

FY 2014 State and Regional Primary Care Associations Cooperative Agreements Funding Opportunity Announcement Frequently Asked Questions

The FY 2014 State and Regional Primary Care Associations (PCA) New and Competing Continuation Funding Opportunity Announcement (FOA) – HRSA-14-032 – is available at <http://www.grants.gov/>. Below are common questions and corresponding answers for the FY 2014 PCA FOA. New FAQs will be added as necessary, so please check the PCA TA web site (<http://www.hrsa.gov/grants/apply/assistance/pca>) frequently for updates. The FAQs are organized under the following topics:

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General Information

1. What is the purpose of PCA funding?

PCA funding establishes cooperative agreements between HRSA and state/regional organizations to provide training and technical assistance (T/TA) to potential and existing health centers.

2. Is this PCA FOA (HRSA-14-032) limited to certain states/regions?

HRSA-14-032 will award three T/TA cooperative agreements, one in each of the following states: Alaska, Georgia, and Wyoming.

3. How much funding is available in FY 2014? How many awards are expected?

HRSA anticipates that approximately \$2.5 million will be available to award three PCA cooperative agreements in FY 2014.

4. What is a cooperative agreement?

A cooperative agreement, as opposed to a grant, is an award of financial assistance where substantial involvement is anticipated between HRSA and the recipient during performance of the proposed project.

Eligibility and Program Requirements/Expectations

5. Who can apply for PCA funding?

Eligible applicants include domestic public or private, non-profit or for-profit entities that can provide T/TA on a statewide/regional basis to community-based organizations in Alaska, Georgia, or Wyoming. Faith-based and community-based organizations, as well as tribes and tribal organizations, are eligible to apply for these funds. Applications may be submitted from new organizations or organizations currently receiving funding under section 330(l) of the Public Health Service (PHS) Act (42 USC 254b).

6. Are organizations that serve health centers in other states or regions of the United States eligible to apply for PCA funding in FY 2014?

Eligible organizations must provide T/TA to health centers in Alaska, Georgia, or Wyoming.

7. What are the program requirements for PCAs?

Applicant organizations must propose the provision of training and technical assistance (T/TA) to potential and existing section 330 health centers, including:

- **Statewide/Regional Health Center T/TA Activities:** Conduct statewide/regional health center T/TA activities based on the identified statewide/regional T/TA needs in the areas of Program Requirements and Performance Improvement, regardless of PCA membership.
- **Statewide/Regional Program Assistance:** Conduct statewide/regional program assistance activities based on statewide/regional and/or HRSA/BPHC priorities, regardless of PCA membership.

More information regarding the PCA T/TA focus areas and performance measures are provided in the FY 2014 PCA FOA, beginning on page 3.

8. To be competitive for a PCA cooperative agreement, what is expected of an applicant organization?

PCAs must design and provide T/TA to potential and existing health centers in the state/region based on needs assessments, a broad understanding of primary health care, and knowledge of health policy and marketplace conditions in the state/region.

Applicants with no experience working with potential or existing health centers and community-based providers with similar missions will not be competitive.

See Section I of the PCA FOA for more information about PCA organizational attributes and characteristics.

Application Development

9. Where can I access the PCA funding opportunity announcement (FOA) and application package?

The PCA FOA and application package are available at www.grants.gov. Follow the instructions below:

- Go to <http://www.grants.gov>.
- Under the Quick Links header on the right, select the Grant Search link.
- Under the Search by Funding Opportunity Number field, enter HRSA-14-032 and click the SEARCH button.
- Click the FOA title (State and Regional Primary Care Associations Cooperative Agreements for Alaska, Georgia, and Wyoming).
- Click the Application button (to the right of the Synopsis and Full Application buttons).
- Under Instructions and Application, click the Download link.
- Click the Download Application Instructions link for the FOA.
- Click the Download Application Package link for the electronic application.

10. Can more than one application be submitted by an organization?

No. An organization can submit only one application. If more than one application is submitted, HRSA will only accept the last application received in Grants.gov and its corresponding application components submitted in HRSA EHB.

11. Is there a page limit for the PCA application?

Yes. There is an 80-page limit on the length of the total application when printed by HRSA. Refer to Tables 1-3 in the FOA for more information on what is counted in the page limit. It is critical that the page limit is strictly followed. Applications exceeding the page limit will be deemed unresponsive and will not be reviewed by HRSA.

12. Does HRSA have guidelines (e.g., font type, font size) for the Program Narrative of the application?

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

footnotes. For more information, please reference the *HRSA Electronic Submission User Guide* available at <http://www.hrsa.gov/grants/apply/userguide.pdf>.

13. How does the Program Narrative differ from the Review Criteria?

The Program Narrative details the information the applicant must include to provide a complete picture of the proposed project. Reviewers will use the Review Criteria as a tool to evaluate how well an applicant presented the information requested in the Program Narrative. Applicants should consider both the Program Narrative and Review Criteria sections of the FOA when developing their applications.

