HRSA Electronic Handbook (EHB)

FY 2023 National Training and Technical Assistance Partner (NTTAP) Cooperative Agreements

HRSA-23-029

User Guide for Applicants

Last updated on August 29, 2022

Contents

This user guide describes the steps you need to follow in order to submit an FY 2023 National Health Center Training and Technical Assistance Partner (NTTAP) Cooperative Agreements application to the Health Resources and Services Administration (HRSA). This user guide does not replace the Notice of Funding Opportunity (NOFO), which details the NTTAP program requirements and the instructions for application development. See the NTTAP Technical Assistance webpage for additional resources: https://bphc.hrsa.gov/funding/funding-opportunities/national-training-technical-assistance-partners-nttaps-cooperative-agreement

You must complete and submit the FY 2023 NTTAP application by following a two-step process:

1. Registering and submitting the application basic information in Grants.gov.
2. Validating, completing, and submitting this application in the HRSA Electronic Handbooks (EHBs).

1. Submitting the Application in Grants.gov

Follow the steps below to complete the Grants.gov application:

1. Find the funding opportunity in Grants.gov searching by the announcement number HRSA-23-029.
2. Download the application package by following the instructions below:

   - Go to www.Grants.gov.
   - Select Search Grants tab.
   - Type HRSA-23-029 in the Opportunity Number field and click the SEARCH button.
   - Select HRSA-23-029 from the matching results.
   - Click the Package tab.
   - Under Actions, click Preview and Download Instructions to access a copy of the NOFO.
   - Other basic forms including the SF-424 required for your application are also included on the 'Preview' page.
   - When you are ready to apply, under Actions, click Apply and follow the prompts.

3. Submit your application basic information (IV. Application and Submission Information, 1. Address to request Application Package) at Grants.gov.
4. Once you successfully submit the first part of your NTTAP application in Grants.gov and it has been downloaded into EHBs by HRSA, the Authorized Organizational Representative will receive an email that will provide the HRSA EHBs Tracking Number assigned to your application.
5. For assistance during the Grants.gov phase of the application, see 'Applicant Support' at https://gditshared.servicenowservices.com/hhs_grants

> **IMPORTANT NOTE:** **Refer to the HRSA SF-424 Two Tier Application Guide (http://www.hrsa.gov/grants/apply/applicationguide/sf424programspecificappguide.pdf) for more details related to submitting the application in Grants.gov and validating it in EHBs.**

2. Starting the FY 2023 NTTAP Application in EHBs

2.1 Application Validation

After you apply in Grants.gov, you will need to start your application in EHBs.

1. Log into EHBs and click on the Grant Applications link under the Tasks tab (**Figure 1**, **1**).

2. Click on the Grants.Gov Application Pending Validation: Validate link (**Figure 1**, **2**).

3. Review information for accuracy and then click "validate". You will then need to enter your award number if you are a currently funded NTTAP, your Grants.gov application tracking number, and your EHBs tracking number (EHBs tracking number emailed after successful Grants.gov submission). Once you entered your information, review it for completeness and click Validate (**Figure 2**).

> **IMPORTANT NOTE:**
>
> **If you do not have a username, you must register in EHBs. Do not create duplicate accounts. If you need assistance registering in EHBs, or experience log in issues or forget your password contact Health Center Program Support (http://www.hrsa.gov/about/contact/bphc.aspx) at (877) 464-4772**

Figure 1: Grant Applications Link
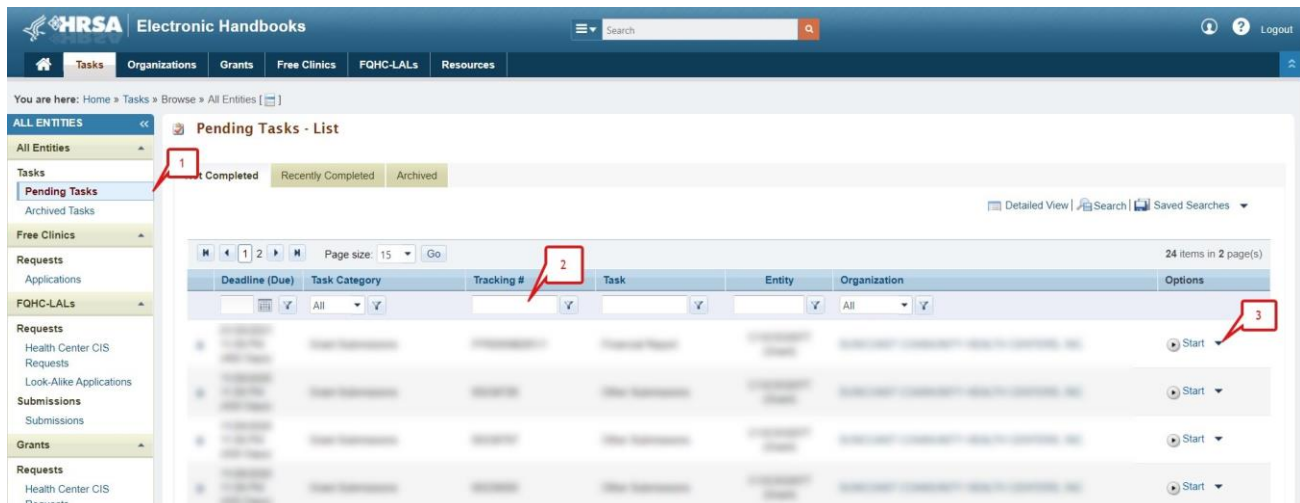
Figure 2: Validating your Grants.gov Application

