Fiscal Year 2016
Health Center Controlled Networks (HCCN)
Competitive Funding Opportunity

Funding Opportunity Number: HRSA-16-010

Technical Assistance Web Page:
http://bphc.hrsa.gov/programopportunities/fundingopportunities/HCCN/index.html

Agenda

- HCCN Introduction
- Funding Opportunity Announcement (FOA) Overview
- Eligibility
- Application Process and Content
- Wrap Up
- Questions

Improving the health of the Nation's underserved communities and vulnerable populations by assuring access to comprehensive, culturally competent, quality primary health care services.

Increase access to primary health care services

Modernize primary care infrastructure and delivery system

Improve health outcomes and health equity

Promote performance-driven, innovative organizations

Increase Value of Health Center Program

Primary Care Strategies and Goals

Strategy	Goal
Increase Access	- Increase number of patients served - Increase % of patients served in existing service areas - Increase % of low income communities served by health centers
Modernize Infrastructure	- Increase % of health centers that report UDS data using an EHR - Increase % of health centers reaching Stage 2 Meaningful Use Standards - Increase % of health centers with PCMH at all sites - Increase % of health centers with modernized facilities
Improve Health Outcomes	- Increase % of health centers exceeding Healthy People 2020 goals - Increase % of health centers improving performance on quality measures - Increase % of health centers that provide integrated care
Promote Performance Driven Culture	- Increase use of enabling services at health centers - Increase number of health centers utilizing team-based practice models - Increase use of health center data to drive program performance and compliance

Health Center Accomplishments

98% of health centers have adopted EHRs

69% of health centers have received PCMH recognition

93% of health centers demonstrated improvement on one or more clinical quality measures
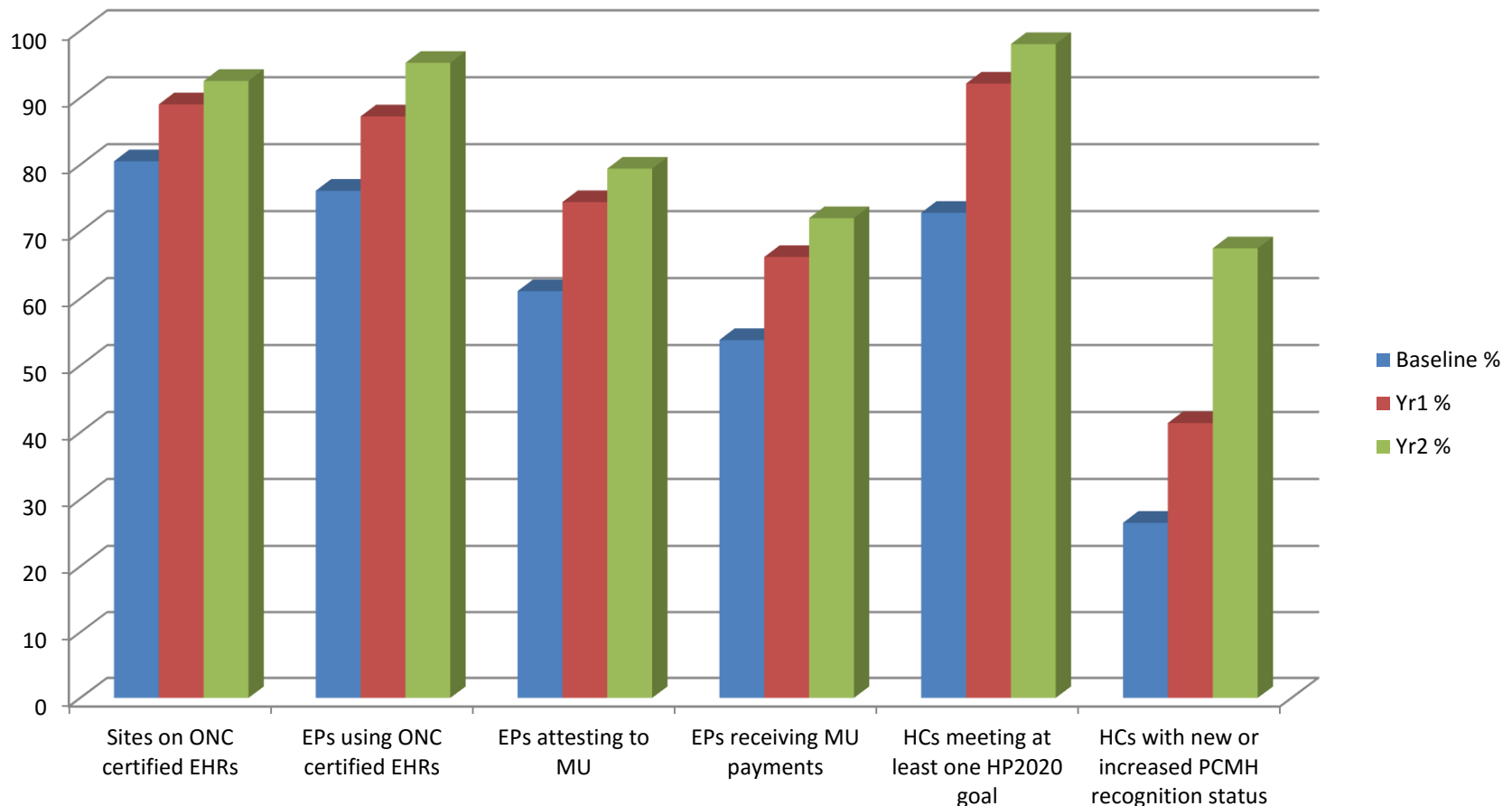
89% of health centers met/exceeded HP2020 goals on at least one clinical quality measure

