



HRSA
Healthy
Grants
WORKSHOP
Presented as a Web Series

HRSA
Health Resources & Services Administration

2025 Grants Policy Checkup

2025 Healthy Grants Workshop

June 11, 2025

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Division of Grants Policy (DGP)

Office of Federal Assistance and Acquisition Management (OFAAM)

Vision: Healthy Communities, Healthy People



Agenda

- HHS' plan for adopting 2 CFR part 200
- Updates to the HHS Grants Policy Statement (GPS)
- Demo of HRSA's Manage Your Grant Website
- Simpler NOFO
- Questions



Getting to Know You

Are you representing the fiscal side or the programmatic side of your organization?

- Fiscal
- Programmatic
- Other

How many years of experience do you have in your grant role?

- 0-1 year
- 2-5 years
- 6-10 years
- 11 or more years

Uniform Guidance Background

- **December 2013 – OMB issued 2 CFR part 200.**
 - This “Uniform Guidance” consolidated several OMB circulars into one location for the first time.
- **December 2014 – HHS codified 2 CFR part 200 at 45 CFR part 75.**
 - It was mostly the same except for 12 HHS modifications.
- **August 2020 – OMB updated 2 CFR part 200.**
 - HHS continued to operate under 45 CFR part 75.



Uniform Guidance Background (cont'd)

- **April 2024 – OMB updated 2 CFR part 200 again.**
 - This was a bigger update than in 2020 with a focus on using plain language and reducing burden.
 - OMB issued a [memo](#) directing agencies to adopt by October 1, 2024.
- **May - September 2024 – HHS developed a plan for implementing 2 CFR part 200 in 2 phases.**

HHS' Phased Approach to Adopting 2 CFR Part 200

- On October 2, 2024, HHS issued an Interim Final Rule (IFR) that outlined its plan for adopting 2 CFR part 200.
 - **Effective October 1, 2024:** HHS adopted eight changes from 2 CFR part 200. These changes provide you with flexibilities.
 - ✓ Continue using 45 CFR part 75 and the eight flexibilities
 - **Effective October 1, 2025:** HHS will adopt the rest of 2 CFR part 200.
 - ✓ When that happens, HHS will rescind 45 CFR part 75 and retain 12 HHS-specific modifications at 2 CFR part 300.



Poll Questions

As of today, I am no longer required to use 45 CFR part 75:

- True
- False - Continue using 45 CFR part 75 and the eight flexibilities

Starting on October 1, 2025, I will be required to use:

- 45 CFR part 75
- 2 CFR part 200 and the 12 HHS-specific modifications at 2 CFR part 300

Eight Changes from 2 CFR part 200 effective October 1, 2024

New Changes!

1. Increased exclusion threshold of subawards from \$25,000 to \$50,000 for modified total direct cost calculations (2 CFR § 200.1 definition of modified total direct cost).
2. Increased threshold for equipment from more than \$5,000 to more than \$10,000 (2 CFR § 200.313(e)).
3. Increased threshold for supplies from less than \$5,000 to less than \$10,000 (2 CFR § 200.314(a)).



Eight Changes from 2 CFR part 200 effective October 1, 2024 (cont'd)

4. Increased amount of fixed amount subawards that you may provide with HRSA prior written approval to \$500,000 (2 CFR §200.333).
5. Increased indirect cost de minimis rate from 10 to 15 percent (2 CFR § 200.414).
6. Increased single audit threshold from \$750,000 to \$1 million (2 CFR § 200.501).



Eight Changes from 2 CFR part 200 effective October 1, 2024 (cont'd)

HHS has already adopted these changes:

7. Increased micro-purchase threshold to \$50,000 (2 CFR §200.320).
8. Allowing 120 days after the period of performance for submission of all final reports related to award closeout (2 CFR §200.344); See [88 FR 63591 - PDF](#).

