

**Fiscal Year 2016 Patient-Centered Medical Home
Supplemental Funding Opportunity
HRSA-16-183
Frequently Asked Questions (FAQs)**

Below are common questions and corresponding answers for the Fiscal Year (FY) 2016 Patient-Centered Medical Home (PCMH) supplemental funding opportunity. New FAQs will be added as needed, so please check the PCMH technical assistance (TA) website for updates: [FAQ Update page](#).

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General Information

1. What is the purpose of the FY 2016 PCMH supplemental funding opportunity?

The purpose of this funding opportunity is to support Health Center Program award recipients (hereafter referred to as health centers) that received initial Health Center Program operational grant funding after FY 2011 (i.e., in FY 2012, 2013, 2014, 2015, or 2016, if funded by April 1, 2016) to improve quality of care and patients’ and providers’ experience of care through the PCMH health care delivery model. This one-time funding will provide assistance to health centers to make the practice changes necessary to achieve, expand, and/or optimize PCMH recognition.

2. When can I start my application?

The application period opened on May 2, 2016. Emails indicating the availability of the application in EHB were sent on that date to the individuals listed as Project Directors, Authorizing Officials, and Business Officials in the health center’s EHB grant folder for all eligible health centers. Applications are due in EHB by 5:00 p.m. ET on **May 31, 2016**. There is no Grants.gov submission requirement for the FY 2016 PCMH supplemental funding application.

3. How much funding is available to support PCMH supplemental funding in FY 2016?

HRSA will award approximately \$10 million to support health centers awarded initial Health Center Program operational grant funding after FY 2011 to achieve, expand, and/or optimize PCMH recognition.

4. How much FY 2016 PCMH supplemental funding is each health center eligible to receive?

Eligible health centers may request up to \$35,000 in one-time supplemental funds. Depending on the number of approvable applications, HRSA may adjust award amounts consistent with funds available for this funding opportunity. FY 2016 PCMH supplemental funding must be expended within 12 months of award. This is a one-time supplemental funding opportunity; ongoing funds beyond the 12 month period will not be available to support activities initiated under this award.

5. Are applicants required to include the special population funding streams currently received when completing the budget request (i.e., CHC, MHC, HCH, and PHPC)?

Yes. Funding must be requested in the same special population funding proportion(s) as existing operational grant funding. The email that HRSA sent to eligible health centers on May 2, 2016 includes a breakdown of the special population funding streams (also known as sub-programs) that the health center currently receives with the maximum funding amount split proportionately. This distribution must be shown on the SF-424 Budget Information form (Section A – Budget Summary).

6. What should I do if the funding stream distribution levels included in the EHB email notification are not correct?

If the funding distribution percentages do not match your current Health Center Program (H80) grant funding distribution, contact BPHC at pcmhsupplement@hrsa.gov.

Eligibility

7. What types of organizations are eligible to apply for FY 2016 PCMH supplemental funding?

FY 2016 PCMH supplemental funding is open to current Health Center Program award recipients that received initial (i.e., new start) Health Center Program operational grant funding in FY 2012, 2013, 2014, 2015, or 2016 (if funded by April 1, 2016).

8. The application instructions note that HRSA will not award FY 2016 PCMH supplemental funding to health centers with 5 or more active 60-day conditions or 1 or more active 30-day conditions. Does this include all conditions, including scope verification and construction/alteration-related conditions?

HRSA will only consider progressive action conditions related to Health Center Program requirements when determining if health centers are able to receive FY 2016 PCMH supplemental funding (i.e., scope verification and construction/alteration-related conditions will not be included). Please contact your Project Officer for any questions regarding the current status of conditions on your grant award.

9. Is the FY 2016 PCMH supplemental funding application subject to review by State Executive Order 12372?

Yes. FY 2016 PCMH supplemental funding awards are subject to the provisions of Executive Order 12372, as noted on page 7 of the application instructions. Applicants in states that have a Single Point of Contact (SPOC) should contact the SPOC to alert them that you will be

submitting an application. The list of SPOCs is available here: [SPOC List](#). For applicants in states that do not have a SPOC, you may contact your Primary Care Office (PCO) for guidance. See [Primary Care Offices](#) for the list of PCOs.

10. Can subrecipients/subcontractors apply for FY 2016 PCMH supplemental funding?

No, only current Health Center Program award recipients are eligible to apply. However, if a site that is operated by a subcontractor/subrecipient is included in an eligible health center's approved scope of project (on Form 5B), the health center may submit an application for FY 2016 PCMH supplemental funding that will support PCMH developmental activities at that site.

Application Requirements

11. What is a Patient-Centered Medical Home?

The primary care patient-centered medical home is a care delivery model designed to improve quality of care through enhanced access, planning, management, and comprehensive care. The PCMH model is built on coordinating care, treating the many needs of the patient at once, increasing access to care, and empowering the patient to be a partner in his or her own care.

12. What types of activities are allowable under the FY 2016 PCMH supplemental funding opportunity?

Allowable activities support achievement, expansion, and/or optimization of PCMH recognition, such as practice redesign, implementation of team-based models of service delivery, necessary system upgrades, and staff/consultant time dedicated to PCMH developmental and/or optimization efforts, including expanding upon existing transformation efforts to further optimize the PCMH model. Applicants are encouraged to utilize PCMH self-assessment tools, pre-survey results, or initial survey results to identify areas in need of improvement.

13. Can health centers that are already PCMH recognized apply?

Yes. Supplemental funds may be utilized to optimize implementation of the PCMH model for one or more PCMH-recognized sites in the health center's approved scope of project. Applications must demonstrate that the activities proposed will improve quality of care and patients' and providers' experience of care through optimization of the PCMH model.

14. Are applicants required to pursue recognition through a specific recognizing body (e.g., National Committee for Quality Assurance)?

No. It is up to each health center to determine which recognizing body is appropriate for its organization. Guidance on selecting a PCMH recognizing entity is available here: [Guidance Website](#).

15. Are applicants required to identify which type of PCMH recognition they intend to achieve at the time the application is submitted?

Yes. If the health center is not currently recognized as a PCMH, the health center should discuss which PCMH recognizing organization it will apply to for recognition when responding to the Project Narrative questions (e.g., The Joint Commission, National Committee for Quality Assurance, Accreditation Association for Ambulatory Health Care).

16. Are health centers required to participate in the HRSA Accreditation and Patient-Centered Medical Home Initiative?

No. However, participation in the HRSA Accreditation and Patient-Centered Medical Home Initiative is strongly encouraged as it supports health centers to achieve ambulatory health care accreditation and/or PCMH recognition by covering certain fees for participating health centers. The fees covered may include initial accreditation and re-accreditation for ambulatory health care accreditation in conjunction with PCMH certification and PCMH recognition, initial, renewal, and add-on surveys. Note that health centers may not propose to use FY 2016 PCMH supplemental funding on costs that are covered by the HRSA Accreditation and PCMH Recognition Initiative.

17. Is it possible to pool FY 2016 PCMH supplemental funding if eligible health centers are collaborating on a project that has mutual benefit?

Yes. Eligible health centers are permitted to collaborate on PCMH development activities, as well as to participate in any PCA or HCCN sponsored activities that support PCMH development. Each health center must complete its own application and describe how the proposed activities will support the applicant's efforts to achieve, expand, and/or optimize PCMH recognition.

18. Should health centers complete an application for FY 2016 PCMH supplemental funding at the health center level or for specific sites that will be targeted?

The application must be completed at the health center level. Applicants should plan to focus the PCMH development activities on at least one site in scope and should discuss how the benefits from PCMH development activities implemented at one site will apply to the rest of the sites in scope and impact the organization's overall PCMH goals.

19. Can I propose a PCMH development project at a site that I plan to bring into scope at a later date?

The application must include a proposal to implement all activities at sites (including mobile vans) that are in a health center's approved scope of project. Sites must meet the eligibility criteria of a primary care service delivery site set forth by PCMH recognition entities. However, if a new site is added to scope in the future, FY 2016 PCMH supplemental funding may be utilized to support PCMH development activities at that location.

20. Can I make changes to my approved scope of project (i.e., services and sites) through the FY 2016 PCMH supplemental funding application?

No. Applicants may not modify their scope of project as part of the FY 2016 PCMH supplemental funding application.

21. What positions can be supported by FY 2016 PCMH supplemental funding?

Applicants may propose up to 12 months of funding for direct hire or contracted staff that support practice transformation and other PCMH development activities. FY 2016 PCMH supplemental funding may not cover costs associated with service provision.

22. What is required for the Project Description attachment in the SF-424 Part 2 section of the application?

Applicants must upload an attachment with a brief summary of the proposed PCMH development activities, timeline, and outcomes. The Project Description/Abstract must be single-spaced and limited to one page in length.

Budget Presentation

23. Are there activities or costs that are ineligible?

Yes. FY 2016 PCMH supplemental funds may not be used for:

- Patient care (e.g., laboratory tests, medical or office supplies);
- Construction, including minor alterations and renovation;
- Fixed/installed equipment;
- Costs incurred prior to award;
- Costs that are covered by the HRSA Accreditation and PCMH Recognition Initiative; and/or
- Facility, land, or vehicle purchases.

In addition, FY 2016 PCMH supplemental funding may not supplant other resources (federal, state, local, or private).

24. Are equipment purchases allowable?

Moveable equipment is an allowable cost. Moveable equipment is defined as tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-federal entity for financial statement purposes, or \$5,000. For proposals that include equipment costs, applicants are required to complete an Equipment List form. Equipment that does not meet the \$5,000 threshold should be listed in the Supplies cost category, not under Equipment.

25. Can I use FY 2016 PCMH supplemental funding toward costs associated with an Electronic Health Record (EHR) system?

FY 2016 PCMH supplemental funding may be used to optimize or upgrade your existing EHR System as needed to support the proposed PCMH development activities. Applicants must provide details about how EHR-related costs are necessary for the proposed PCMH project in the Budget Justification Narrative and detail the costs in the Equipment List form. EHR-related provider licensing costs necessary to enhance PCMH operability should be included in the Other cost category, not under Equipment. See Appendix B of the application instructions for details.