2.2 Accessing the Application

Once the application is validated in EHBs, you can access it in your pending tasks. To access the application in EHBs, follow the steps below:

1. Click the Tasks tab on the EHBs Home page to navigate to the Pending Tasks (**Figure 3**, **1**) page.
2. Locate the NTTAP application using the EHBs application tracking number (e-mailed after successful Grants.gov submission) (**Figure 3**, **2**).
3. Click the Start link to begin working on the application in EHBs (**Figure 3**, **3**).
4. The system opens the Application - Status Overview page of the application (**Figure 4**). This Status Overview page will indicate when you have completed each section of the application and when they are in progress. Select 'update' to begin each section of the application.

Figure 3: Pending Tasks

3. Completing the Standard SF-424 Section of the Application

As presented in the Status Overview Page (**Figure 4**), the application consists of a standard SF-424 section and a program specific section. You must complete the forms displayed in both of these sections to submit your application to HRSA.

The standard SF-424 section of the application consists of the following main sections:

- Basic Information (**Figure 4**, **1**)
- Budget Information (**Figure 4**, **2**)
- Other Information (**Figure 4**, **3**)

Figure 4: Accessing the Application - Status Overview Page

List of forms that are part of the application package		
Section	**Status**	**Options**
Basic Information		
SF-424 **1**	✖ Not Started	
Part 1	✖ Not Started	📝 Update
Part 2	✖ Not Started	📝 Update
Project/Performance Site Location(s)	✖ Not Started	📝 Update
Project Narrative	✖ Not Started	📝 Update
Budget Information **2**		
Section A-C	✖ Not Started	
Budget Period 1	✖ Not Started	📝 Update
Budget Period 2	✖ Not Started	📝 Update
Budget Period 3	✖ Not Started	📝 Update
Budget Period 4	✖ Not Started	📝 Update
Budget Period 5	✖ Not Started	📝 Update
Section D-F	✖ Not Started	📝 Update
Budget Narrative **3**	✖ Not Started	📝 Update
Other Information		
Disclosure of Lobbying Activities	✖ Not Started	📝 Update
Appendices	✖ Not Started	📝 Update
Program Specific Information		
Program Specific Information	✖ Not Complete	📝 Update

3.1 Completing the Basic Information Section

The Basic Information has been imported from Grants.gov and has undergone a data validation check. You may edit some of this information, if necessary, in EHBs. This section consists of the following forms:

- The **SF-424 Part 1** form displays the basic application and applicant organization information.
- The **SF-424 Part 2** form displays project information including the project title, period of performance, cities, counties, and Congressional districts affected by the project.
- To update information in the SF-424 Part1 and SF-424 Part2, enter and save you revisions to the current information prepopulated in the editable fields (sections marked in red in **Figure 5** and **Figure 6** are *not* editable).

- Update Project Abstract with the details of the project (**Figure 7**)

> **IMPORTANT NOTES:**
>
> **In the Congressional Districts fields, select the congressional district where the organization's administrative office is located in both the 'Applicant' row and the 'Program/Project' row.**
>
> **For the Proposed period of performance, enter 07/01/2023 to 6/30/2026.**
>
> **The Estimated Funding section will update automatically when edits are made to the Budget Information section.**
>
> **For the State Executive Order 12372 Process section, refer to the HRSA SF-424 Two Tier Application Guide (http://www.hrsa.gov/grants/apply/applicationguide/sf424programspecificappguide.pdf) for details related to the Executive Order 12372 process.**

Figure 5: Applicant Information on SF-424 Part 1

Figure 6: Applicant Information on SF-424 Part 2

Figure 7: Project Abstract on SF-424 Part 2

- The **Project/Performance Site Location(s)** form refers to the physical mailing address of the applicant. If the administrative site location and any other office locations are listed in Grants.gov, they are displayed here. As stated previously, you may update this information you provided in the form at Grants.gov.