Forms and Attachments

14. Which forms and attachments are required?

Refer to Tables 1-3 on pages 12-15 of the PCA FOA for information on required forms and attachments.

15. Should all staff be included in the Staffing Plan?

List staff that are required to execute the proposed project in the Staffing Plan, including staff whose salaries are paid through an indirect cost rate.

16. How is the Staffing Plan (Attachment 1) different from the Position Descriptions (Attachment 2) and Biographical Sketches (Attachment 3) for Key Personnel?

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>.

17. Who in the organization is considered key personnel for Attachment 2 (Position Descriptions for Key Personnel) and Attachment 3 (Biographical Sketches for Key Personnel)?

Key personnel includes any individual who will oversee 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.

18. What is the difference between a Position Description (Attachment 2) and a Biographical Sketch (Attachment 3)?

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).

19. Can applicants upload additional attachments?

Applicants may upload additional relevant material in Attachment 6. Documents provided in this attachment will be included in the page limit.

20. Does an applicant have to submit letters of support?

Yes. Provide evidence of proposed collaborations by providing letters of support, commitment, and/or investment in support of the proposed project. Include only signed and dated letters of support that specifically indicate a commitment to the project/program (e.g., in-kind services, dollars, staff, space, equipment).

21. To whom should letters of support be addressed and how should they be provided?

Letters of support should be addressed to the appropriate applicant organization contact person (e.g., board, CEO). They should **not** be addressed to HRSA or mailed separately from the application. Letters of support must be included with the application as Attachment 4 or they will not be considered by objective reviewers.

Budget

22. What are the dates of the project period?

The project period will be April 1, 2014 through March 31, 2017.

23. How much funding can be requested?

It is expected that the request for federal support will not exceed the annual level of federal section 330 funding that is currently provided to the state or region. For current PCAs, the budget request must not exceed the recommended level of support found on line 13 of the most recent Notice of Award. For new applicants, contact Beth Levitz at 301-594-4300 or BPHCPCA@hrsa.gov for state PCA funding levels.

24. What should be included in the budget narrative?

The budget narrative/justification must detail the costs of each line item within each object class category from Section B of the SF-424A. A detailed budget justification in line-item format must be completed for each year of the 3-year project period. The sample Budget Justification provided at the PCA TA web site, <http://www.hrsa.gov/grants/apply/assistance/pca>, includes a box for providing narrative beyond what is included in the line-item descriptions.

25. Should the budget include non-federal funding (e.g., grant funding, program income)?

No. Budget requests should only identify requested federal section 330 funding.

26. 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>.

27. If an applicant organization has an indirect cost rate, what needs to be included in the application?

The current federal indirect cost rate agreement **must** be provided in Attachment 6: Other Relevant Documents.

28. Are budget development resources available?

In addition to the standard resources noted in the FOA (e.g., sample Budget Justification), the following resources are recommended:

- 45 CFR Part 74: Uniform Administrative Requirements for Awards and Subawards to Institutions of Higher Education, Hospitals, Other Nonprofit Organizations, and Commercial Organizations, available at <http://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&sid=ddce797b007ad68d6c52a80492a17607&rqn=div5&view=text&node=45:1.0.1.1.35&idno=45>
- 45 CFR Part 92: Uniform Administrative Requirements For Grants And Cooperative Agreements to State, Local, and Tribal Governments available at <http://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&sid=573a8def988d8d4bd10f0ce2d2d84651&rqn=div5&view=text&node=45:1.0.1.1.50&idno=45>
- HHS Grants Policy Statement, available at <http://www.hrsa.gov/grants>
- 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

- The BPHC Primary Care Association Guide 2012 – 2013, available at <http://www.hrsa.gov/grants/apply/assistance/pca/pcaguide2012-2013.pdf>, provides clarification of information about publications and conferences as they pertain to PCA Cooperative Agreements

29. Does the salary limitation enacted in 2012 apply to FY 2014 PCA awards?

Yes. The Consolidated Appropriations Act, 2012 (P.L. 112-74) which limits use of DHHS funds awarded relative to salary amounts applies to FY 2014 PCA awards. As such, federal funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II (\$179,700).

Project Work Plan

30. What are the general requirements for the Project Work Plan?

The Project Work Plan includes pre-defined goals in four key areas (Program Requirements, Clinical Performance Improvement, Financial Performance Improvement, and Statewide/Regional Program Assistance). Applicants must describe contributing and restricting factors predicted to impact goal attainment. They must also define Activities and corresponding details (i.e., person/area responsible, time frame, expected outcome) under focus areas under each goal. More information is available in Appendix B of the PCA FOA.

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

The Project Work Plan goals must be focused on the proposed outcome by the end of the 3-year project period. However, Activities should only be outlined for Year 1 of the project period.

NOTE: Outline only Activities to be supported under the HRSA PCA cooperative agreement during Year 1.

32. What are the required Performance Measures?

The five Performance Measures are:

Program Requirements Goal	
A1	XX% of Health Center Program grantees with no program conditions on their Notice of Awards (NoAs).
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.

