

Fiscal Year (FY) 2018 Service Area Competition (SAC)

HRSA-18-021, HRSA-18-023, HRSA-18-024, HRSA-18-025, HRSA-18-026, HRSA-18-027

SAC Technical Assistance Web Site (http://bphc.hrsa.gov/programopportunities/fundingopportunities/SAC/index.html)

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Notice to Existing Health Center Program Award Recipients

- SAC is for Health Center Program award recipients whose project period ends in FY 2018 (October 1, 2017 September 30, 2018).
- If your project period does not end in FY 2018, complete a Budget Period Progress Report (BPR) rather than a SAC application.





Agenda

- Overview
- Eligibility Requirements
- Application Process
 - Phase 1: Grants.gov
 - Phase 2: HRSA EHB
- HRSA EHB Content
- Patient Projections
- Clinical and Financial Performance Measures
- Award Decision Factors











Purpose

- Competitive funding opportunity for operational support
- Ensures continued access to affordable quality primary health care services
- Funds services in areas already served by Health Center Program award recipients
- Authorized by Section 330 of the Public Health Service (PHS) Act, as amended (42 U.S.C. 254b)





Award Information

- Funding varies by announced service area
- One award for each announced service area, regardless of the number of applications
- Project period
 - Up to 3 years
 - Start date varies by service area throughout FY 2018 (January 1 through June 1, 2018)





Application Types

Competing Continuation

 A current Health Center Program award recipient applying to continue serving its current service area

New

 An organization not currently funded through the Health Center Program applying to serve an announced service area

Competing Supplement

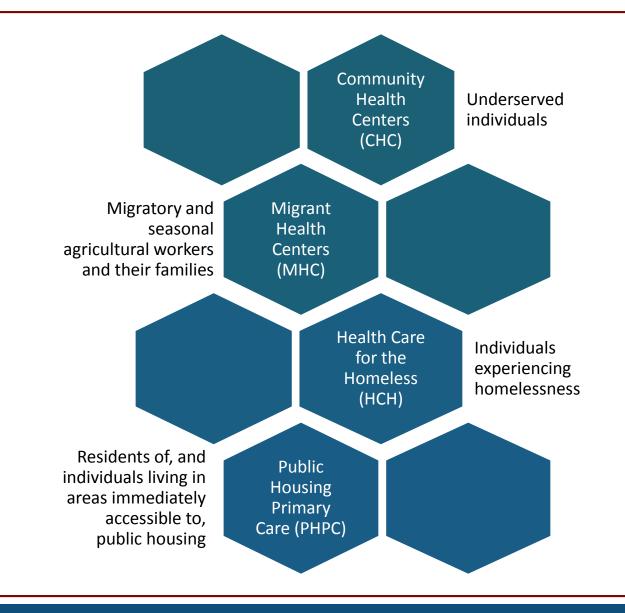
 A current Health Center Program award recipient applying to serve an announced service area, in addition to its current service area





NN SERVICE

Target Populations







Service Area Announcement Table (SAAT)

- Available at http://bphc.hrsa.gov/sac/
- Lists the service areas announced for competition, including:
 - Notice of Funding Opportunity number
 - Zip codes and the percentage of patients that reside within each zip code
 - Funding (total and by target population)
 - Patient Target





SAAT Sample

Service Area Identification Number	Current Project Period End Date	City (Click the City to access the Patient Origin Map)	State	Funding Opportunity Number	Total Funding	CHC Funding	MHC Funding	HCH Funding	PHPC Funding	Zip Codes	Percentage of Patients from Zip Code	Patient Target
016	12/31/2017	<u>Hartford</u>	СТ	HRSA-18-021	\$5,804,183	\$3,365,080	\$0	\$1,857,309	\$581,794	06106	40.3%	34,498
										06114	21.7%	
										06105	7.2%	
										06132	4.5%	
										06112	4.1%	
										06120	3.7%	
										06109	2.6%	
										06111	2.2%	
										06110	1.7%	
										06051	1.4%	
										06040	1.3%	









