



**Sickle Cell Disease Treatment Demonstration Program
HRSA-14-078 Funding Opportunity Announcement
Frequently Asked Questions**

1. Can an organization or foundation with a contract with a medical center that meets the eligibility requirements apply to the SCDTDP FOA based on the contract with the medical center?

The authorizing legislation is very specific as to its eligible applicants. Under section (1)(A), the Administrator may make grants “to up to 40 eligible entities,” and under section (5)(B), eligible entities are defined as being:

Any Federally-qualified health center, nonprofit hospital or clinic, or university health center that provides primary health care that:

(i) has a collaborative agreement with a community-based Sickle Cell Disease organization or a nonprofit entity with experience in working with individuals who have Sickle Cell Disease; and

(ii) demonstrates to the Administrator that either the Federally-qualified health center, the nonprofit hospital or clinic, the university health center, the organization or entity described in clause (i), or the experts described in paragraph (2)(C), has at least 5 years of experience in working with individuals who have Sickle Cell Disease.

Given this specificity in the statutory language, a collaborating nonprofit organization is not eligible to apply in its own right unless it meets the criterion of being a “Federally-qualified health center, nonprofit hospital or clinic, or university health center that provides primary health care...” and meets the additional criteria in subsections (i) and (ii).

The FOA describes the eligibility requirements, but it is up to the organization to decide whether or not it believes that it satisfies the FOA requirements. The organization needs to decide whether or not it wishes to submit an application on the basis of its own judgment, and HRSA will make eligibility determinations upon reviewing the information provided by the applicants.

2. Can the primary grantee place a cap on the Indirect cost amount for sub-awards?
No, the primary applicant cannot put a cap on the Indirect cost for sub-awards. The applicant may wish to see if they can negotiate with the sub-awardee to see if they will use the same rate as the grantee, but, if they have a negotiated rate and want to use it, they can.
3. Does the primary applicant need to submit the itemized budget and the CV's/resumes of the sub-awardees?
Yes, the applicant will need to submit the itemized budget and the CV's/resumes of all of the sub-awardees to HRSA. Applicants should keep in mind that they will not be penalized if they do not have all of their sub-award agreements in place by the time of the application submission. The FOA states that the applicant will make sub-awards (agreements) or demonstrate the ability to make sub-awards. Therefore, if your application demonstrates that you can make the partnership within a reasonable amount of time, then you will not be

penalized. You must make a good faith effort to provide assistance to every state in your region as the regional center.

4. Are sites that currently have a Sickle Cell Disease Newborn Screening Program grant eligible to apply for the Sickle Cell Disease Treatment Demonstration Program Funding Opportunity Announcement?
Yes, assuming that the Sickle Cell Disease Newborn Screening Program grantee meets the other Eligibility Requirements, they are eligible and encouraged to participate in the FOA. Please see the Eligibility Requirements in the Funding Opportunity Announcement for more details.
5. Are current Sickle Cell Disease Treatment Demonstration Program grantees eligible to apply for the new Sickle Cell Disease Treatment Demonstration Program Funding Opportunity Announcement?
Yes, assuming that the Sickle Cell Disease Treatment Demonstration Program grantee meets the other Eligibility Requirements, they are eligible and encouraged to participate in the FOA. Please see the Eligibility Requirements in the Funding Opportunity Announcement for more details.
6. Is information about the Sickle Cell Disease National Coordinating Center embedded in the guidance of the Sickle Cell Disease Treatment Demonstration Program?
No, the Sickle Cell Disease National Coordinating Center is funded through a different mechanism than the Sickle Cell Disease Treatment Demonstration Program. Information regarding the Sickle Cell Disease National Coordinating Center will be available at a later date.
7. On page 8, there is a statement that HRSA will give priority to awarding to FQHCs that have a partnership with... a comprehensive SCD treatment center that "does not receive funds from the NIH." Are you specifically referring to the EHRA U54 awards or to ANY NIH funding?
The priority given to awarding FQHC's that have partnerships with sickle cell organizations is part of the authorizing legislation. The language about comprehensive treatment centers that receive funds from NIH is also language from the authorizing legislation. NIH no longer funds the Sickle Cell Disease Comprehensive Centers, so all sickle cell centers are eligible to apply for this funding.
8. On page 23, it is stated that we need to demonstrate "high sickle cell prevalence in the region." What is high?
The prevalence of sickle cell patients in each region will be considered during the review to increase the impact of the award. For a breakdown of the criteria that will be used to determine successful applicants, please see the Review Criteria in Section V. Application Review Information which starts on page 18 of the FOA.
9. Are the Regional Collaborative sites also able to serve as the state-level program for their home state, or does there need to be a different state-level partner organization to lead the efforts in that state?
Yes, a Regional Collaborative site can also serve as the State-level partner.
10. There are 2 different region lists in the grant guidance. On page ii, the Northeast Region includes PR and VI. On page 8 PR and VI are included in the Southeast Region. Which is the correct list?

