



# Fiscal Year (FY) 2019 Health Center Controlled Networks (HCCN)

## Technical Assistance Webinar

Announcement Number: HRSA-19-011

HCCN Technical Assistance Website

[http://bphc.hrsa.gov/programopportunities/fundingopportunities/  
HCCN/index.html](http://bphc.hrsa.gov/programopportunities/fundingopportunities/HCCN/index.html)

**Bureau of Primary Health Care (BPHC)**

**Health Resources and Services Administration (HRSA)**



# Agenda

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- Laying the Framework
- HCCN NOFO Overview
- Summary of Changes
- Eligibility and Requirements
- Grants.gov and HRSA Electronic Handbooks (EHB) Application Content
- Goals and Objectives
- Award Decision Factors
- Wrap Up
- Technical Assistance Contacts



# Laying the Framework



# HHS Strategic Goals



The Office of the National Coordinator for  
Health Information Technology



# Bureau of Primary Health Care: Strategic Goals



**Increase Access to  
Primary Health Care**



**Advance  
Health Center  
Quality and Impact**



**Optimize Bureau of  
Primary Health Care  
Operations**

**Health Center Program Mission: Improve the health of the  
nation's underserved communities and vulnerable populations**

# Health Center Controlled Networks

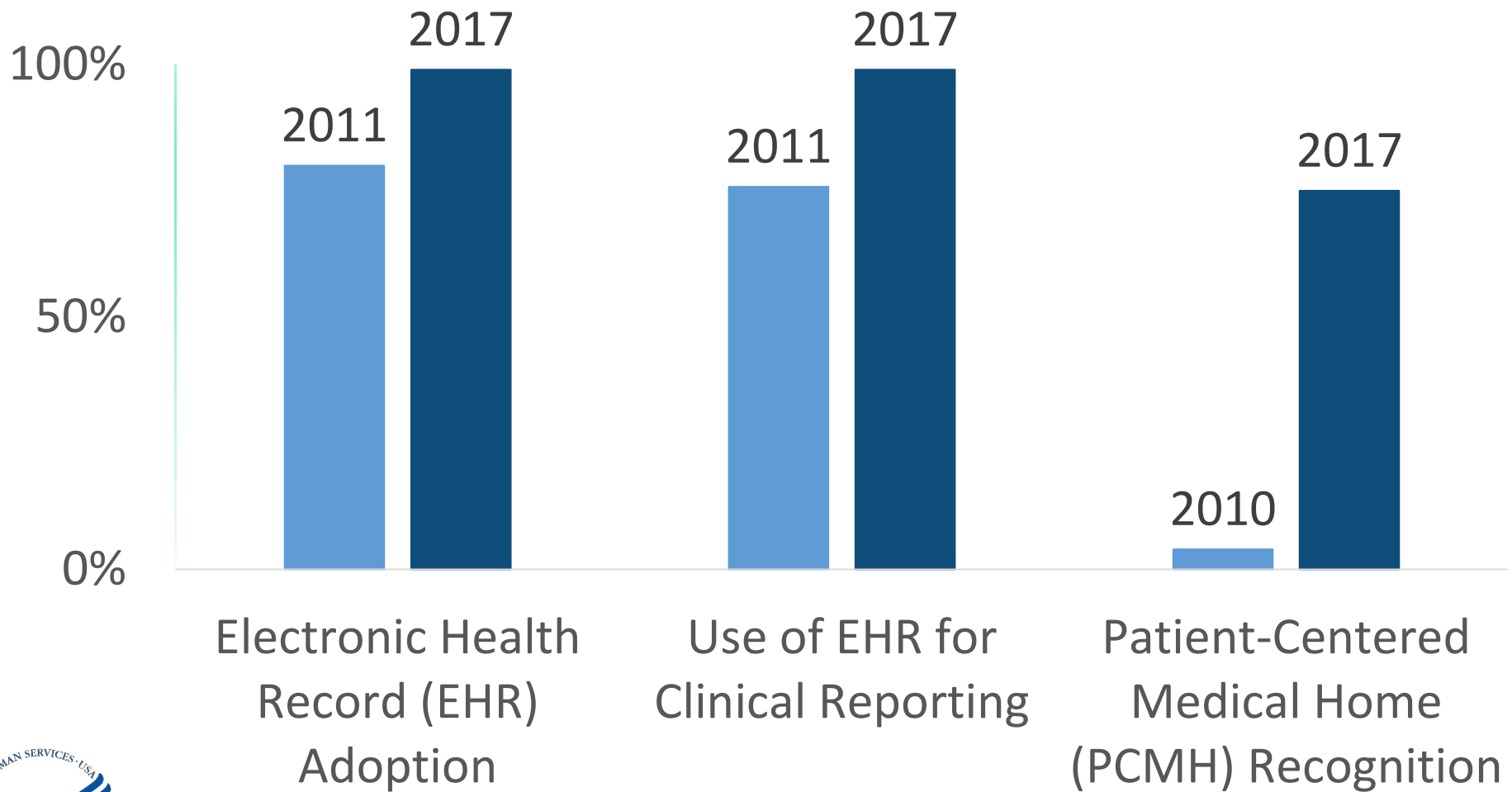
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HCCNs are networks of health centers working together to:

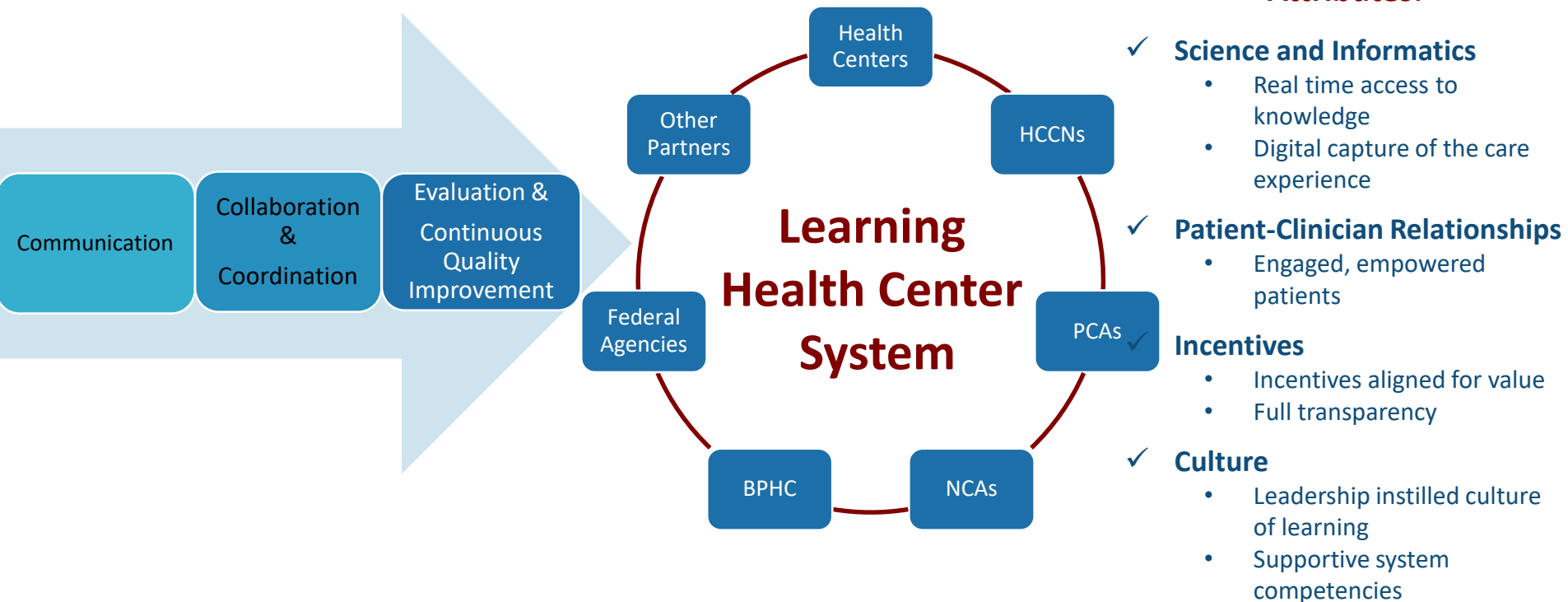
- Leverage health IT to:
  - Improve access to care
  - Enhance quality of care
  - Achieve cost efficiencies
- Redesign practices to:
  - Integrate services
  - Optimize patient outcomes



# Health Center Accomplishments



# Building a Learning Health Center System



Best Care at Lower Cost: The Path to Continuously Learning Health Care in America

<http://www.nationalacademies.org/hmd/Reports/2012/Best-Care-at-Lower-Cost-The-Path-to-Continuously-Learning-Health-Care-in-America.aspx>



# HCCN NOFO Overview



# Purpose

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- Support health centers to leverage health IT to increase their participation in value-based care.
- HCCNs will provide training and technical assistance to help health centers to:
  - Enhance the patient and provider experience
  - Advance interoperability
  - Use data to enhance value

