

New Access Points Implementation TA Call
December 9, 2013
2:00 PM – 3:00 PM ET

Coordinator: Welcome and thank you for standing by. All participants will be on a listen-only mode for the duration of today's conference. We will hold a question-and-answer session at the end of the conference and if you wish to ask a question, you may do so by pressing star 1.

This conference is also being recorded. If you have any objections, you may disconnect at this time. And I will now turn the conference over to Lisa Wald. You may begin.

Lisa Wald: Thank you. Hello everyone. Welcome and thank you for joining us for today's call on New Access Point Implementation. This is Lisa Wald with the Bureau of Primary Healthcare's Office of National Assistance and Special Populations and I will be facilitating this session.

Our goal today is to provide information to the health centers that received New Access Point grants -- both newly-funded and satellite -- in September and November of 2013. I wanted to let you know that we do have slides for today's session and they are available on our website at bphc.hrsa.gov/technicalassistance/training. Again, that's bphc.hrsa.gov/technicalassistance/training. On Slide 2 of that slide deck, you will see our agenda for today.

So in just a moment, I will turn the call over to (Tonya Bowers), our Deputy Associate Administrator, for some opening remarks. We will then review the Funding Opportunity Announcement that you all applied to, followed by an overview of key terms and conditions on your Notice of Award, or NoA. We recommend having your NoA in front of you for this part of the call so you can follow along and reference the

specific terms and conditions on your award. We will then review some information about One-Time Funding and end our call with some time for questions and answers. So I will turn the call now over to Tonya Bowers.

Tonya Bowers: Thank you Lisa, and good morning and good afternoon to everyone on the call. This is, again, another really exciting phone call for us for - simply because it's such a great opportunity to have this time with some of our new grantees, which we are so happy to have you join our family, as well as to our existing grantees, who have made this great commitment to expand access in their communities, and so we're really excited to be able to have another opportunity to talk with you today.

A couple of things just about today's call: as you know, there is a lot of attention on the Health Center Program today and all of the great work that you're doing. And so what we're going to be doing today is to outline some of the expectations that we have that were outlined both in the funding opportunity that you applied to as well as the Notice of Award that you received and, as always, we would be remiss in making sure that before we go any further, that everyone on the phone can guarantee us that they've reviewed their Notice of Award from beginning the first page to the last page because there's some really critical information in there, and we'll be going a lot of that critical information on the call today.

And so, with that, I just want to highlight two of the most important things that I think we'll be covering and that you should pay really close attention to, and that's really around the expectation to begin services within 120 days of your awards and, for many of you on the phone, those dates do vary a little bit but we really do have a great expectation of - what you demonstrated as part of your successful application, you have an Implementation Plan that would be - that would demonstrate that you could be successful within 120 days, so we'll outline for you how you can actually make sure you can actually meet that expectation, as well as demonstrating full operational capacity within two years of receiving your grant. These are two really important goals - milestones for us as part of the implementation of your new access

points, and so we want to give you a really good head start with the information that we're going to be providing to you today.

As always, we will work very closely with you, both in this immediate time right now, as well as the coming months and years to make sure that you're successful and you're able to really do the great things that we know you can do to expand access in your community. So, like today's call, we will be available to help you and to clarify any of the materials that we're going over today, again, today and into the future. So I want to congratulate you all again on such a great accomplishment with your New Access Points and we really do look forward to working with you into the future. And I will turn it now over to Lisa.

Lisa Wald: Thank you. Thanks Tonya. So our next presenters are with the Office of Policy and Program Development and they will provide an overview of the Funding Opportunity Announcement and Notice of Award, so I will turn the call over now to Joanne Galindo.

Joanne Galindo: Thank you. So we have some slides in the slide deck, so this set starts on Slide 3. There are a few key changes in the New Access Point Funding Opportunity Announcement -- or I'll call it the FOA -- in 2013 that impacted both the applications that were selected for funding and the process for implementing and monitoring the funded NAP projects.

First, we made some changes to the Need for Assistance worksheet, which was Form 9 in your application, and that resulted in more points being awarded to applicants whose communities have the most significant health disparity. Second, we also revised the priority points, which resulted in more points being awarded to applicants whose communities have minimal health center presence. Now, of course, all the applications did go through the objective review process, so combining all these ways that we looked for the most communities that have the most need, the NAP awards that were funded demonstrate both significant healthcare needs and access

challenges among their target populations and your grant awards were funded because of what you proposed and the need in your communities.

If you go to the next slide, Slide 4, both the NAP Funding Opportunity Announcement and the Terms and Conditions on the NOA, the Notice of Award, are based on health center program requirements and we've - in the NAP FOA, we had some revised eligibility requirements that we included that at least one proposed NAP site must be a full-time, permanent site, and that primary medical care must be the main purpose of the NAP project. If you go to Slide 5, you'll see that throughout the FOA, we stress the requirement to be open, operational, and compliant within 120 days of the Notice of Award. And on Page 3 of the FOA, we clarified that grantees must demonstrate compliance at the time of the application with the requirements of section 330 of the Public Health Service Act or a detailed plan demonstrating the necessary actions to become compliant - excuse me, to become compliant within 120 days of the Notice of Award. Also, grantees must demonstrate readiness to initiate the proposed project, and that means that the proposed new access points must be operational at providing services in the community and population within 120 days of the Notice of Award.

