



FY 2017 State and Regional Primary Care Association Cooperative Agreements Funding Opportunity Announcement (HRSA-17-057) Frequently Asked Questions

The fiscal year (FY) 2017 State and Regional Primary Care Association (PCA) Funding Opportunity Announcement (FOA) (HRSA-17-057) is available at [Grants.gov](https://www.grants.gov) and on the [PCA Technical Assistance website](#). Below are common questions and corresponding answers for the FY 2017 PCA FOA. New frequently asked questions (FAQs) will be added as necessary, so please check the [PCA Technical Assistance website](#) frequently for updates.

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General Information

1. What is the purpose of this PCA funding opportunity?

The FY 2017 PCA funding opportunity will provide funding to establish or maintain cooperative agreements with state and regional organizations to provide training and technical assistance (T/TA) to existing and potential health centers. Award recipients will conduct T/TA activities to help health centers increase access to care, achieve operational excellence, and enhance health outcomes and health equity.

2. How are existing and potential health centers defined?

Existing health centers include Health Center Program award recipients and look-alikes.¹ Potential health centers include organizations that are applying for or seeking information about applying for a Health Center Program award or look-alike designation.

¹ Health Center Program award recipients are organizations funded under Section 330(e), (g), (h), and/or (i) of the Public Health Service Act, as amended. Health Center Program look-alikes are organizations with look-alike designation per Sections 1861(aa)(4)(B) and 1905(l)(2)(B) of the Social Security Act (42 U.S.C. 1395x(aa)(4)(B) and 42 U.S.C. 1396d(l)(2)(B)(iii)).

3. Where can I access the PCA funding opportunity announcement (FOA)?

The PCA FOA is available at Grants.gov. Follow the instructions below:

- Go to www.grants.gov.
- Select Search Grants tab.
- Type HRSA-17-057 in the Opportunity Number field and click the SEARCH button.
- Select HRSA-17-057 from the matching results.
- Click the Package tab.
- Under Actions, click the Select Package link.
- To download an application, complete the email information, or check the box to indicate that you would not like to provide your email address, and click the Submit button. It is advised that you provide your email address so you will be alerted via email if the FOA is modified or the due date changes.
- Click the Download Instructions link to download the FOA.

4. How can I access the PCA FOA application package?

There are two options for accessing and submitting an application in Grants.gov.

- Option 1: After completing all but the last step in question 3 above, click the Download Package link to download the Grants.gov application forms.
- Option 2: After completing all but the last step in question 3 above, click Login for Workspace Features. Workspace is a shared, online environment where members of the same organization can simultaneously access and edit different forms within an application. For each FOA, you can create an individual workspace.

Note: Applicants must use a two-tier submission process associated with this FOA. You are required to apply electronically through Grants.gov **and** the HRSA Electronic Handbooks (EHBs). Refer to the [Apply for Grants](#) instructions for additional information on the Grants.gov submission process.

5. What are the deadlines for submitting the PCA FOA application?

Applications will be submitted in two phases.

- Phase 1 – Grants.gov: December 12, 2016 (11:59 p.m. EST)
- Phase 2 –EHBs: January 23, 2016 (5:00 p.m. EST)

HRSA recommends applicants ensure registrations and passwords are current for their System for Award Management (SAM) and Grants.gov accounts **as soon as possible**. SAM registration may take up to two weeks and must be completed before Grants.gov registration.

HRSA encourages applicants to complete the initial submission to Grants.gov at least three days before the deadline to allow for any unforeseen circumstances. **Application deadline extensions are not granted for lack of registration**. Detailed instructions for registering with Grants.gov, SAM, and all other required systems are included in Section 3.1 of the [SF-424 Two-Tier Application Guide](#).

6. When can I begin the EHBs submission process (i.e., Phase 2)?

You can begin Phase 2 in the EHBs only after Phase 1 in Grants.gov has been successfully completed and no earlier than October 21, 2016. Applications that are submitted successfully to Grants.gov by the Grants.gov due date are assigned an application tracking number by HRSA. The applicant's Authorizing Official (AO) will be notified by email when the application is ready for the completion of Phase 2 within the EHBs. This email notification will be sent within a few days of the Grants.gov submission. If you do not receive the message with the tracking number within 3 business days, contact the BPHC Helpline at 877-974-2742.

