

***Grants to Support the Hispanic Health Services Research Grant Program
New Announcement
Announcement Number HHS-2008-CMS-HHS-0007
Catalog of Federal Domestic Assistance (CFDA) No. 93.779***

Fiscal Year 2008

Application Due Date in Grants.gov: June 26, 2008

Letters of Intent due: May 27, 2008

Anticipated Award Date: September 2008

Project Period: Two years

Authority: *Section 1110 Social Security Act*

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EXECUTIVE SUMMARY

HISPANIC HEALTH SERVICES RESEARCH GRANT PROGRAM

The Centers for Medicare & Medicaid Services (CMS) is announcing the availability of funds under its grant program to assist researchers in conducting health services research for 2008. The purpose of the Hispanic grant program is to implement Hispanic American health services research activities to meet the needs of diverse CMS beneficiary populations. The grant program is designed to: 1) Encourage health services researchers to pursue research issues which impact Hispanic Medicare, Medicaid, and SCHIP health services issues, 2) conduct outreach activities to apprise Hispanic researchers of funding availability to conduct research-related issues affecting Hispanic American communities to expand the pool of applicants applying for such grants, 3) assist CMS in implementing its mission focusing on health care quality and improvement for its beneficiaries, 4) support extramural research in health care capacity development activities for the Hispanic American communities, 5) promote research that will be aimed at developing a better understanding of health care services issues pertaining to Hispanic Americans, and 6) foster an network for communication and collaboration regarding Hispanic health care issues.

This grant program is consistent with President George Bush's Executive Order 13230, directing an interagency approach to developing, monitoring, and coordinating federal efforts to promote high-quality education for Hispanic Americans. The Commission works to develop ways to maximize the effectiveness of Federal education initiatives within the Hispanic community. This program is one strategy to increase the participation, promotion, and professional development of investigators interested in Hispanic health disparities research.

Funding is available for grants to implement research related to health care delivery and health financing issues affecting Hispanic American communities, including issues of access to health care, utilization of health care services, health outcomes, quality of services, cost of care, health disparities, socio-economic differences, cultural barriers, managed care systems, and active ties related to health screening, prevention, outreach, and education.

To be eligible for grants under this program, applicants must meet one of the following three requirements in order to qualify for funding under this grant program: 1) A health services/disparities researcher at an university or college offering a Ph.D. or Master's Degree Program in one or more of the following disciplines Allied Health, Gerontology, Health Care Administration, Health Education, Nursing, Pharmacology, Public Health, Public Policy, Social Work; or 2) a member of a community-based health organization with a Hispanic health services research component; or 3) a member of a professional association focusing on Hispanic health services and health disparities issues.

Department of Health and Human Services

Centers for Medicare & Medicaid Services

Office of Research, Development, and Information

Hispanic Health Services Research Grant Program

I. FUNDING OPPORTUNITY DESCRIPTION

1. Introduction

The Centers for Medicare & Medicaid Services (CMS) is announcing the availability of funds under its Hispanic Health Services Research Grant Program to inform researchers of funding opportunities to conduct health services research affecting Hispanic American communities for 2008. This announcement seeks competitive applications for small applied research projects that relate to identifying and evaluating solutions for eliminating health disparities among Hispanic Americans. Investigators should be associated with a university, college, community-based health organization, or a professional association that has a health services research component. Researchers are expected to become involved in the design, implementation, and operation of research projects that address health care issues such as financing, delivery, access, quality, and barriers affecting the Hispanic American community. CMS is seeking these types of research projects because of the importance in finding solutions to the many difficult health issues that have a significant impact on the health of Hispanic Americans.

The President's Advisory Commission on Educational Excellence for Hispanic Americans issued a directive to increase the participation of Hispanic Americans in federal education programs and services. This includes Hispanic-serving school districts, Hispanic Institutions, and other educational institutions for Hispanic Americans. The Commission advises the President and the Secretary of Education on these issues. President George Bush's Executive Order 13230, signed on October 12, 2001 directed an interagency approach to developing, monitoring, and coordinating federal efforts to promote high-quality education for Hispanic Americans. The Commission works to develop ways to maximize the effectiveness of Federal education initiatives within the Hispanic community.