On Page 5 of the FOA, we also clarified that failure to meet these program requirements and expectations may jeopardize Health Center Program grant funding through progressive action conditions placed on the Notice of Award. And Beth's going to talk a little bit more about that later. On the next, Slide 6, to ensure that this requirement was addressed, we asked that an Implementation Plan be submitted and it should outline a plan for ensuring all - full program compliance within 120 days of the Notice of Award and detailed action steps the grantee will take to ensure that, within 120 days of the Notice of Award, all the proposed sites will be open and operational, have appropriate staff and providers in place, and begin to deliver services to the proposed target population. The Implementation Plan will be used as a tool for monitoring technical assistance and some of you may have received a condition on your Notice of Award to submit a revised Implementation Plan and

others of you may be asked by your Project Officer to revise the Implementation Plan, so please report to your Project Officer to - accordingly to look at your Implementation Plans and ensuring that compliance and operational capacity will take place within 120 days.

Also, on Page 4 of the FOA, we stated that it is expected that full operational capacity, as outlined in your NAP application, will be achieved within two years of receiving this NAP award, including service to the number of patients projected in the application. And Beth is going to talk a little bit more about that soon too. So on Slide 7, I just wanted to bring your attention back to the Summary Page, which was also new this year in the Funding Opportunity Announcement. And on this form, you've viewed and certified many of the important aspects of the NAP projects, including the sites, One-Time Funding, and proposed patients to be served at full operational capacity.

So now, I'm going to turn it over to Beth Rosenfeld, also with the Office of Policy Program and Development, and she's going to talk about the Terms and Conditions relevant to this implementation.

Beth Rosenfeld: Thank you very much, Joanne. It's a pleasure to be here. This is Beth Rosenfeld and I work in the policy branch of OPPD. And for the remainder of the presentation today, I think you will find it helpful to follow along in your Notice of Award and I'm going to try to go over things generally in the order in which they appear on your award.

So starting on Slide 9, we're going to talk about some of the very grantee-specific types of conditions that are appearing on your awards, and the first set have to do with scope verification conditions and these are the ones that are due within 120 days; they are - and that is titled right above the condition - and they have to do with both sites and services. The site - for all grantees, the site that's noted on that NoA is the address that's being pulled in from your Form 5B and the service sites. And of

course, if your application contained more than one site, then you will have a matching number of site verification conditions for that.

You will also state, in most cases, a verification condition having to do with services. If you're a newly-funded grantee, that will be one specific verification condition that has to do with a set of services for which you said you were going to provide, and in cases for existing grantees, getting a satellite award, you too may have some service verification conditions if you propose to provide a service in a different way that it already appears in your approved scope of project.

So moving along to Slide number 10, you will actually have what we call an electronic deliverable created in EHB, and if you go in there, you can see that. And that's where you will verify your site and services, as applicable, as being operational. And we've included on that Slide number 10 a PAL that we wrote in 2009 and there's a link right there that gives you the step-by-step process for how you go about doing that, so we won't go into that in detail today. You also can get assistance regarding this process by checking the EHB resources or contacting the BPHC Help Line.

We included Slide number 11 so you can see exactly how a scope verification condition text is going to appear in your NoA, so it's going to list out right away what the due date is within 120 days and, in this case, this is a site example and this should match your site address as you've indicated on your Form 5B. So one of the questions that comes up with great frequency is, "What does it mean for the NAP site to be operational?" So therefore, "When can I actually verify the site as being operational through this process?" So the way we are defining that is that some level of primary care medical services are actually available at the site that you're proposing to verify, and that services are being provided to patients of the proposed NAP service area/target population. So those are the two criteria that, if you're meeting those, then you can go in and actually verify your operational date at that point in time.

Another one of our very frequently asked questions is, “What happens if the original site proposed in the Form 5B of the NAP application is no longer available?” And of course, HRSA recognizes that there are circumstances that occasionally occur that are beyond the control of the health center that impacts the ability to actually have the site open and available, that as you intended when you submitted your NAP application. So in those cases, what you would do is submit a Change in Scope to request to add a new comparable site through the CIS process, which is also an Electronic Handbook process.

And so what you - what do we mean when we say comparable? Well, what we mean is, that you are serving all the same zip codes that you had indicated in your Form 5B and, therefore, accessible to that same target population that you spoke to in your NAP application, and that you also have comparable service delivery capacity within that site. And so, essentially, that means that you would be able to provide the same services that you had indicated; you’d be able to serve the same number of patients, the same number of visits; you’d be able to accommodate the same number of exam rooms, square footage, that type of thing. So that’s what we mean by “comparability.”

So moving on to another type of grantee-specific condition, as Joanne mentioned, there were - are a number of grantees who received an Implementation Plan condition -- not everyone, but some did -- and so this was done as a result of some determinations during the pre-funding review process. And so those situations would have been either that the One-Time Funding had some time-sensitive issues identified, relative to the budget of scope of what was being proposed, and the ability to be able to do that within the timeframe specified.

Another reason why you may have gotten this condition is that the steps that you presented in your Implementation Plan either to become operational within 120 days or to become compliant within that timeframe lacks sufficient detail. So what - Project

Officers will likely be in touch with you regarding how you can respond to your own specific situation and resubmit that Implementation Plan with more detailed steps on how you're going to achieve either operational capacity, compliance, or both.

So now I'm going to move on to another section of the NoA and I do want to acknowledge that there are some special grantee-specific conditions that have to do with One-Time Funding, and Matt will address those next. So I'm moving on to the section of the NoA that's called Grant Specific Terms. And I'm going to talk specifically about the one that starts with the Notice of Award is issued to support the NAP application and actually cites the HRSA FOA, HRSA-13-228.

