



## Fiscal Year 2022 Health Center Controlled Networks Sample Budget Narrative and Personnel Justification Table

### Instructions for Completing the Budget Narrative

The Fiscal Year (FY) 2022 Health Center Controlled Networks (HCCN) Notice of Funding Opportunity (NOFO) requires you to submit a budget narrative that outlines federal costs for each 1-year budget period of the 3-year period of performance. The budget narrative should include:

- A detailed justification to explain the amount requested for all items within each object class category of the SF-424A Section B: Budget Categories.
- Detailed calculations explaining how you derived each line-item expense (e.g., cost per unit).
- Only federal funding requested for allowable costs. **Do not provide costs to be supported through other sources of funding.**

Use the sample below to guide the development of your Budget Narrative. See HRSA’s [SF-424 Two-Tier Application Guide](#) and the FY 2022 HCCN NOFO on the [HCCN technical assistance webpage](#) for detailed guidance on how to complete the Budget Narrative.

### Sample Budget Narrative

Budget Line Item	FY 2022 Budget Period (8/1/2022 – 7/31/2023)	FY 2023 Budget Period (8/1/2023 – 7/31/2024)	FY 2024 Budget Period (8/1/2024 – 7/31/2025)
<b>PERSONNEL</b> – List each staff member who will be supported by HCCN funding. Provide the name (if possible), position title, percent full time equivalency (FTE), annual salary, and adjusted annual salary, if applicable. See the <a href="#">Personnel Justification Table</a> for an example of how to provide the requested details.			
Key Personnel (e.g., CEO, CFO, CIO)			
Administration			
IT Support			
Training Staff			
Quality Improvement and Reporting Staff			
Other Staff			
<b>TOTAL PERSONNEL</b>			

Budget Line Item	FY 2022 Budget Period (8/1/2022 – 7/31/2023)	FY 2023 Budget Period (8/1/2023 – 7/31/2024)	FY 2024 Budget Period (8/1/2024 – 7/31/2025)
<b>FRINGE BENEFITS</b> – List the components that comprise the fringe benefit rate (e.g., health insurance, taxes, unemployment insurance, life insurance, retirement plan, tuition reimbursement). Fringe benefits should be directly proportional to the portion of personnel costs allocated for the HCCN project.			
X% FICA			
X% Health Insurance Coverage			
X% Retirement Plan			
X% Unemployment Tax Insurance			
X% Disability & Group Life			
X% Tuition Reimbursement			
<b>TOTAL FRINGE BENEFITS @ XX% of TOTAL PERSONNEL</b>			
<b>TRAVEL</b> – List expenses associated with travel for staff to attend or lead HCCN-related meetings, trainings, and workshops. List costs categorized by local and long-distance travel. All travel must include registration fees, cost for transportation, lodging, and per diem for each trip. For local travel, include the mileage rate and number of miles.			
HCCN staff travel to XXX PHCs for on-site trainings and facilitation: Two day/one night trip to Y: Airfare @\$XXX + Hotel @ \$XXX/day + Per Diem @ \$XX/day + Ground Transportation @ \$XX/day.  HCCN staff travel to XXX PHCs for on-site training: Two day/one night trip to Z: Airfare @ \$XXX + Hotel@ \$XXX/day + Per Diem @ \$XX/day + Ground Transportation @ \$XX/day.			
HCCN staff travel to HIT Conference: Registration fee + Three day/two night trip: Airfare @ \$XXX + Hotel @ \$XXX/day + Per Diem @ \$XX/day + Ground Transportation @ \$XX/day			
Local Travel (XXX miles @ \$.XX per mile) for driving to Be Well PHC train-the-trainer training			
<b>TOTAL TRAVEL</b>			
<b>EQUIPMENT</b> – List and justify the need for each piece of equipment to carry out the proposed project. Equipment includes moveable items that are non-expendable, tangible personal property with a useful life of more than 1 year and an acquisition cost that equals or exceeds \$5,000. <b>Reminder:</b> HCCN funding may not be utilized to purchase equipment for use at the health center level or any other individual health center operational costs.			



