

**Service Area Competition – Additional Area  
HRSA-13-254 Miami, Florida  
September 13, 2012**

Coordinator: Welcome and thank you for standing by. At this time participants lines are in a listen-only mode.

To ask a question during the question and answer session press Star 1 on your touch-tone phone.

Today's conference is recorded. If you have any objections you may disconnect at this time. And Cheri you may begin.

Cheri Daly: Thank you Marsha. Hi everybody. I hope you're having a great day. Welcome to the Technical Assistance call for the fiscal year 2013 Service Area Competition Additional Area or as I'm going to refer to it as SAC-AA throughout the call.

My name is Cheri Daly and I am a Public Health Analyst in the Office of Policy and Program Development within the Bureau of Primary Health Care at HRSA.

A slide presentation for this call is available at the SAC technical assistance web page. If you received an email announcement about this call, the URL for the TA web page was included in that message. If you don't have an email

announcement handy, the SAC TA page is located at [www.hrsa.gov/grants/apply/assistance/sac](http://www.hrsa.gov/grants/apply/assistance/sac). Once again that's [www.hrsa.gov/grants/apply/assistance/sac](http://www.hrsa.gov/grants/apply/assistance/sac). That's S as in service, A as in area and, C as in competition. I'm going to do my best to reference the slide numbers throughout this call so you can easily follow along.

Slide 2 provides the agenda for this call. The presentation will start with a basic overview of the Funding Opportunity Announcement including the due dates and times, the eligibility requirements, award information, and the two-tier submission process. Then I'm going to touch on the different key sections of the SAC-AA application including the program narrative, the performance measures, and the budget presentation. Today's call will conclude with a review of important facts and a list of TA contacts followed by a question and answer session. All participants are currently in a listen-only mode so please make a note of any questions that arise as we go along so you can ask them at the end of my presentation.

Slides 3 and 4 provide an overview of the focus of the SAC. This competition provides funding for the provision of comprehensive primary health care services. The SAC-AA is a competitive funding opportunity with three potential types of applicants.

First, we have the current Health Center Program grantees whose project period is ending and who are applying to continue serving their current service area.

Second, we have new applicants who do not currently have a Health Center Program grant who are applying to serve an available announced service area.

Third, we have current Health Center Program grantees who are applying to serve a new available announced service area in addition to their current service area.

Slide 5 provides a basic overview of the application and submission process. The project period varies based on the type of applicants.

All current Health Center Program grantees are eligible for a project period up to five years including those submitting supplemental applications while new applicants are only eligible for a project period for up to two years.

So please keep this in mind when outlining your plans in the program narrative, setting your goals in the performance measures, and providing your multi-year budget justification.

The project period start date is January 1, 2013 and the submission deadlines are October 10 and 24, 2012.

As you can see in this slide, applications are submitted in two parts. Basic organization and budget information will be provided in grants.gov while detailed project information will be provided in the HRSA Electronic Handbook otherwise known as EHB.

Slide 6 provides the basic eligibility requirements. Detailed eligibility criteria are available in the Funding Opportunity Announcement starting on Page 4. All applicants must be public or non-profit private entities including tribal faith-based and community-based organizations. Additionally, all applicants must propose to serve the general underserved population in the Miami, Florida service area.

Slide 7 details the basic eligibility requirements. An applicant must propose to serve the entire announced service area which includes 16 zip codes.

An applicant must serve the same target population as what is currently being served which in this case is the general underserved population.

An applicant must provide the same or comparable comprehensive primary health care services as the current grantee in the service area.

And, an applicant must request an equal or lesser amount of federal funding compared to the current grantee which in this case is 1,912,275.

Slide 8 provides details about the service area. I'd like to point out that the successful applicant for the service area will receive a notice of award for their SAC-AA grant on or about the project period start date of January 1, 2013.

Slide 9 provides basic award information. In fiscal year 2013, HRSA will award 1,912,275 or less if funding is requested by the successful applicant to one organization to support comprehensive primary health care services in Miami, Florida.

SAC-AA funding is targeted towards the provision of primary health care services so grant funding cannot be used for construction nor can it be used for fundraising, grant writing or lobbying efforts.