So this is the term that speaks to both the duration and the amount of the award that's being given. So it's going to define for you the total federal funding dollars associated with this period of time, so that number, that federal funding amount, is going to match the amount that appears on Page 1 of your NoA. So in addition to that, it's going to address the exact timeframe for this initial NAP award and in all cases where there was one-time funding requested in the application, it will also identify that and the amount of that as well. It will also indicate what the ongoing budget period is for you as a grantee and it will reference the ongoing target level of funding for the following budget periods.

So I'm going to take a step back and try and give you a couple examples. So if you were a newly-funded grantee, your initial budget period started either -- if you're in the cohort that was funded in September -- it started either September 1 or in the second cohort, November 1. And the initial budget period for all folks was, in the cases of the newly-funded grantees, slightly more than 12 months. For the September portfolio, they were given 14 months, so your next budget period will begin November 1st, 2014. And for the group that was funded in November, generally, folks were given 14, 15, or 16 months and all of that is identified for you within this particular terms.

So for the satellite grantees, the funding aligns with your existing budget period. That is always the case when we do supplements. For example, though, if you are a grantee with an April 1 start and you received a NAP award in November, then you would have been funded for either 5 months until the end of your existing budget period, or possibly for 17 months. All of that is spelled out for you in this award, so hopefully that will be clearer to you when you go back and review that.

So the next section of the NoA that I'm going to talk about is the section called Program-Specific Terms and this is the section where you will find the two new terms of the award, as Joanne alluded to both of those in the earlier conversation. And these are the ones that are going to explain to you how HRSA will be holding NAP recipients accountable for carrying out their NAP projects as they proposed in their app - in their NAP application.

So the first one has to do with the requirement to be operational within 120 days and so, specifically, this term - and for those that were newly funded, I think this term appears in almost all cases at the very end of that section, and that's the 11th term on the sample that I picked up, so if you would like to look at that, that might also be helpful. So at least one-time full - one full-time, permanent, primary care site as proposed in the NAP application must be verified as operational within that 120-day period, and that's reiterated in this particular term.

Also, as Joanne mentioned, it was a requirement in this FOA that at least one of your sites meet that criteria of being full-time and permanent. So it was possible that more than one was proposed in your application; this term speaks to at least one. So the other piece of this particular term explains what happens if you're unable to do so. So failure to implement in the timeframe will result in a Progressive Action condition and drawdown restrictions being placed on the health center award.

And so if you go to the next slide, which is Slide 17, for - especially for those of you that are newly-funded, we're giving the reference for the PAL 2010-01 that talks about our Progressive Action process, and so you might find that a helpful resource to go to following the presentation. But essentially, Progressive Action is our process for monitoring deliverables and doing it through a time-phased approach. And so the Progressive Action condition starts with a greater time period and gives you multiple time periods for responding to the condition.

The next term is the one that has to do with full operational capacity within the two years and this one explains, again, as Joanne presented and as was iterated in the FOA numerous times, that you're expected to achieve full operational capacity as outlined in the NAP application within two years of award. So I'm sure you're wondering, well, what exactly do we mean when we say full operational capacity, so how we're defining that is serving the number of patients projected on your Form 1A, which was that General Information Worksheet of your NAP application. And so if you quickly just flip to the next slide, you can see the Form 1A excerpt and I - and the number right there -- I think it's in red "X"s for those of you that have it up on the screen -- the patient number that you said you would be achieving at the end of that two-year project period. So that's your reference for the patient number.

In addition to that, you will be reporting on your progress in terms of reaching your goals throughout - or through the budget period progress report process, so each year there's a reference to the ability to narratively discuss how you're doing relative to the NAP award. And then the other thing included in the term is language that explains that failure to reach that goal could result in withdrawal of support of all or part of the NAP award.

And now I'm going to turn it over to Matt Kozar of the capital branch, who's going to speak to you specifically about terms and conditions that relate to the one-time funding.

Matt Kozar: Thank you Beth.

So if you jump ahead a few slides to Slide 21, that's where we'll begin to discuss a few brief points related to the NAP One-Time Funding. And this really only pertains to those health centers that requested up to \$150,000 in year one of the application proposal budget.

The allowable uses of the NAP One-Time Funding could be for equipment-only purchases, minor alteration/renovation activities with equipment or minor alteration/renovation activities without equipment. The One-Time funding cannot be used for new construction activities, whether it's stand-alone construction or increasing the square footage of an existing building or any major renovation costs - that would be a total project cost that exceeds \$500,000. Depending on the project type, whether you asked only for equipment only or for an accommodation of the minor alteration/renovation with or without equipment, there will be a number of conditions or reporting requirements that will be listed on your Notice of Award. So make sure that you reference your Notice of Award to understand what to respond to related to the conditions which, for the most part, were added based on the information that was still necessary for HRSA to evaluate what your project activities will consist of, or for the reporting requirements which you're to respond to as you implement the activities or the projects as you outlined for your One-Time Funding.

If you go to the next slide, Slide 22, just a few couple reminders: the 120-day operational requirement for the NAP award must be met, regardless of the activities you proposed for One-Time Funding. One-Time Funding activities do not have to be completed within the 120-day operational period, but grantees - so grantees may use the One-Time Funding within the first year of the NAP award. If One-Time Funding was not requested in the NAP application, health centers cannot then request funds to be budgeted for One-Time Funding activities.

And then the last slide, Slide 23: any changes to the One-Time Funding activities, whether it's shifting the types of equipment, shifting from the eight-hour project scope to something else, or as Beth alluded to earlier, if you need to change sites, any of those changes should ultimately be evaluated by the H80 grant Project Officer, and then based on those changes, it could result in the need for a prior approval request as well as some additional information related to One-Time Funding activities and how they may be impacted.

So now at this point, I'll turn the presentation back over to Lisa Wald.

