

**State and Regional Primary Care Association Technical Assistance Call –
Alabama and Pacific Islands**

**Moderator: Denise Nguyen
May 23, 2012
3:30 pm ET**

Coordinator: Good afternoon and thank you all for standing by. All participants will be able to listen-only until the question and answer session of today's conference call.

Today's call is being recorded. If anyone has any objections you may disconnect at this time.

And now I'll turn the call over to your speaker Ms. Denise Nguyen. Ma'am you may begin.

Denise Nguyen: Hi. Hello. I'm Denise Nguyen. I'm from the Office of Policy and Program Development at HRSA's Bureau of Primary Health Care. Thank you for joining us.

The purpose of this call is to provide an overview of the fiscal year 2012 State and Regional Primary Care Association or PCA cooperative agreement specific to Alabama and Pacific Islands.

This funding opportunity announcement or FOA number is HRSA-12-183. This FOA was released on May 17.

The PowerPoint slides are available on the PCA Technical Assistance Web site which is located at <http://www.hrsa.gov/grants/apply/assistance/pca>.

I'll repeat that again <http://www.hrsa.gov/grants/apply/assistance/pca>.

When you go into this website, scroll to the bottom of the page to see - to look for HRSA-12-183. You will notice that this funding opportunity shares the same TA materials as HRSA-12-114.

So please feel free to refer to the FAQs that are posted. And also information on the data report TA materials.

If you do not have slides for today's presentation in front of you please refer to a copy of the FOA. I will refer to the page numbers so that you can follow this presentation.

A digital audio recording will be available within one week after the call on the PCA TA Web site.

On the agenda for today's call, the following topics will be covered. First overview of this FOA, second eligibility requirements, third the two tier electronic submission process, followed by requirements for the project narrative, project work plan, then technical assistance contacts and important reminders and a final question and answer session.

Slide 3, the purpose of this FOA is to establish cooperative agreements with organizations to provide statewide or regional training and technical assistance or TA to all existing Section 330 health centers regardless of PCA membership.

It's also to provide TA to all interested organizations seeking section 330 resources.

Existing health centers include section 330 grantees and federally qualified health center look-alikes.

Potential health centers include organizations that seek to become section 330 grantees. That includes planning grant awardees and organizations applying for new access points.

Slide 4. The PCA TA requirements are listed on Pages 3 to 6 of the FOA. There are two overarching requirements.

For requirement 1, PCAs are expected to conduct statewide or regional health center TA activities based on the needs of existing health centers. The program requirement TA activities will focus on improving program compliance in the state or the region. And performance improvement TA activities will focus on strengthening the clinical and financial performance and enhancing operations in the state or the region. If a TA needs assessment has not been conducted within the past 12 months organizations may propose activities based on previous knowledge or lessons learned over the past two to three years.

For Requirement 2, PCAs are expected to conduct statewide or regional program assistance activities based on the statewide regional or HRSA or Bureau of Primary Health Care priorities. Note that any activity for which a PCA recipient organization uses HRSA funds must be made available to all existing health centers regardless of HRSA grant status or membership in the PCA if the recipient is a membership organization.

Slide 5 summarizes the performance goals and the TA focus areas for requirement one. I will provide more details on the project work plan section later.

There is one program requirements goal. And that is the percent of health centers with no program condition. In this section applicants will need to select at least three TA focus areas from this list. So, for example, it can be need, services or government - I'm sorry governance. You'll also be able to add two additional TA focus areas.

There are four performance improvement goals: two clinical, two financial. Applicants must address the two required TA focus areas which are clinical performance measures and financial performance measures.

You'll see that the expectation is that you work with HRSA to help the health centers meet the program requirements. Also, and on this Slide 5, it's also to help the health centers become recognized as patient center medical homes, to assist health centers to actually meet or exceed healthy people 2020 goals, and expectations to continue work with health centers to keep the cost below the national average increase, make sure that the care that's provided at the health center is cost effective. And finally work with health centers to help keep them financially viable to basically make sure that there are no issues with respect to going concern in terms of the operations.

And on Slide 6 Requirement 2 there are no statewide or regional program assistance goals. Applicants will need to address all seven of the TA focus areas that are on this list. So for example, for special populations, you need to develop strategies for addressing the unique health needs of special

populations in your state or in your region. This includes identifying a special population point of contact, as appropriate.

HRSA anticipates awarding approximately \$900,000 annually to establish to cooperative agreements for federal fiscal years 2012 to 2016.

PCAs will have project periods up to five years. And again the service the area that we're looking at is specifically Alabama and Pacific Island.

Funding beyond the one year budget period but within the five year project period is subject to availability of funds, satisfactory progress of the awardee and a determination that continued funding would be in the best interest of the federal government.

The project period start date will be September 1, 2012.

Current PCA grantees with the project period ending March 31 received a five month project period extension with funds from April 1 through August 31. The revised Notices of Award were released on March 1. An organization's request for funding cannot exceed the annual level of federal Section 330 funding that is currently provided in the state or the region.

Current grantees can refer to Line 19 of the latest Notice of Grant Award. And new organizations can call me to obtain that information. My phone number is 301-594-4300.

See Page 7 of the FOA for eligibility requirements. Note that applicants with no experience working with potential or existing health centers and community based providers with similar missions will not be competitive.

Therefore it is up to the applicant to determine whether they will be competitive in providing TA to existing section 330 health centers and potential health centers as noted in this FOA.

Please refer to the resources and capabilities section of the FOA as a resource for assessing your organization's capacity to carry out the PCA recipient roles and responsibilities.

See Page 26 of the FOA for funding restrictions. Funds may not be used for activities such as those not approved under the cooperative agreement. And it's not allowable to do lobbying activities.

HRSA will use a two tiered submission process which I will describe shortly. For phase one, the Grants.gov deadline is June 20, 2012 by 8:00 PM Eastern Time.

In phase two, the HRSA Electronic Handbook, or EHB the deadline is July 10 by 8 PM Eastern Time.

Applicants who do not complete phase two by the deadline will not be able to move to phase two and therefore will not be able to submit an application.

There's an 80 page limit for the application. We urge you to print your application in advance to ensure that it does not exceed that 80 page limit.

Please refer to HRSA's Electronic Submission User Guide posted on the PCA TA Web site and look specifically at Sections 2 and 5 for the competitive application submission process as well as formatting instructions.

Slide 11. Refer to Tables 2 through 4 on pages 10 through 14 of the FOA for a list of forms and attachments that need to be submitted in each phase.

Applicants should register early in phase one because the process may take up to one month.

So if you have not done so already please register with Grants.gov after this call.

CCR registrations expire annually so be sure that your organization is registered prior to applying.

It's also important to register for a DUNS number as applications will not be reviewed without this number.

Please monitor your email and spam accounts for potential modifications and error messages. If your application was rejected due to an error, you must correct the application and resubmit it to Grants.gov before the posted deadline.

Upon successful completion of the grants.gov submission you will receive an email confirmation with a tracking number. The email notification to begin phase two will be sent on or around seven business days following the Grants.gov validation.

Slide 12. In the grants.gov phase you need to submit four required forms. This includes the SF 424 Application for Federal Assistance. For instructions on how to complete this form, refer to Page 15 of the FOA. In this form on line 15, you'll upload the project abstract, which should be single spaced and one page in length. More details on the project abstract can be found on Page 20 of the FOA.

Then on Line 16 of the SF 424 upload additional congressional districts, if it is applicable to you.

Other required forms include the Performance Site Location Form, the Grants.gov Lobbying Form (which is also the same as the Certification Regarding Lobbying Form) and the SF 424B which is Assurances for Non-Construction Programs.

For the Grants.gov Lobbying Form and the SF 424B, provide the requested information at the bottom of the form. If applicable, complete the disclosure of lobbying activities SF LLL if your organization is engaged in such activity. This form is different from the Grants.gov Lobbying Form.

