

HRSA EHB USER GUIDE

FTCA

User Guide for Grantees

Table of Contents

1.	Introduction	4
2.	Getting Started.....	5
2.1.	What Is FTCA and Who Must Apply?	5
2.2.	When Will the Application be Available?.....	5
2.3.	What Are the Deadlines?	5
3.	Accessing the FTCA Application	6
3.1.	3.1. EHB Roles and Privileges	6
3.2.	Navigating to Your FTCA Application	7
3.3.	The Applications Page	7
3.3.1.	Why Won't the System Let Me Create an Application?	8
3.3.2.	Why Is the Status of My Application "Void"?	9
3.4.	Application Type.....	9
4.	Application Forms	11
4.1.	Status Page.....	11
4.2.	Navigation and Data Entry	12
4.3.	Contact Details Page	12
4.4.	Risk Management Systems Page	14
4.5.	Quality Improvement/Quality Assurance Plan Page	15
4.6.	Credentialing Systems Page.....	16
4.7.	Professional Liability History Page.....	17
4.8.	Additional Information Page.....	18
4.9.	Supporting Documentation Page	19
5.	Subrecipient Application	20
6.	Signing, Reviewing, and Submitting the Application	25
6.1.	Signatures Page.....	25
6.2.	Review Page	25
6.3.	Submit Page.....	26
7.	Change Requests	29
8.	Deeming History	30
9.	Help and Support.....	31

List of Figures

Figure 1:	Application Header Showing Application Deadline.....	5
Figure 2:	FTCA Program Link on Overview Page.....	7
Figure 3:	Applications Page	8
Figure 4:	Applications Page Showing Application in Progress	8
Figure 5:	Error Message for Creation of New Application	9

Figure 6: Select Application Type Page.....	10
Figure 7: Application Creation Confirmation Message and Tracking Number.....	10
Figure 8: Status Page	11
Figure 9: FTCA Application Left Navigation Panel.....	12
Figure 10: Save and Save and Continue Buttons.....	12
Figure 11: Contact Details Page	13
Figure 12: Contact Details Page with Choose Person to Add Form Displayed.....	13
Figure 13: Contact Details Page with Add Contact Information Form Displayed	14
Figure 14: Risk Management Systems Page.....	15
Figure 15: Quality Improvement/Quality Assurance Plan Page.....	16
Figure 16: Credentialing Systems Page	17
Figure 17: Professional Liability History Page	18
Figure 18: Additional Information Page.....	19
Figure 19: Supporting Documentation Page.....	19
Figure 20: Subrecipient Application Page.....	20
Figure 21: Download Template Block on Subrecipient Application Page.....	21
Figure 22: Subrecipient's Record on the Subrecipient Application Page	21
Figure 23: Edit Subrecipient Application Form.....	21
Figure 24: Subrecipient Application Page with Subrecipient Documentation Displayed	23
Figure 25: Signatures Page	25
Figure 26: Review Page.....	26
Figure 27: Submit Page	27
Figure 28: Submit Confirmation Page with FTCA Certification Form Displayed	27
Figure 29: Submission Confirmation Message	28
Figure 30: Applications Page with Application in "Change Request in Progress" Status.....	29
Figure 31: Link to Change Request Email on Application Status Page.....	29
Figure 32: Deeming History Page.....	30

List of Tables

Table 1: Access Privileges.....	6
Table 2: Form Status.....	11
Table 3: Technical Assistance Contact Information.....	Error! Bookmark not defined.

1. Introduction

Federal Tort Claims Act (FTCA) coverage for eligible Health Center Program grantees was established through the Federally Supported Health Centers Assistance Act (FSHCAA) of 1992. The eligible entities ("health centers") are organizations receiving funding under the Health Center Program (Community Health Centers, Migrant Health Centers, Health Care for the Homeless Centers, and Public Housing Primary Care Centers). Health centers are required to reapply each year for deeming and associated medical malpractice coverage.

As a part of continued efforts to streamline and automate data reporting processes, the Bureau of Primary Health Care (BPHC) has developed a FTCA deeming module within the HRSA Electronic Handbooks (EHBs) for the CY 2010 deeming period (January 1 – December 31, 2010) and onwards. This module will fully support electronic web-based functionality for the deeming process including: grantee completion and submission of applications; BPHC review and processing of applications; and production of deeming status notifications to grantees. The module was made available to Health Center Program grantees in June 2009.

The purpose of this document is to provide detailed assistance for completing and submitting deeming applications through the HRSA Electronic Handbooks (EHBs).

Note: This document is not a substitute for the BPHC's Program Information Notices (PINs) and Program Assistance Letters (PALs) related to the Health Center FTCA Program.

2. Getting Started

2.1. What Is FTCA and Who Must Apply?

Please refer to the BPHC's Program Information Notices (PINs) and Program Assistance Letters (PALs) related to the Health Center FTCA Program for information on FTCA purpose and requirements and for programmatic and data reporting questions. These can be found at <http://www.bphc.hrsa.gov/policy/#ftca>.

FTCA coverage is an optional benefit available to organizations receiving funding under the Health Center Program. Health centers seeking coverage must apply. Health centers with subrecipient organizations seeking coverage must apply on behalf of their subrecipient organizations (see, [Section 5, Subrecipient Application](#), below).

2.2. When Will the Application be Available?

For health centers wishing to submit an initial deeming application, the application will be available in the EHB Starting April 16, 2014.

Currently deemed health centers may also begin filing renewal deeming applications on April 16, 2014.

2.3. What Are the Deadlines?

Health centers may submit an initial deeming application at any time during the year. (Note that you must submit the application by December 31 or it becomes void.) Currently deemed health centers submit redeeming applications at specific times of the year, at HRSA's direction. Application deadlines, where applicable, are displayed in the application header (Figure 1).

Figure 1: Application Header Showing Application Deadline

Grantee Name: [Grantee Name]	Application Type: Initial Deeming
Address: [Address]	Application Deadline: N/A
Grant#: H80CS [Grant#]	Funding Streams: [Funding Streams]
Created By: [User] on [Date]	Last Updated By: [User] on [Date]
View: Scope Required Services Scope Additional Services Scope Sites Scope Activities Resources	

3. Accessing the FTCA Application

3.1. EHB Roles and Privileges

To access, work on, and submit FTCA applications, you must be a registered user within the EHBs, with appropriate roles and privileges. Every EHB user has the organization-level role of “Authorizing Official” (AO), “Business Official” (BO) or “Other.” You request that role when you create your EHB account. To work on submissions for a grant, you must also have the grant-level role of “Project Director” (PD) or “Other” for that grant. In the case of FTCA, you must have the “Project Director” or “Other” role for the Health Center grant and you must have one or more of the privileges listed in Table 1.

The [FTCA Program](#) link will only be available as a part of the H80 grant handbook.

Applicants or grantees who have the H80 grant in their portfolio will only have access to view the [FTCA Program](#) link. However, the Project Director automatically has all privileges associated with the grant, including the privilege to view, edit and submit FTCA applications. The Project Director may grant these privileges (as well as others) to any user who requests them.

All users (including the PD) who need to work on the FTCA application should ensure that the Health Center Cluster grant has been added to their portfolios. Click the [View Portfolio](#) link from the left navigation panel in the EHBs. If the grant is not listed, click the [Add to Portfolio](#) link and follow the directions on screen. The PD will be given immediate access to the grant. Others will be given access and privileges when the PD approves their request.

The privileges you have determine what you can do. You may have any or all of the access, view, create, edit and submit privileges at the grant level. The following table summarizes the permissions associated with each privilege within the EHBs.