- After completing the Project Narrative, attach the Project Narrative by clicking on the Attach file button (**Figure 8**, **1**). Refer to the NTTAP NOFO for detailed instructions on completing the Project Narrative attachment.

Figure 8: Project Narrative

3.2 Completing the Budget Information

To complete this section, you must complete the **Budget Information Section A-C** and **D-F** forms in EHB and upload a **Budget Narrative.**

3.2.1 Budget Information – Sections A-C

> **IMPORTANT NOTE: The period of performance associated with the FY 2023 NTTAP awards will be a period of up to three years (July 1, 2023 through June 30, 2026). Therefore, you are only required to enter the budget information for budget periods 1, 2, and 3. Leave budget periods 4 and 5 blank.**

The **Budget Information – Section A-C** form collects information for every budget period in this funding opportunity. Each budget period consists of the following three sections:

- Section A – Budget Summary
- Section B – Budget Categories
- Section C – Non-Federal Resources *(Leave Section C blank; do not enter non-federal funding)*

To complete this form, follow the steps below:

1. Click the Update link for Section A-C 'Budget Period 1' on the Application - Status Overview page (Figure 9, 1).

Figure 9: Budget Information Section A-C Update Link

Section	Status	Options
List of forms that are part of the application package		
Basic Information		
SF-424	✖ Not Complete	
Part 1	✖ Not Complete	📝 Update
Part 2	✖ Not Complete	📝 Update
Project/Performance Site Location(s)	✖ Not Started	📝 Update
Project Narrative	✖ Not Complete	📝 Update
Budget Information		
Section A-C	✖ Not Complete	📝 Update
Budget Period 1	✖ Not Complete	📝 Update
Budget Period 2	✖ Not Started	📝 Update
Budget Period 3	✖ Not Started	📝 Update
Budget Period 4	✖ Not Started	📝 Update
Budget Period 5	✖ Not Started	📝 Update
Section D-F	✖ Not Started	📝 Update
Budget Narrative	✖ Not Started	📝 Update
Other Information		
Disclosure of Lobbying Activities	✖ Not Started	📝 Update
Appendices	✖ Not Started	📝 Update
Program Specific Information		
Program Specific Information	✖ Not Complete	📝 Update

2. The system navigates to the **Budget Information – Section A-C** form for the first budget period of this funding opportunity (Year 1: July 1, 2023 – June 30, 2024) (**Figure 10**).

Figure 10: Budget Information – Section A-C Page

3. To enter or update the budget information for the NTTAP project, click the Update button displayed in the top right corner of the Section A – Budget Summary header (**Figure 10**, **1**).

Figure 11: Section A – Update Page

4. Under the **New or Revised Budget** section, enter the amount of federal funds requested for the first 12-month period (Year 1) (**Figure 11**, **1**).

5. **Do not** update the **Estimated Unobligated Funds** columns. **Do not** enter any non-federal funds in the budget (**Figure 11**, **2**). Only the federal funding request should be provided.

6. Click the Save and Continue button.

> **IMPORTANT NOTE:** **The federal amount refers only to the NTTAP funding requested, not all federal grant funding that an applicant organization receives. Refer to the NOFO details for the maximum annual allowable awards by NTTAP application type (see the Summary of Funding section in the NTTAP NOFO).**

- The **Budget Information – Section A-C** page re-opens displaying the updated New or Revised Budget under Section A – Budget Summary (**Figure 12**).

Figure 12: Section A – Budget Summary Page after Update

Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5					

Section A - Budget Summary							Update

Grant Program Function or Activity	CFDA Number	Estimated Unobligated Funds		New or Revised Budget		
		Federal	Non-Federal	Federal	Non-Federal	Total
National Health Center Training and Technical Assistance Partners Cooperative Agreements	93.129	$0.00	$0.00	$0.00	$0.00	$0.00
Total		$0.00	$0.00	$0.00	$0.00	$0.00

7. In Section B – Budget Categories, you must provide the federal funding distribution across object class categories for the selected 12-month budget period. Click the Update button provided at the top right corner of the Section B header (**Figure 13**, **1**).

