

U.S. Department of Health and Human Services



Health Resources & Services Administration

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2023

Federal Office of Rural Health Policy

Rural Strategic Initiatives Division

Rural Communities Opioid Response Program-Evaluation

Funding Opportunity Number: HRSA-23-045

Funding Opportunity Type(s): Competing Continuation, New

Assistance Listings Number: 93.155

Application Due Date: Friday, January 27, 2023

Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately!

HRSA will not approve deadline extensions for lack of registration.

Registration in all systems may take up to 1 month to complete.

Issuance Date: Wednesday, October 26, 2022

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See [Section VII](#) for a complete list of agency contacts.

Authority: 42 U.S.C. 912(b)(5) (§ 711(b)(5) of the Social Security Act)

508 COMPLIANCE DISCLAIMER

Note: Persons using assistive technology may not be able to fully access information in this file. For assistance, email or call one of the HRSA staff listed in [Section VII. Agency Contacts](#).

EXECUTIVE SUMMARY

The [Health Resources and Services Administration \(HRSA\)](#) is accepting applications for the fiscal year (FY) 2023 Rural Communities Opioid Response Program-Evaluation (RCORP-Evaluation). The purpose of this program is to evaluate the impact of rural behavioral health strategies and methods employed under the RCORP initiative, and to develop evaluation tools and resources for use in rural communities to inform future community-led rural health initiatives.

This notice is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and award funds appropriately. You should note that this program may be cancelled before award.

Funding Opportunity Title:	Rural Communities Opioid Response Program-Evaluation
Funding Opportunity Number:	HRSA-23-045
Due Date for Applications:	Friday, January 27, 2023
Anticipated FY 2023 Total Available Funding:	\$5,000,000
Estimated Number and Type of Award(s):	One cooperative agreement
Estimated Annual Award Amount:	Up to \$5,000,000 per award per year subject to the availability of appropriated funds
Cost Sharing/Match Required:	No
Period of Performance:	September 1, 2023-August 31, 2027 (4 years)

Eligible Applicants:	Eligible applicants include domestic public or private, non-profit and for-profit entities. