AFFORDABLE CARE ACT

EXPANSION OF PHYSICIAN ASSISTANT TRAINING PROGRAM (EPAT)

FREQUENTLY ASKED QUESTIONS

Revised July 8, 2010
Revised April 14, 2011
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Frequently Asked Questions

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**Purpose**

What is the purpose of the Affordable Care Act Expansion of Physician Assistants Training (EPAT) funding opportunity?

The program’s purpose is to increase student enrollment in primary care Physician Assistant programs and graduates planning to practice primary care specialties.

**How is a physician assistant education program defined for the ACA EPAT funding opportunity?**

An EPAT program defines a physician assistant education program as an educational program in a public or private institution in a State that has as its objective the education of individuals who, upon completion of their studies in the program, will be qualified to provide primary care medical services, with the supervision of a physician; and, is accredited by the Accreditation Review Committee on Education for the Physician Assistant (ARC-PA). Primary care is defined as family medicine, general internal medicine and general pediatrics.
**Summary of Funding**

**How much funding is available? [revised July 8, 2010]**

The EPAT Program will provide $32 million in funding for Federal fiscal years 2010 through 2014. The program has a five year budget and project period which begins on September 30, 2010 and ends on September 29, 2015. The program will fund approximately 40 primary care physician assistant training programs. The program funds physician assistant student stipends, educational expenses, reasonable living expenses and indirect costs for a total of $22,000 per student, for a maximum of two years per student, plus indirect costs. All funding will be provided in FY 2010. The amount in which grantees can draw down will be restricted per year to the amount requested and authorized by the notice of grant award.

**How do eligible entities apply for ACA-EPAT funds?**

Funding opportunity announcement HRSA-10-278 is currently open, and will close in both Grants.gov and HRSA’s Electronic Handbooks on July 19.

**Review Criteria 3 on page 22 of the guidance lists the applicable Narrative Section: “Evaluation and Technical Support”, I can’t find this section in the Narrative. Is this correct?**

No. The applicable Narrative Section that should be listed under Review Criteria 3 is, “Outcome Measures and Evaluation”.

**Will this funding be offered again next year?**

No. We anticipate this to be a one-time funding opportunity.

**Are there plans for a Faculty increase project for the future?**

Not at this time. The EPAT program is solely for increasing your current student population.

**When will the grant be awarded?**

ACA-EPAT funds will be awarded in September 2010.

**Is there any formal notification of an ACA-EPAT award from the Health Resources and Services Administration (HRSA)?**

Yes. HRSA will electronically transmit a formal notification in the form of a Notice of Grant Award (NGA) that will be provided to the ACA-EPAT applicant organization/institution.
Eligibility

Who are eligible entities for this funding opportunity?

Eligible entities are public or private academically affiliated physician assistant training programs that have as their objective the education of individuals who, upon completion of their studies in the program, will be qualified to provide primary care medical services with the supervision of a physician. Physician assistant training programs must be accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). All physician assistant applicant programs must meet the ARC-PA standards.

Does the increase in student enrollment numbers apply to our current number of students in training OR to our ARC-approved number?

Your current number of students. If your current number of students in training IS your ARC-approved number, then you may need to seek approval through ARC to request an increase in your allowed student population. This process may take as long as six months.

Is this funding available for new programs?

Not exactly. Your program must currently have students enrolled in training so as to denote an “increase” in your current student population. Programs under “provisional” accreditation are eligible for funding through this announcement provided they currently have students enrolled and attending.

What if I currently have another application pending through HRSA to increase our student population?

If you have applied for another announcement to conduct the same activities as outlined for the EPAT program and if you are approved and recommended for funding for both, you will need to decline one of the opportunities so as to eliminate any duplication of effort by Federal grant dollars.
Eligible Use of Funds

Who are eligible students?

Eligible students are required to be:

(1) newly enrolled, full-time physician assistant students in an accredited primary care physician assistants program. Eligible students must be newly enrolled in order to meet the program because the program’s purpose is to increase student enrollment (class size) in primary care Physician Assistant programs and graduates planning to practice primary care specialties;

(2) a citizen of the United States, a non-citizen national, or foreign national who possesses a visa permitting permanent residence in the United States (individuals on temporary or student visas are not eligible to receive support); and

(3) intend to graduate from the physician assistant program and work in or teach in a primary care discipline. For the purposes of this grant announcement, primary care is defined as family medicine, general internal medicine and general pediatrics.

It appears that the $22,000 stipends will only be available to new students that represent program growth, i.e., if we currently take 40 students and propose to take 45, we would only receive 5 stipends. Is this correct or would all newly matriculated students then qualify for a stipend?

You are correct in that the stipend support would only be applicable for the five “new” students entering your program.

Can students be supported partially with other funding sources?

Yes. PA students may be supported in whole from this award or by a percentage with other funding sources, including State grants, institutional support, and/or other sources including Federal education awards (fellowships, traineeships, etc.) except for educational assistance under the Veterans Readjustment Benefits Act (“GI Bill”), Medicare or Medicaid funding.

Are indirect costs authorized? [revised July 8, 2010]

Yes, and these costs may be requested above the authorized award amount per student of $22,000. In addition, note that indirect costs under training grants to organizations other than state, local or Indian tribal governments will be budgeted and reimbursed at 8 percent of modified total direct costs rather than on the basis of a negotiated cost agreement, and are not subject to upward or downward adjustment.