Puerto Rico and the Virgin Islands should be in the Northeast Region. The mention of PR and VI in the Southeast Region was a mistake.

11. For the pre-application webinar on 5/12, is there a link to register for a login/password or do we just use the Guest entry?

Please use the Guest entry.

12. Will there be a cap on the amount of Indirects for this funding opportunity announcement?

The Sickle Cell Disease Treatment Demonstration Program Funding Opportunity Announcement did not place a cap on indirect cost. Institutions are responsible for negotiating indirect costs with the Division for Cost Allocation. The budget is for total cost.

13. On the congressional district part of the SF-424 application, could you clarify if you are looking for the congressional districts for every state/participating institution in our region or just the congressional district of the institution applying for the grant?

On the SF-424, the applicant needs to submit the congressional district for the institution applying for the grant only.

14. Are State Departments of Public Health allowed to serve as the State-level partner on grant application?

Both the primary applicant and all proposed State-level partners must meet the Eligibility Requirements in order to be considered for this grant. According to page 8 of the Funding Opportunity Announcement, "Eligible entities for this cooperative agreement program are any Federally-qualified health center, nonprofit hospital or clinic, or university health center that provides primary health care that: (1) has a collaborative agreement with a community-based sickle cell disease organization or a nonprofit entity with experience in working with individuals with sickle cell disease; and (2) demonstrates that it, the collaborative entity, or the experts described in section 712(c)(2)(C) of the American Jobs Creation Act of 2004, *has at least five (5) years' experience working with individuals who have sickle cell disease.*" A Department of Public Health would not meet this requirement unless said Department of Public Health is a provider of primary health care.

15. Can a state-level partner wanting to participate in multiple applications participate as a State-level partner on more than one grant application? For example, one state-level partner has been contacted by a two competing application institution? Is it appropriate for the state-level partner to agree to participate in both grant applications?

Yes, it is acceptable and appropriate for an institution to be named as a State-level partner on multiple applications. It is also acceptable and appropriate for an applying institution to be listed as a State-level partner on multiple application if the applying applicant institution so desires.

16. Can the State-level partner work for the same institution as the primary applicant?

Yes, a Regional Collaborative site (applicant) can also serve as the State-level partner.

17. The Funding Opportunity Announcement mentions the use of Extension of Community Healthcare Outcomes (ECHO) like. Are applicants required to join the Project ECHO program out

of the University of New Mexico, which has a high registration fee? If sites are not required to join the UNM program, are we required to duplicate all of their techniques, which would be very expensive and a duplication of efforts?

No, the applicants are not required to register for the Project ECHO program out of UNM. A primary goal of the SCDTDP program is to increase the number of providers treating sickle cell, thereby increasing access to providers with knowledge about sickle cell therapies for patient with sickle cell. This is particularly important in areas where a hematologist is not easily accessible. HRSA would like applicants to consider strategies that use tele-health and telemedicine to outreach and educate primary care providers.

18. We are having some difficulty identifying and establishing a partner with a few of the states in our region, and my not have an establish partnership prior to the deadline for the application. We have a plan for developing the partnership, but we will not have a subaward agreement (contract) in time for our application submission. Will it be counted against our application if we have not formalized an agreement with every state in our region?

No, if you are not able to get a contract (agreement) with state-level partners in every state in your region by the application deadline, it will not be held against your application. The FOA states that the applicant will make subawards (agreements) or demonstrate the ability to make subawards. Therefore, if your application demonstrates that you can make the partnership within a reasonable amount of time, then you will not be penalized. The goal of the program is to eventually provide quality sickle cell care to every sickle cell patient living in the United States, and we hope to do this through the regional model. Therefore, you must make a good faith effort to provide assistance to every state in your region as the regional center.