215 health centers met/exceeded the Million Hearts goals on aspirin therapy, blood pressure control, and smoking/tobacco cessation

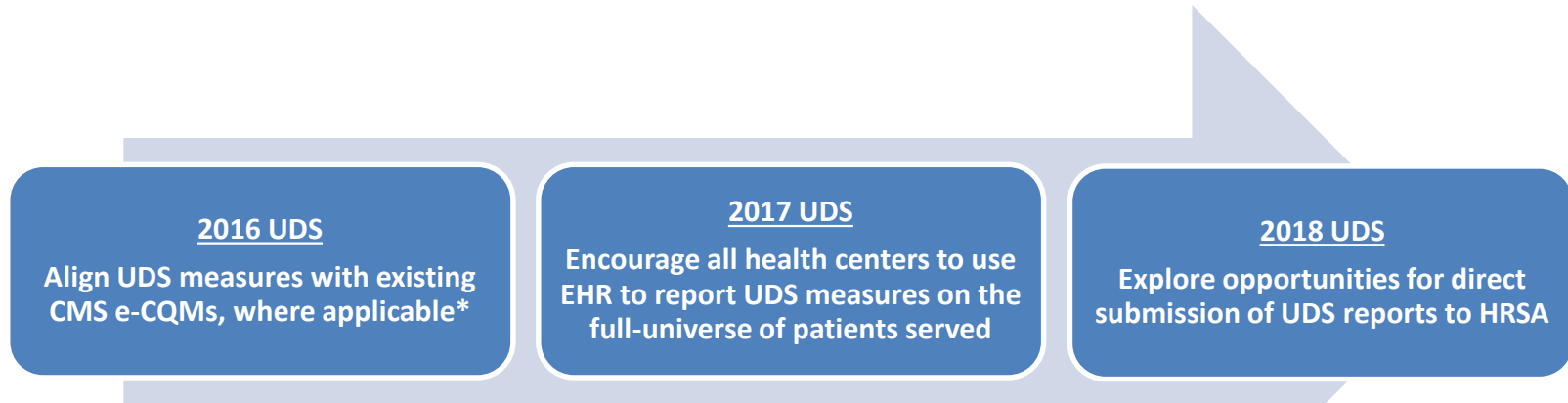# HCCN Baseline – 2 Year Comparison Graph

Source: HCCN Progress Reports

- Competing priorities, staffing, and workforce issues at Health Centers

- Certified vendor issues with flawed updates, poor customer service and problematic technical support approaches

- EHR vendors' unwillingness to work with third party solutions

- High costs associated with health IT interoperability, maintenance, security and upgrades

- Multiple reporting requirements and lack of harmonization across measures reported

- Connecting to state registries

Potential UDS Changes

2016 UDS
Align UDS measures with existing CMS e-CQMs, where applicable*

2017 UDS
Encourage all health centers to use EHR to report UDS measures on the full-universe of patients served

2018 UDS
Explore opportunities for direct submission of UDS reports to HRSA

- Addition of sexual orientation and gender identity elements
- Addition of new staffing information for community health workers, quality improvement staff, and dental therapists
- Additions to Appendix D - telehealth capacity and use; medication-assisted treatment (MAT) capacity and use
- Revisions to clinical quality measures to fully align with CMS electronic clinical quality measures (e-CQMs) where possible

*4 UDS measures are not CMS eCQMs: low birth weight, early entry to prenatal care, HIV linkage to care, and CAD and lipid-lowering therapy.

