NWX-OS-OGC-RKVL

Moderator: David Johnson
April 26, 2012
11:04 am CT

Coordinator:

Thank you for standing by and welcome to today's conference. At this time all participants are in a listen-only mode. After the presentation, we'll conduct a question-and-answer session. To ask your question, you may press star 1 on your touch tone phone. Today's conference call is being recorded. If you have any objections, you may disconnect. I will now turn the call over to your conference host, Mr. David Johnson. Sir, you may begin.

David Johnson:

Thank you (Katherine). Hi everyone. Sorry for the technical difficulties. We had an issue with the numbers obviously in the Web site. So I believe (Katherine) got on and was able to tell everyone the new Web site URL and the pass code to access and we're continuing to gain some attendees on the Web site - the webinar view. So we'll hold off for a few more minutes maybe one or two and then we'll go ahead and begin.

We'll first start off with just an overview with OPA, then we'll go to CDC, and then we'll also end with the Office of Grants Management to talk about the application itself as well as the process including the funding process.

Man:

This could be - I'm seeing more regions on here.

David Johnson:

Okay. So we're going to go ahead and start. Unfortunately it's already 12:20 so we'll go through it. We won't go through it too quickly so you don't lose anything. But I also want to let you know that there will be an opportunity for additional questions and answers tomorrow at 4:00 pm Eastern Time and that information will be (set) or we're told at the end (it'll come) the meeting as well as it's on the last slide of the slide deck. So we'll keep it on that at the end of the presentation. So because this was abbreviated, we still have extra time tomorrow to discuss anything more if questions do come so.

First of all welcome. Thank you for attending. This is the Technical Assistance Call for the Family Planning and CDC Joint Training and Technical Assistance Cooperative Agreement which was published a few weeks ago will be due this coming June 1 I believe. I'm sorry, June 11 excuse me.

So the process will be just again a quick overview. We'll go through Part A and Part B and then we'll hand it over to Alice Bettencourt, the Director of the Office of the Grants Management within the Office of the Assistant Secretary for Health to go over the process and then we'll open it up for questions. So if you have questions along the way, if you can just write them down and keep them. Then we'll go to our operator and she'll be able to open it up and give directions on how to ask those questions.

So we'll start off with myself David Johnson from the Office of Family Planning. Steve Shapiro from the Office of - excuse me, from CDC will then go ahead and state his, and then Alice Bettencourt the Director of the Office of Grants Management will then proceed with the application process. Okay.

(Unintelligible) pulling up now. Well this is another (unintelligible). Well at least we'll start with this part anyway.

As you all know one of the first things that we start with that next slide actually that is blank and several after it, the most important thing to do before you start your application process is to read the absolute entire announcement. That is Part A and Part B if applicable, but read through the whole announcement. Everything that is in the announcement is important. So it's not only following the instructions, but also understanding what are the separate parts of both Part A and the separate parts of Part B and the elements that you need to be responsive in order to be considered for funding as we come up in the next funding cycle.

So real quick, this is another way of getting the announcement if you don't already have it. Hopefully within five minutes after this conference, you'll be able to get this. This is a different way of obtaining it -- grants.gov -- which is the only way that the application can be submitted through. The funding announcement number is up there as well as the CFDA number. So if I didn't say it before read the entire funding announcement. It's very important.

So starting off with Title X. Many of you are familiar, but the mission of Title X is really to provide individuals with information and means to be able to freely determine the number and spacing of their children. So this is what Title X services is all about. This is what we do (and) this is the program. Everything else including training and technical assistance, research, information education all go support this mission.

As I just stated, this announcement relates to Section 1003 which allows the program to fund training and technical assistance grants. They all end up supporting services. So as many of you are familiar, the purpose of these

grants are to help ensure that high-quality services are provided at the Title X family planning centers.

So for Part A and this is again the OPA side, there are four different announcements -- four different training centers, excuse me -- that it encompasses. The first one is the National Training Center for Coordination -- excuse me -- and Strategic Initiatives followed by the Training Center for Management and Assistance with Improvement, the Training Center for Service Delivery, and finally the Training Center for Quality Assurance, Quality Improvement, and Program Evaluation. And so after this slide, we'll go through each one identifying some of the highlights and important pieces of each of these areas.

Individuals and organizations can apply for one or up to all four of these trainings centers within Part A. Some of the limitations here are there'll be one award for each training center. So there won't be two awards going to one. Four total awards that's what that means. Maximum award period will be for four years and the ceiling award amount is \$1 million. And so if you are intending on applying for more than one of these training centers, they will require separate applications for each training center.

So the first training center that's identified is the National Training Center for Coordination and Strategic Initiatives. Really the main purpose of this is to provide coordination and support among the other national training centers that are being posted within this announcement, including the participation with the Clinical Training Center for Family Planning with the true purpose of providing and addressing the needs of the Title X network.

For those that are familiar with the current setup at regional training centers, it's very similar to what we have done in the past. Part of the tasks will be to

address national strategies relating to specific priority issues in priority populations. This training center as well as the other four training centers are going to be awarded as cooperative agreements. So those will also require that there be a lot of back and forth work with OPA headquarters to address these priority topics as stated in the announcement as well as those that arrived throughout the period of performance.

And finally as we just stated working with OPA and other training centers to coordinate meeting specifically the Title to National Grantee Meeting and possibly other technical assistance support meetings.

The second training center is for Management and Systems Improvement. This is going to focus on the ability to strengthen Title X programs and projects to effectively address management and systems issues. One of the ideas behind this was really to focus on how the program as well as the Family Planning Centers can adapt to relative -- excuse me -- the Affordable Care Act and other relevant parts of that not necessarily the whole Affordable Care Act, but those that are specific to the family planning, Title X, and delivery of the services that we do.

In addition to that another focus area is the Title X financial management assessing Title X workforce issues and implementing changes if necessary around there, help provide training to technical assistance with regard to health information technology including electronic medical records and other technologies, and finally linking with other public health programs to address new models of care. So not only having those networks in place, but really working with federally qualified health centers, community health centers, and other areas in your communities or even at the state level to help develop these linkages so that services can be provided seamlessly.

The training center is the National Training Center for Service Delivery. Again this is really going to focus on a training center to enhance the ability of Title X agencies, the Family Planning Centers, and their sub recipients to continue to provide high-quality family planning services. Part of the focus will be not only addressing TA needs as they arise, but also focus on the implementation of the Title X guidelines, regulations, and all of our other administrative guidance as far as how the program should be carried out. And this will include any new guidance that may be coming out in the future.

In addition to that, they'll focus on outreach strategies for specific populations. This could possibly include males, adolescents, and other vulnerable populations. They'll be responsible for providing contraceptive updates as well as STD updates and other relative medical updates that are national in scope. And finally again addressing capacity redevelop for grantees and their sub recipients. So really helping grantees develop capacity so that they can begin training their sub recipients and providing some forms of technical assistance to them.

And the fourth training center within Part A is the National Training Center for Quality Assurance, Quality Improvement, and Program Evaluation. The main purpose of this is really to implement these QA/QI programs to improve in efficiency, improve performance, and support evaluation. One of the important parts within Title X is to make sure not only are we doing things with high-quality, but that we're being responsive to the needs of the public and this is one of the ways that we're going to be working to improve and ensure that we are being responsive.

In addition to that, this training center will provide training and technical assistance on topics that improve compliance with Title X as well as grants management requirement. Those pieces can include developing and

improving performance measures, strengthening program and evaluation both at the grantee and at the sub recipient level, improve compliance with Title X regulation guidelines and program instructions, improve clinic efficiency, and then also at that larger bullet pointed out ensure or help ensure that there is ongoing compliance with the Office of Grants Management. And some of those requirements will be stated and restated later in the call.

That's the quick part of Part A. We're going to go ahead through Part B which is the second part of the joint announcement that we have with the division of STD prevention and the Technical Assistance Training Center are the STD-related reproductive health, prevention, training and technical assistance centers. So I'm going to give this over to Steven Shapiro and his colleagues over at CDC.

Steven Shapiro:

Thanks David. Good afternoon everybody. This is Steve Shapiro. I'm (currently) the National Infertility Prevention Project Coordinator as well as Strategic Priorities Coordinator for Adolescents and Youth and I'll be going through our sets of slides fairly quickly describing the Part B of this funding opportunity announcement. Oh good, it worked. Okay.

So the purpose of this announcement is as stated on this slide to enhance the prevention and control of all STDs including STD-related productive health adverse outcomes and this FOA hopes to do that through providing support to family planning. And STD clinics are providing support to agencies who will provide technical assistance and training to family planning and STD clinics and providers through training and technical assistance through identifying and disseminating, promising, and best practices, improving disease reporting, and strengthening management practices and quality improvement efforts.

We intend to award up to ten separate agencies through this cooperative agreement. The approximate average award will be in the range of \$150,000 to \$170,000 per agency per year. The ceiling of an individual agency award will be \$300,00 and that includes direct costs, the budget period will be 12 months, and the project period as David stated before is five years.

The agencies that we fund through the funding opportunity announcement and cooperative agreement will be expected to provide technical assistance and training to state, local, territorial, and tribal STD in Title X family planning programs to first build and/or strengthen capacity for program management and delivery of STD prevention services and to improve the quality of those STD prevention services.

Applicants as you develop your application for this funding opportunity announcement, you should address your expertise and experience in the five areas listed on this slide. It is important that you prioritize your narratives to show your expertise in at least two of the three top activities here using STD prevention, STD prevalence monitoring data for program planning, experience in health systems management including third-party billing and reimbursement and quality improvement, and/or expertise in assessing and disseminating, promising, and/or best practices. Numbers 4 and 5 should also be addressed, but those will be looked at less critically in the application review process.

This slide certainly gives you a lot of ideas about the activities of these centers of excellence, these regional training centers in collaboration with state, local, territorial, and tribal STD in Title X family planning programs. Awardees will be expected to assist in the development of a prevalence sponsoring needs assessment, perform and coordinate efforts to support the implementation, use, and evaluation of prevalence monitoring, and assist in the development of

NWX-OS-OGC-RKVL Moderator: David Johnson

4-26-12/11:04 am CT Confirmation # 5661293

Page 9

a needs assessment to describe barriers and opportunities with regards to

implementing third-party billing and reimbursement systems for STD

prevention services.

Awardees will also be expected to provide training and technical assistance to

state, local, territorial, and tribal STD and Title X family planning programs to

educate all sorts of providers and consumers in the community about STDs,

prevalence rates, disparities, and to promote health equity and the benefits of

program collaboration and service integration.

Awardees will be expected to collaborate with CDC in the development of

criteria for selection of promising and best practices and grantees will be

asked to identify, disseminate, and support implementation and adaptation of

promising and/or best practices and evidence-based approaches to improve

management and quality of STD-related reproductive health prevention

services.

In addition, grantees will be expected to develop and provide training,

support, implementation, evaluation, and dissemination of best practices,

coordinate one bi-annual strategic planning regional meeting, and

communicate and disseminate pertinent information among all project

partners and CDC.

Your coordination of the one bi-annual strategic planning regional meeting

which we assume will be based on the ten HHS regions will be between STD,

family planning, and other interested parties to discuss and advance ongoing

issues regarding adolescent and women's STD-related reproductive health

services.

Grantees will also be expected to act as a liaison in communicating and disseminating pertinent information among all project partners. You will maintain ongoing communication with CDC representatives, participate in periodic conference calls, and attend the bi-annual National STD Prevention Conference.