The commission is also charged with the development of a monitoring system that will measure and hold executive branch departments and agencies accountable for the coordination of federal efforts to ensure the participation of Hispanic Americans in federal education programs. It will examine available research and information on the effectiveness of current practices at the local, state and federal levels in closing the educational achievement gap for Hispanic Americans and attaining the goals established

by the President's "No Child Left Behind" educational blueprint. The Executive Order calls for a series of actions covering a broad scope of issues including health services research, conferences, service delivery, data collection, and customer service capability for Hispanics. CMS's Hispanic Health Services Research Grant Program is in accordance with the Executive Order. This program is one strategy to increase the participation, promotion, and professional development of investigators interested in Hispanic health disparities research.

2. CMS/Hispanic Partnership

CMS is committed to developing a partnership with Health Disparities researchers focusing on Hispanic health issues to achieve the goals of the President's Executive Order. CMS wants to make sure that Hispanic researchers are apprised of the opportunities to compete for its extramural research funds and gain a better understanding of its research interests. This announcement, the 2008 CMS Hispanic Health Services Research Grant Program, is related to the priority area of CMS's research programs for health care and financing issues in the Hispanic American community. The announcement meets the Healthy People 2010 goals of eliminating disparities and addressing the Healthy People 2010 focus area of health communication.

3. Detailed Purposes of Grant Program

The purpose of this announcement is to implement Hispanic American health services research activities to meet the needs of diverse CMS beneficiary populations. The goals of the Hispanic Health Services Research Grant Program are to:

- Encourage health services researchers to pursue research issues which impact Hispanic Medicare, Medicaid, and SCHIP health disparities issues;
- Conduct outreach activities to apprise Hispanic researchers of funding availability to conduct research-related issues affecting Hispanic American communities to expand the pool of applicants applying for such grants;
- Assist CMS in implementing its mission focusing on health care quality and improvement for its beneficiaries;
- Support extramural research in health care capacity development activities for the Hispanic American communities; and
- Promote research that will be aimed at developing a better understanding of health care services issues pertaining to Hispanic Americans, and 6) foster an network for communication and collaboration regarding Hispanic health care issues.

4. Health Issues of Concern

CMS is interested in the following types of proposals:

- a) Applications that address research on disseminating information and improving health-related attitudes, knowledge, beliefs, and practices related to the following six health conditions:

- 1) Diabetes Mellitus
- 2) Cancer Screening and Management
- 3) Cardiovascular Disease
- 4) HIV/AIDS (Among Medicare or Medicaid Beneficiaries)
- 5) Infant Mortality
- 6) Adult and Childhood Immunizations

Other Population Specific Health Concerns

- 1) Asthma
- 2) Obesity

- b) Proposals to research the effectiveness of programs designed to:

- 1) Remove barriers and improve access to health services
- 2) Reduce health disparities and socioeconomic differences in health services
- 3) Increase the efficient utilization of health services
- 4) Improve quality of care
- 5) Reduce health care costs
- 6) Increase preventive services (for example - mammography and prostate screening; children with asthma who are Medicaid recipients)
- 7) Improve health outcomes among Medicare or Medicaid beneficiaries as these issues relate to the six health priority conditions and other population specific health concerns listed above.

All proposals should describe research to be conducted with relevance to the CMS Medicare, Medicaid, and SCHIP programs and which area of Healthy People 2010 is served by this project.

5. Types of Studies

CMS is interested in supporting the following two types of studies.

- 1) **Educational Intervention Studies.** These studies will inform populations-at-risk about certain health problems especially as they relate to Hispanic Americans. A follow-up plan should be developed to determine the effectiveness of the intervention. An example might include

developing an educational program to enhance the awareness, knowledge, and understanding of Hispanic Americans about prevention, treatment, services, and/or strategies for accessing the health care system. The project should reach a minimum of **400** participants.

- 2) **Developmental Intervention Studies.** These studies will develop promising new approaches to reducing disease, encouraging changes in health behavior, and promoting health among Hispanic Americans. For example, using computers to disseminate health related information or testing the effectiveness of a health hotline in reducing health disparities. The project should reach a minimum of **400** participants.

II. AWARD INFORMATION

1. Type of Award

Funding will be provided in the form of a grant. If an application was submitted in response to a prior year's announcement under this grant program, but was not funded, **a new application must be submitted.**

2. Duration of Award

The total project period for applications submitted in response to this announcement may not exceed two years.