Eligibility Requirements

Eligibility Requirements 1 – 2

Eligibility Requirement	Documentation
 Public or nonprofit private entity, such as a tribal, faith-based, or community-based organization 	Attachment 11: Evidence of Nonprofit or Public Center Status
2. Propose to operate a health center that makes all required primary health care services available and accessible in the service area, either directly or through established arrangements, without regard for ability to pay	Form 5A: Services Provided Attachment 10: Sliding Fee Discount Schedule





Eligibility Requirements 3a – c

Eligibility Requirement	Documentation
3. Propose to serve an announced service area and its patients	Form 5B: Service Sites
a) Project to serve at least 75% of the SAAT Patient Target for the proposed service area by <u>December 31, 2019</u> , as identified in the SAAT	Form 1A: General Information Worksheet
 b) New and Competing Supplement Applicants: Propose service area zip codes where at least 75% of current patients reside, as identified in the SAAT 	Form 5B: Service Sites
c) Propose to serve all currently targeted populations (i.e., CHC, MHC, HCH, PHPC) and maintain the funding distribution, as identified in the SAAT	SF-424A: Budget Information Form





Eligibility Requirements 4 – 6

Eligibility Requirement	Documentation
4. New and Competing Supplement Applicants: Propose at least one new full-time permanent , fixed –building service delivery site (MHC-only projects may propose a full- time seasonal service delivery site)	Form 5B: Services Sites – verifiable physical site address must be included
5. Ensure access to services for all individuals in the service area and target population, as identified in the SAAT	Project Abstract Project Narrative
6. Public Housing Primary Care Applicants: Demonstrate continued consultation with public housing residents, beginning with SAC application preparation and continuing with administration of the health center	Project Narrative





Eligibility Requirements – Other

Eligibility Requirement	Documentation
Request annual funding that <u>does not</u> exceed the Total Funding available for a service area, as identified in the SAAT	SF-424A: Budget Information Form
Include all attachments indicated as "required for completeness"	 New applicants: Attachment 6: Co-applicant Agreement, as applicable Attachment 11: Evidence of Nonprofit or Public Center Status
Cannot apply on behalf of another organization	SF-424: Application for Federal Assistance Attachment 2: Bylaws
Submit the application by the posted deadlines in Grants.gov and HRSA EHB	Refer to Section IV.4 of the NOFO





Question #1

True or False?

Through the SAC application, an applicant can request funding for a new target population (a population not listed on the SAAT).





Question #1 Answer

Answer – False

Applicants may only request funding for designated populations in the service area, as identified in the SAAT.





Application Process





Two-Phase Application Process

- Phase 1: Grants.gov
 - Immediately ensure current Grants.gov registration
 - New registration may take up to 1 month to complete (DUNS number and SAM.gov registration required)
- Phase 2: HRSA Electronic Handbooks (EHB)

Grants.gov

HRSA EHB

 See HRSA's SF-424 Two-Tier Application Guide for details: http://www.hrsa.gov/grants/apply/applicationguide/sf424programs pecificappguide.pdf





Grants.gov Workspace

- Allows multiple people to access and edit application forms online http://www.grants.gov/web/grants/applicants/workspaceoverview.html
- Walks applicants through the Grants.gov process
- Checks for errors before application is submitted





Grants.gov Content

- SF-424: Application for Federal Assistance
 - Upload Project Abstract in box 15
- SF-424B: Assurances Non-Construction Programs
- Project/Performance Site Location(s) Form
- Grants.gov Lobbying Form (certification)
- SF-LLL: Disclosure of Lobbying Activities (as applicable)
- Key Contacts





SF-424 Application Type

Application for Federal Assista	ance SF-424	
 * 1. Type of Submission: Preapplication Application Changed/Corrected Application 	* 2. Type of Application: New Continuation Revision	* If Revision, select appropriate letter(s): * Other (Specify):
* 3. Date Received: Completed by Grants.gov upon submission.	4. Applicant Identifier:	

• In Box 2:

- New applicants: select New
- Competing continuation applicants: select Continuation
- Competing supplement applicants: select Revision and enter your H80 grant number in the Other field
- Incorrect selection may delay access in HRSA EHB (Phase 2)
- In Box 4:







Phase 1: Grants.gov Submission

- For help with the Grants.gov electronic submission, call the Grants.gov Contact Center at 1-800-518-4726 or email <u>support@grants.gov</u>
- The Authorized Organizational Representative (AOR) in Grants.gov will receive 4 emails after submission:
 - 1. Submission Receipt
 - 2. System Validation
 - 3. Agency (HRSA) Download
 - 4. HRSA EHB Tracking Number Assignment (within 3 days of successful Grants.gov submission)
- Errors identified by Grants.gov must be corrected prior to the deadline





Phase 2: HRSA EHB – Submission

- Applications can only be submitted by the HRSA EHB Authorizing Official
 - Receive a confirmation message in HRSA EHB following successful submission
- For help in HRSA EHB, contact the BPHC Helpline at 877-974-2742 ext. 3 or <u>http://www.hrsa.gov/about/contact/bphc.aspx</u>







True/False?

There are benefits to submitting the application early in Grants.gov.





Question #2 Answer

Answer – True

Apply as early as possible in Grants.gov since most of the application is submitted in HRSA EHB.

Items submitted in Grants.gov can be updated in HRSA EHB (e.g., abstract, budget listed on the SF-424).





HRSA EHB Application Content





Phase 2: HRSA EHB – Content

- Project Narrative
- Budget Presentation
- Attachments
- Program-Specific Forms
- Clinical and Financial Performance Measures





Project Narrative and Review Criteria

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





Common Reasons for Lower Review Scores

- Not responding to the current NOFO requirements
- Not responding to each item within each section of the Project Narrative (items and review criteria change each year)
- Missing an attachment required for review
- Inconsistencies across portions of the application





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

Section A – Budget Summary

- Separate rows for each target population (e.g., CHC, MHC)
- Federal amount is the SAC funding requested
- Estimated Unobligated Funds are not applicable
- Section B Budget Categories
 - Line-item budget for Year 1 of the 3-year project period
- Section C Non-Federal Resources
 - Include non-SAC federal funds supporting the proposed project in the "Other" category
 - Program income must be consistent with the Total Program Income presented in Form 3: Income Analysis





Sample SF-424A

	BUDGET I	NFORMATION	V – Non-Constr	uction Program	ns	
		SECTION A - B	UDGET SUMMAR	Y		
Grant Program	Catalog of	Estimated Unobl	igated Funds	New or Revised Budget		
Function or Activity (a)	Fed Domestic Assist No. (b)	Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
. Community Health Centers- 330(e)	93.224			\$2,758,334	\$7,599,486	\$10,357,820
Migrant Health Centers - 330(g)	93.224			\$1,253,113	\$3,452,704	\$4,705,817
l.						
. TOTALS				\$4,011,447	\$11,052,190	\$15,063,637
		SECTION B - BU	DGET CATEGORI	ES		
6. Object Class Category	(1) Federal	Gran (2) Non-Federal	nt Program Function or A	Activity		Total (5)
a. Personnel	\$2,400,000	\$7,001,600				\$9,401,600
b. Fringe Benefits	\$552,586	\$1,612,079				\$2,164,665
b. Fringe Benefitsc. Travel	\$552,586 100,000	\$1,612,079 34,200				\$2,164,665 \$134,200
5						
c. Travel	100,000	34,200				\$134,200
c. Travel d. Equipment	100,000 300,000	34,200 375,557				\$134,200 \$675,557
c. Travel d. Equipment e. Supplies	100,000 300,000 50,000	34,200 375,557 420,000				\$134,200 \$675,557 \$470,000
c. Travel d. Equipment e. Supplies f. Contractual	100,000 300,000 50,000 500,000	34,200 375,557 420,000 441,200				\$134,200 \$675,557 \$470,000 \$941,200
c. Travel d. Equipment e. Supplies f. Contractual g. Construction	100,000 300,000 50,000 500,000 0	34,200 375,557 420,000 441,200 0				\$134,200 \$675,557 \$470,000 \$941,200 \$0 \$1,276,415
c. Travel d. Equipment e. Supplies f. Contractual g. Construction h. Other	100,000 300,000 50,000 500,000 0 108,861	34,200 375,557 420,000 441,200 0 1,167,554				\$134,200 \$675,557 \$470,000 \$941,200 \$0 \$1,276,415
c. Travel d. Equipment e. Supplies f. Contractual g. Construction h. Other i. Total Direct Charges (sum of 6a-6h)	100,000 300,000 50,000 0 108,861 \$4,011,447	34,200 375,557 420,000 441,200 0 1,167,554 \$11,052,190				\$134,200 \$675,557 \$470,000 \$941,200 \$0 \$1,276,415 \$15,063,637