Eligibility and Program Requirements (includes NEW items as of January 10, 2017)

7. NEW (as of January 10, 2017): How is the baseline calculated for Focus Area 1: Access to Care, Goal 2: Increase the number of health centers providing comprehensive services, including medical, oral health, behavioral health, vision, and enabling services?

The pre-populated baseline data represents the number of health centers within the state or region that have reported at least one patient receiving services in each of the following service types: medical, oral health, behavioral health, vision, and enabling services. However, for the purpose of providing technical assistance resources and activities, applicants are encouraged to focus on the integration and coordination of medical, behavioral health, and oral health services.

8. Who can apply for PCA funding?

Eligible applicants include public, non-profit, and for-profit entities, including tribal and faith-based organizations, that can provide T/TA on a state or region-wide basis to existing and potential health centers. New organizations and organizations currently receiving funding as PCAs under Section 330(l) may apply. See Section III-1 of the PCA FOA for complete eligibility criteria.

9. Can an individual apply for PCA funding?

No. Eligible applicants are organizations positioned to provide state and regional T/TA.

10. Since the FY 2017 PCA and National Training and Technical Assistance Cooperative Agreements (NCA) FOAs were published on the same day, can I apply for both?

No. An organization may only submit one application for Health Center Program T/TA funding in Fiscal Year 2017. HRSA will only consider the first validated electronic submission in Grants.gov from an organization that applies for both this PCA funding opportunity (HRSA-17-057) and the National Training and Technical Assistance Cooperative Agreements (NCA) funding opportunity for FY 2017 (HRSA-17-058). The application that is submitted second will not be eligible for funding.

11. Can I submit more than one application for PCA funding?

No. HRSA will only accept your first validated electronic submission in Grants.gov. Subsequent applications will be marked as duplicates and will not be considered for funding.

12. Are organizations located outside of the United States eligible to apply for PCA funding?

Eligible organizations must be located in the United States or its territories, or be part of a Compact of Free Association (i.e., Federated States of Micronesia, Republic of the Marshall Islands, and Republic of Palau).

13. In terms of allowable application types, what is a new application?

Organizations not currently receiving PCA funding under Section 330(l) that seek to provide T/TA in one of the existing states or regions must apply as new applicants.

14. In terms of allowable application types, what is a competing continuing application?

Current PCA award recipients funded under Section 330(l) whose project period ends June 30, 2017 that seek to continue providing state or regional T/TA to the current state or region-wide health centers must apply as competing continuation applicants.

15. How is a state PCA different than a regional PCA?

State PCAs are the primary T/TA providers to existing and potential health centers in one or more state(s). Regional PCAs are value-added T/TA providers that provide T/TA to existing and potential health centers in a collection of states that are also served by state PCAs. See Appendix C in the PCA FOA for the list of state and regional PCA options.

16. Can I apply for PCA funding in multiple states or regions?

Applicants can only apply to provide T/TA to one pre-defined state or regional option as listed in Appendix C in the PCA FOA.

17. Are contracts with current PCAs or other technical assistance providers allowed?

Award recipients are expected to perform a substantive role in the proposed project. PCAs may contract with other entities to carry out a portion of the grant-funded activities. Subrecipients must comply with all PCA statutory and regulatory requirements, as well as applicable grant requirements specified in [Uniform Guidance 2 CFR 200 as codified by HHS at 45 CFR 75](#). The award recipient must demonstrate that it has systems in place to provide reasonable assurances that the subrecipient complies with all statutory and regulatory requirements throughout the period of award.

18. What are the most common reasons that an application is deemed ineligible?

The following mistakes result in most ineligible decisions:

- Exceeding the 80-page limit.
- Missing an attachment required for completeness (as noted in Table 2 of the PCA FOA) or uploading the wrong attachment (for example, uploading a duplicate Budget Narrative instead of the Project Narrative).
- Submitting an incomplete Project Narrative.

19. What are the program requirements for PCAs?

Applicants must address at least two pre-defined Activity Areas under each Goal as outlined in Table 1 in the PCA FOA, and propose two to five activities for each selected Activity Area to be conducted in the first 12 months of the project period. Proposed activities must be based on current health center needs, align with HRSA priorities, and support Goal Target achievement by the end of the three-year project period. Applications that include a Project Work Plan that does not include requested information in all required fields as outlined in Appendix A of the PCA FOA will not be considered eligible for funding.