3. Amount and number of Grants to Be Awarded

Eligible researchers may request \$100,000 to \$125,000 per year for up to two (2) years for a variety of health services research projects.

4. Schedule of Processing

- Application Deadline – June 26, 2008
- Technical Panel Review – July/August 2008
- CMS Review - September 2008
- Announcement of Awards - September 2008

III. ELIGIBILITY INFORMATION

1. Eligible Applicants

Applicants must meet **one** of the following three requirements in order to qualify for funding under this grant program.

1. A health services/disparities researcher at a university or college offering a Ph.D. or Master's Degree Program in **one or more** of the following disciplines:

Allied Health
Gerontology
Health Care Administration
Health Education
Nursing
Pharmacology
Public Health
Public Policy
Social Work; **or**

2. A member of a community-based health organization with a Hispanic health services research component; **or**

3. A member of a professional association focusing on Hispanic health services and health disparities issues.

2. Cost Sharing/Matching

CMS' grant authority under section 1110 of the Social Security Act requires cost-sharing by applicants. To comply with this requirement, CMS is requiring that applicants provide cost-sharing equal to at least one percent of the amount of the award. This cost-sharing requirement may be satisfied through in-kind contributions.

3. Foreign and International Organizations

Foreign and International Organizations are not eligible to apply.

IV. APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package

CMS is requiring applicants for this funding opportunity to apply electronically through Grants.gov. User instructions for Grants.gov can be found at:

http://www.grants.gov/assets/UserGuide_Applicant.pdf

A complete electronic application package, including all required forms, is available at <http://www.grants.gov>. Standard application forms and related instructions are available online at http://www.grants.gov/agencies/approved_standard_forms.jsp#1 and http://apply.grants.gov/forms/sample/SSA_AdditionalAssurances-V1.0.pdf

The applicant must also register in the Central Contractor Registration (CCR) database in order to be able to submit the application. Information about CCR is available at <http://www.grants.gov/CCRRegister>. The central contractor registration process is a separate process from submitting an application. Applicants are encouraged to register

early. In some cases, the registration process can take approximately two weeks to be completed. Therefore, registration should be completed in sufficient time to ensure that it does not impair your ability to meet required submission deadlines. You will be able to submit your application online anytime after you receive your E-Authorization.

For assistance with the grants.gov online process including but not limited to the registration process, down loading the PureEdge Viewer, technical difficulties with completing the application, and password retrieval, please contact Grants.gov at 1-800-518-4726 or support@grants.gov.

A hard copy of the application is also available from the CMS/' Office of Acquisition and Grants Management (OAGM), Room C2-21-15, 7500 Security Boulevard, Baltimore, Maryland 21244-1850, telephone number 410-786-3061, Attention: Louise Amburgey (e-mail: Louise.Amburgey@cms.hhs.gov). **Please be sure to include the name, mailing address, and phone number of a contact person for the institution requesting the application.**

2. Content and Form of Application Submission

The investigator must complete and submit an application package. If an application was submitted in response to a prior year's solicitation under this grant program, but was not funded, a new application must be submitted. The narrative portion of the application should not exceed 25 typewritten double-spaced pages. Times New Roman with 12 Font should be used. While additional documentation may also be submitted, such materials should be limited to information relevant to the specific scope and purpose of the proposed project. Each application received from an eligible institution will be reviewed for merit by a panel of technical experts. Since CMS anticipates a large number of applications for each panel member to review, it is important that your application is concise, yet thorough.

The following items **should not be included in the Project Narrative portion of the application** and, therefore, should not be included in the 25 page limit:

- Applicant's Title Page and Cover Letter;
- Standard Forms from the Application Forms Kit;
- Letters of Agreement or Support;
- Resumes;
- Table of Contents;
- Project abstract;
- Budget Narrative/Justification;
- Other Support Documents;
- Budget Forms; and
- Appendices.

a) Required Contents of the Application

A complete proposal consists of the following materials organized in the sequence indicated. Please ensure that the project narrative is page-numbered.
The sequence is:

- Applicant’s Title Page and Cover Letter;
- Standard Forms from the Application Forms Kit;
- A letter of endorsement from the President or an other official from the Institution;
- Budget Forms (424A/PHS398);
- Budget Narrative/Justification;
- Table of Contents
- Project Abstract;
- Project Narrative;
- Required Appendices;
- Attachments (e.g., Letter of Agreement or Support, Biographical Sketches and Resumes; and
- Supporting documentation

b) Cover Letter

The letter must include the principal investigator name; and a brief description of the proposed project; targeted population; and contact information for your organization (**name, phone number, and e-mail address**). The letter must also include the names of all institutions collaborating in the project and indicate that the applicant institution has clear authority to perform the proposed activities and is capable of implementing this project.

c) Application Forms

The following Standard Forms (SF) must be completed with an original signature:

SF424: Official Application for Federal Assistance

SF424A: Budget Information Non Construction

SF424B: Assurances – Non-Construction Programs

SFLLL: Disclosure of Lobbying Activities

Additional Assurances Certifications:

http://apply.grants.gov/forms/sample/SSA_AdditionalAssurances-V1.0.pdf

Applicants may obtain copies of these forms directly from the CMS Web site at:

<http://www.cms.hhs.gov/GrantOpportunities/>

Note: On SF-424 “Application for Federal Assistance” check box “C” and item 19, since the “Review by State Executive Order 12372 Process” does not apply to these grants.

d) Project Abstract

The application should include a single space (one-page) abstract. The abstract should address:

- 1) Statement of the Problem - Describe what the investigator wants to do and why - e.g. the problem that is being addressed – background, significance, and need; project purpose, goals and objectives, and relevance to CMS mission/programs (for example, Medicare, Medicaid, or SCHIP).
- 2) Methodology of the proposed project - How does the investigator intend to implement the project?
- 3) Ability to implement the research project - Discuss the implementation strategy and management plan (workplan).
- 4) Institutional structure and capabilities - Does the institution have the structure and capacity to conduct the research project?
- 5) Collaboration with an university/college, community-based health organization, or professional association - Describe the type and degree of collaboration.

e) Project Narrative

The 25 page project narrative should provide a concise and complete description of the proposed project. It should contain the information necessary for the review panels to fully understand the project. It should cover all aspects of the project requirements (See criteria for writing the narrative 15).

f) Budget Narrative/Justification and Resources

The applicant should provide a **detailed breakdown** of the aggregate numbers for the budget recorded on Standard Form 424 (SF 424) “Application for Federal Assistance,” including allocations for each major set of activities or proposed tasks. The proposed budget should distinguish the proportion of grant funding designated for each activity. The budget must clearly identify what funds will be administered directly by the lead agency and what will be subcontracted to other partners. The designated lead agency is solely responsible for the fiscal management of the project.

The total budget for each award should include **both direct and indirect costs**. The total indirect costs should not exceed 10% of the entire budget. We anticipate that most awards will be in the range of approximately \$100,000 to \$125,000 per year for a maximum of two years. The number of grants depends on the availability of funds and the technical quality of applications. CMS strongly

encourages collaboration between institutions to implement their research projects.

g) Appendices

- Key Staff Qualifications – including a biographical sketch or resume of key staff describing their qualifications. This form can be found at: http://www.cms.hhs.gov/GrantOpportunities/Downloads/01_biosketch.pdf
- Project Work Plan/Timeline: Include a detailed project work plan and timeline.
- Letters of Agreement, Endorsement, or Support - Provide a set of endorsements from collaborating organizations outlining their contributions, roles, and responsibilities relative to the projects and commitments that have been pledged for the proposed project. Include individual letters of support as appropriate.
- Memoranda of Understanding – reflecting the collaborative relationships between relevant institutions.
- Institutional Review Board Approval – The applicant must include the outcome of their request for Institutional Review Board approval.

h) Supporting Documentation

NOTE: If the proposal does not comply with the guidelines in the Announcement (proper format, table of contents, executive summary, etc.) it will not be reviewed.

Acceptable applications, i.e. those that meet the above criteria, will be reviewed using the procedures as described.

3. Submission Dates and Times

You must submit your application electronically. Applications submitted through Grants.gov constitute electronically signed applications. The registration and E-Authorization process establishes the Authorized Organization Representative (AOR). When you submit the application through Grants.Gov, the name of your representative on file will be inserted into the signature line of the application. Applicants must register the individual who is able to make legally binding commitments for the applicant organization as the AOR.

In the event that the electronic submission of the application has failed through <http://www.grants.gov>, please mail the complete paper application to Louise Amburgey. You must include a copy of the failed submission notice from <http://www.grants.gov> with the paper application as evidence of attempted submission. If you have successfully submitted an electronic application through Grants.gov, please do **not** mail in a paper application as well.

All applicants must obtain a written exemption from the CMS Grants Officer, OAGM, in order to submit an application in any manner other than through Grants.gov. Hard copies of the original application, signed by the university President or other official having authority to legally bind the institution to the performance of a grant, if approved, shall be submitted. If you are submitting hard copies, **the original should be bound and the two copies should be unbound. Please do not use staples. Send a diskette (Microsoft Word) with the 25-page narrative portion of the application.** Mail the original, two copies of the application, and the diskette to:

Centers for Medicare & Medicaid Services
Office of Acquisition and Grants Management
Division of Research Contracts and Grants
Attn: Ms. Louise Amburgey
Mail Stop C2-21-15
7500 Security Boulevard
Baltimore, Maryland 21244-1850

The mailed application shall be received on or before June 26, 2008.

or

Hand deliver the original and two copies of the application by **close of business 5:00 p.m.** (EST) on Thursday, June 26, 2008 to the above location.

To expedite the receipt of your application, you are strongly urged to send it by Federal Express or Express Mail. All applications must be received on or before **Thursday, June 26, 2008.** Upon receipt of an application, the Office of Acquisition and Grants will email a notification of receipt to the institution. If an institution fails to receive the notification of receipt within 15 days from the date of mailing the application, the institution should call the Louise Amburgey at 410-786-3061.

Late applications: Any application that does not meet the above criteria will be deemed a "late application." Those institutions submitting a late application will be notified that the application was not considered in the competition.

Letter of Intent

Although the letter of Intent (LOI) is not required, not binding and does not enter into the review of the subsequent application, an applicant may choose to submit one.

Prospective applicants choosing to submit an LOI are asked to submit by May 27, 2008. The LOI should include a title and description of the proposed project, address, and telephone number of the investigator(s), the identities of other key personnel, and the names of participating institutions. The LOI should not exceed one page. The information received from the LOI allows CMS to estimate the potential review workload and facilitates planning for the review process.

The LOI should be faxed to the Dr. Richard Bragg, project officer at 410-786-5534.

4. Intergovernmental Review

This grant is not subject to Executive Order 12372 concerning “Intergovernmental Review of Federal Programs.”

5. Funding Restrictions

a) Grant funds may be used for any of the following:

- Personnel costs, which may include project support staff and contracts for collaboration.
- Costs of data collection and transmission.
- Travel costs as they pertain to the administration and conduct of the grant.
- Training cost for program participants.
- Indirect costs should not exceed 10% of the entire budget.

b) Grant funds may not be used for any of the following:

- To provide direct services to individuals except as explicitly permitted under the grant solicitation.
- To match any other Federal funds.
- To provide services, equipment, or supports that are already the legal responsibility of another party under Federal law.

6. Other Submission Requirements

Dun and Bradstreet Number – Beginning October 1, 2003, applicants are required to have a Dun and Bradstreet (DUNS) number to apply for a grant or cooperative agreement from the Federal Government. The DUNS number is a nine-digit identification number, which uniquely identifies business entities. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access the following Website:

www.dunandbradstreet.com or call 1-866-705-5711. This number should be entered in the block with the applicant’s name and address on the cover page of the application (Item 5 on the Form SF-424, Application for Federal Assistance), with the annotation “DUNS” followed by the DUNS number that identified the applicant. The name and address in the application should be exactly as given for the DUNS number.

7. CCR Requirements

The applicant must also register in the Central Contractor Registration (CCR) database in order to be able to submit the application. Information about CCR is available at <http://www.grants.gov/CCRRegister>. The central contractor registration process is a separate process from submitting an application. Applicants are encouraged to register

early. In some cases, the registration process can take approximately two weeks to be completed. Therefore, registration should be completed in sufficient time to ensure that it does not impair your ability to meet required submission deadlines. You will be able to submit your application online anytime after you receive your E-Authorization.

V. APPLICATION REVIEW INFORMATION

1. Criteria

We will use the following criteria to evaluate all applications for inclusion in the program. The total score for the criteria is 100 points.