Lisa Wald: Great. Thanks so much, Matt. So we'd like to now take questions that you may have about the material that we've covered today. If you have specific questions that you think may only apply to your health center, we would recommend that you reach out directly to your Project Officer after the call so that you can receive information that's tailored to your unique situation.

So Operator, if you can give the instructions at this time for submitting questions?

Coordinator: Yes, of course. So at this time, if you would like to ask a question, please unmute your phone, press star 1 and record your name clearly at the prompt. And your recording is required so that your question can be introduced. So again, press star 1 to ask a question at this time and it will take a moment or two to queue up. Please stand by.

So it looks like we have quite a few questions queuing up. One moment.

Okay, so our first question here is going to come from (Jonathan Brown). Your line is now open.

(Jonathan Brown): Good afternoon.

Lisa Wald: Good afternoon.

(Jonathan Brown): Two questions: first question is regarding the 120-day operations. On Slide 12, there is a brief definition of what that means. Can you elaborate a little bit on that in some detail? And then the second question is, given the fact that there were some awards given in November, particularly with our health center, the timing of some of the One-Time Funding activities we're planning have been affected by the time of year, you know, based on the holiday seasons and the weather and can you talk a little bit about if extensions are possible?

Beth Rosenfeld: Sure. This is Beth. I'll try and handle the first part. I guess I'm not sure - maybe you can tell me what area it is that you have a question about, but for the site to be considered operational, you have to be providing some level of primary care medical services so, I mean, that's basically because that was the primary purpose of the New Access Point funding and we are aware that some sites were being proposed or some level of service was being provided but perhaps not primary care, so this - it's important that the primary care be beginning by that time and that you are actually seeing patients from that service area that was proposed in your NAP application and that can be, you know, should be from the zip codes that you included - when you filled in your Form 5B, you listed a number of zip codes to represent your service area.

Is there something else more specifically we can help with?

(Jonathan Brown): I guess my - the details behind the question is, if we can't get the site to full capacity, could we propose multiple exam rooms, behavioral health, etc.? And it looks like based on the schedule we've received or we've heard about from contractors, we might be able to get one provider at that site within 120 days seeing patients - not for 32 patient contact hours a week, but maybe for something less than that.

Beth Rosenfeld: And that would meet the criteria spelled out here.

(Jonathan Brown): Perfect, thank you for the response.

Matt Kozar: And related to the second question that you had with the One-Time Funding...

(Jonathan Brown): Yeah.

Matt Kozar: ...activities and exception requests, you should really contact your Project Officer to discuss, you know, what impacts there are with respect to, you know, the timeframes you're receiving related to your project's scope, and discuss, you know, with them what would be reasonable for extensions related to the One-Time Funding requirements.

(Jonathan Brown): Will do. Thank you, Matt.

Coordinator: All right, our next question is going to come from (Jackie). Go ahead, your line is now open.

(Jackie): Hi, good afternoon. Thank you for this informational call today. I just wanted to know if there's a resource - we got a number of conditions specific to required services or additional services. Is there a resource that kind of explains what describes these services that are listed or - as part of the program requirements?

Beth Rosenfeld: I'm going to assume that you're an existing grantee because that's the most likely scenario...

(Jackie): Yes.

Beth Rosenfeld: ...that it would have appeared on your award and so it sounds like what might have happened is when you completed your New Access Point application, you checked services that you may not have currently on your Form 5A or you may have proposed to provide them through a different mode that triggers, in our world, a Change in Scope. And so that's how the system is set up, so it would list out all of those services where one of - either one of those scenarios would have occurred.

(Jackie): Okay. So if this is - it's a scope verification form on EHB and I'm just, you know, I just want to make sure that we're, you know, describing the services as expected, in a sense. Because there's, for example, there's one that just said cancer. We're not sure if that's cancer screening, cancer treatment, so if there's some way that - some description of what these services are, in terms - from HRSA's point of view.

Beth Rosenfeld: Right. I think your Form 5A would have that on there.

(Jackie): Okay.

Beth Rosenfeld: Certainly your Form 5A from your NAP application.

(Jackie): Okay. All right, I'll look there.

Beth Rosenfeld: But if you find that you checked something incorrectly as a satellite grantee, you can indicate "not implemented" but you should talk to your Project Officer about that before.

(Jackie): Oh, great. Thank you so much.

Coordinator: Okay. Our next question here comes from (Emilia Walford). Your line is now open.

(Emilia Walford): Yes, I just wondered if you could repeat to the slides. I can't seem to get to the slides today.

Lisa Wald: Sure. It's bphc.hrsa.gov/technicalassistance/trainings, and there's a list of trainings on that page. You'll need to find the one for the New Access Point Implementation Technical Assistance call and the slides will be there.

(Emilia Walford): Thank you.

Lisa Wald: That's also where we will post the call recording and transcript after the call today.

Coordinator: Okay, our next question here comes from (Ross Brooks). Your line is now open.

(Ross Brooks): Hi, thank you. We've got a New Access Point award and are planning to be fully operational for a satellite site within 120 days. The Notice of Award - the dollars look like they are retroed back to November 1st for us. My question is, given that we're using current staff to get the NAP operational within 120 days, is it appropriate to be expensing the staff against this grant retroed to November 1st within the spirit of the budget that we submitted?

Margaret Davis: Hi Ross, this is Margaret Davis. Yes, that's acceptable. We want to make sure that you're expensing dollars based on the cost incurred at the beginning of the project and all the NoA's, I think, have that November 1st date. It does not - it's not required that only new staff hired under this award would be - could be charged to that grant dollar amount or grant fund.