# Award Information

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- Anticipated Total Annual Funding: \$42 million
- Approximately 50 Awards
- Award amount varies dependent on the proposed number of participating health centers (PHCs)
- Period of Performance: August 1, 2019 through July 31, 2022

# Application Options

Continue as  
an award  
recipient

Become a  
new award  
recipient



# Summary of Changes from FY 16 HCCN NOFO

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- Alignment with HHS priorities, including value-based care, and the evolution of the health IT landscape.
- Streamlined work plan format with new goals and objectives to measure impact while reducing burden.
- Applicants may request funding amounts based on a greater number of PHCs.
- Increased focus on collaboration.
- Requirement to work with at least one Primary Care Association, documented in Letters of Support.



# Maximum Annual Award Amounts

Number of PHCs	Maximum Annual Award
<10	Not eligible for funding
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
50-54	\$1,500,000
55-59	\$1,625,000
60-64	\$1,750,000
65-69	\$1,875,000
70-74	\$2,000,000
75-79	\$2,125,000
80-84	\$2,250,000
85-89	\$2,375,000
90-94	\$2,500,000
95-99*	\$2,625,000

\*HCCNs may apply for an additional \$125,000 for each 5 additional PHCs after 99.



# Knowledge Check

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Which of the following is not a change or update from the FY 2016 HCCN NOFO?

- A. The minimum number of PHCs changed to 20.
- B. Updated focus to increase participation in value-based care.
- C. Applicants may request funding amounts based on a greater number of PHCs.

# Knowledge Check

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The correct answer is A.

- A. The minimum number of PHCs changed to 20. (The minimum number of PHCs for the FY 2019 NOFO is 10, the same as FY 2016).
- B. Updated focus to increase participation in value-based care.
- C. Applicants may request funding commensurate with a greater number of participating health centers.



# Eligibility and Requirements



# Eligibility

- An organization must be either:
  - A network (referred to as an HCCN) that is at least majority controlled and, as applicable, at least majority owned by Health Center Program award recipients (i.e., the majority of the governing board members are Health Center Program award recipients); or
  - A current Health Center Program award recipient, funded for at least the 2 consecutive preceding years, applying on behalf of an HCCN.
- See Section III of the notice of funding opportunity (NOFO) for complete eligibility information.



# Participating Health Centers (1 of 2)

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- Minimum of 10 required for eligibility.
- Majority must be Health Center Program award recipients.
- Engaged in all network activities.
- Not required to become network members.
- Cannot be charged for services provided through the grant.



# Participating Health Centers (2 of 2)

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- A Health Center Program award recipient applying on behalf on an HCCN may be a PHC for its own application.
- A health center may be a PHC in only one HCCN application.
- A health center with multiple sites counts as one PHC (all sites must participate in HCCN activities).



# Funding Focus (1 of 2)

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Applications must:

1. Document an understanding of the PHCs' needs to:
  - Enhance the patient and provider experience
  - Advance interoperability, and
  - Use data to enhance value.

# Funding Focus (2 of 2)

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Applications must:

2. Propose a comprehensive plan to meet the identified needs that:

- Supports the use and enhancement of Office of the National Coordinator for Health Information Technology (ONC)-certified EHR systems.
- Supports the use of national standards as specified in the ONC Interoperability Standards Advisory.



# Knowledge Check

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Which of the following is correct?

- A. A minimum of 51% of PHCs must be Health Center Program award recipients or look-alikes.
- B. A Health center with sites in different states may participate with multiple HCCNs.
- C. Applications must document an understanding of the PHCs' needs to advance interoperability.



# Knowledge Check

The answer is C.

- A. A minimum of 51% of PHCs must be Health Center Program award recipients or look-alikes.
  - B. A Health center with sites in different states may participate with multiple HCCNs.
  - C. Applications must document an understanding of the PHCs' needs to advance interoperability.
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- A minimum of 51% of PHCs must be Health Center Program award recipients.
  - A single health center with multiple sites counts as one PHC, and all sites of a PHC must participate in HCCN activities. A health center may be a PHC of only one HCCN.





# Grants.gov and EHB Application Content



# Two-Phase Process

- Two-phase submission process:
  - Phase 1 – Grants.gov – Required information must be submitted and validated via Grants.gov; and
  - Phase 2 – HRSA EHB – Supplemental information must be submitted via HRSA EHB.
- Directions available at <http://www.grants.gov/applicants/apply-for-grants.html> and the HRSA EHB <https://grants.hrsa.gov/webexternal/login.asp>.