FOA OVERVIEW

- Two application phases: Grants.gov and HRSA EHB

- Health centers with look-alike designation may be Participating Health Centers

- Health Center Program award recipients must be at least 51 percent of Participating Health Centers

- HCCNs will address four Core Objectives and their corresponding Focus Areas

- The Project Work Plan content will be submitted as a form in the HRSA EHB application phase

Support health centers in strengthening quality of care and improving patient health outcomes by achieving:

- Meaningful use of ONC-certified electronic health records (EHRs);

- Adopting technology-enabled quality improvement strategies; and

- Engaging in health information exchange (HIE)

- Approximately $33 million per year to support approved activities
- Approximately 45 expected awards
- Maximum award depends on number of Participating Health Centers
- Project period is three years
  - August 1, 2016 through July 31, 2019
  - Three one-year budget periods
- Awards will be made prior to the project period start date of August 1, 2016

ELIGIBILITY

- A practice management network (HCCN) that is majority controlled and, as applicable, at least majority owned by Health Center Program award recipients; or
- A health center funded for at least the two consecutive preceding years as a Health Center Program award recipient applying on behalf of an HCCN
  - The HCCN must:
    - Be majority controlled and, as applicable, at least majority owned by Health Center Program award recipients, and
    - Have its own governing board that is independent of the boards of its health center members

- Applicants must demonstrate public or non-profit, private organization status
- Applications must demonstrate that at least 10 Health Center Program award recipients and/or look-alikes (minimum of 51 percent Health Center Program award recipients) are committed to achieving the program purpose, as Participating Health Centers
- Applications must propose at least 2 Activities for each Focus Area

Who is not eligible? Select all that apply. A and D

A. A health center newly funded in FY 2015 applying on behalf of an HCCN

B. An HCCN that is majority controlled and majority owned by health centers funded under Section 330 of the PHS Act

C. A health center applying on behalf of an HCCN that provides documentation that 11 health centers committed to working with the HCCN to achieve the grant program's goals

D. A private, for profit entity that develops, sells, and supports EHRs

APPLICATION PROCESS AND CONTENT

- Applications may not exceed 80 pages
- Failure to follow the instructions and include all required documents may:
  - Negatively affect the application's review score
  - Result in the application being considered non-responsive and not considered for funding

Application Instructions

- Two-tier application process
  - Grants.gov
  - HRSA Electronic Handbooks (EHB)
- Information submitted in the Grants.gov application phase may be updated in the EHB application phase
- SF-424 Two-Tier Application Guide
  - General information on application preparation and submission process for two-tier applications
  - http://www.hrsa.gov/grants/apply/applicationguide/sf424program specificappguide.pdf
- Funding Opportunity Announcement
  - Program-specific instructions
  - Available via Grants.gov
    - Search for announcement number HRSA-16-010

- Grants.gov
  - http://www.grants.gov/
  - Due February 1, 2016
  - New Workspace feature allows health center staff to mutually access, edit, and submit application forms and documents online
    - http://www.grants.gov/web/grants/applicants/workspace-overview.html
  - Confirm current System for Award Management (SAM) registration
    - https://www.sam.gov/portal/SAM/#1
    - SAM registration must be renewed every 12 months
  - Confirm Data Universal Numbering System (DUNS) number is correct and valid
    - http://fedgov.dnb.com/webform
  - A series of validation emails from Grants.gov will follow a successful submission
  - SF-424 Two-Tier Application Guide provides details
    - http://www.hrsa.gov/grants/apply/applicationguide/sf424programspecific appguide.pdf

- SF-424: Application for Federal Assistance

    – Type of application: New

    – Upload Project Abstract on page 2, box 15

- SF-424B: Assurances – Non-Construction Programs

- Project/Performance Site Location(s) Form

    – Provide Administrative Site location only

- Grants.gov Lobbying Form

- SF-LLL: Disclosure of Lobbying Activities, as applicable

- HRSA Electronic Handbooks (EHB)

  – https://grants.hrsa.gov/webexternal

  – Due March 1, 2016

  – Only the Authorizing Official registered in EHB may submit the application

    - Confirm EHB registration is current and the correct Authorizing Official is listed

