



**Fiscal Year 2023 Health Center Program Service Expansion–
School-Based Service Sites (SBSS)
Non-Competing Continuation Instructions**

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Purpose

The purpose of the Health Center Program Service Expansion – School-Based Service Sites (SBSS) funding is to increase the number of patients who access comprehensive primary health care services through service delivery sites located at schools (preschool¹ through secondary school (i.e., high school)). Submission and approval of your SBSS Non-Competing Continuation (NCC) will provide funding for the SBSS year 2 budget period (May 1, 2023 through April 30, 2024). Year 2 funding is dependent upon congressional appropriation, satisfactory progress, and a decision that continued funding is in the best interest of the federal government.

Submission and Award Information

NCCs will be available starting October 28, 2022, and are due in the HRSA Electronic Handbooks (EHBs) by **5 p.m. ET on December 12, 2022**. HRSA anticipates releasing SBSS year 2 funding on or around the budget period start date of May 1, 2023.

¹ For purposes of SBSS funding, preschool is defined as a school readiness program targeted to children ages 3 and up.

General Instructions

You will complete your NCC in EHBs by providing updated information about the SBSS budget and activities proposed in your SBSS application (HRSA-21-093). To find your SBSS NCC in EHBs, click on the **Grants tab** on the HRSA EHBs Home page to navigate to the My Grant Portfolio – List page. Click on the **Grants Folder** for your H2E grant, then click on the **Work on My NCC Report** link under the Submissions section. Finally, you will locate the record titled “Noncompeting Continuation Progress Report” and you will click on the **Start** link to begin working on your SBSS NCC. Please note after you start working on the NCC, the system will display an Edit link instead of the Start link the next time you access this page. In your NCC you must include all forms and attachments identified in [Table 1: Forms and Attachments](#). Complete all forms online, including the Project Work Plan Update, directly in EHBs. Attachments must be uploaded into EHBs.

NCCs that lack required information will be considered incomplete or non-responsive and will be returned via a “Change Requested” notification in EHBs to provide missing information. If HRSA does not receive your NCC by December 12, 2022, or receives an incomplete or non-responsive NCC, a delay in Notice of Award (NoA) issuance or a lapse in SBSS funding could occur.

Attachments in the NCC are recommended not to exceed **10 pages** in total when printed by HRSA. Do not count the standard OMB-approved forms or your indirect cost rate agreement, if applicable, in the page limit. Narrative documents submitted as attachments must be single-spaced with 12 point, easily readable font (e.g., Times New Roman, Arial, and Calibri) and one-inch margins. You may use smaller font (no less than 10 point) for tables, charts, and footnotes.

Table 1: Forms and Attachments

SBSS NCC Section	Form or Attachment	Instructions
Basic Information: SF-PPR and SF-PPR-2	Form	Complete the SF-PPR and SF-PPR-2. Refer to the Basic Information instructions.
Budget Information: Budget Details	Form	Provide the budget for the upcoming budget period broken down by object class categories and federal/nonfederal funding.
Budget Narrative	Attachment	Upload the Budget Narrative. Refer to Budget Narrative instructions.
Project Work Plan Update	Form	Complete the Project Work Plan Update. Refer to the Project Work Plan Update instructions.
Attachment 1: Other Relevant Documents (if applicable)	Attachment	Upload an indirect cost rate agreement, if applicable. Include other relevant documents to support the proposed project, as desired.

Basic Information

The SF-PPR form displays basic information about your health center. Review and update the information as necessary.

The SF-PPR-2 form displays SBSS information related to lobbying activities, areas affected by the project, and the point of contact. Review and update the information as necessary.

Budget Information: Budget Details Form

In **Section A: Budget Summary**, verify the pre-populated Federal, Non-Federal, and Total budget numbers. The total federal funding requested must equal the Recommended Federal Budget figure that is pre-populated at the top of the Budget Information: Budget Details form. This figure should correspond with the recommended future support figure (Item 33) on your H2E Notice of Award.

Note: The NCC may **not** be used to request changes in the total award, funding type(s), or allocation of Health Center Program funds between funding types. **Funding must be requested and will be awarded proportionately for all funding types as currently funded under the Health Center Program.** You may not add new population types.

In the Non-Federal column, provide the total of the SBSS-specific non-federal funding sources. Enter all other project costs in the non-federal column. As per [45 CFR §75.302](#), you must document use of SBSS funds separately and distinctly from other Health Center Program funds and other federal award funds.

The amount(s) in the total column will be calculated automatically as the sum of the federal and non-federal columns. The amounts for each category in the federal and non-federal columns, as well as the totals, should align with the Budget Narrative.

In **Section B: Budget Categories**, by object class category, provide the SBSS federal funding request for year 2 in the first column and the non-federal funding in the second column. Each line represents a distinct object class category that must be addressed in the Budget Narrative.