Table 1: Access Privileges

Privilege	Permissions
Access FTCA Handbook	View the FTCA Home page
View FTCA Application	All permissions associated with the “Access” privilege, plus <ul style="list-style-type: none">• Access the read-only version of the FTCA application• Access the submitted read-only versions of the applications for all previous years
Create FTCA Application	All permissions associated with the “View” privilege, plus <ul style="list-style-type: none">• Create an FTCA application
Edit FTCA Application	All permissions associated with the “Create” privilege, plus <ul style="list-style-type: none">• Enter and save the data in the electronic forms for all sections of the application

Privilege	Permissions
-----------	-------------

Submit FTCA Application

All permissions associated with the “Edit” privilege, plus

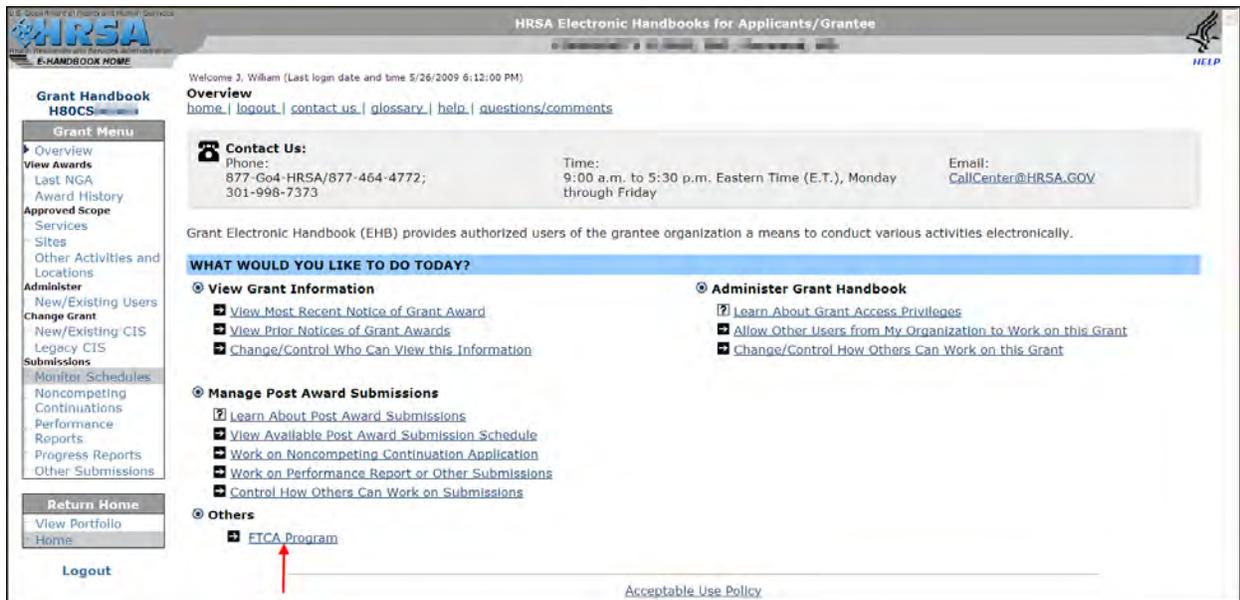
- Submit the application once the data has been entered

3.2. Navigating to Your FTCA Application

If you are already a registered user with the HRSA EHBs, you can follow these steps to get started:

1. Type the link to the EHBs, in the address bar of your browser:
<https://grants.hrsa.gov/webexternal/Login.asp>
2. Log into the EHBs.
3. On the left navigation panel, under **Grants Portfolio**, click on the View Portfolio link.
4. In the **Grants List**, click on Open Grant Handbook for your health center cluster grant.
5. The **Overview** page opens. Under **Others**, click on the FTCA Program link.

Figure 2: FTCA Program Link on Overview Page

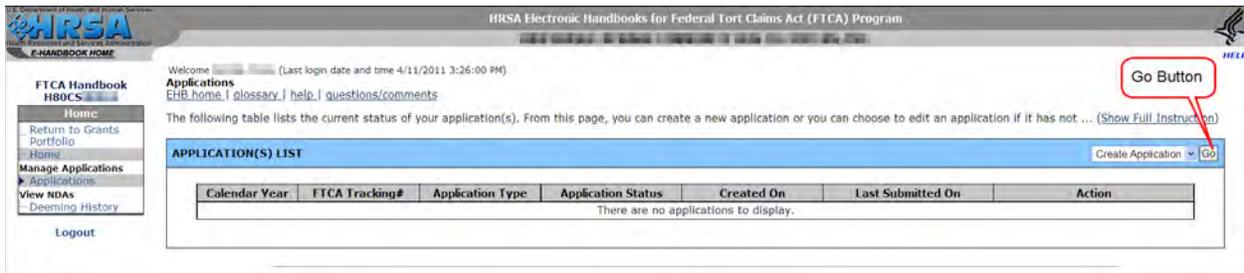


6. The **Welcome** page for the FTCA program opens. Under **View Applications**, click on the Work on My FTCA Application link.
7. The **Applications** page opens. It is described in [section 3.3](#).

3.3. The Applications Page

From the **Applications** page, you may create a new application or work with one you created previously (Figure 3).

Figure 3: Applications Page



1. To create an application, click the **Go** button in the upper right corner of the Applications List. You need not complete the application in a single sitting.
2. To return to an application you have previously begun, click the Edit Application link.

Figure 4: Applications Page Showing Application in Progress



3.3.1. Why Won't the System Let Me Create an Application?

Note: Under certain circumstances, the system will not allow you to create an application. Specifically:

- If you have already created an application, the system will not allow you to create another one. This applies when your application is in progress as well as when it has been submitted and is under review.
- If you are a currently-deemed health center, the system will not allow you to create a redeeming application outside of your "redeeming cycle," that portion of the year during which HRSA is prepared to accept your application.
- If the project period for your grant is not current, the system will not allow you to create an application. The system also checks your project period when you submit your application, and will not allow you to submit if your project period is not current.

If any of the above circumstances apply, the system will display an error message when you attempt to create an application (Figure 5).

Figure 5: Error Message for Creation of New Application



3.3.2. Why Is the Status of My Application “Void”?

There are several sets of circumstances that could make the status of your application void. These are:

- Application requirements are subject to change at any time. If it is necessary that HRSA change the requirements for deeming or redeeming, this will affect any application you have in progress.
- HRSA will advise you, via email, of the date by which you must submit your application. This date also appears in your application header. If you do not submit your application by this date, you will not be able to submit it at all. The status of the application will move to “Void.”
- Initial deeming applications not submitted by December 31 of the year in which they are created become void. This applies to initial submissions and any change requests.

Note: Should your application become void for any reason, you will have to create a new one.

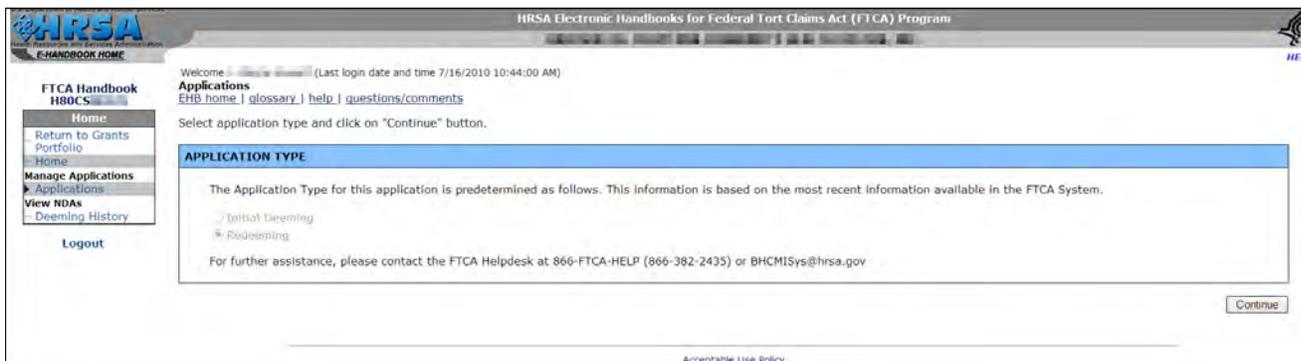
3.4. Application Type

The **Application Type** page (Figure 6



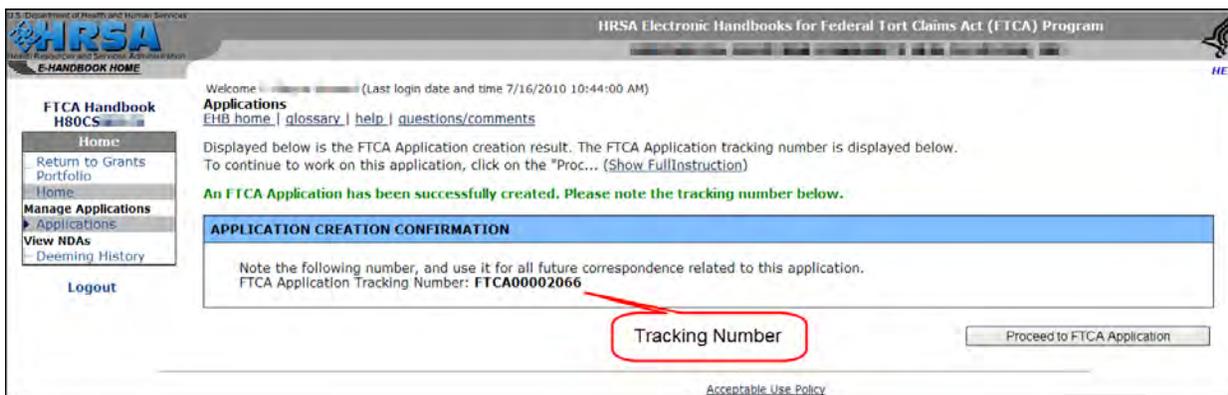
) is the first page you see when you create an application. This page shows, based on information available to BPHC, whether the bureau considers your application to be an initial deeming or a redeeming.

Figure 6: Select Application Type Page



1. Click the **Continue** button to continue. A confirmation message is displayed, showing that you have successfully created your application (Figure 7).

Figure 7: Application Creation Confirmation Message and Tracking Number



1. Take note of the **Tracking Number**. Use it in any correspondence related to this application.
2. Click the **Proceed to FTCA Application** button.

4. Application Forms

4.1. Status Page

The **Status** page (Figure 8: Status Page) displays the completion status of each section of the FTCA application. This is the page that opens when you click the **Proceed to FTCA Application** button (see Section 3.4), or when you return to an application in progress.

The FTCA Application Status table on the **Status** page lists the forms included in the application. The completion status is displayed to the right. Click the Update link under **Action** to open the form for editing. You can also open a form by choosing it from the left navigation panel.

Figure 8: Status Page

The screenshot shows the FTCA Federal Tort Claims Act Application status page. It includes a navigation menu on the left, a welcome message, and a 'STATUS OVERVIEW' section with application details. Below that is the 'FTCA APPLICATION STATUS' table.

Section	Status	Action
Contact		
Contact Details	Not Started	Update
FTCA Process Data		
Risk Management Systems	Not Started	Update
Quality Improvement/Assurance Plan	Not Started	Update
Credentialing Systems	Not Started	Update
Professional Liability History Services and Activities	Not Started	Update
Miscellaneous		
Additional Information	Not Started	Update
Supporting Documents	Not Started	Update
Certifications		
Signatures	Not Started	Update

Completion statuses for forms are listed and explained in Table 2.

Table 2: Form Status

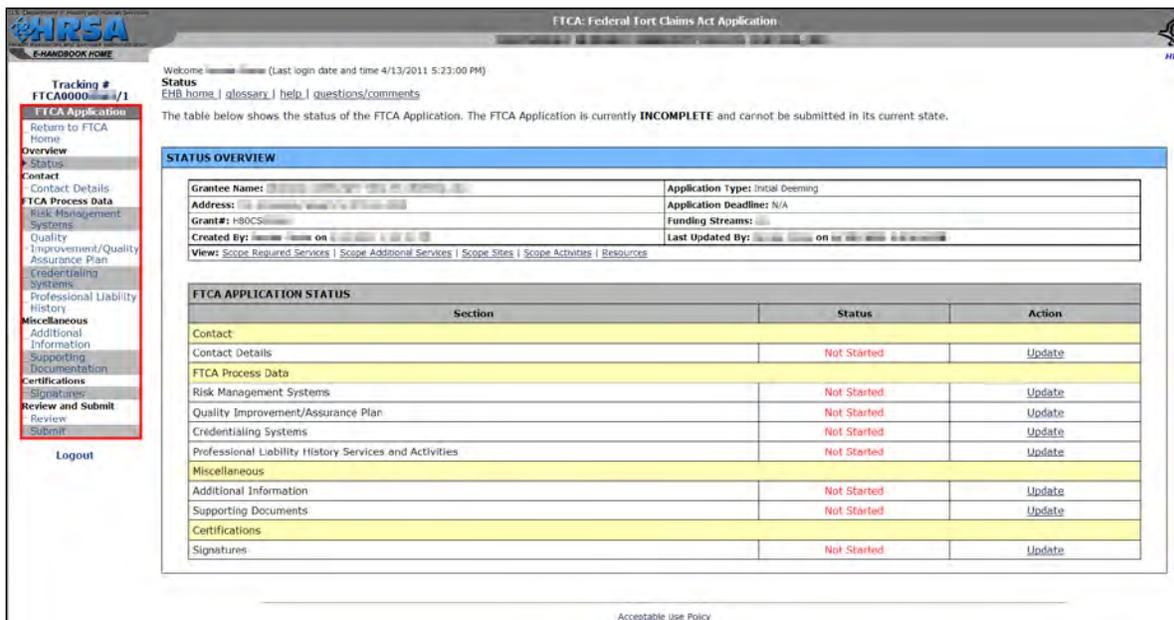
Status	Denotes
Not Started	The page has not been accessed. All the forms are initially in the “Not Started” status. Accessing the page moves the status to “In Progress.”
In Progress	Once you have entered all the data within the form and there are no errors, the form status will be changed to “Complete.”
Complete	The form will remain in this status until all the data has been entered and has been saved. The data will be saved as long as there are no critical errors.

Once a form has been marked “Complete,” making changes to the data which cause errors on the page will change the page status back to “In Progress.” A page never reverts to the “Not Started” status.

4.2. Navigation and Data Entry

Navigation within the FTCA application reflects the conventions used within the EHBs. It is designed to facilitate data entry by streamlining the flow of pages. All the pages in the application can be accessed through the Left Side menu of the handbook (Figure 9).

Figure 9: FTCA Application Left Navigation Panel



There is a **Save** and **Save and Continue** button on each page of the application. Clicking on the **Save** button will save the data and keep the control on the current page. Clicking the **Save and Continue** button will save the data and navigate you to the next page in the application.

Figure 10: Save and Save and Continue Buttons



You can click the **Save** button at any time to save the data you have entered to this point on the current page. If data entry is incomplete, the system will display error messages. You may disregard them and continue data entry. The **Save and Continue** button has a similar function as the **Save** button, except that it will navigate you to the next page. The status of your page after clicking the **Save** button will be "In Progress."

When data entry for a page is complete, you should click the **Save** button to see if there are errors. If there are, you can address them immediately. If clicking the **Save and Continue** button produces no error messages, your page status will be updated to "Complete" and you may continue to the next page.

4.3. Contact Details Page

The **Contact Details** page (Figure 11) asks for contact information for the Executive Director, Medical Director, Risk Manager, Primary and Alternate Deeming Contacts.

1. Access this page by clicking the Update link on the **Status** page or by choosing Contact Details from the left navigation panel.

- You must enter information for each contact marked with an asterisk (*).

Note: Information you enter on this page applies to, and is saved with, this application only.

Figure 11: Contact Details Page

The screenshot shows the 'CONTACT DETAILS' page for an FTCA application. The page includes a sidebar with navigation options like 'Tracking # FTCA0000', 'Overview', 'Contact', and 'Logout'. The main content area is titled 'CONTACT DETAILS' and has a status of 'In Progress'. It contains several sections for entering contact information:

- Grantee Information:** Fields for Grantee Name, Address, Grant#, Created By, and Last Updated By.
- Application Information:** Fields for Application Type, Application Deadline, and Funding Streams.
- Contact Information Table:** A table with columns for Name, Direct Phone, Fax, and Email. It includes sections for:
 - *Executive Director:** Must electronically sign and certify the application.
 - *Medical Director**
 - *Risk Manager:** Recommend a health care provider or individual with at least one year of risk management experience.
 - *Primary Deeming Contact:** Individual responsible for completing application.
 - *Alternate Deeming Contact:** Individual responsible for assisting with application.

Buttons for 'Add Executive Director', 'Add Medical Director', 'Add Risk Manager', 'Add Primary Deeming Contact', and 'Add Alternate Deeming Contact' are provided for each section. At the bottom, there are 'Go to Previous Page', 'Save', and 'Save and Continue' buttons.

- For a given contact, click the **Add** button to open the **Contact Details** page with the **Choose Person To Add** form displayed (Figure 12).

Figure 12: Contact Details Page with Choose Person to Add Form Displayed

This screenshot shows the 'CONTACT DETAILS' page with the 'CHOOSE PERSON TO ADD' form open. The form is a table with columns for Select, Title, Salutation, First Name, Last Name, Middle Name, Phone, Fax, Email, and Source. It lists three potential contacts:

Select	Title	Salutation	First Name	Last Name	Middle Name	Phone	Fax	Email	Source
<input checked="" type="radio"/>	CFO		David	Barlow		(978) 880-1234 555 1234	Not Available	xxxxxxxx@xxxxxxxx.com	Last Submitted Grant Application
<input type="radio"/>	Chief Executive Officer		David	Barlow		(978) 880-1234 555 1234	Not Available	xxxxxxxx@xxxxxxxx.com	Last Submitted Grant Application
<input type="radio"/>	Medical Director		David	Barlow		(978) 880-1234 555 1234	Not Available	xxxxxxxx@xxxxxxxx.com	Last Submitted Grant Application

Buttons for 'Cancel', 'Choose Selected Person as Executive Director', and 'Add New Person as Executive Director' are located below the table.

Choose a person from the list (the list is pre-populated from your last FTCA application, your last grant application, and the current FTCA application), and then click the **Choose Selected Person** button.

To add a person not listed, click the **Add New Person** button. The **Contact Details** page opens with the Add Contact Information form displayed (Figure 13).

Figure 13: Contact Details Page with Add Contact Information Form Displayed

1. Complete the form. Data entry is required in fields marked with an asterisk (*).
2. Click the **Save and Continue** button when done.
3. Repeat for all required contacts.

4.4. Risk Management Systems Page

The **Risk Management Systems** page (Figure 14) asks for information about risk management systems.

You will be navigated to the **Risk Management Systems** page if you click the **Save and Continue** button at the bottom of the **Contact Details** page. You may also access the **Risk Management Systems** page by clicking the Update link on the **Status** page or by choosing Risk Management Systems from the left navigation panel.

1. Enter your responses to the questions. Responses are required where questions are marked with an asterisk (*).
2. When instructed to provide an explanation, enter it in the space provided.

Figure 14: Risk Management Systems Page

FTCA: Federal Tort Claims Act Application

Welcome

Risk Management Systems
[EHB home](#) | [glossary](#) | [help](#) | [questions/comments](#)

Answer all of the following questions. Click the "Save and Continue" button to move onto the next section. Click "Save" to save the form at any time. To go back to the last page, click "Go to Previous..." ([Show Full Instruction](#))

Fields marked with an asterisk (*) are required.

RISK MANAGEMENT SYSTEMS (Section 224(h)(1)) Status: **In Progress**

Grantee Name: [REDACTED]	Application Type: Redeeming
Address: [REDACTED]	Application Deadline: 5/23/2014
Grant#: [REDACTED]	Funding Streams: CH
Created By: on [REDACTED]	Last Updated By: on [REDACTED]

Risk Management Systems

*1. The health center conducts documented periodic assessments to identify, prevent and monitor medical malpractice risk.

Yes
 No

(If 'No', then please enter explanation below)
 Maximum 4000 characters (Approximately one page)
 Rich Text Editor and Toolbar

4.5. Quality Improvement/Quality Assurance Plan Page

On the **Quality Improvement/Quality Assurance Plan** page (Figure 15), you are asked to upload documents and answer questions concerning your health center's Quality Improvement/Quality Assurance Plan.

You will be navigated to the **Quality Improvement/Quality Assurance Plan** page if you click the **Save and Continue** button at the bottom of the **Risk Management Systems** page. You may also access the **Quality Improvement/Quality Assurance Plan** page by clicking the [Update](#) link on the **Status** page or by choosing [Quality Improvement/Quality Assurance Plan](#) from the left navigation panel.

Upload documents and enter your responses to the questions. Responses are required where questions are marked with an asterisk (*).

Figure 15: Quality Improvement/Quality Assurance Plan Page

FTCA: Federal Tort Claims Act Application

Welcome (Last login date and time: 4/13/2011 5:53:00 PM)

Quality Improvement/Quality Assurance Plan
[EHB Home](#) | [glossary](#) | [help](#) | [questions/comments](#)

Answer all of the following questions. Click the "Save and Continue" button to move onto the next section. Click "Save" to save the form at any time. To go back to the last... ([Show Full Instruction](#))

One or more errors have occurred on the page.

Field level errors.
 Error 1 Error 2 Error 3 Error 4 Error 5 Error 6
[View additional errors](#)

Fields marked with an asterisk (*) are required.

QUALITY IMPROVEMENT/ASSURANCE (QI/QA) PLAN Status: **In Progress**

Grantee Name:	Application Type: Initial Deeming
Address:	Application Deadline: N/A
Grant#: H80CS	Funding Streams:
Created By: on	Last Updated By: on

View: [Scope Required Services](#) | [Scope Additional Services](#) | [Scope Sites](#) | [Scope Activities](#) | [Resources](#)

QUALITY IMPROVEMENT/ASSURANCE (QI/QA) PLAN

*1. Please upload the following:

a. Upload and attach the QI/QA Plan that has been reviewed and approved by the Board (within the past 3 years) - The Board approval date must also appear on the attached QI/QA Plan and will be verified for consistency with the answer provided to Question 2.
Error 1: Please attach a current copy of the QA plan. Go to top

Attachment B - Copy of Health Center's Quality Improvement/Quality Assurance Plan (Maximum 6 attachments)

Select	Purpose	Document Name	Size	Uploaded By	Description
No attached document exists.					

[Attach](#)

4.6. Credentialing Systems Page

The **Credentialing Systems** page asks about your health center's credentialing process.

You will be navigated to the **Credentialing Systems** page if you click the **Save and Continue** button at the bottom of the **Quality Improvement/Quality Assurance Plan** page. You may also access the **Credentialing Systems** page by clicking the [Update](#) link on the **Status** page or by choosing [Credentialing Systems](#) from the left navigation panel.

1. Upload documents and enter your responses to the questions. Responses are required where questions are marked with an asterisk (*).
2. When instructed to provide an explanation, enter it in the space provided.