Budget Presentation: SF-424A (Section E)

Section E – Budget Estimates of 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, entered on separate rows for each target population (CHC, MHC, HCH, and/or PHPC)
- The Third and Fourth columns should remain \$0





Entering the Funding Request on the SF-424A

- The total federal request must not exceed the Total Funding for the service area announced in the SAAT
- Request funding for all service area population types in the same proportion announced in the SAAT
- Available funding for an announced service area may be adjusted by HRSA; refer to the SAAT periodically

	CEDA	Estimated Unobligated Funds		New or Revised Budget		
Grant Program Function or Activity	CFDA Number	Federal	Non- Federal	Federal	Non-Federal	Total will auto- calculate in EHB
Community Health Centers	93.224	N/A	N/A	\$2,000,000	←	b.
Health Care for the Homeless	93.224	N/A	N/A	\$1,000,000	←	d.
Migrant Health Centers	93.224	N/A	N/A	\$500,000	—	Č.
Public Housing	93.224	N/A	N/A	\$500,000	<	e.
	Tota	will auto-car	culate in EHB	\$4,000,000	→	a.

SF-424A Budget Information: Section A – Budget Summary

Total Funding available for the service area and support per population type from the SAAT

Total Funding	CHC Funding	MHC Funding	HCH Funding	PHPC Funding	
\$4,000,000	\$2,000,000	\$500,000	\$1,000,000	\$500,000	
a.	b.	c.	d. 🕇	е.	





Budget Presentation: Budget Narrative

- Line-item details for each year of the 3-year project period
- Year 1 must show the federal and non-federal portions (aligns with Section B Budget Categories of the SF-424A)
- Demonstrates that costs are reasonable and necessary
- Provides a table of all federally funded personnel
 - Federal funds may not be used to pay the salary of an individual at a rate in excess of \$187,000
- Ineligible uses of SAC funding include construction, fundraising, and lobbying
- See HRSA's SF-424 Two-Tier Application Guide for details: http://www.hrsa.gov/grants/apply/applicationguide/sf424programs pecificappguide.pdf





Question #3

Where can an applicant obtain the maximum amount of funding that can be requested for each year of the 3-year project period?

- A. Notice of Funding Opportunity
- B. SAAT
- C. Notice of Award





Question #3 Answer

Answer:

B: SAAT

Obtain the maximum amount of annual funding available for each announced service area from the SAAT.





HRSA EHB Attachments

- The only attachments Required for Completeness are:
 - Attachment 6: Co-Applicant Agreement (required for new public center applicants who require a co-applicant to ensure compliance with governance requirements; HRSA has this document on file for current public center awardees)
 - Attachment 11: Evidence of Non-Profit or Public Center Status (required for new applicants; HRSA has this document on file for current award recipients)
- Applications missing any attachment labeled **Required for Review** may be scored down by the objective review committee
- Refer to Section IV.2.vi of the NOFO for details





Program Specific Forms: 1A – 6B

- Form 1A: General Information Worksheet
 - Project the unduplicated number of patients to be served by December 31, 2019
- Form 2: Staffing Profile
 - Collects the number of direct hire staff
 - Contracted staff are indicated, but not quantified
- Form 3: Income Analysis
- Form 4: Community Characteristics
- Form 5A: Services Provided
- Form 5B: Service Sites
 - Enter the service area zip codes from which at least 75% of current patients reside
- Form 5C: Other Activities/Locations (if applicable)