33. Can organizations propose additional Performance Measures to the Project Work Plan?

No. Applicants must ensure that all proposed Activities align with the existing goals. However, as desired, organizations can add T/TA Focus Areas for the existing Performance Measures.

34. How should the impact of Activities be measured?

To measure the statewide/regional impact of the T/TA Activities, applicants must establish percentage goals for the end of the project period and monitor their progress toward achievement of the goals throughout the entire project period.

35. How do I calculate percentage goals for the performance measures?

Projected data are goals for the end of the 3-year project period based on data trends to date, including an assessment of contributing/restricting factors and past performance. Goals (projected data) should be realistic for achievement by the end of the 3-year project period.

36. What are 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.

37. 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 should be measurable by the end of the budget period (e.g., number of health centers to receive training by the end of Year 1). However, longer term expected outcomes may be proposed since some Activities will not have measurable outcomes within Year 1 (e.g., staff retention rates).

38. How should progress be reported for currently funded PCAs?

Report progress in the FY 2013 Project Work Plan Progress Report pre-populated with information entered during the FY 2013 non-competing continuation (NCC). All fields in this form will be locked except the Progress field to facilitate reporting progress on the work plan since April 1, 2013. If no progress has been made, indicate this within the field and provide a brief explanation.

NOTE: New applicants will not see the FY 2013 Project Work Plan Progress Report in EHB.

39. How should the FY 2014 Project Work Plan be completed?

New Applicants

EHB will present a blank FY 2014 Project Work Plan to enter information for the first year of the 3-year project period. The Project Work Plan will contain all of the fields described in Table 5 of the FOA, except the Progress field. A sample Project Work Plan is available on the PCA TA web site.

Current PCAs

To facilitate Project Work Plan development, the FY 2014 Project Work Plan will be pre-populated with the FY 2013 Project Work Plan data. Revise the pre-populated data to provide new 3-year goals and outline Activities planned for FY 2014.

Application Submission

40. How and when should I submit my application?

There is a two-phase application submission process for the FY 2014 PCA applications via Grants.gov and the HRSA Electronic Handbooks (EHB).

- Phase 1 - Grants.gov: Application must be completed and successfully submitted via Grants.gov by 11:59 PM ET on September 18, 2013.
- Phase 2 - HRSA EHB: Application must be completed and successfully submitted by 5:00 PM ET on October 30, 2013.

HRSA recommends submitting applications in Grants.gov as soon as possible to ensure that maximum time is available for providing the extensive supplemental information in EHB.

41. When can applicants begin Phase 2 of the submission process in EHB?

Applicants can begin Phase 2 in HRSA EHB only after Phase 1 in Grants.gov has been successfully completed by the Grants.gov due date and HRSA has assigned the application a tracking number. The applicant's Authorizing Official (AO) will be notified by email when the application is ready within EHB for the completion of Phase 2 (within 7 business days of the Grants.gov submission).

42. How will applicants be notified if their application was not successfully submitted in Grants.gov and/or EHB?

Grants.gov will send a series of e-mails to notify the applicant once the Grants.gov application has been validated or if there are errors. If there are errors, the applicant must correct the errors and re-submit the application in Grants.gov **prior to the due date/time**. In EHB, all validation errors must be resolved before the application can be submitted to HRSA **by the AO**. The on-screen status of the application will appear as "Application Submitted to HRSA" once it has been submitted successfully in EHB.

Award Information

43. When will PCA funds be awarded?

PCA awards will be issued through a Notice of Award (NoA) on or around April 1, 2014.

44. If awarded, will federal funding for the PCA cooperative agreement continue beyond the 3-year project period?

Continuations beyond the initial 3-year project period may be awarded in subsequent years on a competitive basis. These competitive awards will be subject to availability of funds, satisfactory awardee performance, and a determination that continued funding would be in the best interest of the Federal government.

Funding Restrictions

45. 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.

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

Yes. Organizations may propose educational initiatives (e.g., issue briefs) to 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, materials related to pending or existing legislation cannot be created utilizing federal funding.

Technical Assistance

47. Who should be contacted with programmatic questions (e.g., application submission requirements)?

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 Beth Levitz in the Bureau of Primary Health Care's Office of Policy and Program Development at BPHCPCA@hrsa.gov or 301-594-4300.

48. Who should be contacted for questions about budget preparation, including eligible costs?

Contact Vera Windham in the Office of Federal Assistance Management's Division of Grants Management Operations at vwindham@hrsa.gov or 301-443-6859.

49. If I encounter technical difficulties in Grants.gov, whom should I contact?

Refer to http://www.grants.gov/applicants/applicant_faqs.jsp for applicant FAQs or contact the Grants.gov Contact Center 24 hours a day, 7 days a week (excluding federal holidays) at 1-800-518-4726 or support@grants.gov.

50. If I encounter technical difficulties in HRSA EHB, whom should I contact?

Contact the BPHC Helpline Monday through Friday, 8:30 AM to 5:30 PM ET (excluding federal holidays) at 1-877-974-2742 or BPHCHelpline@hrsa.gov.