Figure 16: Credentialing Systems Page

The screenshot shows the 'Credentialing Systems' page within the FTCA application. The left sidebar contains a navigation menu with categories like 'FTCA Application', 'Overview', 'Contact', 'FTCA Process Data', 'Miscellaneous', 'Subrecipient', 'Certifications', and 'Review and Submit'. The main content area includes a 'Welcome' message, a 'Credentialing Systems' heading, and a table of application details. The table lists fields such as Grantee Name, Address, Grant#, Created By, Application Type, Application Deadline, Funding Streams, and Last Updated By. Below the table, there are instructions for the 'Credentialing Systems' section, including a list of personnel to be included and a note about uploading the list as an Excel spreadsheet.

Tracking #
FTCA Application
 Return to FTCA Home
Overview
 Status
Contact
 Contact Details
FTCA Process Data
 Risk Management Systems
 Quality
 Improvement/Quality Assurance Plan
Credentialing Systems
 Professional Liability History
Miscellaneous
 Additional Information
 Supporting Documentation
Subrecipient
 Subrecipient Application
Certifications
 Signatures
Review and Submit
 Review
 Submit
Logout

Welcome
Credentialing Systems
[EHB home](#) | [glossary](#) | [help](#) | [questions/comments](#)

Answer all of the following questions. Click the "Save and Continue" button to move onto the next section. Click "Save" to save the form at any time. To go back to the last page, click "Go to Previous..." ([Show Full Instruction](#))

Fields marked with an asterisk (*) are required.

CREDENTIALING SYSTEMS (Section 224(h)(2)) **Status: In Progress**

Grantee Name:	Application Type: Redeeming
Address:	Application Deadline: 5/23/2014
Grant#:	Funding Streams: CH
Created By:	Last Updated By:
View: Scope Required Services Scope Additional Services Scope Sites Scope Activities Subrecipients Resources Grant Project Officer	

Credentialing Systems

1. All current health care personnel involved in direct patient care must be credentialed within the last two years in accordance with the requirements outlined in PIN 2001-16 and PIN 2002-22, including all of the following:

- Licensed independent practitioners (e.g., physicians, nurse midwives, nurse practitioners)
- Licensed practitioners (e.g., RNs, LPNs)
- Certified practitioners/technicians (e.g., dental, lab, radiology, MA) where applicable
- Note: If your state does not require certain health care personnel (e.g., MAs, DAs) to be licensed or certified, please include these individuals on the credentialing list and indicate that state law does not require that they be certified.

***Upload and attach the credentialing list. (List MUST be in an Excel spreadsheet).**

Be sure to include the following on the credentialing list:

- Name and Professional Designation (e.g., MD/DO, RN, CNM, DDS,LPN, PA, MA, NP etc.)
- Title/Position
- Specialty
- Employment Status (full-time employee /part-time employee /contractor/volunteer)
- Hire Date (or anticipated hire date)
- Current Credentialing Date (MUST BE WITHIN PAST 2 YEARS); and
- Next Expected Credentialing Date

Note: The application will be returned without further review if the personnel are not credentialed within the

4.7. Professional Liability History Page

The **Professional Liability History** page (Figure 17) asks whether professional liability suits have been filed or settled against your health center and/or its employees/contractors over the last five years.

You will be navigated to the **Professional Liability History** page if you click the **Save and Continue** button at the bottom of the **Credentialing Systems** page. You may also access the **Professional Liability History** page by clicking the Update link on the **Status** page or by choosing Professional Liability History from the left navigation panel.

1. Enter your response.
2. If necessary, click the **Attach** button to upload the document described in the on-screen instructions.

Figure 17: Professional Liability History Page

The screenshot shows the 'Professional Liability History' page within the FTCA application system. The left sidebar contains a 'Tracking #' section and a 'FTCA Application' menu with options like 'Return to FTCA Home', 'Overview', 'Status', 'Contact', 'FTCA Process Data', 'Improvement/Quality Assurance Plan', 'Credentiaing Systems', 'Professional Liability History', 'Miscellaneous', 'Subrecipient Application', 'Certifications', and 'Review and Submit'. The main content area has a 'Welcome' message, a 'Professional Liability History' heading, and a table with application details. Below the table is a note about medical malpractice claims and a text entry field for the 'Professional Liability History' question.

Tracking #
FTCA Application
 Return to FTCA Home
 Overview
 Status
 Contact
 Contact Details
 FTCA Process Data
 Risk Management Systems
 Quality Improvement/Quality Assurance Plan
 Credentiaing Systems
 Professional Liability History
 Miscellaneous
 Additional Information
 Supporting Documentation
 Subrecipient Application
 Certifications
 Signatures
 Review and Submit
 Review
 Submit
 Logout

FTCA: Federal Tort Claims Act Application
 Welcome
Professional Liability History
 EHB home | glossary | help | questions/comments
 Answer the following questions. Click the "Save and Continue" button to move onto the next section. Click "Save" to save the form at any time. To go back to the last page, click "Go to Previous Page".
 Fields marked with an asterisk (*) are required.
PROFESSIONAL LIABILITY HISTORY (Section 224(h)(3)) Status: **In Progress**

Grantee Name:	Application Type: Redeeming
Address:	Application Deadline: 5/23/2014
Grant#:	Funding Streams: CH
Created By:	Last Updated By:
View: Scope Required Services Scope Additional Services Scope Sites Scope Activities Subrecipients Resources Grant Project Officer	

Note: Health centers are expected to maintain their own records of medical malpractice claims as part of their risk management systems and in accordance with local practice requirements and guidelines.

If a claim or lawsuit involving covered activities is presented or filed, it is essential that the covered entity preserve all potentially relevant documents. Once a covered entity or covered individual reasonably anticipates litigation—and it is reasonable to anticipate litigation once a claim or lawsuit is filed, whether administratively or in state or federal district court—the entity or individual must suspend any routine destruction and hold any documents relating to the claimant or plaintiff so as to ensure their preservation for purposes of claim disposition or litigation.

Professional Liability History
 *1. Please describe the board approved claims management process and policy that have been implemented within the health center to address all actual and potential claims.
 Maximum 2000 characters (Approximately half a page)
 Rich Text Editor and Toolbar

4.8. Additional Information Page

The **Additional Information** page (Figure 18) asks about

- Accreditation, certification and recognition
- Medical malpractice risk management training
- Continuing education

You will be navigated to the **Additional Information** page if you click the **Save and Continue** button at the bottom of the **Professional Liability History** page. You may also access the **Additional Information** page by clicking the Update link on the **Status** page or by choosing Additional Information from the left navigational panel.

1. Enter your responses. Responses are required where questions are marked with an asterisk (*).
2. When instructed to provide an explanation, enter it in the space provided.

Figure 18: Additional Information Page

Welcome [User] (Last login date and time 4/13/2011 5:53:00 PM)

Additional Information
[EHB home](#) | [glossary](#) | [help](#) | [questions/comments](#)

Answer the following questions. Click the "Save and Continue" button to move onto the next section. Click "Save" to save the form at any time. To go back to the last page, ... ([Show Full Instruction](#))

Fields marked with an asterisk (*) are required.

ADDITIONAL INFORMATION Status: **In Progress**

Grantee Name: [Redacted]	Application Type: Initial Deeming
Address: [Redacted]	Application Deadline: N/A
Grant#: H80CS [Redacted]	Funding Streams: [Redacted]
Created By: [Redacted] on [Redacted]	Last Updated By: [Redacted] on [Redacted]

View: [Scope Required Services](#) | [Scope Additional Services](#) | [Scope Sites](#) | [Scope Activities](#) | [Resources](#)

Additional Information

* 1. Has your health center achieved one or more of the following designations from a national review body by demonstrating the ability to meet nationally recognized standards, guidelines, and measures related to quality assurance and quality improvement in health care organizations?

- Accreditation;
- Certification; and/or
- Recognition

Yes
 No

If "Yes", then please select all that apply:

The Joint Commission (TJC) for Ambulatory Care
 Accreditation Association for Ambulatory Health Care (AAAHC)
 Adjunct Medical Home Chapter (If Applicable)
 National Committee for Quality Assurance (NCQA) Patient Centered Medical Home

4.9. Supporting Documentation Page

The **Supporting Documentation** page (Figure 19) shows, on a single screen, all documents that you have uploaded to the application.