Plain language to improve readability



- ✓ Write like we talk
- ✓ Speak directly to applicants
- ✓ Use easy to understand terms
- ✓ Avoid jargon & acronyms
- ✓ Write less
- ✓ Write shorter sentences

Modifications to 2 CFR part 200 that HHS will codify at 2 CFR part 300 on October 1, 2025

#	HHS Modification	Current 45 CFR part 75 Citation	Proposed 2 CFR part 300 Citation	Summary of Modification
7	Revision of budget and program plans (specific to research care cost prior approval)	45 CFR § 75.308(c)(1)(ix)	2 CFR § 300.308(f)(11)	Requires prior approval for research patient care costs.
8	Intangible Property (patents and inventions)	45 CFR § 75.307(c)(2)	2 CFR § 300.315(c)	Limits HHS rights in inventions under awards made primarily for educational purposes.
9	Indirect Costs (Training and Foreign cap and allowing rates for American U, Beirut, and WHO)	45 CFR § 75.414(c)(1)(i)-(iii)	2 CFR § 300.414(c)(i)-(iii)	Limits indirect costs on training awards, awards to Foreign organizations, and awards to Foreign public entities performed fully outside the US to a fixed rate of 8 percent of MTDC and allows negotiated indirect cost rates for American University, Beirut and the World Health Organization.
10	Independent research and development costs	45 CFR § 75.476	2 CFR § 300.477	Describes requirements for independent research and development costs.
11	Shared responsibility payments	45 CFR § 75.477	2 CFR § 300.478	Describes requirements for payments for failure to maintain minimum essential health coverage and failure to offer health coverage to employees.
12	Cost Principles for Research & Development grant activities with Hospitals	45 CFR part 75, Appendix IX	2 CFR part 300, Appendix IX	Hospital Cost Principles



HHS Grants Policy Statement

- **The HHS Grants Policy Statement (GPS)**

- Was first issued in January 2007.
- It is incorporated by reference as a standard condition of HHS awards.
- Provides information on HHS agencies, the award process, and where to apply for awards.
- Outlines the legal and regulatory rules that apply to awards.
- Updated in September 2024 to reflect HHS' phased plan for adopting 2 CFR part 200.
- Will be updated again this year to reflect adoption of 2 CFR part 200.



HHS Grants Policy Statement

- **Key changes:**

- 17 years of policy updates!
- Uses more plain language.
- Change in salary rate limitation (applies to both direct and indirect costs).
- Reaffirms the 8% cap specified in 45 CFR § 75.414 for training grants.

HRSA's Implementation of 2 CFR part 200 and HHS GPS

- **Effective October 1, 2024:**
 - HRSA applied the eight changes from 2 CFR part 200 and the 2024 HHS GPS to all new and active awards.
 - ✓ You can rebudget active awards to reflect the eight threshold changes.



Poll Question

- **What is the current threshold for equipment per 2 CFR part 200?**
 - \$10,000
 - \$250
 - \$5,000

HRSA's Implementation of 2 CFR part 200 and HHS GPS (cont'd)

- **OFAAM has taken the following actions to implement the changes**
 - Updated NOFOs and Application Guides
 - Posted a Grants Policy Bulletin on the HRSA Manage Your Grant website
 - Revised the FY 2025 HRSA General Terms and Conditions
- **HRSA is preparing for full implementation of 2 CFR part 200 on October 1, 2025**



Poll Question

Have you watched/attended our Healthy Grants Workshop series before?

- Yes
- No



Demo

HRSA's Manage Your Grant Website



The screenshot shows the HRSA website header with the logo and a 'MENU' button. Below the header is a breadcrumb trail: 'Home » Grants » Manage Your Grant'. A sidebar on the left contains a 'Manage your Grant' section with a minus sign, listing options: Training, Administrative Management, Financial Management, Reporting Requirements, and Policies, Regulations, & Guidance. Below this is a 'Become a Grant' link. The main content area is titled 'Manage Your Grant' and features a yellow box with the heading 'Updated Award Closeout Timelines'. The text in the box states: 'We now follow the closeout provisions at [2 CFR 200.344](#) instead of [45 CFR 75.381](#).' Below this, there are two bullet points: 'Effective October 1, 2023:' followed by two sub-points: 'HRSA recipients have 120 days to submit final reports to us and liquidate all financial obligations. This is an increase from 90 days.' and 'Subrecipients still have 90 days to submit final reports to the pass-through entity and liquidate all financial obligations.' At the bottom of the yellow box is a 'Give Feedback' button and a small icon of a document with a checkmark.