20. Can PCA funding be used to provide education on health centers and health care needs within the state/region?

Yes. Organizations may propose activities that result in products or educational documents (e.g., issue briefs) that analyze issues impacting health centers and underserved populations. Such analyses on issues may be made available to the general public and other stakeholders such as policy makers, health centers, other safety-net providers, community leaders, and potential partners. However, educational documents related to pending or existing legislation cannot be created using federal funding (see [Federal Restrictions on Lobbying for HHS Financial Assistance Recipients](#)). All publications created or disseminated with PCA funds must be drafted in accordance with HRSA's Publication Protocol and discussed with the assigned Project Officer.

21. NEW: Will PCAs continue to do outreach and enrollment activities?

Under Focus Area 1: Access to Care, applicants must propose activities to strengthen health center operations and expand capacity to increase access to comprehensive primary care services in the state or region. Applicants should include outreach and enrollment activities to address one or more Goals and/or Activity Areas that fall under Focus Area 1. See Appendix B in the PCA FOA for example activities, including specific reference to outreach and enrollment.

22. NEW: Should activities supported in part, but not completely, by PCA funding be included in the PCA application?

The budget presentation in the PCA application must only include PCA funding requested for the proposed activities. Do not provide other sources of funding, or activities supported by other sources of funding, in the PCA application. Activities that will be partially supported by PCA funding may be included in the PCA Project Work Plan, though only the PCA funds used to support the activities should be reflected in the budget presentation. For further assistance with PCA budget related questions, contact Christie Walker at 301-443-7742 or cwalker@hrsa.gov.

23. NEW: Must all PCA T/TA activities be available at no cost to existing or potential health centers in the state/region?

Yes. T/TA supported by PCA funding must be made available at no cost to all existing and potential health centers in the selected state/region.

Application Development (includes NEW items)

24. What are the required forms and attachments needed for an application to be complete?

Table 2 in the PCA FOA indicates which attachments are required for completeness and which ones are required for review. Applications that do not include attachments required for completeness will be considered incomplete or non-responsive and will not be considered for funding. Failure to include attachments required for review may negatively impact an application's objective review score.

25. Is there a page limit for the PCA application?

Yes. There is an 80-page limit on the length of the total application when printed by HRSA. Refer to Table 2 in the PCA FOA for more information on what is counted in the page limit. Applications exceeding the page limit will be deemed non-responsive and will not be reviewed by HRSA. **This limit is strictly enforced. Please print your application and double-check your page count prior to submission.**

26. When I view the PDF version of the submitted application in EHBs, why does the cover page indicate a higher number of pages than I counted?

When the application is submitted in EHBs, an automatic page count occurs that counts all pages, including attachments that are not included in the page limit as noted in Table 2 in the PCA FOA. This page count appears on the final PDF version of the application. However, be assured that HRSA will complete a manual page count after submission and pages the FOA says do not count against the limit will be removed from the final page count.

27. Does HRSA have application formatting guidelines (e.g., font type, font size, attachment formats)?

Yes. Attachments should be single-spaced narrative documents with 12-point, easily readable font (e.g., Times New Roman, Arial, Courier) and 1-inch margins. Smaller font (no less than 10-point) may be used for tables, charts, and footnotes. For more information, reference Section 4.2 of the [SF-424 Two-Tier Application Guide](#). HRSA will accept attachments as PDF, Microsoft Word, and/or Excel files. Do not use spaces or special characters when naming files. Be sure to upload the attachments in the appropriate fields. **When using Excel or other spreadsheet documents, be aware that reviewers will only see information that is set in the “Print Area” of the document.** Do not submit documents with multiple spreadsheets (tabs).

28. HRSA’s [SF-424 Two-Tier Application Guide](#) seems to indicate that all attachments are submitted in Grants.gov, yet the PCA FOA does not. Which instructions do I follow?

Follow the instructions in the PCA FOA for the components to be submitted in Grants.gov and the EHBs. Table 2 in the PCA FOA lists the forms to be submitted in Grants.gov and the forms and attachments to be submitted in the EHBs.

29. How do I change the SF-424 information submitted in Grants.gov?

The SF-424 components are transferred into the EHBs under the Basic Information, Budget Information, and Other Information sections. You can update this information in EHBs as desired. For example, to change the abstract, go to the SF-424 Part 2 under the Basic Information section in EHBs. The project abstract is attached in this form and listed as the Project Description. You can view the original abstract submitted via Grants.gov, delete it, and replace it by uploading a revised abstract. See the User Guide posted at the [PCA Technical Assistance website](#) for additional guidance.

30. How will I be notified if my application was successfully submitted in Grants.gov and/or HRSA EHBs?

Grants.gov will send a series of four e-mails to the contacts listed on the Grants.gov application. **If there are errors, you must correct the errors and re-submit the application in Grants.gov prior to the due date/time.** You are strongly encouraged to closely monitor your email accounts, including spam folders, for email notifications and/or error messages from Grants.gov.

When submitting in the EHBs, all validation errors must be resolved before the application can be submitted to HRSA by the AO. The status of the application in EHBs will appear as "Application Submitted to HRSA" once it has been successfully submitted, and the AO will receive an email notification. **Only the AO can submit the final EHBs application to HRSA.** Allow proper time for this to occur before the deadline. Contact the BPHC Helpline for assistance submitting your application in the EHBs at 1-877-974-2742, option 3.

31. How does the Project Narrative differ from the Review Criteria?

The Project Narrative details the information you must include to provide a complete overview of the proposed PCA project. The Review Criteria is the tool objective reviewers will use to evaluate the information presented in the application. Consider both the Project Narrative and Review Criteria when developing the application.

32. Why do the Project Narrative and Review Criteria repeatedly refer me to other sections of the application (e.g., appendices, forms, attachments)?

The Project Narrative and Review Criteria were written to guide applicants and reviewers to the relevant sections of the application where information should be presented. Both applicants and reviewers are expected to check the cross-referenced documents to ensure the application provides complete and consistent information.

33. Are all sections of the Project Narrative required?

Applicants must provide information in response to all sections of the Project Narrative as described in the PCA FOA. An application that fails to provide responses within each of the following five Project Narrative sections will be considered incomplete or non-responsive and will not be considered for funding under this announcement: Need, Response, Collaboration, Evaluative Measures, and Resources/Capabilities.

34. How are special and vulnerable populations defined for the FY17 PCA FOA?

“Special populations” refers to three population groups and the legislatively-mandated health center types that serve them: Migratory and Seasonal Agricultural Workers, People Experiencing Homelessness, and Residents of Public Housing (see Public Health Service Act, as amended, Title III, Section 330(I), (42 U. S. C. 254b)). “Vulnerable populations” have unique social, cultural, and communication factors that affect culturally and linguistically competent health care access and utilization.

35. NEW: In the past, PCAs received State/Regional Performance Profiles on an annual basis. Will updated Performance Profiles be available this year?

Updated State/Regional Performance Profiles with summary health center UDS data for the state or region are anticipated to be distributed approximately mid-November to currently funded PCAs to support T/TA activities in the current funded project period. New applicants for PCA funding may email bphcpca@hrsa.gov to request a copy of the Performance Profile for the proposed state/region. UDS data included in the Performance Profiles may also be accessed via the [Health Center Program Data Resources website](#).

36. NEW: What changes are reflected in the new version of the PCA FOA available on Grants.gov?

The following sections of the PCA FOA were revised:

- Appendix C was updated to include the following compilation of jurisdictions as one of the state PCA options: American Samoa, Federated States of Micronesia, Guam, Marshall Islands, Mariana Islands, and the Republic of Palau. The baseline data pre-populated in the Project Work Plan section of the EHBs application reflects data for all six jurisdictions.
- Goal 2 under Focus Area 1 shifted from increasing the number of patients receiving comprehensive services to increasing the number of health centers providing comprehensive services to align with the baseline data pre-populated in the EHBs application.

Forms and Attachments (includes NEW items)

37. What dates should be listed in Item 17 of the SF-424 for the Proposed Project Start Date and Proposed Project End Date?

Enter July 1, 2017 for the Project Start Date and June 30, 2020 for the Project End Date.

38. Which staff should be included in the Staffing Plan?

Include all staff supported by PCA funds that will support the proposed project. A sample Staffing Plan is available on the [PCA Technical Assistance website](#).