Can salaries be paid out of this grant funding?

No. This program funds physician assistant student stipends, educational expenses, indirect costs and reasonable living expenses. Personnel, staffing, fringe benefits, consultant costs, equipment, supplies, subcontracts, travel and other items are strictly prohibited under this grant award.

Would we be allowed to award a more modest stipend to our incoming students?

Exactly $22K must be awarded to the approved student, per year, for the two years.
Do training costs include housing and travel for clinical rotations?

No. Training costs do not include travel expenses. However, a stipend is defined as a “reasonable living expense”. Students could therefore pay for housing out of the stipends awarded to them by the school.

Regarding the new HRSA PA grant: Our class has been selected for the 2010-2012 cycle. If we apply for this grant, can the expansion occur in August of 2011?

This timeline is adequate, but please just ensure that your students are attending and the stipends have been allocated PRIOR to September 30, 2011.

Since the entering Class of 2010 is considered the baseline, none of the grant funding would be disbursed until Academic Year 2011-2012, after our entering Class of 2011 matriculates, but prior to September 30, 2011. Is my understanding of this correct?

Yes.

We currently run a three-year program; can the stipend funding be for three years of support for each selected student?

Unfortunately, only two years may be provided for each student.

We have a three-year program; can we provide funding for years 2 and 3 of the new students?

Yes.

For our two year program, can we fund students starting in their second year?

No.

Do we need to increase our student population exponentially over the five years? Would we need to increase by five every year?

No, as long as you maintain a student population level above and beyond your baseline year, you are fine.

How will ACA-EPAT funding be delivered to grantees?

Grantees will receive ACA-EPAT funds much in the same way schools get their current HRSA funding via the PMS; a NGA will be issued under a different grant number. For information regarding the drawdown of your awarded funds, contact your account representative at 1-877-614-5533 or http://www.dpm.psc.gov/. Grantees should drawdown funds based on the needs of the ARRA-EPAT project.

Can stipends be paid under the EPAT program? [Revised April 14, 2011]

Yes, as mentioned in the program guidance, stipends are an allowable expense under the EPAT program. Stipends are permissible cost-of-living allowances for trainees and fellows, if permitted by a program’s authorizing statute or regulations. Stipends are allowable costs of traineeships and fellowships, and can be used as a subsistence allowance for fellows or trainees to help defray living expenses during the training experience.

Although EPAT funding may be used for a multitude of purposes as laid out in the program guidance, grantees must abide by the budgets set forth in their funding applications and referenced in their Notices of Award. In the event that a grantee requested to use EPAT funding for tuition and fees only, that grantee would be unable to use the funding award for another purpose (e.g. stipends) unless the grantee submitted and received prior approval for a grant modification in the Electronic Handbooks (EHB) System.
Can tuition expenses be funded under the Expansion of Physician Assistant Training (EPAT) program? [Revised April 14, 2011]

Yes, tuition and fees are allowable expenses under the EPAT program. According to the program guidance, “The [EPAT] program supports physician assistant student stipends, educational expenses, reasonable living expenses and indirect costs for a total of $22,000 per student, for a maximum of two years per student, plus indirect costs.” Although tuition expenses are not explicitly mentioned in the guidance or governing statutory authority, the EPAT legislative language, sec. 747(a)(1)(B) of the PHS Act, as revised by P.L. 111-148, allows funding to be used for “…need-based financial assistance in the form of traineeships and fellowships…” Tuition and fees are allowable costs of traineeships or fellowships, if required for specific courses in support of the training.

Can an EPAT program require trainees to go into primary care even though HRSA cannot impose such a requirement under section 747 of the Public Health Service Act? Can a student that receives support though the EPAT program be required to sign a contract stating that he or she will go into primary care and that failure to fulfill this obligation will result in the student having to reimburse any funds expended? [Revised April 14, 2011]

No, awardee institutions cannot impose primary care service obligations or penalties on EPAT-supported trainees because this type of obligation is not permitted by the program’s authorizing statute, section 747 of the PHS Act, as revised by P.L. 111-148. Awardees may not enforce administrative requirements on sub-recipients (students) that are more stringent than those requirements imposed on the primary recipient (the grantee). Simply put, since the statutory authority does not allow HRSA to impose service obligations on trainees, grantees cannot hold trainees to such a requirement.
**Reporting**

Are there any special reporting requirements for these funds?

All Bureau of Health Professions grantees are required to submit an annual two-part progress report. The first part demonstrates grantee progress on program-specific goals. The second part collects core performance measurement data to measure the Bureau’s progress through its grantees in: (1) improving the distribution, diversity, and quality of the healthcare workforce, (2) improving the educational environment infrastructure, and (3) increasing students’ selection of primary care education. Awarded projects will receive further information on data submission. More details can also be found on pages 26-28 of the Funding Opportunity Announcement.

HRSA encourages, but doesn’t require, programs to follow their graduates for more than the first year after program completion to evaluate the effectiveness of their training program in producing graduates who provide high quality, culturally and linguistically appropriate (primary) care to underserved populations. The Affordable Care Act authorizes HRSA to fund such longitudinal evaluations by its grantees. HRSA anticipates establishing guidelines for these evaluations in the coming year and requesting applications from existing grantees to conduct evaluations (pending availability of appropriations for this activity).