Resources

- [2 CFR part 200](#)
- [HHS Grants Policy Statement \(GPS\)](#)
- [GPB 2025-01E – Adopting 2 CFR 200 and](#)
- [HRSA's Manage Your Grant Website](#)



2 CFR 200 Appendix I--Full Text
of Notice of Funding Opportunity

Simpler NOFOs

Rural Veterans Health Access Program

Opportunity number: HRSA-25-036



NOFO modernizations: Required by regulation; Realized by partnering with HHS OG SimplerNOFOs

Improve
Readability

Make easy to
Navigate

Organize
content
consistently

Plain language to improve readability



- ✓ Write like we talk
- ✓ Speak directly to applicants
- ✓ Use easy to understand terms
- ✓ Avoid jargon & acronyms
- ✓ Write less
- ✓ Write shorter sentences



Metrics to evidence readability

OpDiv	Comparable NOFOs Published	Avg Word Count	Avg Sentence Length	Avg Reading Level
HRSA	8	-33%	-36%	-3.7

Links for easy navigation

Example 1: Internal links

The screenshot displays the HRSA website interface for a grant opportunity. At the top, a navigation bar includes links: 1. Review, 2. Get Ready, 3. Prepare, 4. Learn, 5. Submit, 6. Award, and Contacts. The main content area is divided into three sections: 'Basic information', 'Summary', and 'Funding details'. The 'Basic information' section identifies the 'Health Resources and Services Administration (HRSA)' and the 'Federal Office of Rural Health Policy (FORHP)'. The 'Summary' section describes the 'Rural Veterans Health Access Program'. The 'Funding details' section provides specifics on funding type, amount, and duration. On the right side, a sidebar contains three blue boxes with white text: 'Have questions? Go to Contacts and Support', 'Key facts' (listing opportunity name, number, and federal assistance listing), and 'Key dates' (listing NOFO issue date, informational webinar, application deadline, expected award date, and expected start date).

Example 2: External links

Post-award requirements and administration

Administrative and national policy requirements

There are important rules you need to know if you get an award. You must follow:

- All terms and conditions in the Notice of Award (NOA). We incorporate this NOFO by reference.
- The regulations at [2 CFR 200](#), Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards, exceptions at 2 CFR 300, and any superseding regulations.
- The HHS [Grants Policy Statement \(GPS\) \[PDF\]](#). Your NOA will reference this document. If there are any exceptions to the GPS, they'll be listed in your NOA.
- All federal statutes and regulations relevant to federal financial assistance, including those highlighted in [HHS Administrative and National Policy Requirements](#).

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Consistency of content organization

2 CFR 200 Appendix I

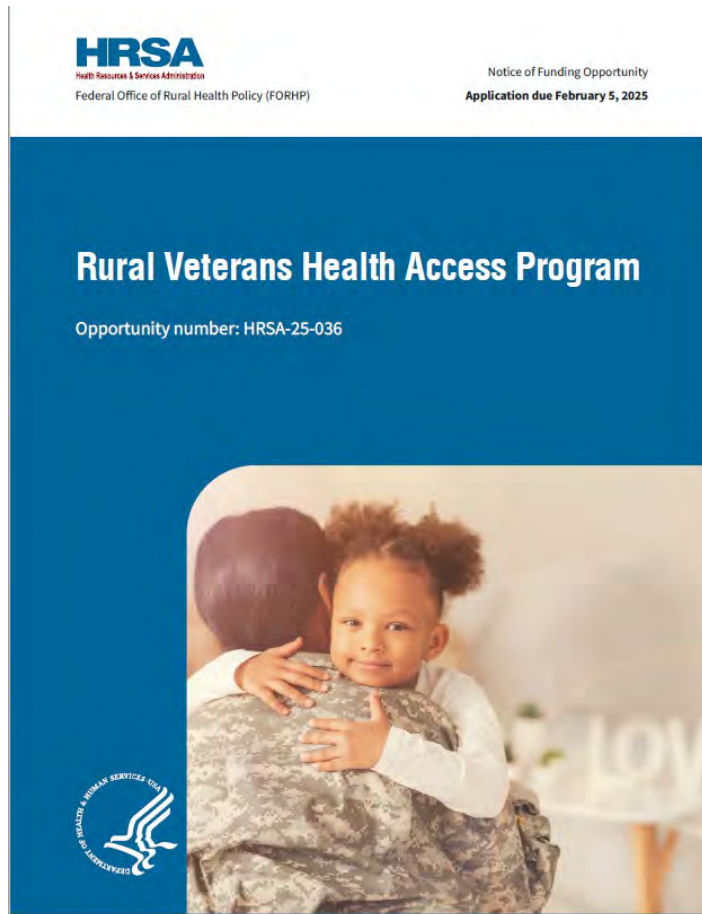
- (i) Basic Information
- (ii) Eligibility
- (iii) Program Description
- (iv) Application Contents and Format
- (v) Submission Requirements and Deadlines
- (vi) Application Review Information
- (vii) Award Notices
- (viii) Post-Award Requirements and Administration