26. Are applicants required to include non-federal funding in the FY 2016 PCMH supplemental funding application budget presentation?

Applicants are required to include total budget information in the application, which may include non-federal funding (e.g., program income) that supports the project. Total budget information must be included in the SF-424A, the Federal Object Class Categories Form, and the Budget Justification.

27. Can award recipients request to carryover a balance of funds to the next budget period?

Yes. The FY 2016 PCMH supplemental funding awards provide supplemental funding for activities for the period August 1, 2016 through July 31, 2017 (12 months of funding). As such, a portion of these funds will be provided to award recipients for use in the FY 2017 budget period. In order to use FY 2016 PCMH supplemental funding in the upcoming budget period, award recipients must submit a Prior Approval Request to carry over these funds. Health centers should consult the Grants Management Specialist (GMS) for questions regarding submission of the Prior Approval request to carry over unobligated funds after their FY 2016 budget period has ended.

28. Are there any formatting guidelines for the Budget Justification Narrative attachment? Can I submit a Microsoft Excel document?

Please use an easily readable font, such as Times New Roman, Arial, Courier, or CG Times. The font should be no less than a 10-point font and you should use 1.0 line spacing. When the application is printed by HRSA, documents will print as they are formatted by the applicant. Applicants are encouraged to limit Excel documents to one worksheet only (i.e., one tab in the spreadsheet) and to make sure that the print area is set to the information that must appear in the submission.

Award Information and Reporting Requirements

29. When are FY 2016 PCMH supplemental funding applications due in EHB?

The due date for submissions is 5:00 p.m. ET on Friday, May 31, 2016.

30. When will FY 2016 PCMH supplemental funding be awarded?

HRSA anticipates announcing the awards in August 2016.

31. What is the length of the FY 2016 PCMH supplemental funding period?

FY 2016 PCMH supplemental funding must be expended within 12 months of award. The award period is August 1, 2016 through July 31, 2017. Health centers are required to demonstrate achievement of recognition (or implementation of proposed optimization activities if the organization is already recognized) by July 31, 2017. Please note that this is a one-time supplemental funding opportunity, and no ongoing funds will be available to support activities initiated under this award.

32. Are there specific reporting requirements for FY 2016 PCMH supplemental funding award recipients?

Health centers that receive FY 2016 PCMH supplemental funding are required to complete the following:

- Approximately six months after awards are released: Participate in a HRSA-led technical assistance webinar (additional information will be provided to successful applicants).
- Approximately 45 days after the end of the 12 month funding period: Submit a final report describing progress made toward achieving the proposed outcomes, lessons learned, barriers or challenges experienced while implementing activities, and documentation of proof of recognition as applicable (see [table in FAQ #33](#))

33. What type of documentation are health centers required to submit after implementing the activities proposed in the application?

If funded, health centers are required to demonstrate that activities have been implemented to support accomplishment of the proposed outcomes, **including the achievement or expansion of PCMH recognition**. The table below outlines the documentation health centers are required to submit with the final report depending on the recognizing body selected (as applicable).

Recognizing Body	Documentation Required for Health Centers Proposing to Achieve or Expand PCMH Recognition
National Committee on Quality Assurance (NCQA)	Proof of the recognition decision or proof of final survey tool submission to NCQA (via a certificate or an email from NCQA verifying submission) by July 31, 2017.
Accreditation Association for Ambulatory Health Care (AAAHC)	Proof of the recognition decision or proof that the final site visit has been scheduled by July 31, 2017.
The Joint Commission (TJC)	Proof of the recognition decision or proof that your final site visit has been scheduled by July 31, 2017.
Minnesota Health Care Home	Proof of the recognition decision or other documentation that demonstrates implementation of steps necessary to achieve recognition through the Minnesota Health Care Home process by July 31, 2017.
Oregon Patient-Centered Primary Care Home Program	Proof of the recognition decision or other documentation that demonstrates implementation of steps necessary to achieve recognition through the Oregon Patient-Centered Primary Care Home Program process by July 31, 2017.

Technical Assistance and Contact Information

34. What technical assistance is available as I develop my application?

Technical assistance materials, including FAQs and an Application User Guide, are available at the PCMH technical assistance website: [PCMH technical assistance website](#).

35. Who should I contact with programmatic questions concerning the FY 2016 PCMH supplemental funding application requirements and process?

Contact the PCMH Technical Assistance Team at pcmhsupplement@hrsa.gov.

36. Who should I contact if I have specific questions about allowable costs, the budget, or the budget justification narrative?

Contact Terry Hatchett in HRSA's Office of Federal Assistance Management, Division of Grants Management Operations at THatchett@hrsa.gov.

37. If I encounter technical difficulties when trying to submit my application in EHB, who should I contact?

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 or submit a Web request ([BPHC Contact Site](#)).