As this is a cooperative agreement, CDC staff will be substantially involved in the program activities above and beyond -- I'm sorry -- will be substantially involved in the program activities above and beyond routine grant monitoring. This is a non-research grant and research activities will not be supported. If research is proposed, the application will not be reviewed. There is a definition of research on the CDC Web site. So I'm going to turn it back to David and his colleagues at OPA in Rockville. Thank you.

David Johnson:

Great. Thanks Steven. So there's two minor things that I want to point out. Actually they're significantly major that I want to point right before we get into the grants management piece.

And that is one, the CDC announcement part that Steven just presented those awards are five years. Part A, the OPA side of it, are for four years. And in addition all of these awards will be awarded separately. So there will be four awards in Part A and up to ten awards in Part B for each of the regions. So I just wanted to clarify that. And for Part A, applications should be submitted that are national in scope. So Part A everything is national in scope. And so with that, you know, we'll certainly have some questions afterwards -- I'm trying to get the, oh there we go, the mouse back -- so we're going to go ahead with Alice Bettencourt, the Director of the Office of Grants Management within the Office of the Assistant Secretary for Health.

Alice Bettencourt:

Good afternoon or good morning everyone depending on where you are. I want to actually say something about the slide that David skipped over which is to read the entire funding announcement. I can't tell you how many times applications get disqualified or not accepted because somebody didn't read the entire announcement. So everything in there matters. Make sure you read it. This is taking awhile. And we're going to reiterate, read the entire announcement.

Okay. So my office, the Office of Grants Management handles the administrative business and budgetary responsibilities related to your grants. We have a number of policies and rules and regulations that apply including grants policy directives, a grants policy statement that is published on the HHS Web site as well as federal rules and regulations that are applicable to HHS grants and government-wide grants.

So we have the management and oversight of the pre-award processes including the actual competition, issuing the notice of award, all post-award processes such as budget revision, changes of scope, your federal financial reports which are your financial status reports, and eventually audit resolution on a yearly basis depending on the amount of federal funds you receive and your grants closeout activities at the end of your four or five-year should you be successful.

So the applicants have to be - we have a screen out criteria for responsiveness that applicants must be able to offer - that's not the right one David, yes. Hold on a second folks, we got an errant slide in there. Here we go. Okay. So these are for the training and technical assistance cooperative agreements and applicants must be able to offer -- yes, we still don't have, sorry about that folks. Yes okay.

Page 12

All of your application materials will be on grants.gov. For some of you who

may be considering applying in our existing grantees, you may have gone in

through Grant Solutions before. That is no longer the case. Everything for

applying is now on grants.gov.

Eligible applicants are public or non-profit private entities located in a U.S.

state or territory and you must provide proof of your non-profit status. State-

based and community-based organizations and American Indian and Alaskan

native, Native American organizations are also eligible to apply and you must

be able to demonstrate the capacity to carry out the requirements of the

project.

We have this year what we're calling a responsiveness criteria so you must be

able to demonstrate significant experience of health-related training and

technical assistance activities related to the design, development,

implementation, successful completion, and evaluation of those projects as

well as evidence of familiarity with planning in reproductive-related

prevention issues specifically but not limited to Title X. Your application will

not be reviewed any further if we determine that you do not meet this

responsiveness criteria.

The program announcement provides the information and guidance that you

need related to these applications. Follow the program announcement

carefully. This takes precedence over any other conflicting information you

have. If you're a previous applicant or grantee don't think we used to, I used

to provide this, don't we need to provide this checklist or that checklist. What

is in this year's announcement is what you need to follow.

For your application be complete and do not leave blanks on the forms unless the information doesn't apply to you. The system should make sure that you're filling out all the boxes that you have to complete.

The individual who's submitting the application forms must have the legal authority to act on behalf of the organization. Grants.gov will only accept applications from those who are authorized representatives within the system. If you don't have your account setup, if you're a new applicant you need to make sure you get these accounts established now. They take some time and this is not something you can do at the last minute.