(Ross Brooks): Okay, excellent and so - and thanks, Margaret. And so, for example, our medical director is - and our HR manager are working on hiring staff and getting folks up to speed and credentialing and privileging, so it'd be appropriate to expense the relevant

amount of those individuals to this grant? So focused on bringing the New Access Point up to speed.

Margaret Davis: Right, so you just want to make sure that you're accounting for things that are happening as they're happening. So if you budgeted ahead of time in your ongoing H80 100% costs for your medical director, then you wouldn't want to put them in both - two times, but...

(Ross Brooks): Got it.

Margaret Davis: ...your accounting at the end of the day is where you want to make sure that that's all accurate.

(Ross Brooks): Got it, so if I put 100% of my medical director in the former H80, I shouldn't have 125% of him expensed for the New Access Point? Makes...

Margaret Davis: Brilliant.

(Ross Brooks): Yeah, makes - okay. Perfect, thank you.

Margaret Davis: Thanks for your question.

Margaret Davis: (Unintelligible), (Ross). Good luck.

(Ross Brooks): Thank you.

Coordinator: Okay, we do have quite a few questions left in queue here. Our next is going to come from (Terry Jones Clark). Your line is now open.

(Terry Jones Clark): Yeah, hi. Good afternoon. I just actually want to thank you guys. My question has been answered but this is a great opportunity for all of us, so thanks much.

Lisa Wald: Great, thank you. Thanks for joining us.

Coordinator: And just a reminder to all participants, if you do find your question has been answered, you may remove your question from queue by pressing star 2. So move on to our next question, which comes from (Emilia Clarke). Your line is now open.

(Emilia Clarke): Hi, thanks. We went out to the EHB to complete our scope verification following the directions that were sent out as well, but it - we could not find anywhere in the EHB where - we're already a (look-alike) so we have to log in that way, but we couldn't find where the New Access Point had been connected to us so that we could go in under tax and submissions. Is there someone we need to follow up with to get it connected to us?

Matt Kozar: Yeah, you want to contact the BPHC Help Line. Do we have contact information...

(Emilia Clarke): Yeah, we went that way. I just didn't know if there was someone else that we could...

Matt Kozar: Yeah, they'd be the best resource for you to...

(Emilia Clarke): ...follow up with.

Matt Kozar: ...to contact. They can work you - walk you through the technical piece of the EHB. But, I mean, if you're going in through your look-alike thing...

Woman: (Unintelligible).

Matt Kozar: ...that's not the appropriate mechanism to get into your H80 grant. You need to get into your H80 grant folder to access the conditions and deliverables associated with that grant.

(Emilia Clarke): Okay. All right, thank you.

Matt Kozar: Sure.

Lisa Wald: For anybody who's looking for that information, you can reach the BPHC Help Line at 877-974-BPHC or you can e-mail them at bphchelp@hrsa.gov.

Coordinator: Okay, our next question we have in queue here comes from a (Ron Kamp). Your line is now open.

(Ron Kamp): Yes, thank you so much. Question about - going back to the 120 days. We were notified six days after the 1st of November and I was wonder - I had two questions: one, can I get those six days back? And also, we had a lot of inclement weather where I'm located and I've been trying to get answers about that and the Christmas holidays and New Year's and all that - Thanksgiving that we lost, if we were going to be able to recoup some of those days because we're really under a tight schedule and no - so far, nobody's been able to answer those questions for me because I've tried. So I sure would appreciate any help.

Beth Rosenfeld: This is Beth. I'll start and I think others have - might have some contributions to your numbers of questions. Essentially, the 120 days begins from your NoA issue date so that's the date and I think you will find that in the top part of your Notice of Award.

(Ron Kamp): Yeah, I saw that; I was just hoping we would get those six days back that we were - that they didn't notify us.

Beth Rosenfeld: I mean, just to point out that the 120 days is the date by which we - that you committed to have something open and that we are monitoring you against, but it is not your final opportunity. So even though you are in progressive action during that period of time, you will have a period of time in which you can verify it as operational. It's just that we will be closely monitoring to be sure that we, you know, can assist you and support you because we really want you to be successful in actually becoming a new access point.

(Ron Kamp): Well, maybe that answers what I needed because we're - we can probably finish pretty close, but it may be 10 days after the 120 or something like that and that was my main concern.

Beth Rosenfeld: Yeah, and if it - I - then we put a condition on your award and you are able to satisfy it, we will remove it.

(Ron Kamp): Okay, well thank you very much.

Coordinator: Our next question is coming to come from - I believe the name is (Deanne)? Your line is now open.

(Deanne): Hi. Hello?

Woman: Go ahead.

Woman: Hello.

(Deanne): Hi, I'm so sorry. Okay, so we have our terms and conditions regarding the 120 days and I do have a couple of sites that are on there. You said that only one of those sites would have to follow the 120 days or do all of the sites have to be operational in 120 days?

Beth Rosenfeld: The requirement is for at least one of the full-time permanent primary care sites. So I'm not sure - some folks had other sites that wouldn't meet that threshold, but if you happened to have had more than one that met that criteria, then the requirement applies to at least one.

(Deanne): So just one out of the three that I have?

Beth Rosenfeld: Assuming all three are full-time, permanent sites - primary care sites.

(Deanne): Okay. All right, thank you.

Coordinator: Okay, we do have about nine questions left here. Our next one's going to come from (Terry Mackey). Your line is now open.

(Terry Mackey): Yes, we had a question about how quickly we can process a Change in Scope because it looks like we're going to need to do a Change of Scope. How long does that take?