NOFO

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+ Visually appealing



Award information

Cooperative agreement terms

Our responsibilities

Aside from monitoring and technical assistance, we also get involved in these ways:

- Advising on [performance measures](#) to ensure that HRSA can capture any cross-cutting outcomes among award recipients.
- Facilitating partnerships with the VHA-ORH.
- Facilitating sharing of best practices and resources with other relevant stakeholders.

Your responsibilities

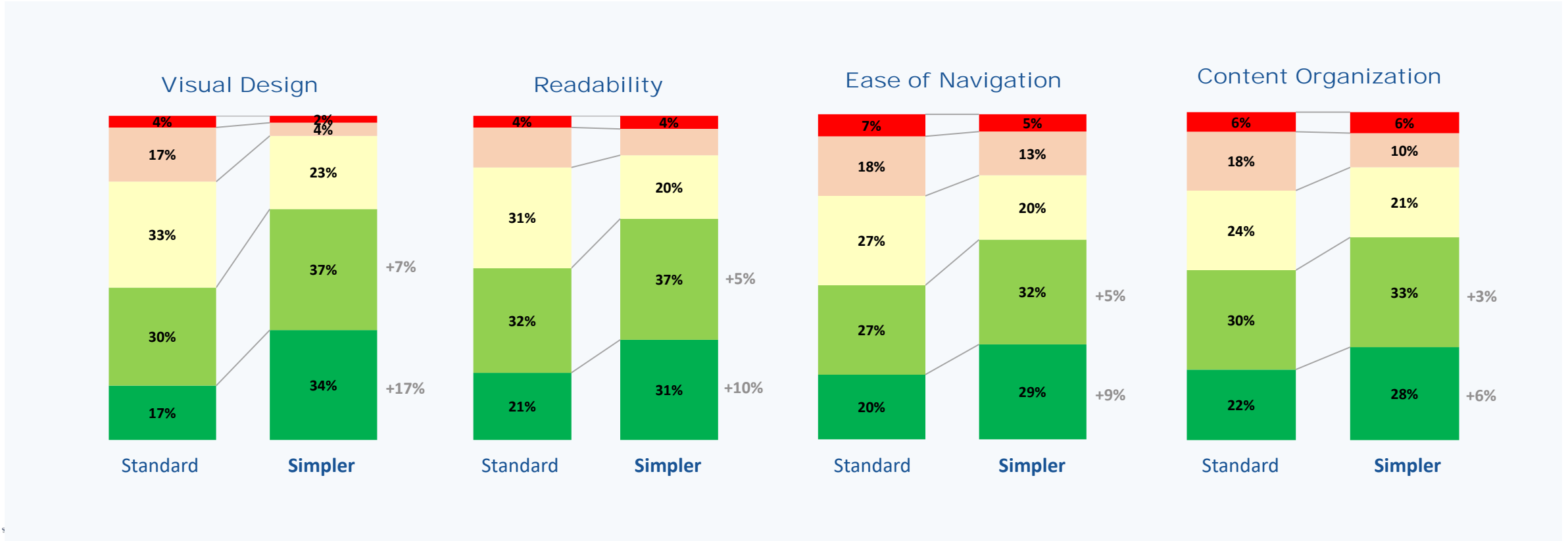
You must follow all relevant laws and policies. Your other responsibilities will include:

- Collaborating with HRSA and the VHA-ORH (including VRHRCs) in implementing program objectives, measuring program progress, and assessing program effectiveness.
- Executing program activities to meet the objectives of the project, with ongoing input from HRSA.

Step 1: Review the Opportunity

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The four main CX features SimplerNOFOs aimed to improve were rated higher by SimplerNOFO applicants across the board



Questions

Contact DGP@hrsa.gov
with any questions!



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