Figure 13: Section B – Budget Categories

Section B - Budget Categories		Update
Object Class Categories	Grant Program Function or Activity	
	Training and Technical Assistance National Cooperative Agreements (NTTAP)	Total
Personnel	$0.00	$0.00
Fringe Benefits	$0.00	$0.00
Travel	$0.00	$0.00
Equipment	$0.00	$0.00
Supplies	$0.00	$0.00
Contractual	$0.00	$0.00
Construction	$0.00	$0.00
Other	$0.00	$0.00
Total Direct Charges	$0.00	$0.00
Indirect Charges	$0.00	$0.00
Total	$0.00	$0.00

8. Enter the federal dollar amount requested for each applicable object class category under the NTTAP column (**Figure 14**, **1**).

- 'Construction' is not an allowable use of NTTAP funding – do not enter a federal request in that row.
- Click the Calculate Total button to compute the sum of amounts provided (**Figure 14**, **2**).
- The total NTTAP amount in Section B – Budget Categories must be equal to the total new or revised federal budget amount specified in Section A – Budget Summary of the **Budget Information – Section A-C** form.
- Click the Save and Continue button (**Figure 14**, **3**).

Figure 14: Section B – Update Page

9. Once you have completed Section A and Section B for the first budget period, you can move on to the **Budget Information - Section A-C** form for the next budget period by:

    - Selecting the desired tab (**Figure 15**, **1**); OR
    - By clicking on the Save and Continue button at the bottom of the form (**Figure 15**, **3**)
    - **Only complete the first three tabs in this form (i.e., Budget Periods 1-3). Leave Budget Periods 4 and 5 blank.**

Figure 15: Budget Information – Section A-C Page after Updates

10. If the budget information is identical to the previous budget period:

- If the budget information is identical to the previous budget year: You may click on the **Copy from Previous Budget Period** button (**Figure 16**, **1**) to copy over the information from the previous tab, or

- If your budget information is not identical, you may repeat steps 1 – 9 above to enter the desired budget information and move on to the next budget period.

Figure 16: Budget Information – Section A-C Page for Subsequent Budget Periods

3.2.2 Budget Information – Section D-F

The **Budget Information – Section D-F** page consists of the following three sections:

- Section D – Forecasted Cash Needs
- Section E – Federal Funds Needed for Balance of the Project
- Section F – Other Budget Information

To complete this form, follow the steps below:

1. Section D –
- Forecasted Cash Needs is optional and **may be left blank**.
- You may enter the amount of cash needed by quarter during the first budget period for the federal requested amount. Click the Update button provided in the top right corner of Section D to do so (**Figure 17**, **1**).
2. Section F –
- Other Budget Information is optional and **may be left blank.**
- You may provide information regarding direct and indirect charges in this section. You can also document any relevant comments or remarks in this section. Click the Update button provided in the top right corner of Section F to do so (**Figure 17**, **2**).
3. Finally, click the Save and Continue button on the **Budget Information – Section D-F** to proceed to the next form (**Figure 17**, **3**).

Figure 17: Budget Information – Section D-F

3.2.3 Budget Narrative

1. Upload a budget narrative by clicking on the Attach File button (**Figure 18**, **1**).
   a. If using Excel or other spreadsheet documents, do not use multiple pages (sheets).
   b. **Make sure that all information that needs to be viewed is set in the "Print Area" of the document** if the Budget Narrative is presented as a spreadsheet.
2. Once completed, click on the Save and Continue button to proceed to the next form.

Figure 18: Budget Narrative

3.3 Completing the Other Information section

The Other Information section consists of the Assurances, Disclosure of Lobbying Activities, and Appendices forms. You must complete all three forms to complete this section.

3.3.1 Completing the Disclosure of Lobbying Activities Form

Complete all sections of the **Disclosure of Lobbying Activities** form and click on the Save and Continue (**Figure 19,1**) button to proceed to the **Appendices** form.

Figure 19: Disclosure of Lobbying Activities

Disclosure of Lobbying Activities

> **Note(s):**
> Disclosure of Lobbying Activities form is optional if "No" is selected in the Certification Regarding Lobbying section.

▶ ~~SMYTH ERYRI HOSPITAL DISTRICT~~   Due Date: ~~██████ ██ PM (Due in: █ days)~~ | Section Status: Not Complete

▼ **Resources** 🗗

| View |

Application | Action History | Funding Opportunity Announcement | FOA Guidance | Application User Guide

Fields with * are required

Certification Regarding Lobbying

* **Do you currently receive more than $100,000 in federal funds and engage in lobbying activities? (If "No" is selected, all other questions on this page are optional.)**   ○ Yes ○ No

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (nonappropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING $100,000 in total costs (45 CFR Part 93).

The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the under- signed, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Disclosure of Lobbying Activities

Type of Federal Action	Grant
* Status of Federal Action	Select Status of Federal Action ▾
* Report Type	○ Initial Filing ○ Material Change ● N/A

For Material Change, complete the following information

Year	
Quarter	Select Fiscal Quarter ▾
Date of Last Report	🗓

Name and Address of Reporting Entity

Recipient Type	Prime
Name	SMYTH ERYRI HOSPITAL DISTRICT
Address	1858 CARNARY BOULEVARD FORT EUSTIS TX 10385-2884
Congressional District,if known	N/A

Federal Department/Agency: U.S. Department of Health and Human Services, HRSA

Federal Program Name/Description	National Health Center Training and Technical Assistance Partners (NTTAPs) Cooperative Agreements
CFDA Number	93.129
Federal Action Number	HRSA-23-029
* Award Amount	0

Name and Address of Lobbying Registrant

Prefix	Select Prefix ▾
* First Name	
Middle Name	
* Last Name	
Suffix	Select Suffix ▾

* Physical Address (Required)

Address Type	● Domestic Address ○ International Address [Refresh]

Specify Domestic Address

* Address	Street Number [____] * Street Name [_____] Select One [____▾] Number [_____]
* City	[_____] (Required if Zip is not specified)
Urbanization	[_____] (Used only for Puerto Rico(PR))
* State	[__▾] (Required if City is specified)
* Zip Code (Lookup 🗗)	[____]-[____] (Required if City is not specified)

* Individual Performing Services   [⊕ Add New]

There are no records to be displayed.

[Go to Previous Page]   [1] [Save] [Save and Continue]

IMPORTANT NOTES:

> **If you certify that you are currently NOT receiving more than $100,000 in federal funds, and you engage in lobbying activities, you are not required to complete the Disclosure of Lobbying Activities form.**

3.3.2 Completing the Appendices Form

Complete the **Appendices** form using the following steps:

1. Click on the Appendices link to navigate to the **Appendices** form.
2. Upload the following attachments by clicking the associated Attach File buttons on Appendices form page (**Figure 20**):
    *   Attachment 1: Organizational Chart (min 1, max 1)
    *   Attachment 2: Staffing Plan (min 1, max 1)
    *   Attachment 3: Job Descriptions for Key Personnel (min 1, max 1)
    *   Attachment 4: Biographical Sketches for Key Personnel (min 1, max 1)
    *   Attachment 5: Letters of Agreement (min 1, max 1)
    *   Attachment 6: Summary of Contracts and Agreements (as applicable) (max 1)
    *   Attachment 7: Other Relevant Documents (as applicable) (max 5)
3. After completing the **Appendices** form, click the Save and Continue button to proceed to the **Program Specific Information – Status Overview** page.

Figure 20: Appendices

> **IMPORTANT NOTES:**
>
> **If you have multiple documents for the same category and only one file may be uploaded, scan and consolidate your documents and upload them as a single attachment.**

4. Completing the Program Specific Forms

Expand the left navigation menu if not already expanded by clicking the double arrows displayed near the form name at the top of the page. Click the Program Specific Information link under the Program Specific Information section in the left menu to open the **Status Overview** page for the Program Specific Information forms (**Figure 21**). Click the Update link to edit a form (**Figure 21**, **1**). **Note: Both Form 1A and the Project Work Plan form MUST be completed entirely in EHBs. Do not upload Form 1A or the Project Work Plan into the NTTAP application.**

The **Program Specific Information** section consists of the following forms:

- Form 1A: General Information Worksheet
- Project Work Plan

Figure 21: Status Overview Page for Program Specific Forms

4.1 Form 1A: General Information Worksheet

Form 1A: General Information Worksheet allows you to provide a summary of information related to the applicant organization, indicate the NTTAP Type you plan to apply for, and review the budget information. This form is comprised of the following three sections:

- Applicant Information (**Figure 22**, **1**)
- NTTAP Type (**Figure 22**, **2**)
- Budget Information (**Figure 22**, **3**)

Figure 22: Form 1A

4.1.1 Applicant Information

The **Applicant Information** section is pre-populated with application and grant-related information and may be updated if needed. Complete this section by providing or updating information in the following required fields:

1. In the 'Fiscal Year End Date' field (**Figure 22**, **4**), select the month and day of the applicant organization's fiscal year end date (e.g., December 31) to inform HRSA of the expected audit submission timeline in the Federal Audit Clearinghouse (https://harvester.census.gov/facweb/default.aspx).