Beth Rosenfeld: The first thing you need to do is have a conversation with your Project Officer. It does take a while to complete. It's a checklist that has a number of questions and they can give you some guidance on exactly what we're looking for relative to that comparability piece that we spoke to a little bit earlier, and it would be really important to include all of that information the first time you submit because that will facilitate quicker processing.

(Terry Mackey): Okay thank you.

Coordinator: And our next question is going to come from (John Calvin). Your line is now open.

(John Calvin): Good afternoon. We received an award for a 13-month period and we are having to do a carryover because our fiscal year just ended and it hasn't been 120 days to be operational yet so we haven't extended any of the money. So I was wondering, for the carryover, if we're able to request the entire amount of that 13-month award period? I didn't know what would happen to those additional funds since we didn't have time to get operational and since we were issued the award on 10/25 and it's effective November 1st, so the 120-day mark's in February.

Margaret Davis: I - this is Margaret Davis. And so I will say that if you had no expenses incurred then in November, in terms of the planning of executing or implementing of this site, then I think that you can talk to your Project Officer because they'll be reviewing any carryover requests that you make, but understandably that it's a 13-month and you only had, you know, the one month left in your existing budget period. I would imagine that you had some level of effort or things that you were doing during the first month after award, but that's for you to look at in terms of what you budgeted and what you account for in your account system.

(John Calvin): Okay. Thank you.

Coordinator: Our next question will come from (Anirudh Matil). Your line is now open.

(Anirudh Matil): Hi, my question is about some level of primary service - medical service available. Can you give us a few examples of exactly what you mean when you say, "some level of primary service available" and the 120-day period?

Beth Rosenfeld: Well I think the example that an earlier caller gave is a good one. I mean, maybe you had intended ultimately to have three or four different types of providers, maybe an OB, a pediatrician and a family practice doctor. If you were only able to have the family practice doctor available and providing services at 120 days, that would meet the threshold.

(Anirudh Matil): Okay. Makes sense. Bye.

Coordinator: And this is a reminder, if you do find your question has been answered, you may press star 2 to remove your question from queue. Our next question here is coming to come from (Erin Pak). Your line is now open.

(Erin Pak): Hi, we're a new grantee and former Look-Alike and I have a question regarding mental health. Up to this point, we have not been able to bill Medicaid. I'd like to know, now that we're a (unintelligible), if we may bill Medicaid or if we have to wait until a certain magic time that you announce. And the second question regarding mental health is, if we're able to bill when ASW's work is co-signed by an LCSW or psychiatrist. That's it.

Beth Rosenfeld: This is Beth and I'll try to start out. I think that you're referring to things that are very state-based with your Medicaid agency.

(Erin Pak): Oh, okay.

Beth Rosenfeld: And I'm not familiar with states that would be treating the FQHC Look-Alikes differently than the actual funded health centers, but maybe that's something that your PCA might be able to help you out with.

(Erin Pak): Okay. By the way, we're in California.

Lisa Wald: Thank you for that. Next question.

Coordinator: Yes, our next question is going to come from (Brett Latton). Your line is now open.

(Brett Latton): Hi. Thanks so much for the call. We're a start-up new access point and we had a question about Medicare and Medicaid billing numbers. We are currently seeing patients but we're holding our claims and we've submitted our Medicare application but we - is that good enough or are you waiting to see that we get a Medicare and a Medicaid billing number before we verify that our sites are operational?

Beth Rosenfeld: Those would be two separate things. So you can verify that you're operational if, in fact, you meet the criteria of being operational relative to the HRSA NAP criteria and we understand that sometimes it's a little unpredictable when you might actually get your Medicare number as an FQHC able to bill at a different rate.

(Brett Latton): Okay, great.

Coordinator: Our next question will come from (Chris Brown). Your line is now open.

(Chris Brown): Thank you for taking my call. I believe I heard at the beginning of the call, you mentioned that there has been changes to the point system for scoring the Need for Assistance section and I wonder if you could repeat what you said and also, were there any changes to the Unserved, High Poverty Population section or the Sparsely Populated Area?

Joanne Galindo: If you want to, you can send that question to the NAP mailbox, which is n - bphcnap@hrsa.gov and we can give you all the details on the scoring for the - for those parts of the FOA.

(Chris Brown): Yeah, no problem, did - but did you mention that there had been changes?

Joanne Galindo: There have been changes from the previous funding opportunity announcement, yes. There have been some changes in the (persistence) worksheet. We changed the scoring a little bit for the Core Barriers and changed some of the indicators so that you

had different ones to choose from, and also the High Poverty priority points were also changed to be based on the Health Center Program presence in the area, rather than just based on poverty alone.

(Chris Brown): Okay, and could you repeat the website one more time?

Joanne Galindo: Oh, so that's an email box and it's bphcnap@hrsa.gov.

(Chris Brown): Thank you.

Joanne Galindo: And they can give you more details as you request.

(Chris Brown): Thank you.

Coordinator: Our next question comes from (Bernie Solomon). Your line is now open.

(Bernie Solomon): Good afternoon. I just wanted to verify that it seems to me I won't be able to charge any work by either existing or new staff before - that occurred before our NoA date, which was 10/25 because I seem to be confused by the answer to the gentleman who asked that prior. Doesn't seem possible that I should be able to charge anything before 10/25, or am I incorrect?

Margaret Davis: Yeah, I think that the previous question was an NoA that had a November 1st date that they hadn't received it until November 6th and so they were asking about that period of time, but you can't charge anything to the grant prior to the November 1st date. You don't have a 10/25 date on your Notice of Award.

(Bernie Solomon): Well, that's when the Notice of Award was issued. The budget period is from 11/1.

Margaret Davis: Right, so that's where...