Indirect costs may only be claimed with an approved indirect cost rate (see details in the [Budget Narrative](#) section below).

In **Section C: Non-Federal Resources**, provide a breakdown of SBSS-specific non-federal funds by funding source (e.g., state, local) for each type of Health Center Program funding (CHC, MHC, HCH, PHPC). If you are a State agency, leave the State column blank and include State funding in the Applicant column. When providing Non-Federal Resources by funding source, include non-SBSS federal funds supporting the proposed project in the “other” category. Program Income must be consistent with the Total Program Income (patient service revenue) presented in the budget narrative and other NCC components, as applicable.

Salary Limitation

The Consolidated Appropriations Act, 2022 (P.L. 117-103), Division H, § 202, states “None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II,” which is currently \$203,700 as of January 2022. However, this rate may change in 2023. Please use the link under [Personnel Costs](#) to ensure your budget request reflects the most current rate.

The salary limitation reflects an individual’s base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to your organization. This salary limitation also applies to subrecipients under a HRSA grant or cooperative agreement. See Section 5.1.iv Budget – Salary Limitation of HRSA’s [SF-424 Application Guide](#) for additional information. Note that these or other salary limitations will apply in the following fiscal years, as required by law.

Budget Narrative

You are required to upload a line-item Budget Narrative in EHBs that outlines federal and non-federal costs for the SBSS year 2 budget period (May 1, 2023 to April 30, 2024) by object class category. This attachment should align with the budget information provided in the [Budget Information: Budget Details form](#) and with the [Project Work Plan Update](#). In addition, provide a table of personnel to be paid with federal funds, as shown in the example provided in the Budget Narrative on the [SBSS TA webpage](#). Your budget narrative must:

- Demonstrate that you will use SBSS funds for costs that will increase the number of patients served at school-based service site(s).
- Include detailed calculations explaining how each line-item expense is derived (e.g., cost per unit).
- Not include [ineligible costs](#).
- Provide HRSA with sufficient information to determine that you will use SBSS funds separately and distinctly from other Health Center Program support (e.g., H80 awards).
- Highlight changes from the first budget year.

Include the following in the Budget Narrative:

Personnel Costs: List all direct hire personnel who will be supported with SBSS funds, and include their name (if possible), position title, percentage of full-time equivalency, and annual salary. SBSS funds may not be used to pay the salary of an individual at a rate in excess of [Executive Level II of the Federal Executive Pay scale](#).²

Fringe Benefits: List the components of the fringe benefit rate for proposed direct hire staff. The fringe benefits should be directly proportional to that portion of personnel costs that are allocated for the SBSS project.

Travel: List expenses associated with both local and long-distance travel for consultants, direct hire personnel, and/or contractors. Detail travel costs consistent with the organization's established travel policy and in compliance with [45 C.F.R. § 75.474](#).

Supplies: List supplies that support your SBSS project individually, separating items into three categories: office, medical, and educational. Include equipment that does not meet the \$5,000 threshold.

Contractual Services: Clearly state the purpose of each contract, including specific deliverables. You must have an established and adequate procurement system with fully developed written procedures for awarding and monitoring contracts.

Other: Include all costs that do not fit into any other category and provide an explanation of each cost. List EHR license fees for new personnel and health information technology, if any.

Indirect Costs: Include indirect costs in your budget request only if your organization has a negotiated indirect cost rate agreement or is claiming a de minimis rate of 10 percent of modified total direct costs. If your budget includes indirect costs, you must upload a copy of your most recent indirect cost rate agreement as [Attachment 1: Other Relevant Documents](#) or indicate that you are

² OPM "Rates of Pay for the Executive Schedule" link on this website has the most current salary limitation.

using the de minimis indirect cost rate of 10 percent of modified total direct costs under the requirements detailed at [45 C.F.R. § 75.414](#).

Note: If you carry out all or a portion of the project through a subaward (as defined in [45 CFR part 75.2](#)), you must document your determination that, at the time such a subaward is made, the subrecipient meets all the Health Center Program requirements. See Chapter 12: Contracts and Subawards of the [Health Center Program Compliance Manual](#) for additional information.

Ineligible Costs

Year 2 SBSS funds may only be used for allowable costs and may not be used for:

- Costs already paid for by other Health Center Program funds;
- Costs for services and activities that are not provided directly by or on behalf of the health center and health center project;
- Construction activities, including additions or expansions;
- Minor or major alteration/renovation projects (Note: Minor alteration and renovation funds that are unobligated may be carried over to year 2 to complete existing projects. However, no new alteration/renovation costs may be added in year 2.);
- Purchase or upgrade of an electronic health record (EHR) that is not certified by the Office of the National Coordinator for Health Information Technology (ONC);
- Purchase and/or installation of trailers and pre-fabricated modular units;
- Facility or land purchases;
- Vehicle purchases (a mobile unit is not considered a vehicle in this case); and/or
- Concrete or asphalt paving of new areas outside of a building.