Your application content. You must clearly describe your administrative, management, and training capability required to deliver these services. Your project must include all the requirements identified in the funding announcement. And a successful application will have all of the evidence of the systems of training and technical assistance, quality assurance, personnel, administration, and your experience related to this programmatic area.

So your content will include your required forms, your budget information which is two part -- your detailed budget, and then your budget justification -- and then your project narrative depending on which Part A or Part B you are applying for.

These are the administrative requirements that you must have. A lot of these are related to legislation passed over the last few years related to transparency and the reporting of spending that you receive from the federal government. So you need to make sure that you have a DUNS number. You need to make sure that you're registered in the Central Contactor Registry. You will need to complete an HHS project abstract. We continue to get asked for those by Congress and (Ellen B.) and other folks. Please make sure - do not trick the

Page 14

system and put an X In your project abstract narrative section. We need an

abstract from you.

You need your standard Form 424 which is the application for federal assistance, the 424A which is actually a third piece of the budget -- that's the form that the information goes on -- your disclosure of lobbying activities, and the notification of project management form as well as your evidence of non-

profit status and if you have one your indirect cost rate agreement.

You must have as early as possible if you do not already have it, your Dun & Bradstreet number - your DUNS number. And then you must go to the Central Contractor Registry and make sure that your organization is registered. The CCR says it will take a minimum of five days to complete. There's some time in there that you do not control which is an IRS approval that your registration goes through and that itself can sometimes take four to five days. So if you do

not already have a CCR entry, you need to.

For those of you who already do, please check your registration. Those expire after a year and you need to go in at least every year to make sure that your information is accurate and up-to-date. And this happens at two stages of the process. Grants.gov will not accept your application if you do not have an active CCR registration. If it's in there and pending that does not count, it will not accept your application. And then should you be successful in the competition and be considered for an award, we cannot make an award to you if your registration is not active. Again it doesn't matter if it's pending. It must be a completed registration in active status.

The application narrative, we have two page limits. Okay. So Part A, your narrative section can be 40 pages. Your total submission of your appendices can be up to 100 pages. For Part B 20 pages for the narrative, 75 pages total. If

the application exceeds either of those page limit totals, the application will be deemed ineligible and not reviewed. We will not pull off the extra pages and still review it. It will not be reviewed. They need to be double spaced pages using 12 point font. The items that are excluded are your standard forms: the budget, the budget justification, your assurance forms, all of those forms that are required.

You need to limit your appendices. Just because we allow the pages does not mean use them all. Please only provide appendices that are relevant to your application. Do not include brochures or bound materials. In fact there's no way to do that anymore. We are completely electronic now. Hard copies are not accepted. We do not take any hard copies.

Your project narrative is the heart of your application. It provides the information that demonstrates the need for the project. It describes your organizational capacity both programmatically as well as for the business and grants management aspects of your organization. Provides specific information related to how you will develop and implement the required services. And this is essentially if you are successful our agreement with you that you must implement once you're awarded unless we negotiate some changes before the award is made. So make sure what you're putting in there is what you intend to do and want to do because will hold you to it. You should include both an objectives that are smart and establish a specific work plan and evaluation plan for the project.

So your scope of services again make sure this describes what it is that you plan to do and want to do. Any changes to it if you are successful on an award have to go through a prior approval for a change to your scope. You cannot make the change and then let us know afterward. It is a prior approval requirement.

The budget, you need to be consistent with the requirements for Title X and budgeted costs must be derived from your proposed activities. Please make sure they match. Go through what you wrote in the narrative. Make sure the budget matches both the activities, the personnel, all of this should fit together as a single package, and the budget justification should be through. Make sure you are explaining all of the items that you have as cost items.

So you need to follow the - as I said the 424A is the standard form. It's a less detailed budget. It goes by the official budget categories that we use at HHS. Actually, it's government-wide. It's a government-wide budget categories. It should identify all sources of project funds. If you are proposing program income those sorts of things, you need to make sure that's all identified on your form and you need to indicate if you have an indirect cost rate as well as your project costs that you are proposing for future years.

We also want to make sure you're aware of, we now have a statutory salary limitation. The salary of an individual compensated through this cooperative agreement must not exceed executive level 2 which right now is currently \$179,700 exclusive of fringe benefits. That's the rate of the salary. So if it's 50%, you only get half of that that you can charge to this grant. And the detailed budget justification as I mentioned, you need to just make sure that you're providing all of the justifications especially on the salary as we now have this salary limitation. So make sure you're providing all of the detail that we will need to make sure that these are allowable as well as reasonable costs.

If you're not familiar with them, you should find the OMB circular that applies to you depending on what type of organization you are: a non-profit, a university, or the regulations if you're a hospital. So we have them all listed here for you.

So as I mentioned, we only have one submission mechanism now and that is the grants.gov web portal. We also have a uniform due date - deadline. It's 5:00 pm on the due date, no later and just make sure you leave yourself enough time to get it in by 5:00 pm. Applications submitted after the deadline will not be accepted. Applications that don't meet the requirements in the funding opportunity announcement will not be reviewed.

You also need to make sure that you initiate your applications early to address any problems. Grants Solutions has a verification process, that must be completed. If you get kicked out because you didn't submit your application soon enough and you fail verification after the deadline, we cannot accept your application afterwards. And grants.gov will send you a tracking number and please make sure you keep this should any problems occur. Those applications all have to be transmitted to another system that we use to make the award so make sure you keep your tracking number in case something happens.

Again to mention the verification process. That can take up to 48 hours. It will kick your application out for things like being too big, for not being submitted by the authorized representative. Those are two of the most common reasons that they fail verification. As I mentioned if it fails verification after the submission deadline, there will not be an opportunity to resubmit. We will not accept the application not even if you email it to us or somehow try to get to us, it will not be accepted.

Also the applications are submit to the state Single Point of Contact Program so check the list to see if your state participates to give them an opportunity to provide us comments on your application.

NWX-OS-OGC-RKVL Moderator: David Johnson

4-26-12/11:04 am CT Confirmation # 5661293

Page 18

Another reminder, read the entire funding announcement. Okay. Your applications will be reviewed according to the criteria listed in the program announcement. So that's another reminder. Make sure you read through the entire thing and that you what you write responds to everything in that

announcement.

Our grants management staff will also review it for administrative and business compliance to make sure that you're not an excluded party or have other outstanding issues related to you as an organization that would preclude you from getting a grant from HHS.

The eligible applications. Once we've gone through the screening process will be reviewed and scored by the reviewers with technical expertise in this field. The objective review process is formal and confidential and our staff of program staff and grants management staff are available to the panel as they do their work if they have any questions and to ensure they're following the process.

Funding decisions. These are made with input from the objective review committee. It is a recommendation from them as well as our internal staff reviews both from the program office and the grants management office as well as the likelihood of achieving the benefits expected are all considered when making the funding decisions. The final awards will be made by the Deputy Assistant Secretary for Population Affairs in consultation with the program staff. And as we mentioned Part A is up to four years, Part B is up to five years. Subsequent years will be non-competing continuation applications submitted on a yearly basis. So your budget period is also one year at a time.

The Office of Grants Management should you be successful will be your official contact point for you as a grantee. All official communication would go between the Office of Grants Management and the successful applicant.

If you are unsuccessful, the Office of Population Affairs will notify you that you've been unsuccessful and you will communicate regularly with your program project officer who oversees the programmatic details. And the Office of Grants Management will maintain your official grant file. That's why it's important that you communicate and make sure all communication goes through your assigned grants management specialist once you have one.

The final project budget may be negotiated during the review process if there are things that we want to discuss, you may hear from us. It just means you're being considered for an award. It does not mean you are getting an award.