Budget Line Item	FY 2022 Budget Period (8/1/2022 – 7/31/2023)	FY 2023 Budget Period (8/1/2023 – 7/31/2024)	FY 2024 Budget Period (8/1/2024 – 7/31/2025)
Network Fiber Optics Upgrade			
Network-Level Servers to support EHR data integration for Participating Health Centers (X units x \$5000 per unit)			
Network-Level EHR Software Upgrade to improve standardized workflows and reduce provider burden			
<b>TOTAL EQUIPMENT</b>			
<b>SUPPLIES</b> – List the items necessary for implementing the proposed project, separating items into two categories: office supplies (e.g., paper, pencils) and educational supplies (e.g., training manuals). Equipment that does not meet the \$5,000 threshold listed above should be included here (e.g., computers, software). <b>Reminder:</b> HCCN funding may not be utilized to purchase supplies for use at the health center level or any other individual health center operational costs.			
Office Supplies (\$XX per month x 12 months)			
Training Materials (\$Y per fact sheet x ZZZ fact sheets)			
Equipment (X units x \$3500 per unit)			
<b>TOTAL SUPPLIES</b>			
<b>CONTRACTUAL SERVICES</b> –Provide a clear explanation of each contract purpose, timeframe, how costs were estimated, and the specific contract deliverables. A summary of contracts/agreements must be included as Attachment 7. For consultant services, list the total costs for all consultant services and identify each consultant, the services he/she will perform, total number of days, travel costs, and total estimated costs.			
Privacy & Security Risk Assessment of patient data protections and shared data HIPAA compliance (\$XXX flat fee per year)-6 month contract			
Reporting and Evaluation Consultant to aid in performance improvement of data collection, analysis, and reporting processes. Deliverable: final report summarizing performance improvement recommendations (hourly rate: \$XX; estimated number of hours/days: XX; travel costs: XX)			
Health Information Exchange Consultant to support PHCs in information sharing at the community, state, and regional level that will facilitate care coordination. Deliverable: final report summarizing performance improvement recommendations for each PHC (hourly rate: \$XX; estimated number of hours/days: XX; travel costs: XX)			

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<b>TOTAL CONTRACTUAL</b>			
<b>OTHER</b> – Include all costs that do not fit into any other category and provide an explanation of each cost (e.g., audit, legal counsel). Include sufficient detail to justify each item.			
Audit Services (\$XXX flat fee for yearly audit)			
Video Conferencing Telecommunication (\$XX per month x 12 months)			
<b>TOTAL OTHER</b>			
<b>TOTAL DIRECT CHARGES</b> (Sum of all TOTAL Expenses rows above (i.e., Personnel, Fringe Benefits, Travel, Equipment, Supplies, Contractual, and Other)			
<b>INDIRECT CHARGES</b> – Include approved indirect cost rates as supported by the Indirect Cost Agreement in Attachment 10, as applicable.			
X.XX% Indirect Rate (includes utilities and accounting services)			
<b>TOTAL</b> (Total of TOTAL DIRECT CHARGES and INDIRECT CHARGES above)			



## Personnel Justification Table

Provide personnel costs for all direct hire staff and contractors to be supported by HCCN funding including salary and FTE. Use the sample below to guide the development of your personnel justification table and ensure it aligns with your staffing plan in Attachment 6: Staffing Plan. Include additional tables for your FY 2023 and FY 2024 budget periods if proposed personnel differ from year to year. See HRSA's [SF-424 Two-Tier Application Guide](#) and the FY 2022 HCCN NOFO on the [HCCN technical assistance webpage](#) for detailed guidance on how to complete the Personnel Justification Table.

FY 2022 Budget Period Proposed Personnel					
Name	Position Title	Base Salary	Adjusted Annual Salary*	FTE to Support HCCN Funding Activities	Federal Amount Requested
J. Smith	Chief Executive Officer (CEO)	\$180,000	N/A	50	\$90,000
W. MacBain	Chief Financial Officer (CFO)	\$175,000	N/A	10	\$17,500
J. Chu	Chief Information Officer (CIO)	\$175,000	N/A	15	\$26,250
C. Bansal	Clinical Director	\$225,000	\$199,300	10	\$19,930
P. Agarwal	Health IT Coordinator	\$125,000	N/A	45	\$56,250
R. Doe	Program Lead	\$75,950	N/A	100	\$75,950
J. Jones	Quality Improvement Team Lead	\$65,000	N/A	25	\$16,250
H. Black	Project Coordinator	\$65,000	N/A	50	\$32,500
				<b>TOTAL</b>	<b>\$334,630</b>

\* If the base salary is over the federal limitation (currently \$199,300), include the adjusted annual salary.