To assist applicants in preparing the application and to aid the technical panel in its review, the narrative portion of the application should be written using the following format:

- Statement of the Problem
- Methodology
- Ability to Implement the Research Project
- Institutional Structure and Capabilities
- Collaboration with an university/college, community-based health organization, or professional association. The panel reviewers will score the applications based on the following.

a) Statement of the Problem

The application must demonstrate that the applicant has a thorough understanding of the specific health problem(s) within the target population and the strategies required to address the problem(s) identified. The applicant should clearly describe the proposed project explaining what the researcher plans to do and why. This section of the application must describe the:

- Background, significance, and need for the project
- Project purpose, goals, and objectives
- Relevance of the project to CMS's mission/programs. How will the project improve the overall health outcomes and quality of care, reduce health disparities, and achieve savings for the targeted population (Medicare, Medicaid, or SCHIP programs)?
- Supporting research materials/Review of Literature

Panel scoring: 20 Maximum Points

b) Methodology

The applicant should explain how the research team intends to implement the project. The applicant should make a complete and concise presentation of the methodology that will be implemented in this project. It should cover all aspects of the project requirements. The proposal should provide clear and convincing evidence and supporting materials that are appropriate for the project, likely to improve quality of care and reduce health disparities for the targeted population. Any innovative features of the proposed project should be highlighted. The application must include:

- Study design and intervention strategies (Include in appendix samples of focus group guides and questionnaires to be used)
- Hypotheses/research questions
- Data collection and data analysis plan as appropriate
- Target population and setting
- Expected outcomes
- A plan for evaluation of the project
- Information about the Institutional Review Board (IRB) Approval (Include in appendix a sample of the letter of approval or information to be submitted to the IRB)

Panel scoring: 30 Maximum Points

c) Ability to Implement the Research Project

The applicant should provide detailed information to demonstrate their technical understanding and capability of performing the requirements of the project, including:

- A detailed implementation strategy and plan that includes a management plan (workplan) describing tasks, responsible individuals, timelines, and costs. A timetable of not more than 24 months with specific key actions and milestones should be included.
- The capabilities/responsibilities of all personnel and a description of how the personnel will be organized, to whom they will report, and their role in accomplishing the goals and objectives or components of the project.

Panel scoring: 20 Maximum Points

d) Institutional Structure and Capabilities

The applicant should demonstrate clear and convincing evidence that the institution has the organizational infrastructure and management capacity to conduct the research project effectively, including:

- Evidence of the availability and adequacy of the facilities, equipment, and financial management systems to conduct the project
- A plan for budget and performance monitoring (How does the PI plan to monitor the budget?)
- Protocols to guide the administrative aspects of the project (How does the PI plan to interact with the Office of Sponsored Programs, Budget Office, Contract Office to administer the project?)

Panel scoring: 15 Maximum Points

e) Collaboration with a University/College, Community-Based Health Organization, or Professional Association

The applicant should describe the types and degrees of the collaborative relationships supporting the proposed research project that have been established or that may be established between the applicant institution and other institutions or community-based health organizations. This description should include specific information about the roles and responsibilities of each collaborator on the project. Letters of support from collaborating organizations outlining their contributions, roles, and responsibilities relative to the research project should be included in the proposal. **Include letters of support in the appendix.** Collaborating organizations may include the following:

- Community Health Organizations
- Faith-based Organizations
- Social Organizations

Panel scoring: 15 Maximum Points

2. Review and Selection Process

An independent review will be conducted by a panel of experts. The panel will be convened during the summer of 2008. The panel will conduct an independent, objective review of all responsive applications. The panelists will assess each application based on the review criteria to determine the merits of the proposal and the extent to which it furthers the purposes of the research program. The panelists' comments and recommendations will be condensed into a summary statement that will assist CMS in making the final award decisions. CMS will use the information to judge the likelihood

that the project will be successfully implemented and will have tangible, beneficial outcomes.

3. Anticipated Announcement and Award Dates

The applicant will receive written notification of the award decision. Awards will be made to successful applicants during September 2008.

VI. AWARD ADMINISTRATION INFORMATION

1. Award Notices

The award decision will be made by the Director and Senior staff members, Office of Research, Development, and Information, Centers for Medicare & Medicaid Services, after consideration of the comments and recommendations of the technical review panelists and availability of funds. CMS reserves the right to determine which qualified applications will receive funding under this program. Technical assistance will be made available post award to the awardee.