2. Select one category in the 'Business Entity' field.

3. Select one or more categories for the 'Organization Type.' If you choose to select 'Other' as one of the Organization Type values, you must specify the organization type (**Figure 22**, **5**).

4.1.2 NTTAP Type

This section allows you to select the **NTTAP Type** that you wish to apply under in your NTTAP application. Choose your NTTAP Type selection from the dropdown list (**Figure 23**, **1**) and click on the Select button (**Figure 23**, **2**).

Figure 23: NTTAP Type Information

4.1.3 Budget Information

Once you have selected your NTTAP Type the **Budget Information** section allows you to validate the maximum allowable annual funding amount against the total Federal funding requested for Budget Period 1 in the **Budget Information Section – A-C** form of this application. Refer to the NTTAP NOFO for details on the maximum allowable award amounts for each NTTAP Type.

The maximum annual award amount for the selected NTTAP Type must be less than or equal to the allowable total Federal funding requested for Budget Period 1.

After completing all sections of **Form 1A**, click the Save and Continue button to save your work and proceed to the next form.

> **IMPORTANT NOTE:**
>
> **If you need to edit the amount requested for the selected NTTAP Type, revisit the total Federal funding requested for Budget Period 1 in the Budget Information Section – A-C form of this application.**

4.2 Project Work Plan

The **Project Work Plan** describes the objectives for the NTTAP type selected and describe targets for the three-year period of performance. Proposed activities should contribute to achieving each objective and be conducted or initiated in the first 12 months of the period of performance. You must select an NTTAP Type in Form 1A before accessing the Project Work Plan to prepopulate the objectives specific to the NTTAP type. If you try to access the Project Work Plan before selecting an NTTAP Type in Form 1A, you will be presented with the following page (**Figure 24**).

Figure 24: Invalid Project Work Plan

> **IMPORTANT NOTE:**
>
> **Each Project Work Plan is specifically tailored to the NTTAP Type selected in Form 1A. Therefore, if you change your NTTAP Type selection in Form 1A, your Project Work Plan along with any previously entered information will be deleted. You will then need to re-enter all of information for the selected NTTAP Type.**

4.2.1   Completing the Objectives

Complete all required Objectives in the **Project Work Plan** by following the steps below.

1. Click on the Update link for each of the required objectives. (**Figure 25**, **1**).

Figure 25: Project Work Plan List Page

2. After clicking Update, you will be redirected to the **Objective Information – Update** page for that objective (**Figure 26**).

3. The requested information must be provided for each required objective for the application to be eligible for review. For each objective, you are required to complete the following sections:

- Objective Details (**Figure 26**, **1**)

- Key Factors (**Figure 26**, **2**)

- Activities (**Figure 26**, **3**)

Figure 26: Objective Information – Update Page

4.2.1.1 Objective Details Section

1. For all objectives, the Objective Description (**Figure 26**, **4**) can be a pre-populated text field, multi - select option, or a free text box.

2. The Number field captures Baseline data and corresponds to the Objective Description. In case of multi-select list, there will be Number field for each outcome, and you must provide the Number value for the outcome(s) selected.

3. Provide the remaining information in the Objective Details section as required. Refer to the information icons next to each of the fields for more information regarding information required in each field (**Figure 26**, **6**).