(Bernie Solomon): So 16 months.

Margaret Davis: Right. So it's when the budget period date starts, yeah.

(Bernie Solomon): Okay, so I would not be able to charge for any efforts applied to our becoming fully op - our becoming fully operational that occurred before November 1st?

Margaret Davis: Yeah. Correct.

(Bernie Solomon): Okay, thank you.

Margaret Davis: Yeah. Thank you.

Coordinator: All right. Our next question here is going to come from (Lynn Hopkins). Your line is now open.

(Lynn Hopkins): Thank you. I had a question regarding the ability to charge staff to the New Access Points grant post the award date and what kind of detail is required, for example, if me, as the chief operating officer, or our HR department, is spending significant amount of time getting the new access point up and running, what type of documentation would be required to charge that time to the grant? And would you actually have to keep the timesheet noting those hours? Can it be an allocation of an (FTE)?

Margaret Davis: Yeah, if you could send that question in to your Project Officer, we can also work with our grants management folks. I - we do have - we thought we had some folks on the line but I think the way the conference call is, we can't have folks contribute to the answer right here live for you, so if you can send that in to your Project Officer and we can get that answered for you.

(Lynn Hopkins): Okay, thanks.

Margaret Davis: Mm-hmm.

Coordinator: All right, our next question is going to come from (Anthony White). Your line is now open.

(Anthony White): Yeah, my question is in regards to the Change in Scope that's been populated in the EHB that's due - to verify the site within 120 days. If you're not able to do that, it's my understanding that that changes the (drawdown) and then we need to submit a new Change in Scope. Is that correct?

Beth Rosenfeld: That actually is correct.

(Anthony White): Okay, well then my - which I thought was the case, which then goes to a second question which is, I think you're hearing a lot on the call, is the difficulty in actually making 120 days and it sounds like some of the people may have received the Notice of Award on the 25th of September and others with a November 1st start date but we received ours on the 6th of November so, effectively losing six days as the gentleman said before. And I guess if it was just the Progressive Action and we had some time and it was a plan in place, that's one thing, but I think you would probably agree that to submit a whole new Change in Scope is a lot of work and puts us through having to redo all of the verifications and all of the justification for the site in the first place only 120 days after receiving.

Is there some sort of process that you might have in place to streamline that process for people that might extend 10 days past 120 days or 30 days past 120 days?

Beth Rosenfeld: Just to clarify a couple of things, all the notices of award went out at the same time for both - I mean, the September portfolio all went out at the same time...

(Anthony White): Oh.

Beth Rosenfeld: ...as the November even though the dates may appear slightly different at the top of the award, and our plan would be to treat everyone in each of the cohorts consistently in terms of the date that we would actually be placing the Progressive Action condition and/or drawdown restriction on your awards. So we do have a plan in place for that.

(Anthony White): So does that mean we may actually have longer than 120 days?

Beth Rosenfeld: You would have 120 days from the date of the announcement.

(Anthony White): So it would be November - it would be the 6th rather than the 1st?

Margaret Davis: Yes, we would work with that date.

(Anthony White): Okay. What about if you pass the 120 days, any kind of process for streamlined Change in Scope?

Beth Rosenfeld: It wouldn't be a streamlined Change in Scope. In some ways, quite frankly, it's slightly more specific because you would need to propose that comparability factor relative to a new site or if it's the same site, perhaps...

(Anthony White): It's the same site. It's just that we couldn't get open in 120 days.

Beth Rosenfeld: You could make references and - to what's in your NAP application.

(Anthony White): Okay well, making references is one thing but having to redo the whole scope is a lot of work that you're putting on the grantees. So there's no streamlined process or a process that might make it easier for those that extend it a few days past 120 days?

Tonya Bowers: Hi, this is Tonya Bowers again and I truly understand the concern that you have about the timeframes for implementation. I just think it's really important to reiterate the expectation that came with the award and that you documented as part of the application, which was this Implementation Plan's ability to be effective within 120 days and certainly, from where we sit, our expectation is that these dollars are going into a community and being used to provide care as quickly as possible.

And so while we understand that there are circumstances that may lead organizations to need additional time, whether it's 3 days, 30 days, or 60 days beyond that timeframe, we need to hold all grantees to the same standard and expectations that were articulated first in the FOA, then secondly in the Notice of Award, and then again on today's call, and so while we truly understand there are going to be a lot of circumstances for a lot of different health centers, whether it's getting providers, hiring providers, whether materials and supplies were doing what they need to get the site operational, that we, you know, those are certainly things to talk about with your Project Officer individually, but that do recognize we're going to be holding everyone accountable to the same expectations for timeframes and the need to follow procedures so that we can assure that the dollars are being used for the purposes that they were awarded.

So I would encourage everyone who's got specific circumstances around that - their timeframes to talk with their Project Officer and see how they can meet their timeframes just to assure that there aren't any additional changes that are necessary in the future.

Lisa Wald: So Operator, if - we're at the top of the hour. I just want to check in and see how many questions we have in queue.

Coordinator: It looks like we have four questions currently in queue.

Lisa Wald: Okay. We'll go ahead and finish up hopefully pretty quickly so folks can get on to the rest of their day.

Coordinator: Okay, so our next question is going to come from (Brooke Johnson). Your line is now open.

(Brooke Johnson): Hi, we're an existing grantee with a fiscal year end of November 30th and in our NoA, we have two reporting requirements: one, that we submit documentation certifying that the project has been completed and two, that we upload a new (SF-424C) budget page and budget narrative showing actual project costs. And in EHB, these submissions are actually due here in a few days, on December 30th. And my question is, the project has not been completed. I'm thinking that - in EHB it says we have to submit these within 30 days after the completion of the project or the budget period end date.