Successful applicants will receive an official Notice of Award (NOA), signed by the CMS Grants Officer that will set forth the amount of the award and other pertinent information, along with a set of Terms and Conditions for fulfillment of the grant specifically applicable to the applicant. The NOA is a legal document issued to notify the grantee that an award has been made and that funds may be requested from the HHS payment system. The successful applicant will be required, within 30 days of receipt of the Notice of Award, to sign and return a signature page included at the end of the Terms and Conditions that demonstrates agreement to accept the grant and its Terms and Conditions.

The **grantee must submit an article to a refereed journal** describing the findings of the study. All published reports, both formal and informal, should acknowledge grant support with the following footnote "This project was supported with funding from the Centers for Medicare & Medicaid Services." The article must also state the following: *The statements contained in this report are solely those of the authors and do not necessarily reflect the views or policies of the Centers for Medicare & Medicaid Services. The grantee assumes responsibility for the accuracy and completeness of the information contained in this report.* **Before submitting a manuscript or a publication, the principal investigator must consult with the Project Officer. When a manuscript resulting from this grant is accepted for publication, the principal investigator must promptly notify the Project Officer of its acceptance and the date it is scheduled to be published.** The awardee is also required to participate in CMS sponsored research conferences. At these conferences, the awardee will present preliminary and/or final results of his/her study.

2. Administrative and National Policy Requirements

General Terms and Conditions for these grants are available for reference on our website at <http://www.cms.hhs.gov/ResearchDemoGrantsOpt/>. In addition to the General Terms and Conditions, applicants should be aware that they may be required to comply with Special Terms and Conditions that will apply specifically to the proposal. These terms and conditions are used to clarify particular grant activities and assure that grant funding is being used in a permissible manner. Because these terms and conditions are written specific to the applicant grant, it is not possible to review them prior to application submission.

All Grantees receiving awards under this grant program must meet the requirements of:

Title VI of the Civil Rights Act of 1964;
Section 504 of the Rehabilitation Act of 1973;
The Age Discrimination Act of 1975;
Hill-Burton Community nondiscrimination provisions; and
Title II, Subtitle A, of the Americans with Disabilities Act of 1990.

3. Reporting

- a) Grantees must agree to fully cooperate with any Federal evaluation of the program and provide quarterly or semi-annually any financial reports in a form prescribed by CMS (including the SF269a, Financial Status Report forms). These reports will be designed to outline how grant funds were used and to describe program progress, as well as barriers and measurable outcomes. CMS will provide a format for reporting.
- b) In order for CMS to monitor awardees efforts toward reaching the goals of the grant program awardees must agree to provide CMS with information it may require to assess the functioning and effectiveness of the program and to ensure that the grant monies are expended for the purposes for which they were awarded. The awardee must submit the following required reports throughout the period of performance: 1) quarterly progress reports, 2) annual report, and 3) final report. CMS will provide the format for these reports.

VII. AGENCY CONTACTS

Questions concerning this grant program are encouraged. Requests to clarify any issues from potential applicants are welcome. Please contact:

Richard Bragg, Ph.D.
Project Officer
Office of Research, Development, and Information
Centers for Medicare & Medicaid Services
Mail Stop C3-19-07

7500 Security Boulevard
Baltimore, Maryland 21244-1850
(410) 786-7250
e-mail – Richard.bragg@cms.hhs.gov

Direct inquiries regarding grant procedures, fiscal matters, or guidance in completing the application forms to:

Centers for Medicare & Medicaid Services
Office of Acquisition and Grants Management
Division Research Contracts and Grants
Attn: Ms. Louise Amburgey
Mail Stop C2-21-15
7500 Security Boulevard
Baltimore, Maryland 21244-1850
(410) 786-3061
e-mail – Louise.Amburgey@cms.hhs.gov

VIII. OTHER INFORMATION

Meetings - Applicants must include in their application provision for attendance of up to two project members at two research meetings sponsored by CMS.

Limitation - One objective of the Hispanic Health Services Research Grant Program is to conduct outreach activities to apprise Hispanic researchers of funding availability to conduct research related issues affecting Hispanic American communities to expand the pool applicants applying for such grants. In an effort to expand the number of awardees, awards to principal investigators (PI) will be limited to a maximum of two. If you received two or more awards in the past, you will be unable to apply for this application. However, you may serve as a consultant on an application.