Slide 13. Once an application is successfully submitted through Grants.gov and downloaded in EHB, HRSA will issue the applicant a tracking number.

The Project director and Authorizing Official must register in EHB. Note that registration in EHB is independent of Grants.gov registration.

So to access an application in EHB, registered users will need to have their grant announcement number, which is HRSA-12-183. The Grants.gov tracking

number usually begins with GRANT followed by eight digits. And you also need to have the EHB tracking number.

Slide 14. In phase two, the following forms are required in EHB. First the Project Narrative form. That's where you would upload the project narrative which I'll provide more detail shortly.

You need to complete the SF 424A which is the budget information for non-construction programs. For guidelines on completing this form, see Pages 16 and 17 of the FOA.

Form 1A in EHB will allow you to provide general information about your organization. And that's also where you would indicate the state or region that you plan to serve. So you would have the option to select Alabama or Pacific Island.

To provide structure to the project work plan, HRSA has made the project work plan a program specific form. Applicants will enter information directly into EHB. This again I want to emphasize that this is not a document that you will upload into the system. You actually have to go into EHB and fill it out online. For detailed instructions with screenshots please visit our PCA TA website and look at the PCA User Guide. And also on the TA website you'll also find a sample work plan.

Slide 15. Applicants will also need to upload required attachments in the EHB. You can refer to Table 4 on Pages 13 and 14 of the FOA.

For Attachment 1, identify the total personnel who will be supported under the cooperative agreement. See Page 17 for more details on how to present this information and go to the TA website for a sample staffing plan.

For Attachments 2 and 3, upload position descriptions and biosketches for key personnel. Key personnel refer to any individual directly involved in the project activities including the Chief Executive Officer, Chief Financial Officer, Chief Information Officer, Chief Operating Officer or Program Leads.

For Attachment 4, provide evidence of proposed collaborations with other HRSA supported providers of TA, for example a national cooperative agreement awardee, primary care offices. And evidence your collaboration with other state based organizations such as the state quality improvement organizations. So provide, you know, indicate the collaboration that you have in support of your project's operation and provision of TA services. The letter should be dated. All letters of support can be merged into one PDF file to upload.

If applicable include a summary of contract or agreement in Attachment 5.

And if you're looking at the slide right now, I notice that there is an error on Slide 15 which has summary contract and agreements as Attachment 7. We will need to update the slides but it should be Attachment 5.

And then for attachment 6 through 10, you have four additional places where you can upload other documents that are relevant to your project here. You may reference those materials in the project narrative such as survey instruments. You can upload needs assessment reports or your organizational chart.

Again I want to note that all attachments will be counted toward the 80 page limit. Failure to include all required attachments may result in your application being considered incomplete or noncompliant.

So we will update Slide 15 to reflect the correct attachment numbers. But I want to say that Attachment 5 should be summary of contracts and agreements and then Attachment 6 through 10 will be other relevant documents. So I apologize for that error.

So what is required in the project narrative? The required elements are provided on pages 20 to 24 of the FOA and are linked to six review criteria.

Refer to Pages 30 through 33 of the FOA for specific details and scores assigned to each element.

The narrative should only describe information regarding the activities to be supported under this cooperative agreement.

The narrative should include the following section header. Introduction, Need which is worth 15 points, Response 25 points, Collaboration 10 points, Evaluative Measures or Impact 15 points, Resources or Capabilities 25 points, and Support Requested 10 points.

So for Need, describe the statewide or regional TA needs based on the current or previous TA needs assessment as well as related health center program reports that will be provided by HRSA. HRSA will provide to you with the state performance profile for your states. And please if you are a new

organization please contact me directly and I will provide you with those reports.

Under Response, discuss how the TA activities proposed in your 12-month project work plan are one consistent with the needs section of the application, two how it addresses the immediate TA needs, and three how it's appropriate for the long term five year project period.

The work plan should address only activities to be supported under this cooperative agreement. Complete a 1-year project work plan. You'll do that electronically in EHB.