I know the funding is - our funding is for November 1, 2013 through November 30th, 2014. I'm thinking that this should be the budget period end date. Am I wrong, or - there's just not going to be anything that we could really submit by December 30th to show completion of project.

Matt Kozar: No, you're right. Those two submissions that you're referring to are related to the One-Time Funding, which you can use that One-Time Funding within the first year of your award. So contact your Project Officer and work with them to request an extension on both of those items.

(Brooke Johnson): Okay, great. Thanks.

Coordinator: All right, our next question is going to come from (Beth Littleterry). Your line is now open.

(Beth Littleterry): Hi. If a restriction is placed on your grant when you're in Progressive Action, what is the process to require approval to work with grants management to have access to the funds?

Helen Harpold: This is Helen Harpold. Can you hear me?

(Beth Littleterry): Yes.

Helen Harpold: If you have - if you're on drawdown restrictions, you have to send a prior approval request through EHB to - for approval to draw a fund.

(Beth Littleterry): Okay so it's through the EHB?

Helen Harpold: If you - are you on drawdown restriction? Did you get that term on your award?

(Beth Littleterry): No, I did not. I'm just, you know, thinking about, you know, should we because we have the same concerns as everybody else: what happens if you don't make your 120 days and you go into Progressive Action which, you know, affects your ability to draw down your grants and so if we all end up there, what's the process to be able to have prior approval for a drawdown?

Helen Harpold: Well you - unless you're on restricted drawdown -- and you would have a term for that on your award -- you don't have to request to draw funds from EHB; however - I mean from PMS. You shouldn't draw funds until you need them and when you draw them, you should use them within 72 hours.

(Beth Littletery): Right.

Helen Harpold: So if you're not on restriction, you can still draw funds from PMS. As far as the Progressive Actions go, that's something you have to talk about with your Project Officer.

(Beth Littletery): Right, and so in the Notice of Award on Page 3 under Number 1, it says that Progressive Action will occur after the 120-day period if you're not fully operational, then you can go into the Phase 1 of Progressive Action and it says restrictions are placed on your grant award requiring that all drawdown of section 330 grant funds from PMS must have prior approval. So my question still is, if we get to that point, what is the process to be able to request a prior approval?

Margaret Davis: Helen, this Margaret. So just to - I appreciate your question and we all are hoping that you're able to verify within 120 days and that won't affect many people, but if you do go into Progressive Action after that 120 days, drawdown restriction will be placed.

As Helen identified, there is a process in place where you submit a prior approval request. You do it through the EHB. We have a procedure between grants management and (unintelligible) primary health care and the program office to review those requests in a very expedited fashion so that it does as little as possible to slow down your receipt of those funds, so as - you'll work with - if you end up getting a condition on your award that restricts your draw or a term on your award that restricts your draw, it just means you have to go through a little extra effort in justifying what those funds will be used for and you'll talk with your grant specialist about what, specifically, you'll need to submit.

But it will just be documentation of costs incurred, I think, and just ensuring that that's allowable on the grant and we move that through quickly so that PMS is

notified you're able to make that draw. So just to be clear that it is an extra hoop but it is a hoop that we have worked very hard to expedite for grantees that find themselves in that place.

(Beth Littleterry): Okay and then the final question to piggyback onto that is, is the restriction only related to this funding opportunity here, see this Notice of Award and not our entire H80 grant?

Margaret Davis: This is part of your H80 grant so the restriction would apply to all of your H80 grant which is inclusive of this award as well. But once - and once that is verified and once you have implemented, we will put in place to remove that term off of your award and it will be removed.

(Beth Littleterry): Okay. Thank you very much.

Margaret Davis: So (unintelligible) only be for the time period in which we have to do that close monitoring of progressive action that we add that restricted draw.

(Beth Littleterry): All right, thank you so much.

Coordinator: Okay, our next question comes from (Brenda Coglund). Your line is now open.

(Brenda Coglund): I understand you to have said that if we have two separate addresses in our notice of grant award, only one of the sites has to be up and running within 120 days; however, if the two sites service different service areas, would both of them have to be up and running?

Margaret Davis: As long as the one site - if your - if the requirement is for one site that is permanent and providing primary care services.

(Brenda Coglund): Okay. So if we haven't fully served the other patient population within that 120 days, we can still do that in the next year of the grant?

Margaret Davis: Yeah. We will still be monitoring you to get that second site up and running as quickly as possible because, of course, both of those service areas' folks are waiting for you to be there to provide those services, so but the requirement for the initial 120 days is for one site.

(Brenda Coglund): Thank you.

Coordinator: Okay, we do have one final question here in queue coming from (Warren Shirad). Your line is now open.

(Warren Shirad): Hi, so my question is, in the unlikely event that we don't make the 120 days, is it possible that we can meet the definition of being operational through the use of our mobile medical units? In other words, if the site is not itself ready to go and we can bring the mobile units there and we can provide some level of primary care and that care is provided to the service target population, would that suffice for the purposes of your definition?

Beth Rosenfeld: Well, we would certainly want you to consider providing services to those patients in any way that you possibly can as early as you possibly can, but it would not make the criteria. It must be one full-time permanent site.

(Warren Shirad): Okay. Thank you.

Beth Rosenfeld: Thank you.

Lisa Wald: Okay. Thank you all so much for your questions. If you think of additional ones after the call today, please reach out to your Project Officer for guidance. We thank you again for participating in this session and have a great afternoon.

Coordinator: Okay. With that, we will conclude today's conference. Thank you for your participation. You may disconnect at this time.

END