You will be navigated to the **Supporting Documentation** page if you click the **Save and Continue** button at the bottom of the **Additional Information** page. You may also access the **Supporting Documentation** page by clicking the [Update](#) link on the **Status** page or by choosing [Supporting Documentation](#) from the left navigation panel.

Any document that you have uploaded on any page will appear on this one. You may also upload documents on this page. Documents you upload on this page are automatically uploaded to the appropriate page of the application.

Figure 19: Supporting Documentation Page

Welcome [User] (Last login date and time 4/13/2011 5:53:00 PM)

Supporting Documentation
[EHB home](#) | [glossary](#) | [help](#) | [questions/comments](#)

This section allows you to attach the documents that the FTCA application should include. To attach a file click on "Attach File" button. Click the "Save and Continue" button... ([Show Full Instruction](#))

Fields marked with an asterisk (*) are required.

SUPPORTING DOCUMENTATION Status: **In Progress**

Grantee Name: [Redacted]	Application Type: Initial Deeming
Address: [Redacted]	Application Deadline: N/A
Grant#: H80CS [Redacted]	Funding Streams: [Redacted]
Created By: [Redacted] on [Redacted]	Last Updated By: [Redacted] on [Redacted]

View: [Scope Required Services](#) | [Scope Additional Services](#) | [Scope Sites](#) | [Scope Activities](#) | [Resources](#)

Attachment A - Policies and Procedures for Tracking System (Maximum 4 attachments)

Select	Purpose	Document Name	Size	Uploaded By	Description
No attached document exists.					

[Attach](#)

* **Attachment B - Copy of Health Center's Quality Improvement/Quality Assurance Plan (Maximum 6 attachments)**

Select	Purpose	Document Name	Size	Uploaded By	Description
No attached document exists.					

[Attach](#)

5. Subrecipient Application

Health centers that have identified one or more subrecipients on their most recent Form 5B will see this section and must complete it. Health centers that have no subrecipients will not see this section.

All health centers must be aware that their FTCA application must reflect their current approved scope. If, during the application submission process, changes are made to the scope information with respect to subrecipient data (if, for example, subrecipient organizations are added, updated or removed from the current approved scope), then these changes must be reflected on the FTCA application.

The **Subrecipient Application** page (Figure 20) lists the subrecipient organizations identified on your most recent Form 5B. Each subrecipient has a record on this page. You must account for each subrecipient as follows:

- For any subrecipient that is seeking FTCA coverage, you must submit, as part of the current application, a deeming application on their behalf.
- For any subrecipient that declines FTCA coverage, you may choose to provide a brief statement why (optional).

You will be navigated to the **Subrecipient Application** page if you click the **Save and Continue** button at the bottom of the **Supporting Documentation** page. You may also access the **Subrecipient Application** page by clicking the Update link on the **Status** page or by choosing Subrecipient Application from the left navigation panel.

Figure 20: Subrecipient Application Page

The screenshot displays the 'Subrecipient Application' page within the FTCA system. The page title is 'FTCA: Federal Tort Claims Act Application'. The main content area is titled 'SUBRECIPIENT APPLICATION' and has a status of 'Not Started'. It includes a 'Download Template' section with a table of templates for download. Below this is an 'SRO Info' section with a status of 'Not Started' and a table for tracking application status.

Template Name	Template Description	Action
FTCA Deeming and Redeeming Application	FTCA Deeming and Redeeming Application	Download

Applying for FTCA Coverage	Application Status
	Not Started

1. To submit an initial deeming or renewal deeming application on behalf of a subrecipient, you will download an application template from the **Subrecipient Application** page and send it to the

subrecipient. The template document is a version of the electronic deeming/redeeming application in Microsoft Word document format.

2. The subrecipient will complete the application and return it to you, and then you will upload it here. It is the health center's responsibility to communicate with subrecipient organizations and to ensure that they return completed FTCA applications in a timely manner.
3. To download the template document, go to the Download Template block (Figure 21) and click the [Download](#) link. Save the document to your computer.

Figure 21: Download Template Block on Subrecipient Application Page

Download Template		
Template Name	Template Description	Action
FTCA Deeming and Redeeming Application	Template for FTCA Deeming and Redeeming Application	Download

4. For each subrecipient listed on the **Subrecipient Application** page, you must indicate whether they will seek FTCA coverage or not. To do this, click the [Begin Subrecipient Application](#) link under Action in the subrecipient's record (Figure 22). The **Subrecipient Application** page opens, displaying the Edit Subrecipient Application form (Figure 23).

Figure 22: Subrecipient's Record on the Subrecipient Application Page

SRO Info:			Status: Not Started
CRSEIN :			
Applying for FTCA Coverage	Application Status	Not Started	
View:	View Attachments		
Action:	Begin Subrecipient Application		

5. Answer "Yes" or "No" to the question "Is the subrecipient applying for FTCA Coverage?"
6. Optionally, if the answer is "No," you can enter an explanation in the space provided.
7. If coverage is not requested as the time of your application, but may be desired at a later date, please state "Future Request."

Figure 23: Edit Subrecipient Application Form

8. If the answer is "No," enter a comment (optional), and then click the **Continue** button. The system returns you to the **Subrecipient Application** page (Figure 20).

9. If the answer is “Yes,” enter the Executive Director’s name, and then click the **Continue** button. The **Subrecipient Application** page opens with the Subrecipient Documentation block displayed (Figure 24).

Figure 24: Subrecipient Application Page with Subrecipient Documentation Displayed

File Edit View Favorites Tools Help

FTCA: Federal Tort Claims Act Application
2008-2009 FTCA Application - Renewal - User Manual - Version 1.0

HELP

Tracking #

FTCA Application

- Return to FTCA Home
- Overview
- Status
- Contact
- Contact Details
- FTCA Process Data
- Risk Management Systems
- Quality Improvement/Quality Assurance Plan
- Credentialing Systems
- Professional Liability History
- Miscellaneous
- Additional Information
- Supporting Documentation
- Subrecipient
- Subrecipient Application
- Certifications
- Signatures
- Review and Submit
- Review
- Submit

Logout

Welcome

Subrecipient Application

[EHB home](#) | [glossary](#) | [help](#) | [questions/comments](#)

This section allows you to attach the documents that the subrecipient FTCA application should include. To attach a file click on "Attach" button.

SUBRECIPIENT DOCUMENTATION

SRO Info:		CRSEIN:	
Applying for FTCA Coverage	Yes	Application Status	Pending

Fields marked with an asterisk(*) are required.

Template Name	Template Description	Action
FTCA Deeming and Redeeming Application	FTCA Deeming and Redeeming Application	Download

*** FTCA Application (Maximum one Attachment)**

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

Attachment A - Policies and Procedures for Tracking System (Maximum 4 attachments)

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

*** Attachment B1 - Copy of Health Center's Quality Improvement/Quality Assurance Plan (Maximum 6 Attachments)**

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

Attachment B2 - Signed and Dated Minutes Demonstrating Board Approval of Quality Improvement/Assurance Plan (Maximum 6 Attachments)

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

*** Attachment C - Six meeting minutes of QI/QA committee minutes (Maximum 6 attachments)**

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

*** Attachment D - Six meeting minutes of approved board minutes (Maximum 6 attachments)**

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

Attachment E - Any health center committee reports In addition to the minutes noted above, that further evidence of QI/QA activities (Maximum 5 Attachments) ATTACHMENT MUST BE IN EXCEL FORMAT

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

*** Attachment F - List of Licensed or Certified Health Care Practitioners (Maximum 5 Attachments) ATTACHMENT MUST BE IN EXCEL FORMAT**

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

*** Attachment G1 - Credentialing and Privileging Policy (Maximum 5 attachments)**

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

Attachment G2 - Signed and Dated Minutes Demonstrating Board Approval of Credentialing and Privileging policy (Maximum 5 attachments)

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

Attachment H - Review of Professional Liability History (as applicable) (Maximum 5 Attachments)

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

Attachment I - Other Supporting Documentation (Maximum 20 Attachments)

Select	Purpose	Document Name	Size	Uploaded By	Description
		No attached document exists.			
<input type="button" value="Upload"/>					

[Acceptable Use Policy / Viewers and Players](#)

1. Upload the subrecipient's completed application here.
2. Upload other documentation, as required for a complete application and available. Uploading attachments marked with an asterisk (*) are required.
3. Click the **Continue** button to return to the **Subrecipient Application** page (Figure 20).
4. Repeat for every subrecipient listed on the **Subrecipient Application** page, and for whom FTCA coverage is being requested.
5. Click the **Save and Continue** button on the **Subrecipient Application** page to navigate to the next section of your application.