SAC-AA funding can support the purchase of equipment and supplies necessary for the provision of primary health care. For more information about appropriate use of the SAC-AA funding, please contact Donna Marx. Her contact information will be provided at the end of the presentation.

Slides 10 and 11 provide an overview of the two tier submission process which as I noted earlier is grants.gov and EHB.

You will also find resources for registering the multiple required systems on the SAC TA web page. The central contractor registration was moved to a new system which is now called the System for Award Management which was effective the end of July. Please read Pages 6 and 7 of the FOA for more detailed information.

If you are a current Health Center Program grantee, you should already be registered in the appropriate system. You should verify all registrations and access to both grants.gov and EHB in advance of the deadline.

Please note that phase one of the application process is completed through a successful submission to grants.gov and you will receive a validation email upon successful submission. Please check your spam folder if you do not see this email message in your inbox.

Slide 12 provides the grants.gov web address along with a list of the required grants.gov submission components and I'll read them for you. The SF424 Application for Federal Assistance, SF424B Assurance - Non-Construction Programs, the project performance site location form, grants.gov lobbying form and the SFLLL disclosure of lobbying activities.

And while we're talking about the grants.gov forms I want to quickly discuss how to complete the type of application field on these forms.

For the SF424 select new if you are a new applicant or a current Health Center Program grantee applying to serve a new service area in addition to your

current service area. Select continuation if you are a current Health Center Program grantee applying to continue serving your current service area.

Slide 13 provides the EHB web address along with a list of the required EHB submission components. This includes the program narrative, SF-424A, budget information non-construction program, budget justification, attachments, program specific forms and program specific information.

Slide 14 provides information on all the attachments. More details about the attachments can be found in Table 4 on Page 11 of the FOA.

The following attachments are required only if applicable to your organization. Attachment 6, the co-applicant agreement, will be provided by only public center applicants. Attachment 7, a summary of current service related contracts and agreements will be provided only if such contracts and agreements exist.

Attachment 12, proof of nonprofit or public center status, will be provided only if it is not already on file with an HHS agency.

Attachment 13, floor plans, will be provided for all new applicants and only the current grantees with significant changes.

Attachments 14 and 15 are where applicants can provide any additional documents. Please note that these documents will count against your page limit.

Slide 15 provides information on the forms. More details about the forms can be found in Table 5 on Page 15 of the FOA.

Form 1C, Documents on file has been revised to incorporate the Health Center Program requirements. Form 3, the income analysis form has been revised to collect specific income data. Form 5C, Other Activities and Locations is optional. The Form 6A, Current Board Member Characteristics is optional for applicants who are a tribal or urban Indian business entity as indicated on the Form 1A. The Form 6B, Request for Waiver of Governments Requirements is not applicable for applicants who are a tribal or urban Indian business entity as indicated on form 1A and/or CHC as indicated in the Budget Summary Form.

Slide 16 provides an overview of the sections of the program narrative. These are Need 15 points, Response 20 points, Collaboration 10 points, Evaluative Measures 15 points, Resources and Capabilities 20 points, Governance 10 points, and Support Requested 10 points.

We are often asked about the difference between the program narrative and the review criteria sections of the Funding Opportunity Announcement.

The program narrative provides the general items to which you will respond. The review criteria provide details and examples that should be included in a thorough response. This is the section that objective viewers will use when assessing your application. You will need to look at both sections in responding to the items in the program narrative.

Slide 17 and 18 begin the discussion of the standard clinical performance measures. The items on these slides which I have labeled as standard clinical performance measures are the ones that should be familiar to current grantees. For all applicants, of the measures on this list, only prenatal health and perinatal health can be marked not applicable. They can only be marked not applicable if you do not directly provide or pay for these services. For new

applicants, please note that all measures on these slides are defined for you with the exception of behavioral health and oral health for which you can define your own measures based on your behavioral health and oral health services. Details about these clinical performance measures can be found on the SAC Technical Assistance web page.