In Collaboration, describe formal and informal collaborations and the coordination of services with other HRSA supported providers of TA and other state based organizations. And evidence of proposed collaborations should be documented and uploaded in Attachment 4.

And then for Resources and Capabilities, discuss why your organization is appropriate to receive funding.

New organizations must demonstrate that the timeline for TA delivery is reasonable and operational with 30 days of the award.

The program narrative should be succinct and well organized so that reviewers can understand the proposed projects.

Slide 17. In EHB the project work plan is divided into four sections. Section 1 focuses on program requirement TA. Section B1 focuses on clinical performance improvements. Section B2 focuses on financial performance

improvements. And then Section C is focused on statewide and regional program assistance.

For detailed instructions on how to enter information directly into the project work plan in EHB visit our TA website and review the PCA User Guide. Also instructions are provided in Appendix B of the FOA. A sample is also provided for your convenience on the TA Web site.

Note that the project work plan should cover the first 12 months of the project period and should address only activities to be supported under this cooperative agreement.

Slide 18. All of the goals are linked to requirement one on this slide. You will complete this in EHB.

For example in - the - for example under Health Center Program Requirements you would need to provide a percentage for “Percent of Health Center Program grantees with no program conditions in their Notice of Award.” You'll be able - you'll be expected to plug-in a value for that goal and provide a target goal for the end of the five year project period. This information will be used to measure the statewide or regional impact of the TA activities and monitor progress toward achievement of the goals throughout the five year project period.

So again HRSA will provide the program reports and new organizations can contact me directly to obtain the baseline data.

Slide 19. The key components of the project work plan are outlined in this slide. You can also refer to it in Appendix B which is located on Pages 40 and

41 of the FOA. The components include projected goal percentages, key factors, TA focus areas, activities, person or area responsible, timeframe, and expected outcomes.

For Key Factor, identify three to five key factors that contribute to and restrict progress on achieving your goal. Identify at least one restricting factor and one contributing factor. In EHB if you list for instance three factors and they're all restricting factors you will receive an error message. So be sure that you have at least one contributing factor in that example.

In the TA Focus Area, once you've identified the key restricting and contributing factors, identify areas that are appropriate and effective in achieving the proposed goal.

In the activity identify two to five major activities that you will implement for each TA focus area. Within each activity identify at least one person responsible, timeframe, and expected outcome.

It is optional to add supplemental information regarding the entry. So the Comments box is there in the form for you. And so there are, you know, this information that you couldn't capture in any of the fields, the Comments box would be a good location for you to include that information or you can leave this field blank because that's the only optional field.

For Expected Outcomes, identify at least one quantifiable outcome that will result directly from your TA activity. Since this is a 12-month project work plan, short term expected outcomes must be measurable by the end of this budget period. However, longer term expected outcomes may also be proposed and some activities will not have measurable outcomes within one

year but these outcomes will be provided in subsequent years of the project period. For example, staff retention rates.

The table on Slide 20 summarizes the minimum and maximum number of key components required in each section of the work plan. The character limit information is also included. This table can also be found on Page 41 of the FOA. So as you can see there are four sections that I mentioned earlier. So if you look in terms of the columns you'll see key components Section A program requirements, Section B the clinical performance improvement. The second Section B is financial performance improvement and Section C which focuses on the statewide or regional program assistance.

Then when you look in the row, for the first row for goal, you'll notice that in Section A, there's one required goal which is the program requirements, helping the Health Center to meet program requirements.

Then for Section B there are two required clinical goals and then two required financial goals. In Section C there are no goals.

When there is a performance goal you'll need to provide key contributing and restricting factors for each performance goal. Therefore, since Section C has - does not have any performance goals, you will not need to provide any key factors in that section.

But in EHB, the form itself will not request for that information so you won't have to worry. The system will keep track of that. But I just wanted you to have that information in case you were expecting, you know, thinking that you need to do key factors for Section C. You wouldn't have to.