HRSA recommends the [HHS Grants Policy Statement](#) to facilitate development of an appropriate budget.

Project Work Plan Update

In your Project Work Plan Update you will:

- Provide an update on activities you proposed in your SBSS application Project Work Plan, and
- Propose new activities that will be supported with SBSS funds, as needed.

Your Project Work Plan Update must outline activities for year 2 (May 1, 2023 – April 30, 2024) that will advance progress on the SBSS objective of increasing the number of patients served at school-based service sites. An [example Project Work Plan Update Form](#) is available for your reference.

Your Work Plan Update Form will pre-populate the Focus Area, Activity Category, Activity Subcategory, and Activity Description information from your SBSS application Project Work Plan. Contact your program contact if the project work plan submitted in your application does not match the Project Work Plan Update in EHBs.

You will review and complete the following fields in EHBs for all pre-populated activities:

- Activity Progress

- Indicate the completion status (Not started; In progress; Completed; Will not complete; or New) of each [activity](#).
- Activity Progress Update
 - For each activity, describe what has been completed to date and what you expect to complete for the remainder of the current budget period (through April 30, 2023), including an expected completion date.
 - If you are adjusting an activity, describe any activity revisions.
 - For each activity that you mark as ‘Will not complete,’ explain the reason that you will not complete the activity and indicate if you are proposing a new activity as a replacement.
 - For each activity marked as ‘New,’ explain the reason for adding the activity.

You may add activities using the “Add Activity” button, which is located at the top of the screen, above the Project Work Plan Update table. You will complete the following fields for all new activities:

- Focus Area
 - Select a Focus Area for each activity you add using the pre-populated [list of services](#). Your selected focus area must align with the service(s) proposed for expansion in your application.
- Activity Category
 - At least one activity category is required per selected focus area.
 - You may select from the [pre-populated list](#) or write in your own “other” activity category.
- Activity Subcategory
 - At least one activity subcategory is required per selected focus area.
 - You may add new activity subcategories by selecting from the [pre-populated list](#) or writing in your own “other” activity subcategory.
- Activity Description
 - For each new activity, describe how the selected activity will expand services to increase the number of patients served at school-based service sites. The description must include a timeframe for completing each activity.
- Activity Progress Update
 - Provide a reason for adding each new activity (e.g., new activity for year 2 based on lessons learned in year 1 regarding outreach to and enrollment of new school-based patients).

Attachment 1: Other Relevant Documents

If applicable, upload an indirect cost rate agreement or other relevant documents to support the proposed project as attachment(s).

Technical Assistance Contacts

ASSISTANCE NEEDED	CONTACT
General Technical Assistance	The SBSS TA webpage contains example forms, a technical assistance webinar recording, and other resources.
Budget/Fiscal Questions	<p>Brian Feldman Senior Grants Management Specialist Division of Grants Management Operations Office of Federal Assistance Management (OFAM) Telephone: 301-443-3190 Email: bfeldman@hrsa.gov</p> <p>Nicole Turner Grants Management Specialist Division of Grants Management Operations Office of Federal Assistance Management (OFAM) Telephone: 301-443-0770 Email: nturner@hrsa.gov</p>
SBSS NCC Requirements Questions	<p>SBSS Technical Assistance Team 301-594-4300 Submit a Web Request at BPHC Contact Form Under Funding, select Supplemental Grant Award</p>
HRSA EHBs Submission Assistance	<p>Health Center Program Support 877-464-4772 Contact Health Center Program Support at BPHC Contact Form Under Technical Support, select EHBs Tasks/EHBs Technical Issues</p>

Appendix A: Project Work Plan Focus Areas, Activity Categories, and Activity Subcategories

Focus Areas:

- General primary medical care
- Mental health
- Substance use disorder
- Oral health
- Vision
- Enabling

Activity Categories and Subcategories:

- Increasing Workforce Capacity
 - Recruiting and onboarding of personnel (direct hire and/or contracted)
 - Training and professional development
 - Expanding care delivery workflows, including new or enhanced referral arrangements
 - Expanding use of telehealth
 - Expanding face-to-face services
 - Other (specify)
- Increasing Organizational Capacity
 - Enhancing telehealth infrastructure and integration
 - Enhancing health information technology
 - Adding other equipment and supplies
 - Other
- Enhancing Physical Infrastructure
 - Adding new site(s) (permanent or seasonal)
 - Adding mobile unit(s)
 - Executing minor alteration/renovation (A/R)
 - Other (specify)
- Enhancing Collaboration and Community Awareness
 - Establishing new or enhanced collaborations with other local organizations
 - Establishing new or enhanced collaborations with other health centers
 - Outreaching to students and families
 - Other (specify)
- **Other** (specify)
 - Other (specify)