39. How is the Staffing Plan (Attachment 1) different from the Position Descriptions (Attachment 3) and Biographical Sketches (Attachment 4)?

The Staffing Plan presents and justifies all staff proposed to support the PCA project. Position Descriptions and Biographical Sketches are focused on key personnel only.

40. What is the difference between a Position Description (Attachment 3) and a Biographical Sketch (Attachment 4)?

A position description outlines the key aspects of a position (e.g., position title, description of duties and responsibilities, position qualifications, salary range, work hours). A biographical sketch describes the key qualifications of a specific individual that make him/her qualified for a position (e.g., past work experience, education/training, language fluency).

41. Are letters of support required?

Yes. At a minimum, applicants must include a current dated letter of support from the primary formal collaborators noted in the Collaboration section of the Project Narrative and at least one relevant state public agency (e.g., state health departments, state primary care offices, state Medicaid agencies). See the Collaboration section in the PCA FOA for more details on required letters of support.

42. Are regional PCA applicants required to submit letters of support from each state PCA in the region and all relevant state public agencies from each of the states in the region?

Rather than letters of support, a Memorandum of Agreement (Attachment 6) is required to document the support of each state PCA in the region (see [FAQ 42](#) below). Additionally, at a minimum, a current dated letter of support from at least one relevant state public agency (e.g., state health departments, state primary care offices, state Medicaid agencies) in the region must be submitted, in addition to letter(s) from the primary formal collaborators noted in the Collaboration section of the Project Narrative.

43. What is required for the regional PCA Memorandum of Agreement in Attachment 6?

Regional applicants must submit a signed Memorandum of Agreement (MOA) documenting support from the current state PCAs in the selected region. Should all applicants be funded, the MOA must summarize the expected actions on behalf of all parties to ensure effective coordination between the regional PCA and the state PCAs in the region to maximize the impact of HRSA-supported T/TA without duplication of effort. If signatures from the leadership of all current state PCAs cannot be obtained, regional PCA applicants should include documentation of efforts made to obtain the signatures along with an explanation for why they could not be obtained in the Collaboration section of the Project Narrative.

44. To whom should letters of support be addressed and how should they be provided?

Letters of support should be addressed to the appropriate applicant organization contact person (e.g., PCA board, CEO). They should **not** be addressed to HRSA or mailed separately from the application. Letters of support must be included with the application as Attachment 5 or they will not be considered by reviewers.

45. What if I am not able to get a letter of support from one or more of the entities required in the FOA?

Attach documentation of your efforts to obtain the letter(s) in Attachment 5: Letters of Support and include an explanation for why they could not be obtained in the Collaboration section of the Project Narrative.

46. NEW: Are Letters of Support counted in the page limit?

Yes. As outlined in Table 2 in the PCA FOA, the page limit applies to the Project Abstract, Project and Budget Narratives, and attachments (except the Indirect Cost Rate agreement included in Attachment 9, if applicable). In Attachment 5, applicants must include a current dated letter of support from the **primary formal collaborators** noted in the Collaboration section of the Project Narrative and at least one relevant state public agency (e.g., state

health departments, state primary care offices, state Medicaid agencies). Note that items not counted in the page limit include:

- Standard OMB-approved forms included in the application package;
- Program-specific forms completed in EHB, such as the Project Work Plan form where all of the information regarding the Goal Targets, Key Factors, and proposed activities are addressed in detail;
- Attachment-specific table of contents page(s); and
- Indirect cost rate agreement.

47. What is the Summary Progress Report submitted as Attachment 8?

In Attachment 8: Summary Progress Report, applicants are required to document the organization's demonstrated success and capabilities by providing a summary of the accomplishments achieved under the current project period (ending June 30, 2017). The summary should address the project period covered, specific objectives, and the results achieved. **Only currently funded PCAs are required to submit Attachment 8: Summary Progress Report.**

48. NEW: What period of time should Attachment 8: Summary Progress Report cover?

The Summary Progress Report attachment is a high-level summary of the accomplishments achieved to date for the entire currently funded project period (i.e., by the time the FY 2017 application is submitted).