Program Specific Forms: 6A – 12, Summary Page, and Performance Measures

- Form 6A: Current Board Member Characteristics
- Form 6B: Request for Waiver of Board Member Requirements
- Form 8: Health Center Agreements
- Form 10: Emergency Preparedness Report
- Form 12: Organization Contacts
- Summary Page
- Clinical Performance Measures
- Financial Performance Measures





Service Area Zip Codes

 Propose on Form 5B (service delivery sites or admin/service delivery sites) the service area zip codes from which at least 75% of current patients reside

SA	SAAT service area zip codes				DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration FORM 5B: SERVICE SITES		FOR HRSA USE ONLY	
	and the percentage of patients that reside in each						Grant Number	Application Tracking Number
zip code								
	Zip Codes	Percentage of Patients from Zip Code	Patient Target	÷		D This site has a Medicare billing number		
					FQHC Site National Provider Identification (NPI) Number (Optional field)		Total Hours of Operation (when patients will be served per week)	
	06106	40.3%	34,498		Months of Operation			
	06114	21.7%			Service Area Zip Codes Number of Contract			
	06105	7.2%			Service Delivery Locations (Required only for 'Migrant		Number of Intermittent Sites (Required only for 'Intermittent Site' Type)	
	06132	4.5%			Venetes Constant Offer Toron	1		
	06112	4.1%						
	06120	3.7%	-					
HUMAN SERVICES.	06109	2.6%						
ABALTHI,	06111	2.2%						
AMUTIVALIA SERVICES USA								Health Center Prog

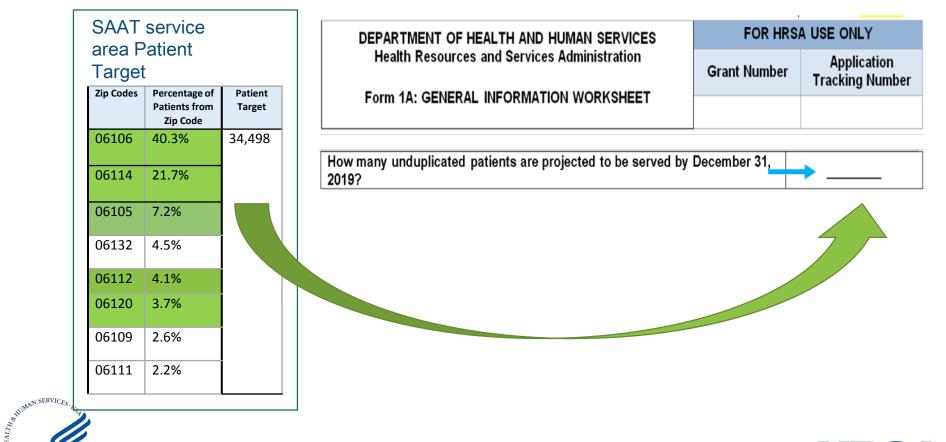
Patient Projections





Patient Projection on Form 1A

• Propose on Form 1A to serve at least 75% of the patient target listed in the SAAT by December 31, 2019





Patient Projection and the Funding Request

Patient Projection as Percentage of SAAT Patient Target	Funding Request Reduction
95-100% of patients listed in the SAAT	No reduction
90-94.9% of patients listed in the SAAT	0.5% reduction
85-89.9% of patients listed in the SAAT	1% reduction
80-84.9% of patients listed in the SAAT	1.5% reduction
75-79.9% of patients listed in the SAAT	2% reduction
0-74.9% of patients listed in the SAAT	Ineligible application

 To determine the maximum funding based on the patient projection, a calculator tool is available at <u>http://bphc.hrsa.gov/programopportunities/fundingopportunities/S</u> <u>AC/index.html</u>





Patient projections must:

- Be 75% or more of the SAAT patient target
- Be realistic, achievable, annualized, and unduplicated (include only patients projected to be seen in calendar year 2019)
- Consider factors such as:
 - Service area patient, clinical, and financial data trends
 - Service area and target population needs
 - Known and anticipated workforce challenges
- Additional information provided in the Patient Target FAQs <u>http://bphc.hrsa.gov/programopportunities/fundingopportunities/sac/</u> <u>patienttarget.pdf</u>





Post-Award

- Patient target Total number of patients that an award recipient commits to serving through funded applications
 - FY 2018 SAC application patient projection (new and competing continuation applicants) will be the new base value of the patient target
 - Future supplemental application patient projections (such as AIMS new patient projections) will be added to the base value
- If the patient target is not achieved by December 31, 2019 (measured using the 2019 Uniform Data System (UDS) Report), funding for the service area may be reduced when it is announced in the FY 2021 SAC





Clinical and Financial Performance Measures





Performance Measures: General Information

- 16 Clinical Performance Measures
 - 14 have not changed. Refer to the 2016 UDS Manual (<u>https://bphc.hrsa.gov/datareporting/reporting/2016udsreporting</u> <u>manual.pdf</u>).
 - 2 have been revised (cervical cancer screening and ischemic vascular disease). Refer to Program Assistance Letter 2017-02 (<u>https://bphc.hrsa.gov/datareporting/pdf/pal201702.pdf</u>).
 - Dental Sealants is the only measure that can be zeroed out if services are not provided directly. See the FAQs for details.
- 3 Financial Performance Measures
- See SAC NOFO Appendix B for complete performance measure instructions





Performance Measure Form Field Highlights

- Baseline Data: Zeros are acceptable when data is not available (e.g., newly revised measures)
- Goal: Project for calendar year 2019
- Key Factor Type: Specify at least one contributing and restricting factor
- Competing continuation applicants:
 - Baseline data will not pre-populate for the revised Clinical Performance Measures
 - For prepopulated baseline data, more current data may be provided in the Comments field, if desired
 - Progress field captures progress since the last submission (SAC or BPR)





Question #4

True/False?

New and competing supplement applicants are not required to complete the performance measures forms, since they have never reported in the Uniform Data System (UDS) for the service area proposed.





Question #4 Answer

Answer – False

All applicants must respond to all performance measures





Award Decision Factors





Project Period Length Criteria

- See the Project Period Length Criteria in Section V.2 of the NOFO
- A one-year project period will be awarded if any of the following are met:
 - 10 or more Health Center Program requirement conditions
 - 3 or more unresolved conditions related to Health Center Program requirements in the 60-day phase of Progressive Action carried over into the new project period
 - 1 or more unresolved conditions related to Health Center Program requirements in the 30-day phase of Progressive Action carried over into the new project period





Consecutive One-Year Project Periods

HRSA will not make a SAC award to a competing continuation applicant that has been awarded one-year project periods in the previous two award cycles and meets the criteria for a third one-year project period in FY 2018





Funding Priority (Competing Continuation Applicants Only)

- Priority 1: Program Compliance (5 points)
 - No Health Center Program requirements conditions in 60-day, 30-day, or default status
- Priority 2: Patient Trend (5 additional points)
 - Positive or neutral 3-year patient growth trend (+/- 5%)
 - Must meets the criteria for Priority 1: Program Compliance to receive these additional points





Technical Assistance Contacts

- SAC Technical Assistance (TA) Web site <u>http://bphc.hrsa.gov/programopportunities/fundingopportunities/SAC/</u> <u>index.html</u>
- Program related questions
 - <u>https://www.hrsa.gov/about/contact/bphc.aspx</u> (select Applicant, Application, SAC) or 301-594-4300
- Budget related questions
 - Donna Marx: dmarx@hrsa.gov or 301-594-4245
- Grants.gov related questions
 - support@grants.gov or 800-518-4726
- HRSA EHB related questions
 - BPHC Helpline Web Form

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http://www.hrsa.gov/about/contact/bphc.aspx or 877-974-2742