Slide 19 provides a list of the new clinical performance measures which are coronary artery disease - lipid therapy, ischemic vascular disease - aspirin therapy and colorectal cancer screening. These new measures will appear in the Clinical Performance Measure form in EHB alongside the performance measures listed on the previous slides. You can choose to either include these new measures or mark them as not applicable and provide a justification. The justification could be as simple as baseline data not yet available. Either way, if your application is funded, you will be required to be put in the new measures in the 2012 UDS Report which is a yearly data report required for all Health Center Program grantees which we submitted in early 2013.

Slide 20 provides a list of the financial performance measures. These measures have not changed since last year. As in the past, the three audit related measures noted on the slide with an asterisk can be noted not applicable by only tribal and public center applicants. Once again, details about the financial performance measures can be found on the SAC Technical Assistance web page.

Slide 21 provides general performance measure information. All applicants can add additional performance measures by selecting the Other Measure button at the bottom of the performance measure form in EHB. If you are a current Health Center Program grantee and you are no longer tracking a previously defined other performance measure, the measure can be marked not applicable to keep it from pre-populating in future budget period renewals



and service area competition applications. However, this requires a justification in the comments field.

Any information that will not fit in the Performance Measures form due to character limits should be provided in the Evaluative Measures section of the program narrative. Please be reminded that any information included in the program narrative counts against your page limit. Lastly, for key factor type you must specify at least one key contributing and one restricting factor.

Slide 22 provides special instructions for current Health Center Program grantees applying to continue serving their current service area. Current health center grantees applying to continue serving their current service area will not be able to edit their baseline data for the required measures. If you would like to report more current baseline data, this information should be included in the comments field. Please note that the performance measures will be pre-populated with data from the 2011 UDS Report. Additionally, you should use the Performance Measure Form to provide not only your predicted contributing and restricting factors and major planned actions, but also a brief description of any progress made towards achieving your performance measure goals.

Slide 23 provides information about the budget justification. In addition to completing a standard form, applicants must also provide a budget justification which we also refer to as a budget narrative. Because new applicants can only apply for a two year project period, they must provide a two year budget justification.

Current Health Center Program grantees whether they are applying to continue serving a service area or applying to serve a new service area in addition to their current service area, must provide a five year budget

justification. The budget justification must provide sufficient information to show that costs are reasonable and necessary for implementation of the proposed project. If the line item budget justification which will consist of sections such as personnel, travel, and supplies does not provide for sufficient detail, additional narrative should be provided to fully explain all costs.

Salary limitation - Federal funds may not be used to pay the salary of an individual at a rate in excess of \$179,700.

Slide 24 highlights important facts. First, your submission may not exceed 150 pages. Tables 2 through 5 of the Funding Opportunity Announcement will highlight items which will be included in the page limit.

Slide 25 provides an overview of resources for technical assistance and there are many sources of support available throughout the application process. So please listen carefully as I describe each one.

The most commonly accessed resource is the Service Area Competition Technical Assistance web page. I will read it again. It's located at [www.hrsa.gov/grants/apply/assistance/sac](http://www.hrsa.gov/grants/apply/assistance/sac). On this site you can access useful documents such as the FAQs. The contact person for program related questions is myself Cheri Daly. I can be reached at 301-594-4300 or [bphcsac@hrsa.gov](mailto:bphcsac@hrsa.gov). The other technical assistance resources you will find on slide 25.

Slide 26 provides a reminder that the Frequently Asked Questions document on the SAC TA web page will be updated throughout the application period as questions arise. Whenever documents are updated on the TA Page, you will see the revised date beside the link.

A digital audio recording will be posted on the SAC TA web page approximately one week after this call is completed. Information about how to access the replay is posted on the SAC TA web page in case you need to reference it later.

Now I would like to open the call for question and answers. Thank you.

Coordinator: Thank you. At this time we'll begin the question and answer session. To ask a question, please press Star 1 on the touch-tone phone.

Please remember to un-mute the line and record your first and last name when prompted. To withdraw the question press Star 2.

Once again please press Star 1 to ask a question.

Coordinator: Once again you may press Star 1 to ask a question.

Currently there are no questions.

Cheri Daly: Okay. Well, thank you all so very much. If you do have questions, please don't hesitate to give me a call or send me an email. Thank you. Have a great day.

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