49. NEW: Where should emergency preparedness T/TA activities be addressed in the PCA application?

Applicants must address emergency preparedness planning activities in the Response section of the Project Narrative attachment. Emergency preparedness T/TA activities planned for the first 12 months of the project period should be included in the Project Work Plan under the Focus Area and Goal for which the activities will have the greatest impact.

Budget (includes NEW items)

50. How much funding can be requested?

The annual funding request may not exceed the current annual level of support for the state or region. Applicants can obtain information on the annual level of PCA funding for the proposed state or region by contacting bphcpca@hrsa.gov.

51. What should be included in the Budget Narrative?

The Budget Narrative must justify each line-item (i.e., object class category) expense outlined in Section B: Budget Categories of the Budget Information: Budget Details form, with detailed calculations for each year of the three-year project period. A sample Budget Narrative is available on the [PCA Technical Assistance website](#). Refer to the Budget Narrative instructions in Section IV.2.iv of the PCA FOA for detailed guidance on this required attachment.

52. Should the Budget Information: Budget Details form or the Budget Narrative include non-federal funding (e.g., private grant funding, program income)?

No. Budget requests should only include the PCA Federal funding requested for the proposed activities. Do not provide other sources of funding in any of the attachments or forms included in the PCA application. Do not include activities in the application supported by non-Federal funding.

53. What should I do if the budget figures change between the Grants.gov submission and the EHBs submission?

Budget information submitted in Grants.gov may be updated in the EHBs (see [FAQ 28](#)).

54. Does HRSA require PCAs to have an indirect cost rate agreement?

No. Organizations are only required to have an indirect cost rate agreement if indirect costs are included in the PCA budget. If an organization does not have an indirect cost rate agreement, costs that would fall into such a rate (e.g., administrative salaries) may be charged as direct line-item costs. Or, applicants that have never received a negotiated indirect cost rate may elect to charge a de minimis rate of 10 percent, which may be used indefinitely (see [45 CFR part 75](#) for details). Once elected, this methodology must be used consistently for all Federal awards until such time as the organization chooses to negotiate for a rate, which they may apply to do at any time. More information about applying for an indirect cost rate agreement, is available at <https://rates.psc.gov/>. Applicants must clearly indicate if the organization intends to use the 10 percent de minimis rate.

Note: Organizations that include indirect costs in the budget must include a copy of the indirect cost rate agreement in Attachment 9 as stated in the PCA FOA. The indirect cost rate agreement will not be counted in the page limit.

55. Does the Federal salary limitation apply to PCA funding?

Yes. Federal funds that support PCAs may not be used to pay the salary of an individual at a rate in excess of Federal Executive Level II (currently \$185,100). Review the detailed guidance in the PCA FOA on the salary information that must be provided in the Budget Narrative for each staff position supported in whole or in part with Federal funds. Details are also provided in the sample Budget Narrative on the [PCA Technical Assistance website](#).

56. Are there activities that are ineligible for PCA funding?

Yes. Examples of unallowable uses of PCA funding include, but are not limited to:

- Direct patient care;
- Construction/renovation of facilities;
- Activities that do not align with the intent of this cooperative agreement;
- Reserve requirements for state insurance licensure;
- Support for lobbying and advocacy efforts; and/or
- Conference sponsorship (note that content development of individual program sessions related to the PCA Project Work Plan is allowable).

57. Is there guidance on allowable costs related to T/TA events hosted by PCAs?

Refer to the following resources:

- [The HHS Grants Policy Statement](#)
- [The HHS Policy on Promoting Efficient Spending: Use of Appropriated Funds for Conferences and Meetings, Food, Promotional Items, and Printing and Publications](#)

58. NEW: How should currently funded HCCNs applying for PCA funding separate the budget and reporting for goals that overlap the HCCN and PCA project?

Activities undertaken by an organization with both HCCN and PCA funding address distinct audiences; training and technical assistance supported by PCA funding must be accessible to all existing and potential health centers in the selected state or region, which is not the same requirement for HCCN-funded activities. Current HCCN award recipients applying for PCA funding must have systems in place to be able to separate budgets and reporting functionality for different funding sources. The PCA application must reflect budget information for PCA funding only, and only include activities that will be supported by PCA funding.

Project Work Plan

59. What are the requirements for the Project Work Plan?

The PCA Project Work Plan outlines the T/TA activities to be conducted during the first 12 months of the project period. Only include activities supported under the PCA cooperative agreement. The required Project Work Plan fields are detailed in Appendix A of the PCA FOA, available on the [PCA Technical Assistance website](#), along with a sample Project Work Plan.