4. Save your work (**Figure 26**, **7**) and proceed to the next section of the form.

> **IMPORTANT NOTES:**
>
> **If Objective is Access to Comprehensive Care or Emerging Issue (except for Clinical Quality Improvement and Patient Safety), then the Objective Description will be a free text box to be filled by you.**
>
> **If the Objective is Chronic Disease Management or Preventive Services Outcome, then the Objective description will be a multi-select list. You can select minimum of 1 for all the NTTAP except for Clinical Quality Improvement and Patient Safety NTTAP. For Clinical Quality Improvement and Patient Safety NTTAP, minimum of 2 selection is required.**
>
> **The Number field that captures the UDS measure corresponds to the Objective Description field. In the instances where an Objective has multiple Objective Description fields, each option must have a corresponding Number value. This value cannot be negative number and must be a whole number equal or greater than 0.**
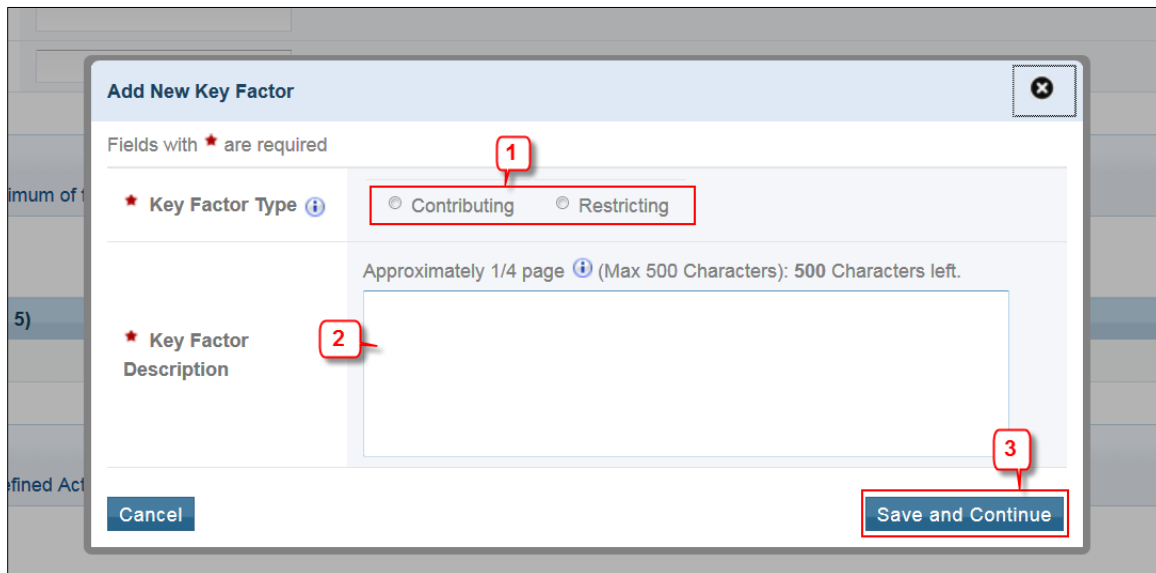
4.2.1.2   Key Factors

1. In the Key Factors section, add key factors using the Add Key Factors button (**Figure 26**, **2**).

2. The system displays an **Add New Key Factor** overlay (**Figure 27**). When adding a Key Factor, identify the Key Factor Type (i.e., contributing or restricting) (**Figure 27**, **1**) and provide the Key Factor Description (**Figure 27**, **2**).

3. Click the Save and Continue button to return to the **Objective Information – Update** page (**Figure 27**, **3**).
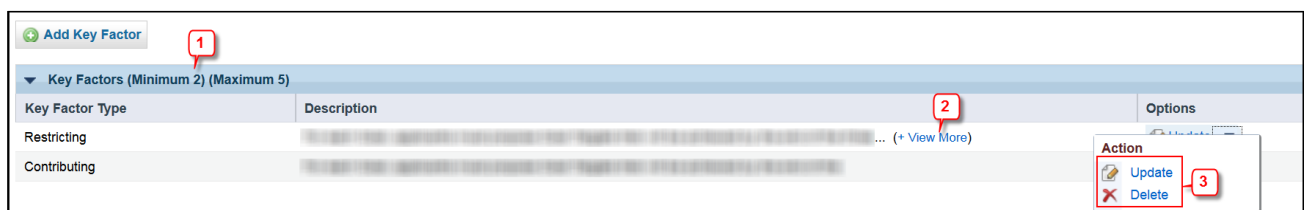
Figure 27: Add New Key Factor Overlay

> **IMPORTANT NOTE:**
>
> **Identify a minimum of 2 and a maximum of 5 key factors. At least 1 contributing factor and 1 restricting factor must be provided.**

4. Upon returning to the **Objective Information – Update** page, the system will display your newly entered Key Factor under the **Key Factors** grid (**Figure 28**, **1**). Click the View More link to view portions of the Key Factor descriptions that are hidden by default (**Figure 28**, **2**). You can also update and delete previously entered Key Factor information (**Figure 28**, **3**).

Figure 28: Key Factors Grid
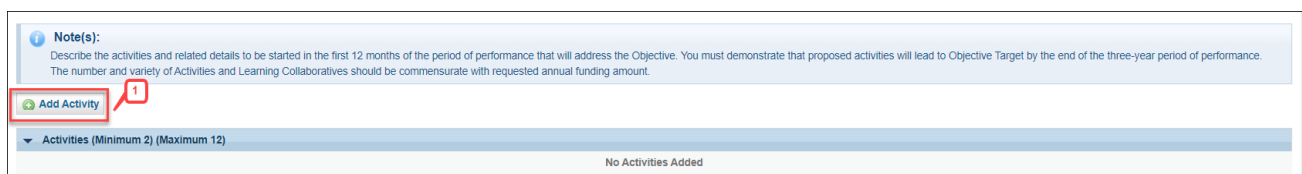
4.2.1.3   Activities

1. In the Activities section, add activities using the Add Activity button (**Figure 29**, **1**).

Figure 29: Add Activity Button

2. The system displays an **Add New Activity** overlay (**Figure 30**). When adding an Activity, select the Activity Audience (**Figure 30**, **1**) (i.e., Learning Collaborative or National Audience).