In the row for TA focus areas in Section A there's a minimum of three TA focus areas. You have the option to add two additional TA focus areas based on, you know, your needs assessments or what you see as being necessary TA activities for your state or region.

In Section B there is one required clinical TA Focus Area. In Section B there is also one required financial TA Focus Area.

In Section C, the statewide program assistance, you'll have to address all seven of the required TA focus areas.

I also want to note that when you are entering information into EHB, one of the challenges that you may face is how to add a second activity for your TA focus area. Once you provide your percentage goal, key factors, focus area for your first activity, you need to click on the Save button.

Once you click the Save button you will receive an error message because the form is requesting that you add a second activity.

So you will have to start the process over and click on TA focus area, add second activity under activity description and then provide all of the other details related to that second activity.

Since this is not a fillable form we wanted to make sure that your activities belong in the TA focus area that you meant to put it in. So while the process may seem very circular, it will ensure that accurate information is captured in the appropriate fields of the form.

The PCA User Guide is extremely helpful in this process. And I would definitely refer you to specifically pages 31 to 38, as that's where you may encounter the most problems with using the form.

For the project work plan, please develop a realistic timetable. Set timelines to the extent to which you will be able to complete each activity within a 12-month period, as well as a description of how each activity will contribute to the overall goals and expected outcomes of the project.

In the work plan the - it is a 1-year project work plan. But for each of your performance goals, you should establish them for the end of the 5-year period. So that may be a little bit confusing. But the reason why it's a 5-year goal, performance goal is, you know, your annual project work plan you'll have an opportunity to revise it on an annual basis.

There are many helpful resources as you're working on your application. Your first stop for information is the PCA TA website.

So right now there are FAQs posted in addition to the slides. There is a sample project work plan, sample staffing plan, sample budget justification.

And new FAQs will be added as necessary. So please check this site frequently.

I also want to note that there are two user guides posted. The first one is the HRSA Electronic Submission User Guide which is a general overview of how to apply. And the second is the PCA User Guide which is specifically provides you details on how to complete the work plan.

A replay of this call will be available within one week and it will be posted on the website. For additional technical assistance please feel free to contact me at bp - I'm sorry bphcpca@hrsa.gov or you can call me at 301-594-4300.

You can also find other agency contacts on Page 37 of the FOA. For assistance with completing and submitting an application in EHB the BPHC helpline will be able to assist you with that. And they will open until 8:00 pm Eastern Time on the dates of - on the EHB deadlines.

So I'd like to close with - oh and if you have questions regarding the budget please contact Angela Wade. And her email address is A-W-A-D-E AWade@hrsa.gov or her phone number is 301-443-3190.

I'd like to close with a few important to reminders. The Grants.gov deadline is June 20, 2012 by 8:00 PM Eastern Time.

The EHB deadline is July 10, 2012 by 8:00 PM Eastern Time. Applications may not exceed 80 pages. So that includes the abstract, the project narrative, budget narrative, and all attachments. Those are all counted towards the page limit.

Standard forms will not be included in the page limit. For example, the project work plan that you will be entering into EHB will not count toward the 80 page limit.

Applicants must enter information directly into EHB for the project work plan. And failure to include all required documents may result in your application being considered incomplete or noncompliant.

An MP3 replay of this call is available approximately one week after the call, after today's call.

So that concludes my presentation. I'd like to open the floor up for questions that you may have.

Coordinator: Thank you. At this time if you'd like to ask a question please press Star 1 on your touch-tone phone and record your first and last name so that you may be announced.

In order to withdraw your question you will press Star 2. Once again if you'd like to ask a question please press Star 1 on your touch-tone phone and record your first and last name so that you may be announced. One moment please for our first question.

And it looks as though there are no questions ma'am.

Denise Nguyen: Okay well since there are no questions right now I will end the call but, you know, if you think of questions later please feel free to send - please feel free to contact me.

The email is again bphcpca@hrsa.gov or give me a call 301-594-4300. Thank you for joining us today.

Coordinator: This will conclude today's conference call. You may now disconnect.

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