# Key Dates

**Applications due in  
Grants.gov**

**January 3, 2019**

**11:59 p.m. ET**



**Supplemental Information  
Due in EHB**

**January 29, 2019**

**5 p.m. ET**

# Grants.gov Components

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- SF-424: Application for Federal Assistance
- Project Abstract: Attached under box 15 of the SF-424
- SF-424B: Assurances – Non-Construction Programs
- Project/Performance Site Location(s) Form
- Grants.gov Lobbying Form (certification)
- SF-LLL: Disclosure of Lobbying Form
- Key Contacts



# HRSA EHB Components

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- Project Narrative
- Budget Information – Non-Construction Programs (SF-424A)
- Budget Narrative
- Program Specific Forms
- Attachments



# Project Narrative Elements and Review Criteria

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- Need (15 points)
- Response (20 points)
- Collaboration (15 points)
- Evaluative Measures (15 points)
- Resources/Capabilities (20 points)
- Governance (10 points)
- Support Requested (5 points)

# Budget Presentation: SF-424A (Sections A-B)

- Cover all 3 years of the period of performance
- Do not include non-federal funding
- Section A – Budget Summary
  - Federal amount is the HCCN funding requested
  - Estimated Unobligated Funds are not applicable
- Section B – Budget Categories
  - Enter the federal dollar amount for each applicable object class category



# Sample SF-424A Section A and B

## BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1.HCCN	93.224	\$	\$	\$ 1,875,000.00	\$	\$ 1,875,000.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 0.00	\$ 0.00	\$ 1,875,000.00	\$ 0.00	\$ 1,875,000.00
SECTION B - BUDGET CATEGORIES						
6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)	
	(1)	(2)	(3)	(4)		
a. Personnel	\$	\$	\$ 1,620,000.00	\$	\$	1,620,000.00
b. Fringe Benefits			250,000.00			250,000.00
c. Travel						0.00
d. Equipment						0.00
e. Supplies			2,500.00			2,500.00
f. Contractual						0.00
g. Construction						0.00
h. Other			2,500.00			2,500.00
i. Total Direct Charges (sum of 6a-6h)		0.00	0.00	1,875,000.00	0.00	1,875,000.00
j. Indirect Charges						0.00
k. TOTALS (sum of 6i and 6j)	\$	\$ 0.00	\$ 0.00	\$ 1,875,000.00	\$ 0.00	\$ 1,875,000.00





# Budget Presentation: SF-424A (Sections C-F)

- Section C – Non-Federal Resources (not applicable)
- Section D – Forecasted Cash Needs (optional)
- Section E – Federal Funds Needed for Balance of the Project
  - Provide the federal funds requested for Year 2 in the first column and Year 3 in the second column
  - The third and fourth columns should remain \$0
- Section F – Other Budget Information (optional)

See the EHB User Guide, available at <https://bphc.hrsa.gov/programopportunities/fundingopportunities/hccn/index.html> for more information



# Budget Presentation: Budget Narrative

- Include a detailed budget narrative for each 12-month period of the 3-year project period
- Year 2 and 3 of the budget narrative must highlight changes from Year 1, or clearly indicate that there are no substantive changes
- Unallowable uses of HCCN funding include construction, fundraising, and lobbying

See a sample budget narrative on the HCCN TA webpage at:

<http://bphc.hrsa.gov/programopportunities/fundingopportunities/HCCN/index.html>



# Funding Restrictions

You cannot use funds under this notice for the following:

- Equipment, supplies, or staffing for use at the health center level or any other individual health center operational costs
- Direct patient care
- Fundraising
- Incentives (e.g., gift cards, food)
- Construction/renovation costs
- Facility or land purchases
- Vehicle purchases



# EHB Attachments (1 of 2)

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- Attachment 1: Proof of Public or Non-Profit Status\*
- Attachment 2: PHC 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

\*required for completeness (refer to Section IV.2.vi of the NOFO for details)



# EHB Attachments (2 of 2)

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- Attachment 7: Summary of Contracts and Agreements, as applicable
- Attachment 8: Letters of Support
- Attachment 9: Network Bylaws\*
- Attachment 10: Indirect Cost Rate Agreement
- Attachment 11: Other Documents

\*required for completeness (refer to Section IV.2.vi of the NOFO for details)



# EHB Forms: Project Work Plan

- Divided into sections based on the goals:
  - Goal A: Enhance the patient and provider experience
  - Goal B: Advance interoperability
  - Goal C: Use data to enhance value
- Provide baseline and target data for each objective under each goal. Targets should be set for the end of the 3-year project period (by July 31, 2022).
- Detail the proposed activities for the first 12 months of the project period (August 1, 2019 to July 31, 2020).