    - Authorizing Official receives a tracking number for accessing EHB via email no more than 7 business days after successful Grants.gov submission

    - A confirmation message in EHB follows successful submission

  – SF-424 Two-Tier Application Guide provides details

    - http://www.hrsa.gov/grants/apply/applicationguide/sf424programspecificappguide.pdf

- Project Abstract

  - May update the abstract submitted in Grants.gov, as needed

- Project Narrative

- SF-424A Budget Information Form

- Budget Justification Narrative

- Attachments

- Program Specific Forms/Funding Opportunity-Specific Forms

- Organize requested content according to the following sections (corresponding maximum Review Criteria points shown)

  - Need (15 points)

  - Response (20 points)

  - Collaboration (15 points)

  - Evaluative Measures (15 points)

  - Resources/Capabilities (20 points)

  - Governance (10 points)

  - Support Requested (5 points)

- Section IV of the FOA provides additional detail

Maximum Annual Award Amount

Number of Participating Health Centers	Maximum Annual Award Amount
10-14	$500,000
15-19	$625,000
20-24	$750,000
25-29	$875,000
30-34	$1,000,000
35-39	$1,125,000
40-44	$1,250,000
45-49	$1,375,000
50 or more	$1,500,000

Budget Restrictions

- Requested amount may not exceed the stated maximum allowed according to the number of Participating Health Centers
- Funds under this announcement may not be used for:
  - Equipment, supplies, or staffing used by individual health centers
  - Direct patient care
  - Fundraising or lobbying
  - Incentives (e.g., gift cards, food)
  - Construction or renovation of facilities
  - Facility land purchases
- The HCCN may not require Participating Health Centers to become members or pay to receive the services provided through this grant

Budget Justification Narrative

- Provide only federal funding requested
  - Amount must match that stated in the SF-424A Budget Information Form

- A narrative justification is required for each budget category presented in Section B-Budget Categories of the SF-424A Budget Information Form

- Year 2 and Year 3 justifications should highlight the changes from the preceding year or clearly indicate no substantive changes

- Provide sufficient information to demonstrate that costs are reasonable and necessary to implement the proposed project

- Refer to the SF-424 Two-Tier Application Guide http://www.hrsa.gov/grants/apply/applicationguide/sf424programspecificappguide.pdf for details

Which of the following is a correct statement? D

A. Non-federal budget information is required

B. The budget should include all Health Center Program costs and revenue

C. Additional funds will be awarded if the HCCN adds Participating Health Centers during the project period

D. The HCCN may not require Participating Health Centers to become members or pay to receive grant services offered by the HCCN

- Attachments are referenced in the Project Narrative items and related Review Criteria
- Attachments support the information provided in the Project Narrative and Funding Opportunity-Specific forms
- Applications missing a required attachment will be considered incomplete and deemed ineligible
- Applications missing non-required attachments may be scored down by the Objective Review Committee
- All attachments are counted toward the page limit except the Proof of Public or Non-Profit Status and Indirect Cost Rate Agreement (if applicable)
- Attachment-specific table of contents are not counted toward the page limit

- Attachment 1: Proof of Public or Non-Profit Status

- Attachment 2: Participating Health Center Memorandum of Agreement (MOA)

- Attachment 3: Project Organizational Chart

- Attachment 4: Position Descriptions for Key Project Staff

- Attachment 5: Biographical Sketches for Key Project Staff

- Attachment 6: Staffing Plan
- Attachment 7: Summary of Contracts and Agreements, as applicable
- Attachment 8: Letters of Support
- Attachment 9: Corporate Bylaws
- Attachment 10: Indirect Cost Rate Agreement, as applicable
- Attachments 11-15: Other Documents

- A minimum of 10 Participating Health Centers throughout the project period

- A minimum of 51 percent Health Center Program award recipients

- A maximum of 49 percent health centers with look-alike designation

- May be a Participating Health Center for only one FY 2016 HCCN application

- MOA must state:
  - An effective date range of August 1, 2016 to July 31, 2019

  - Participating Health Centers' commitment to help the HCCN address the Goals of each Focus Area for the entire project period

  - Each Participating Health Center's project champion

- MOA must state:
  - Responsibilities of the HCCN and a summary of activities to address the particular needs of the Participating Health Centers

  - The HCCN's commitment to developing individualized work plans for the Participating Health Centers that address project goals within 90 days of award

  - Certification that participation in the project will not result in the reduction of the amount or quality of health services currently provided to Participating Health Center patients

Example MOA Signature Table

1: Participating Health Center name Grant/LAL number Number of sites CEO name CEO signature	2: Participating Health Center name Grant/LAL number Number of sites CEO name CEO signature
3: Participating Health Center name Grant/LAL number Number of sites CEO name CEO signature	4: Participating Health Center name Grant/LAL number Number of sites CEO name CEO signature

- False. A health center with 15 sites does not meet the definition of an HCCN and does not fulfill the Participating Health Center requirement.

