# Instructions for the Fiscal Year (FY) 2016 Partnerships for Care (P4C) Progress Update and Budget Request Submission

## Table of Contents

Purpose .................................................................................................................................................. 2
Submission and Award Information ........................................................................................................ 2
General Instructions .............................................................................................................................. 2
Budget Instructions ............................................................................................................................... 3
  A. Budget Information – Non-Construction Programs Form: SF-424A ........................................ 3
  B. Budget Narrative ............................................................................................................................ 4

If you have any questions regarding the completion of this submission, please contact your P4C project officer, Dr. Rene Sterling at bphcp4c@hrsa.gov or 301-443-9017.

If you experience any technical challenges completing this submission in EHB, please contact the BPHC Helpline at http://www.hrsa.gov/about/contact/bphc.aspx or by phone at 877-974-2742 (option 3), Monday through Friday (except federal holidays) from 8:30 AM to 5:30 PM (ET).
Purpose

The Partnerships for Care (P4C) Progress Update and Budget Request will provide Year 3 funding from September 1, 2016 through August 31, 2017. Continued funding is based on program compliance, organizational capacity to accomplish the project’s goals, Congressional appropriation, and a determination that continued funding would be in the best interest of the federal government.

Submission and Award Information

Submissions are due in EHB by 5:00 PM ET on June 30, 2016. The anticipated date of award is September 1, 2016. The budget request must not exceed the level of support approved in the FY2014 P4C supplemental funding application.

General Instructions

The submission must include the attachments identified in Table 1. All attachments are required and must be uploaded into EHB. The submission, titled “P4C Future Year Budget,” will be located in the Health Center Program grantee grant folder under Submissions.

<table>
<thead>
<tr>
<th>Title</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attachment 1: P4C Budget Information</td>
<td>Upload the SF-424A. Refer to the <a href="#">Budget Instructions</a> for more information.</td>
</tr>
<tr>
<td>– Non-Construction Programs Form</td>
<td></td>
</tr>
<tr>
<td>Attachment 2: P4C Budget Narrative</td>
<td>Upload the Budget Narrative. Refer to the <a href="#">Budget Instructions</a> for more information.</td>
</tr>
<tr>
<td>Attachment 3: P4C Project Year 3 Work Plan</td>
<td>Upload the Year 3 project work plan. A template and instructions are available in EHB.</td>
</tr>
<tr>
<td>Attachment 4: P4C HIV Care Team Composition Table</td>
<td>Upload information regarding the composition of each HIV Care Team. A template and instructions are available in EHB.</td>
</tr>
</tbody>
</table>

If any of the required documents are incomplete or non-responsive, the submission will be returned via a “request change” notification in EHB for provision of missing information. If HRSA does not receive the submission by the established deadline, a delay in NoA issuance or a lapse in P4C funding could occur.
Budget Instructions

A complete budget includes the Budget Information – Non-Construction Programs form (SF-424A) and the budget narrative. Provide budget information for the third year of the P4C project (September 1, 2016 – August 31, 2017). The budget request must not exceed the level of support requested and approved in the P4C application for Year 3. Only include funds that support the P4C project.

P4C funding must supplement, not supplant, existing service provision resources (federal, state, local, or private). Award recipients are required to comply with the administrative requirements outlined in 45 CFR part 75 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards. In addition, HRSA awards are subject to the requirements of the HHS Grants Policy Statement, available at http://www.hrsa.gov/grants/hhsgrantspolicy.pdf.

Pursuant to existing law and consistent with Executive Order 13535 (75 FR 15599), health centers are prohibited from using federal funds to provide abortion services (except in cases of rape or incest, or when the life of the woman would be endangered). This includes all funds awarded under this announcement and is consistent with past practice and long-standing requirements applicable to awards to health centers.

As a reminder, P4C funds may not be used for the following purposes:

- Incentives (e.g., gift cards, food)
- Costs to support activities at sites that are not included in the health center’s current scope of project
- Fundraising
- Construction/renovation of facilities
- Distribution of sterile needles or syringes for the hypodermic injection of any illegal drug
- Vehicle purchases
- Equipment

A. Budget Information – Non-Construction Programs Form: SF-424A

Complete Sections A, B, C, and F (if applicable) of the SF-424A for the period of September 1, 2016 – August 31, 2017. All budget amounts must be rounded to the nearest whole dollar.

In Section A: Budget Summary, provide the proposed budget under New or Revised Budget. Separate the budget into the Federal funding request (column e) and Non-Federal funds supporting the project (column f).