6. Signing, Reviewing, and Submitting the Application

6.1. Signatures Page

The Executive Director, indicated in the Contact Details section, must sign the application. This is done on the **Signatures** page (Figure 25).

You will be navigated to the **Signatures** page if you click the **Save and Continue** button at the bottom of the **Supporting Documentation** page (or, if applicable, the **Subrecipient Application** page). You may also access the **Signatures** page by choosing Signatures from the left navigation panel.

Figure 25: Signatures Page

FTCA: Federal Tort Claims Act Application

Welcome (Last login date and time 4/14/2011 5:31:00 PM)

Signatures
EHB home | glossary | help | questions/comments

Please read the following statement carefully before certifying it. Click the "Save and Continue" button to move onto the next section. Click "Save" to save the form at any... (Show Full Instruction)

One or more errors have occurred on the page. [View Error](#)

Field level errors:
▼ Error 1

Fields marked with an asterisk (*) are required.

SIGNATURES		Status: In Progress
Grantee Name:	Application Type:	Initial Deeming
Address:	Application Deadline:	N/A
Grant#:	Funding Streams:	
Created By:	Last Updated By:	

View: Scope Required Services | Scope Additional Services | Scope Sites | Scope Activities | Resources

Certification and Signatures

▼ Error 1: Please electronically sign the application. Go to top

* I declare under the penalty of perjury that all statements contained in this application and any accompanying documents are true and correct, with full knowledge that all statements made in this application are subject to investigation and that any false or dishonest answer to any question may be grounds for denial or subsequent revocation of coverage.

I understand that by printing my name I am signing this application.

Please note - this must be signed by the Executive Director, as indicated in the Contact Information Section of the FTCA application. If not signed by the Executive Director, the application will be returned to the health center.

Go to Previous Page Save Save and Continue

Acceptable Use Policy

Click the **Save and Continue** button to proceed.

6.2. Review Page

The **Review** page (Figure 26) displays, in table format, all the sections in the FTCA application. It allows you to view or print any or all sections.

Subrecipient information is displayed on this page only if there are subrecipients. The page also displays, for each subrecipient, whether that subrecipient intends to seek or decline FTCA coverage.

You will be navigated to the **Review** page if you click the **Save and Continue** button at the bottom of the **Signatures** page. You may also access the **Review** page by choosing Review from the left navigation panel.

Figure 26: Review Page

Welcome
Review
[EHB home](#) | [glossary](#) | [help](#) | [questions/comments](#)

The following is the table of contents for the FTCA application. Click on "Print" button for a printable version of this page. For a printable version of all pages listed below, click on the "Print..." ([Show Full Instruction](#))

Note: 'Print All HTML Forms' button will print all program specific HTML forms only.

TABLE OF CONTENTS		
Section	Type	Action
Contact		
Cover Sheet	HTML	View
Contact Details	HTML	View
FTCA Process Data		
Risk Management Systems	HTML	View
Quality Improvement/Assurance Plan	HTML	View
Credentialing Systems	HTML	View
Professional Liability History	HTML	View
Miscellaneous		
Additional Information	HTML	View
Attachment A - Policies and Procedures for tracking system	DOCUMENT	Not Available
Attachment B1 - Copy of Health Center's Quality Assurance/Improvement Plan	DOCUMENT	Not Available
Attachment B2 - Signed and Dated Minutes Demonstrating Board Approval of Quality Improvement/Assurance Plan	DOCUMENT	Not Available
Attachment C - Six meeting minutes of QI/QA committee minutes that clearly document QI/QA activities	DOCUMENT	Not Available
Attachment D - Six meeting minutes of the Board that are related to QI/QA activities	DOCUMENT	Not Available
Attachment E - Any health center committee reports in addition to the minutes noted above, that further evidence of QI/QA activities	DOCUMENT	Not Available
Attachment F - List of Licensed or Certified Health Care Practitioners	DOCUMENT	Not Available
Attachment G1 - Credentialing and privileging policy	DOCUMENT	Not Available
Attachment G2 - Signed and Dated Minutes Demonstrating Board Approval of Credentialing and Privileging policy	DOCUMENT	Not Available
Attachment H - Review of Professional Liability History (as applicable)	DOCUMENT	Not Available
Attachment I - Other Supporting Documentation	DOCUMENT	Not Available
Certifications		
Signatures	HTML	View

1. Click the [View](#) link next to any section of the application to view that section. The item will open in HTML format, in a separate window.
2. Click the **Print** button to print this page.
3. Click the **Print All** button to print all HTML-format forms.
4. To print a document not in HTML format, click the [View](#) link. The document will open in its native application (e.g., Microsoft Word).
5. Print the document from the native application.

6.3. Submit Page

The **Submit** page (Figure 27) is the page from which you start the application submission process. It displays, in table format, the sections of the application and their completion status. All sections must be in "Complete" status before you can submit the application.

You will be navigated to the **Submit** page if you click the **Continue** button at the bottom of the **Review** page. You may also access the **Submit** page by choosing [Submit](#) from the left navigation panel.

Figure 27: Submit Page

Welcome System User to **HRSA EHB Mockups** (Last login date and time 5/8/2009 1:47:55 AM)

Submit
[home](#) | [contact us](#) | [questions/comments](#)

The table below shows the Status of the FTCA application.

Your FTCA application is complete and can be submitted in its current state.

STATUS OVERVIEW	
Grantee Name: East Orange General Hospital	Application Type: Initial Credentialing
Address: East Orange, New Jersey, 07085	Application Deadline: N/A
Grant #: H00CS00041	Funding Streams: CH, ML, LCH and P40C
Created By: Diana Brewer On 05/10/09	Last Updated By: Marvin Harrison On 06/12/09
Program Resources: PAL PIN Program Requirements User Guide Program Statistics How to Submit Sub-recipient Applications Frequently Asked Questions Read Me	
View: Form-ER (Sites) Form-SA (Services) Form-SC (Other Activities) Sub-recipients	

FTCA APPLICATION STATUS		
Section	Status	Action
Contact		
Contact Details	Complete	Update
FTCA Process Data		
Risk Management Systems	Complete	Update
Credentialing Systems	Complete	Update
Professional Liability History	Complete	Update
Miscellaneous		
Additional Information	Complete	Update
Supporting Documentation	Complete	Update
Sub-Recipient		
Sub-Recipient Application	Complete	Update

[Go to Previous Page](#) [Proceed to Submit](#)

[Privacy Policy](#) | [Disclaimer](#)

Click the **Submit** button when you are ready to submit the application.

Note: The **Proceed to Submit** button appears only if all sections are deemed “Complete.” At all other times, the button will not be available. This prevents the user from submitting an incomplete application.

The FTCA Certification form appears (Figure 28).

Figure 28: Submit Confirmation Page with FTCA Certification Form Displayed

Welcome [User Name] (Last login date and time 5/8/2009 1:47:55 AM)

Submit
[home](#) | [contact us](#) | [questions/comments](#)

Note: This is a confirmation page! You MUST click on the appropriate button to complete your action.