And flexibility and schedule and resource planning is expected and you do have some flexibility once you're awarded to move things around. But then also there could be things that are done in consultation with the program offices based on lessons learned and annual Title X priorities and incentives as well as any new requirements Congress may place on us in a given fiscal year.

You will receive a notice of award that notifies you of your successful application, your award amount, and your project and budget periods. It will include any conditions on the award. For those of you who may be current grantees with us and already received your 2012 funding, you probably notice by now you have a lot more conditions. For those of you who may be getting one, you will be getting a lot more conditions. Congress placed quite a few conditions on us in the Appropriations Act and all of these grants will have those conditions. It will also include all of your standard terms, your reporting

NWX-OS-OGC-RKVL Moderator: David Johnson 4-26-12/11:04 am CT

Confirmation # 5661293 Page 20

requirements, and your official contact information for both the grants and

program offices.

Read the entire funding announcement. Hopefully we've made that point clear

by now. So our overall tip is to be clear and complete and concise in your

project description. Follow what's in the announcement. Don't make

reviewers search for the required information. Generally the easier the

application is to review, the letter, the score and we do have multiple

reviewers and hopefully if somebody didn't find it somebody will say no, no

that was on page 12. But the easier you make it for them, the more points you

will get for your application.

Clearly identify the sections of the application and indicate which component

is being addressed. As we say, the more directly responsive it is to the

announcement the better you'll do. And it must include all of the information

within the page limits.

Make sure your objectives are smart, that the activities presented in the work

plan relate directly to your goals and objectives, and that your entire

application presents a complete picture of what you're going to do under this

project.

Your staffing should be appropriate and reasonable, be complete in describing

what they'll do, what each position will do, and include position descriptions

and biosketches in your appendices for your key staff and others that you

think may be important to your application.

And your budget should include the adequate funds. Your request should not

exceed the ceiling in the funding announcement. The budget needs to be

reasonable and directly relate to the goals and objectives. And again your

operating budget should include the federal funds you're requesting, any non-federal funds, program income that you're proposing, and any other contributing funds.

And again electronic submission is required. No more paper and don't wait until the last minute. Problems as everybody knows with technology problems can always arise. I'll turn it back over to David.

David Johnson:

Thank you Alice. So just for a quick summary. This is information as far as the two points of contact for OPA Part A and CDC Part B related to the announcement itself. And if there's additional information-related budgetary and administrative requirements, there's that contact for Robin Fuller in the announcement and it's Robin, R-O-B-I-N dot fuller, F-U-L-L-E-R@hhs.gov. And again like I said her information is in the announcement.

So right now we have some time for questions and answers. Again like I said tomorrow there'll be another call and it'll only be an audio call that will primarily focus on Part B questions, but there will be staff from OPA on Part A. There's some questions that we'll be able to answer today, but our CDC folks unfortunately had to leave at 1:00 pm and unfortunately due to the delay in the call. But if you do have those questions, please feel free and ask them and we can write them down so they'll be available to answer tomorrow. And (Katherine) can you give instructions on how to ask questions?

Coordinator:

If you would like to ask your question at this time, please unmute your phone and press star 1. Only record your first and last name. To withdraw your question, you may press star 2. Once again to ask your question, please press star 1 on your touch tone phone. One moment for the first question.

David Johnson:

You know, again for anyone who has any questions online or over the phone again the best thing to do is also look at and read the announcement. It's pretty comprehensive as far as eligibility. Those that should be able to apply as well as what types of training programs are acceptable and responsive to the announcement.

Coordinator:

And we show no questions at this time.

David Johnson:

There is an online question that we have and the question is can you have a table within the narrative? Sure. Again if you do, the format should relate to 12 point font and double spaced.

So another question that's online is related to who's available if OPA is interested in seeing different types of competition as far as different agencies. And just like our services announcement, we're certainly open to all eligible agencies applying for this and proposing applications for this in any of our projects whether it be services, training, research, or anything else that we announce.