Refer to Appendix C of the NOFO for details.



# EHB Forms: PHC List

Identify your PHCs – ensure a match between this list and Attachment 2: PHC MOA

- New Applicants: Add your PHCs
- Competing Continuation Applicants: Edit your PHCs to reflect those proposed in this FY 2019 HCCN application (add and delete as needed)

See Appendix B in the NOFO for more information



# Goals and Objectives





# Goal A: Enhance the Patient and Provider Experience

<b>Objective A1: Patient Access</b>	Increase the percentage of PHCs using health IT to facilitate patients' access to their personal health information.
<b>Objective A2: Patient Engagement</b>	Increase the percentage of PHCs improving patient engagement with their health care team by advancing health IT and training.
<b>Objective A3: Provider Burden</b>	Increase the percentage of PHCs that improve health IT usability to minimize provider burden.

# Goal B: Advance Interoperability

<b>Objective B1: Data Protection</b>	Increase the percentage of PHCs that have completed a security risk analysis and have a breach mitigation and response plan.
<b>Objective B2: Health Information Exchange</b>	Increase the percentage of PHCs that leverage HIE to meet Health Level Seven International (HL7) standards or national standards as specified in the ONC Interoperability Standards Advisory and share information securely with other key providers and health systems.
<b>Objective B3: Data Integration</b>	Increase the percentage of PHCs that consolidate clinical data with data from multiple clinical and non-clinical sources across the health care continuum to optimize care coordination and workflows.

# Goal C: Use Data to Enhance Value

## **Objective C1: Data Analysis**

Increase the percentage of PHCs that improve capacity for data standardization, management, and analysis to support value-based care activities.

## **Objective C2: Social Risk Factor Intervention**

Increase the percentage of PHCs that use both aggregate and patient-level data on social risk factors to support coordinated, effective interventions.

## **Objective C3: Applicant Choice**

Applicants will develop an objective and outcome measure to address an emerging issue based on the needs of the PHCs in their network.

# Applicant Choice Example

## Sample Objective:

- Increase the percentage of PHCs that improve access, quality, and cost of care by providing substance use disorder or opioid use disorder services through telehealth innovation

## Example Activities:

- Support PHCs' use of telehealth to conduct Screening, Brief Intervention, and Referral to Treatment (SBIRT)
- Support HIE infrastructure development to facilitate access to Prescription Drug Monitoring Programs (PDMP) from within the EHR and the sharing of information from the EHR with the PDMP



# Wrap Up



# Common Reasons for Ineligible Applications

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- Proposing 9 or fewer PHCs
- Inconsistencies between Attachment 2 and the PHC List resulting in fewer than 10 PHCs matching across the two documents
- Not providing HCCN Bylaws



# Common Reasons for Lower Review Scores

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- Lack of response to the current NOFO requirements
- Lack of response to each item within each section of the Project Narrative
- Missing or incomplete attachments
- Inconsistencies across sections of the application

# Post-Award Requirements

- Develop an individualized work plan with each PHC within 90 days of award
- Inform HRSA of changes to the number of PHCs
  - Award amounts will not be adjusted for PHCs added during the project period
  - Award amounts may be reduced if the number of PHCs drops below the number required for their funding tier
  - If an HCCN maintains fewer than 10 PHCs for a period of longer than 90 days, HRSA may reduce or discontinue HCCN funding





# Technical Assistance Contacts

## HCCN Technical Assistance website:

<https://bphc.hrsa.gov/programopportunities/fundingopportunities/HCCN/index.html>

### Program related questions

<https://www.hrsa.gov/about/contact/bphc.aspx> or  
301-594-4300

### Budget related questions

Donna Marx  
[dmarx@hrsa.gov](mailto:dmarx@hrsa.gov) or 301-594-4245

### Grants.gov related questions

[support@grants.gov](mailto:support@grants.gov) or  
800-518-4726

### HRSA EHB related questions

Health Center Program Support  
<https://www.hrsa.gov/about/contact/bphc.aspx> or  
877-464-4772



# Thank you

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Visit the HCCN Technical Assistance page  
for more information:

<https://bphc.hrsa.gov/programopportunities/fundingopportunities/hccn/index.html>