In Section B: Budget Categories, provide a breakdown of the annual amount by object class category (e.g., Personnel, Fringe Benefits). The budget narratives submitted with your initial P4C application and Year 2 request may serve as helpful tools in developing your Year 3 budget request. In Column 1, provide the Federal funding amount for the
P4C project. In Column 2, provide the Non-Federal funds supporting the P4C project. The total in Section B should match the total in Section A.

In Section C: Non-Federal Resources, enter the funds supporting the project that are not part of the P4C funding request. Non-federal contributions may be in cash or in-kind.

B. Budget Narrative

Include a line-item budget narrative which explains the amounts requested for each row in Section B: Budget Categories of the SF-424A. The budget narrative (also referred to as the budget justification) should include only the upcoming 12-month (Year 3) P4C budget period (September 1, 2016 – August 31, 2017).

**NOTE:** It is important to ensure that the budget narrative contains detailed calculations explaining how each line-item expense is derived.

Specifically describe each cost element and how each cost will support the project and achievement of proposed goals, including the following:

**Personnel:** Personnel costs must list the exact amount requested. List each staff member who will be supported with the P4C funds, name (if possible), position title, percent of full-time equivalency, and annual salary. Award funds may not be used to pay the salary of an individual at a rate in excess of Federal Executive Level II or $185,100. While an individual’s base salary is not constrained by the legislative provision, the amount of the salary charged to the Health Center Program grant must not exceed the rate limitation. Provide all base salaries at the full amount even if they exceed the salary limit.

See the table below for the information that must be included for each staff position supported in whole or in part with federal grant funds. This level of information is not required for staff positions supported entirely with non-federal funds.

### Budget Sample for Salary Limitation

<table>
<thead>
<tr>
<th>Name</th>
<th>Position Title</th>
<th>% of FTE</th>
<th>Annual Salary</th>
<th>Federal Amount Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td>J. Smith</td>
<td>Physician</td>
<td>50</td>
<td>$185,100*</td>
<td>$92,550</td>
</tr>
<tr>
<td>H. Lee</td>
<td>HIV Program Lead</td>
<td>15</td>
<td>$60,000</td>
<td>$9,000</td>
</tr>
<tr>
<td>R. Doe</td>
<td>Nurse Practitioner</td>
<td>100</td>
<td>$75,950</td>
<td>$75,950</td>
</tr>
<tr>
<td>D. Jones</td>
<td>Data/AP Specialist</td>
<td>25</td>
<td>$33,000</td>
<td>$0 (in-kind)</td>
</tr>
</tbody>
</table>

*Actual annual salary = $225,000

**Fringe Benefits:** List the components that comprise the fringe benefit rate (e.g., health insurance, taxes, unemployment insurance, life insurance, retirement plan, tuition reimbursement). The fringe benefits must be directly proportional to the portion of personnel costs allocated for the project.
**Travel:** The mileage rate, number of miles, reason for travel, and staff members/patients completing the travel should be described. The budget must also reflect the travel expenses associated with participating in proposed meetings, trainings, or workshops. Each applicant is expected to budget for travel to required meetings for key members of each HIV care team and the HIV Program Lead, including the annual two-day grantee meeting in Atlanta and bi-annual meetings with its partner state health department.

**Equipment:** Equipment means tangible personal property (including information technology systems) having a useful life of more than 1 year and a per-unit acquisition cost that equals or exceeds $5,000. **Equipment costs are not allowable in Year 3 and may not be requested with grant funds.** Non-federal funding may be used for equipment purchases.

**Supplies:** Separately list the supplies necessary to support project activities, including clinical supplies and equipment required for HIV service delivery valued up to $5,000.

**Contractual:** Provide a clear explanation as to the purpose of each contract, how the costs were estimated, and the specific contract deliverables. Each applicant is responsible for ensuring that its organization has in place an established and adequate procurement system with fully developed written procedures for awarding and monitoring contracts.

**Construction:** Construction costs are unallowable and should not be included.

**Other:** Include all allowable costs that do not fit into another category into the “Other” category (e.g., EHR provider licenses) and provide an explanation of each cost.

**Indirect Costs:** Indirect costs may only be claimed if the recipient provides documentation of an approved indirect cost rate. Indirect costs include costs incurred for common or joint objectives which cannot be readily identified but are necessary to organizational operation (e.g., the cost of operating and maintaining facilities, depreciation, administrative salaries).