centers to receive training by the end of the second year of the cooperative agreement). However, longer term expected outcomes may also be proposed since some activities will not have measurable outcomes within one year (e.g., staff retention rates).

**29. What are the differences between the Comments, Progress Report, and Narrative for Deletions fields?**

The Comments field is an optional field and can be left blank for new activities that are proposed in this NCC or if no changes were made. Comments are required for any edits or deletions made to any T/TA Focus Area, Activity, Person/Area Responsible, Time Frame, or Expected Outcome.

The Progress Report field is a required field. Use it to report progress toward each Activity. If no progress has been made, indicate this within the field and provide a brief explanation.

The Narrative for Deletions field is required when pre-populated activities are deleted. Use it to provide progress to date and explain why the activity will not be carried into Year 2.

**30. Will the Project Officer (PO) be involved in the development of the Project Work Plan?**

Changes to the performance measure goals should be discussed in advance with the PO. Consultation with the PO on other aspects of the submission is allowed. Please note that the PO will review the entire NCC submission (including the Work Plan) and, if necessary, negotiate with the PCA on required revisions and/or place conditions on the Notice of Award to address areas of non-compliance, as appropriate.

**31. Where can information be obtained regarding the HRSA program reports?**

For information regarding HRSA program reports, organizations should contact Beth Levitz in the Office of Policy and Program Development at [BPHCPA@hrsa.gov](mailto:BPHCPA@hrsa.gov) or 301-594-4300.

**32. New! How can the work plan be utilized to both report progress on the FY 2012 activities and list the proposed FY 2013 activities?**

There are two options for reporting progress for every activity.

- If the pre-populated activity can easily be edited to make it applicable to FY 2013, use the Progress Report field to report progress made since September 1, 2012 and edit the activity field as needed to indicate plans for FY 2013.
- If the pre-populated activity will be significantly changed or replaced with something completely new for FY 2013, delete the activity and use the narrative box that appears to both report progress and justify the deletion. A new activity can then be added to replace the deleted activity.

**33. New! How will my Project Officer understand what the Progress Report column means if it links back to the FY 2012 activities and the Activity column has been edited to reflect proposed FY 2013 activities?**

Your Project Officer will be able to access the FY 2012 work plan when reviewing the NCC submission. However, if you want to provide more context for the Progress Report notes, you can provide a brief summary of the FY 2012 activity

in the Progress Report field (e.g., completed planning and development for 2 of the planned 5 webinars; held 1 of the planned 5 webinars), copy and paste the FY 2012 activity into the Comments field with an “FY 2012” header, or include information in Item 1 of the Program Narrative Update.

**34. *New!* How should progress from the period of April 1, 2012 through August 31, 2012 (the extended FY 2011 project period) be reported?**

Since this was not part of the PCA NCC instructions, there is no designated place in the submission to report progress made during the project period extension BPHC granted for April 1, 2012-August 31, 2012, and it is not required. Please provide such progress in the Program Narrative Update and work plan as desired.

## Funding Restrictions

**35. Are there activities that are ineligible for PCA funding?**

Yes, PCA funding may not be used for the following activities:

- Construction/renovation of facilities;
- Activities not approved under the cooperative agreement;
- Reserve requirements for state insurance licensure; or
- Support for lobbying/advocacy efforts.

**36. Can section 330 funding be used to provide education on health centers and health care needs within the state/region?**

Yes, organizations may propose activities (e.g., issue briefs) to analyze issues impacting health centers and the underserved. Such analysis on issues may be made available to the general public and other stakeholders such as policy makers, health centers, other safety net providers, community leaders, and potential partners. However, educational documents related to pending or existing legislation cannot be created utilizing federal funding.

## Technical Assistance

**37. Who should be contacted if the organization is unable to access the NCC module in EHB or has difficulty submitting?**

If you are experiencing any problems in the EHB system, please contact the BPHC Help Line at [bphchelp@hrsa.gov](mailto:bphchelp@hrsa.gov) or 1-877-974-2742.

**38. How will organizations be notified that the NCC was successfully submitted in EHB?**

EHB will generate a confirmation page upon successful submission. Organizations are encouraged to print this confirmation page, since no email confirmation will be sent.

**39. Who should be contacted with programmatic questions concerning the NCC submission requirements and process?**

Refer to the PCA TA web site at <http://www.hrsa.gov/grants/apply/assistance/pca> for TA slides, a replay of the TA call, FAQs, and samples, among other resources. Organizations may also contact their PO or Beth Levitz in the Bureau of Primary Health Care's Office of Policy and Program Development at [BPHCPCA@hrsa.gov](mailto:BPHCPCA@hrsa.gov) or 301-594-4300.

**40. Who should be contacted for specific questions about budget preparation, including eligible costs?**

Contact the Grants Management Specialist (GMS) listed at the bottom of your Notice of Award. If your GMS is unable to assist, contact Angela Wade in the Office of Federal Assistance Management's Division of Grants Management Operations at [awade@hrsa.gov](mailto:awade@hrsa.gov) or 301-594-5296.