- An HCCN is an organization whose governing board is comprised by a majority of Health Center Program award recipients (multiple, unique health center organizations).

- Participating Health Centers must be unique health center organizations, not one health center's sites.

- Completed in EHB Program Specific Forms section
- Participating Health Centers Form
  - Identify Participating Health Centers by searching for health center name, city, state, and/or Health Center Program grant number or look-alike number
  - Search results will provide only the administrative site
    - All sites must be engaged in the HCCN project
  - Participating Health Centers selected on the form must match those represented in the MOA
  - Instructions will be provided in the EHB User Guide

- Project Work Plan
  - Goal Target Percentages reflect projected outcomes at the end of the three-year project period
    - July 31, 2019
  - Outline activities to be conducted during the first 12 months of the project period
    - August 1, 2016 to July 31, 2017
  - Enter required information directly into EHB
  - Appendix A provides instructions
  - http://bphc.hrsa.gov/programopportunities/fundingopportunities/HCCN/index.html

Project Work Plan Requirements

- Core Objectives
  - Health Information Technology Implementation and Meaningful Use
  - Data Quality and Reporting
  - Health Information Exchange and Population Health Management
  - Quality Improvement
- Focus Areas
  - Specific targets for each Core Objective
  - Must propose at least two Activities for each Focus Area
- Goals
  - Metrics for each Focus Area
  - HCCNs will report progress toward achieving Goals annually

- **Health IT Implementation and Meaningful Use**
  - Goal A1: Increase the percentage of Participating Health Centers with an ONC-certified EHR system in use.

  - Goal A2: Increase the percentage of Meaningful Use eligible providers at Participating Health Centers receiving incentive payments from CMS for meeting Meaningful Use requirements.

- **Data Quality and Reporting**
  - Goal B1: Increase the percentage of Participating Health Centers that electronically extract data from an EHR to report all Uniform Data System (UDS) Clinical Quality Measure data on all of their patients.

  - Goal B2: Increase the percentage of Participating Health Centers generating quality improvement reports at the site and clinical team levels.

  - Goal B3: Increase the percentage of Participating Health Centers that integrate data from different service types and/or providers (e.g., behavioral health, oral health).

- **Health Information Exchange and Population Health Management**
  - Goal C1: Increase the percentage of Participating Health Centers that improve care coordination through health information exchange with unaffiliated providers or entities.

  - Goal C2: Increase the percentage of Participating Health Centers using health information exchange to support population health management.

- **Quality Improvement**
  - Goal D1: Increase the percentage of Participating Health Centers that meet or exceed Healthy People 2020 goals on at least five selected UDS Clinical Quality Measures.

  - Goal D2: Increase the percentage of Participating Health Centers that improved the value, efficiency, and/or effectiveness of health center services.

  - Goal D3: Increase the percentage of Participating Health Center sites that have current Patient-Centered Medical Home recognition.

- False. Applications must propose at least 2 Activities that will achieve each Focus Area's Goal in all four Core Objectives. Applications may not propose Goals in addition to those stated.

WRAP UP

- Grants.gov due date: February 1, 2016, 11:59 P.M., ET

- EHB due date: March 1, 2016, 5:00 P.M., ET

- Applications may not exceed 80 pages

- Submit single-spaced narrative documents with 1-inch margins and easily-readable 12 point font
  - e.g., Times New Roman, Arial, Courier

- Applications failing to meet all eligibility requirements or include required attachments will not be considered for funding

- Technical Assistance Web page
  - http://bphc.hrsa.gov/programopportunities/fundingopportunities/HCCN/index.html

- Program related questions
  - bphchccn@hrsa.gov
  - 301-594-4300

- Budget related questions to Christie Walker
  - cwalker@hrsa.gov
  - 301-443-7742

- Grants.gov related questions
  - support@grants.gov
  - 800-518-4726

- EHB related questions to the BPHC Helpline
  - http://www.hrsa.gov/about/contact/bphc.aspx
  - 877-974-2742

QUESTIONS