You have chosen to submit this application to HRSA. Type "I Agree" in the text box to electronically sign the FTCA Application. Click on the "Submit Application" button below to submit the application. If you do not wish to submit the FTCA Application at this time, click on the "Cancel" button to return to the previous screen.

Fields marked with an asterisk (*) are required.

*** FTCA CERTIFICATION**

I certify to the best of my knowledge and belief that this FTCA Application is true and correct. [View Application](#)

Type "I Agree" in the text box to electronically sign the FTCA Application

[Privacy Policy](#) | [Disclaimer](#)

6. Complete the form
7. Click the **Submit Application** button. A confirmation message will appear (Figure 29).

Figure 29: Submission Confirmation Message

The screenshot shows a web interface for the HRSA Electronic Handbooks for Federal Tort Claims Act (FTCA) Program. The page title is "HRSA Electronic Handbooks for Federal Tort Claims Act (FTCA) Program". The user is logged in as "System User to HRSA EHD Mockups" with a last login date and time of 5/8/2009 1:47:55 AM. The page displays a confirmation message: "FTCA Application was successfully submitted and received by HRSA." Below this message, it states: "The tracking number for your submission is listed below. Please keep record of the tracking number for future reference." The message also includes instructions for contacting HRSA for questions or technical issues. A table at the bottom of the message provides the submission details:

Submitted on Date and Time	5/8/2009 2:31:51 AM
Tracking Number	000004

The page also features a navigation menu on the left with options like "Home", "Return to Grants Portfolio", "Welcome", "Manage Applications", "View Applications", "Peer Access", and "Logout". There is a "Print this page" button and a search bar at the top right.

7. Change Requests

HRSA may find it necessary to return your application with a request for changes. If this is the case, you will be notified by email. Follow the steps given in section 3.2, Navigating to Your FTCA Application, to access your application. On the **Applications** page, the status of your application will be "Change Request." When you open the application, the status will move to "Change Request in Progress" (Figure 30).

Figure 30: Applications Page with Application in "Change Request in Progress" Status

The screenshot shows the HRSA Applications page. At the top, it says "HRSA Electronic Handbooks for Federal Tort Claims Act (FTCA) Program". Below that, there's a navigation menu on the left with options like "FTCA Handbook", "HBOCS", "Home", "Return to Grants Portfolio", "Manage Applications", "Applications", "View NDAs", and "Deeming History". The main content area shows a welcome message and a table of applications. The table has columns for Calendar Year, FTCA Tracking#, Application Type, Application Status, Created On, Last Submitted On, and Action. One application is listed with a status of "Change Request In Progress".

Calendar Year	FTCA Tracking#	Application Type	Application Status	Created On	Last Submitted On	Action
2012	FTCA0000/2	Redeeming	Change Request In Progress			Edit Application View Application

A link to the change request email is provided on the Status page (Figure 31, Arrow 1). In addition, there is a link to the change request email in the header on every page (Arrow 2).

Figure 31: Link to Change Request Email on Application Status Page

The screenshot shows the HRSA FTCA Federal Tort Claims Act Application Status page. The page has a navigation menu on the left with options like "Tracking #", "FTCA Application", "Return to FTCA Home", "Overview", "Contact", "FTCA Process Data", "Risk Management Systems", "Quality Improvement/Quality Assurance Plan", "Credentialing Systems", "Professional Liability History", "Miscellaneous", "Additional Information", "Supporting Documentation", "Certifications", "Signatures", "Review and Submit", and "Submit". The main content area shows the application status and details. A red arrow labeled "1" points to a link "View Change Request Email" in the "LAST CHANGE REQUEST COMMENTS" section. Another red arrow labeled "2" points to a link "Change Request Email" in the "STATUS OVERVIEW" section.

LAST CHANGE REQUEST COMMENTS

This change request is in response to your FTCA application FTCA0000/2 for the calendar year 2012. This application is returned to you with a request for more information, changes etc. Please click on the link below to view the change request details. The reviewer(s) information has been provided within the change request for any further questions or clarifications.

[Change Request Details](#) [View Change Request Email](#)

STATUS OVERVIEW

Grantee Name:	Application Type: Redeeming
Address:	Application Deadline: 6/30/2011
Grant #: HBOCS	Funding Streams: CH
Created By: on on	Last Updated By: on

View: [Scope Required Services](#) | [Scope Additional Services](#) | [Scope Sites](#) | [Scope Activities](#) | [Resources](#) | [Change Request Email](#)

FTCA APPLICATION STATUS

Section	Status	Action
Contact		
Contact Details	Complete	Update

8. Deeming History

To access your deeming history in the Electronic Handbook::

1. Log into the EHBs.
2. On the left navigation panel, under Grants Portfolio, click on the [View Portfolio](#) link.
3. In the Grants List, click on [Open Grant Handbook](#) for your health center cluster grant.
4. The **Overview** page opens. Under Others, click on the [FTCA Program](#) link.
5. The **Welcome** page for the FTCA program opens. On the left navigation panel, click [Deeming History](#) under View NDAs.
6. The **Deeming History** page opens (Figure 32).

Figure 32: Deeming History Page

HRSA Electronic Handbooks for Federal Tort Claims Act (FTCA) Program

Welcome [User] (Last login date and time 4/19/2011 11:50:00 AM)

Deeming History
EHB home | glossary | help | questions/comments

DEEMING HISTORY

Input Parameters: (toggle Parameters)
Calendar Year: All; Notice Type: All; Entity Name LIKE: All; Entity Type: All; Coverage Period Start Date From: All; Coverage Period Start Date To: All; Coverage Period End Date From: All; Coverage Period End Date To: All; Notice Received Date From: All; Notice Received Date To: All; Sort By: Notice Received Date

Displaying 1-4 of 4

Notice #	Entity Name	Entity Type	Notice Type	Calendar Year	Coverage Period	Notice Received Date	View
1-F00000-10-1	[Redacted]	Subrecipient	Renewal	2011	1/1/2011 - 12/31/2011	8/27/2010 4:41:45 AM	FTCA Application NDA
1-F00000-10-1	[Redacted]	Grantee	Renewal	2011	1/1/2011 - 12/31/2011	8/27/2010 4:41:45 AM	FTCA Application NDA
1-F00000-09-01	[Redacted]	Grantee	Renewal	2010	1/1/2010 - 12/31/2010	12/9/2009 10:54:53 PM	FTCA Application NDA
1-F00000-09-01	[Redacted]	Subrecipient	Renewal	2010	1/1/2010 - 12/31/2010	12/9/2009 10:54:53 PM	FTCA Application NDA

Page 1

Acceptable Use Policy

Entries are in reverse chronological order. The history includes grantee and subrecipient organizations.

For each deeming action, there is a link to the corresponding application and Notice of Deeming Action (NDA).

9. Help and Support

BPHC FTCA Website: <http://bphc.hrsa.gov/ftca/>

Technical Assistance Conference Call Replay Information:

All TA Information will be posted to the FTCA Website:
<http://bphc.hrsa.gov/ftca/healthcenters/hcapprocess.html>

For information on the FTCA Program and the deeming application: BPHC Helpline:

- Phone: 1-877-974-BPHC (877-974-2742) 8:30 am to 5:30 pm ET
- Email: BPHCHelpline@hrsa.gov

For system questions related to the deeming application contact the BPHC Help Desk:

- Phone: 1-877-974-BPHC (877-974-2742) 8:30 am to 5:30 pm ET
- Email: BPHCHelpline@hrsa.gov

For EHB technical support (e.g., registration, username and password), contact the HRSA Call Center:

- Phone: 1-877-464-4772 (Monday through Friday (except federal holidays) 9 AM to 5:30 PM (ET))
- Email: CallCenter@hrsa.gov