Again as far as training programs that are appropriate to be provided with new technologies I think all training programs can be provided and proposed as long as they're appropriate and at least within your -- I'm sorry -- within your proposal and your response are well justified.

We have a question for Part B related to the average award and the ceiling as well as a question about how the funding level will be determined and what criteria should be used to determine what the budget is either different levels. So I will save that question specifically for tomorrow as well as we'll try to also this post this answer on the Web site once it's answered. In addition we'll post these slides as well.

NWX-OS-OGC-RKVL Moderator: David Johnson

4-26-12/11:04 am CT Confirmation # 5661293

As far as how this may relate to Part A which we could address better, again

the criteria used to determine how you should submit your budget and at what

amount. This should be as Alice said in her presentation, this is really about

what you're proposing to do and how you're proposing to do it and there is no

right answer as far as what the number should be. As long as the number

makes sense and it's well justified and again your budget justification is

thorough. That is the justification that you use to submit and tell the reviewers

why it's appropriate. Ultimately the funding levels will be determined by OPA

and for those for Part B in consultation with CDC.

We have another question about what percentage of the total contract or the

total budget should be allocated for evaluation within Part A. There is no

specific amount identified by OPA or within the announcement as far as what

that should be. Again related to budget in your program plan, it should be well

justified and make sense.

Coordinator: We do have an audio question at this time.

David Johnson: Okay.

Coordinator: (Jennifer), your line is open.

(Jennifer): Oh, I'm wondering about Part B. As part of providing training and technical

assistance for prevalence monitoring would we serve as the centralized

coordinating body for data collection, management, and reporting? And would

we maintain the current prevalence monitoring data system?

David Johnson: We will forward that question along to Steve and his colleagues. I would also

- if you could email that question to me so I can ensure that Steve gets it in

full. But that would be something that he and his colleagues along with (unintelligible) can respond better (unintelligible)?

(Jennifer): Okay. So we should just hold Part B questions for tomorrow then?

David Johnson: We're writing that down.

(Jennifer): Okay.

David Johnson: At the same time if you have them, it may be good to go ahead and ask them

anyways.

(Jennifer): Okay.

David Johnson: Especially if they may even relate to Part A.

(Jennifer): Thank you.

Coordinator: Once again to ask an audio question, please press star 1 and record your name.

One moment for the next question. We show no audio questions at this time.

David Johnson: There's a few other questions that are coming online and so they're moving in

a very odd way. One question is do we need to provide copies of stock letters,

special points of contact letters in the appendix.

Alice Bettencourt: Those generally are transmitted directly to us if they have any. I mean if

they send it to you and you have it then absolutely, but most of them will send

directly to HHS if they have comments.

David Johnson:

So for tomorrow - if there's no more questions and again feel free to email me as well as Steven Shapiro if you have any other additional questions. My email is David, D-A-V-I-D dot Johnson, J-O-H-N-S-O-N@hhs.gov. And Steve Shapiro's email -- actually we're going to do something even easier is sjs4 -- the number 4 - @cdc.gov and they should be up on the Web site right now as stated. There were also included in the contact section of the funding opportunity announcement. Feel free to email us directly and we can also - we'll also forward other questions to other staff if we're unable to directly answer them.

And so finally for tomorrow as referenced earlier additional questions and answers specifically to Part B, but there will be staff from the Office of Population Affairs to address any other questions that may arise between now and then. The call in number is up there. For those that are only on audio, the call in number is 1-866-774-4726. It's 866-774-4726 and the pass code when prompted is 8272806. Again 8272806 and that call will be at 4:00 pm Eastern Time.

I guess if there's no more questions then we'll go ahead and end the call. Let me check real quick to see if we have anymore online. I hope we answered your question.

Coordinator:

Thank you. We show no questions in the audio queue. Today's conference has ended. All participants may disconnect at this time.