3. Provide information for the remaining Activity fields as required. Refer to the information icons next to each of the fields for more information about each required field (**Figure 30**, **2**). The Learning Collaborative Behavior Change Target field is required only if you selected "Learning Collaborative" for Activity Audience, and the 'Comments' field is optional.

4. Click the Save and Continue button to return to the **Objective Information – Update** page.

Figure 30: Add Activity Overlay

IMPORTANT NOTE:

You must add minimum of 2 activities for each Objective. Maximum of 12 activities can be added for each objective.

Minimum number of activities as well as minimum number of activities which are Learning Collaboratives for each NTTAP type will be determined by the funding amount requested. Funding table is attached for reference-

Table 1:Number of activities and learning collaboratives by funding level		
Funding Level	**Minimum number of activites across all objectives per budget period**	**Minimum number of learning collaboratives per budget period**
$0-$550,000	16 minimum activites	2 learning collaboratives
$550,001-$1,000,000	20 minimum activites	3 learning collaboratives
$1,000,001 - $1,500,000	24 minimum activites	4 learning collaboratives
$1,500,001 - $2,000,000	32 minimum activites	5 learning collaboratives
$2,000,001 - $7,000,000	72 minimum activites	10 learning collaboratives

If all the objectives have reached their minimum of 2 activities, the remaining activities needed to meet the required minimum can be added to a single or multiple objectives.

The min/max count of activities for the NTTAP type will be recalculated prior to submission if the budget amount is changed on the SF-424 budget summary form.

5. Upon returning to the **Objective Information – Update** page, the system will display your newly entered Activity under the **Activities** grid (**Figure 31**, **1**). Click the View More link to view portions of the Activity field descriptions that are hidden by default (**Figure 31**, **2**). You can also update and delete previously entered Activities (**Figure 31**, **3**).

6. Click on the Save or Save and Continue button on the **Objective Information – Update** page to save your information and proceed to the next Objective (**Figure 31**, **4**).

7. If all the objectives are updated, then click on the Save or Save and Continue button on the last **Objective Information – Update** page to save your information and proceed to the PWP list page.

Figure 31: Activities Grid

5. Reviewing and Submitting the FY 2023 NTTAP Application to HRSA

To review your application, follow the steps below:

1. Navigate to the standard section of the application using the **Grant Application** link in the navigation links displayed at the top of the **Program Specific** forms.

2. On the **Application** - **Status Overview** page, click the **Review** link in the Review and Submit section of the left menu (**Figure 32, 1**).

Figure 32: Review Link

The system navigates to the **Review** page.

3. Verify the information displayed on the **Review** page.

4. If you are ready to submit the application to HRSA, click the Proceed to Submit button at the bottom of the **Review** page (**Figure 33, 1**).

Figure 33: Review Page – Proceed to Submit

The system navigates to the **Submit** page.

5.   Click the Submit to HRSA button at the bottom of the **Submit** page.

The system navigates to a confirmation page.

> **IMPORTANT NOTES:**
>
> **To submit an application, you must have the 'submit' privilege. This 'submit' privilege must be activated by the Project Director (PD) by completing and submitting the application to the Authorizing Official (AO) listed for your organization in EHBs.**
>
> **If you are not the AO, a Submit to AO button will be displayed at the bottom of the Submit page. Click the button to notify the AO that their action is required to submit the application to HRSA (Figure 34, 1).**
>
> **Applicants are strongly encouraged to notify the AO directly and ensure that they leave adequate time for the AO to complete the submission process prior to the deadline.**

Figure 34: Submit to AO

6. The AO must answer the questions displayed under the Certifications and Acceptance section of the confirmation page and click the Submit Application button to submit the application to HRSA.

7. If you experience any problems with submitting the application in EHBs, contact HRSA Health Center Program Support at 1-877-464-4772 (Monday – Friday, 8:00 AM - 8:00 PM ET) or send an ticket through the BPHC Contact Form (http://www.hrsa.gov/about/contact/bphc.aspx).

8. Your application must be submitted by the EHBs application deadline of November 14, 2022 at 5:00 pm ET.