60. How do I calculate Goal Targets for the required Goals within each Focus Area?

Goal Targets are the projected numerical values for each Goal that will be achieved by the end of the three-year project period. They should be realistic and attainable, and informed by a current understanding of health center capacity and experience working in the proposed state or region. If awarded, progress toward proposed Goal Targets will be monitored through future progress reports and by the assigned Project Officer.

61. How should Key Factors be developed?

Key Factors represent issues or circumstances that will contribute to or restrict the applicant's efforts to reach the identified Goal Target. They could be based on state/regional factors or application organization factors. An understanding of the relevant Key Factors should also impact the selection of proposed activities to be conducted. Applicants must identify at least two Key Factors (one contributing and one restricting) for each Goal.

62. How should Expected Outcomes be developed?

Applicants are required to identify at least one outcome that will result directly from each proposed T/TA activity. Expected Outcomes should be realistic and attainable, and

represent objectives projected for the end of the three-year project period based on expectations, predicted contributing and restricting factors, and past performance.

63. How should Activity Areas be selected?

Activity Area selection should be based on the needs of the proposed state or region with consideration toward opportunities for the greatest impact. Selection of at least two Activity Areas under each Goal is required.

Application Reviews and Awards

64. How will PCA applications be reviewed?

Applications for PCA funding will be subject to an internal and external review. The internal HRSA review assesses completeness, eligibility, and responsiveness. Applications deemed complete and eligible will also be externally reviewed by an ORC. ORC reviewers are selected based on training and experience in relevant fields or disciplines. Each reviewer provides an objective, unbiased evaluation based on the review criteria in the FOA (see [FAQ 64](#)). Prior to award, HRSA reviews financial risk factors outlined in Section V.3 of the PCA FOA, Assessment of Risk and Other Pre-Award Activities, the results of which impact the project period length for successful applicants (see [FAQ 68](#)).

65. What criteria does the ORC use in assessing PCA applications?

Refer to the Review Criteria section of the PCA FOA (Section V). ORC reviewers will be looking at the Project Narrative as well as additional supporting documentation throughout the application, such as information in the attachments and forms, when assigning points to each review criterion.

66. Are there funding factors?

No. The PCA FOA does not have any funding priorities, preferences, or special considerations.

67. When will PCA funds be awarded?

HRSA anticipates PCA awards will be issued through a Notice of Award (NoA) prior to the project period start date of July 1, 2017.

68. How much PCA funding is available in FY 2017 and how many awards are expected?

HRSA anticipates approximately \$53.6 million will be available to fund up to 52 PCAs in FY 2017. See the Summary of Funding in Section II of the PCA FOA for details.

69. What is the length of the PCA project period?

The awards will have, at most, a three-year project period. Funding beyond the first year is dependent on the availability of appropriated funds in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government. When determining project period length, HRSA will consider the financial risk factors outlined in Section V.3 of the PCA FOA, Assessment of Risk and Other

Pre-Award Activities, as well as application responsiveness and current compliance status (if the applicant is a current PCA award recipient).

Technical Assistance and Contact Information

70. Who should I contact with programmatic questions (e.g., application requirements)?

Refer to the [PCA Technical Assistance website](#) for resources, including technical assistance presentation slides and sample documents. Applicants may also contact the PCA Technical Assistance Response Team at bphcpca@hrsa.gov.

71. Who should I contact for questions about budget preparation, including eligible costs?

Contact Christie Walker in the Office of Federal Assistance Management's Division of Grants Management Operations at cwalker@hrsa.gov.

72. Who should I contact regarding submitting my application in Grants.gov?

Refer to the [Grants.gov applicant FAQs](#) or contact the Grants.gov Contact Center 24 hours a day, 7 days a week (excluding Federal holidays) at 1-800-518-4726 or support@grants.gov.

73. Who should I contact regarding submitting my application in the HRSA EHBs?

Contact the BPHC Helpline Monday through Friday, 8:30 a.m. to 5:30 p.m. ET (excluding federal holidays) at 1-877-974-2742 (select option 3 from the menu of choices) or [Submit an Online Request](#).