Frequently Asked Questions (FAQs) for the FCHIP TA Program

1. **Do I have to be located in Montana, Nevada, or North Dakota to apply?**

   No, we are accepting applications from eligible organizations located in any state, including public, private, and nonprofit organizations. The organization awarded the FCHIP TA cooperative agreement will provide technical assistance to ten critical access hospitals (CAHs) located in Montana, Nevada, or North Dakota. Finally, as stated in the funding opportunity announcement, priority points may be available for applicants with experience and familiarity with any of the five states qualified for inclusion in the FCHIP demonstration: Alaska, Montana, Nevada, North Dakota, and Wyoming. Please see page 5 in the funding opportunity announcement for more information on eligibility and pages 19-20 for more information on priority points.

2. **Can for-profit entities apply for the FCHIP TA Program?**

   Yes, eligible applicants include public, private, and nonprofit organizations. Faith-based and community-based organizations, tribes, and tribal organizations are also eligible. Please see page 5 of the funding opportunity announcement for more information on eligible applicants.

3. **Should tables be included in the text of the application or in the attachments?**

   Tables and charts describing the challenges to be addressed, technical assistance services to be provided, timelines of site visits and data collection, and other relevant activities should be included as an attachment (Attachment 5). Please refer to these tables in the text where applicable. Please see page 12 of the funding opportunity announcement for more information on tables and charts.

4. **How do I get a waiver to receive cost-based reimbursement for telehealth and/or ambulance services under the FCHIP demonstration?**

   The FCHIP TA Program offers a cooperative agreement to provide technical assistance to the ten CAHs selected by the Centers for Medicare & Medicaid Services (CMS) to participate in the FCHIP demonstration. Those ten CAHs receive waivers from CMS to test new models of integrated, coordinated care in sparsely populated rural counties. The organization awarded the FCHIP TA cooperative agreement does not receive any such waivers from CMS. For more information on the FCHIP demonstration, please see the demonstration webpage at [https://innovation.cms.gov/initiatives/Frontier-Community-Health-Integration-Project-Demonstration/](https://innovation.cms.gov/initiatives/Frontier-Community-Health-Integration-Project-Demonstration/).

5. **What is the difference between a resume and the biographical sketch required for the application?**

   A resume is a relatively short-form document detailing the relevant qualifications and experience for key personnel. This is crucial information for the application reviewers to
account for when determining whether key staff are qualified to run the FCHIP TA Program. The biographical sketch should include further information to put the qualifications and experience of key personnel into context for the applicable program. In the case of this program, the biographical sketch should answer the question “how do particular qualifications and experience make the key personnel well suited to run the FCHIP TA program?” When applicable, this should include any training, language fluency, or cultural competency for the populations served. Although these documents are different and serve different purposes, you can join them together in one document. For more information on biographical sketches, please see page 44 of the SF-424 application guide at https://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf.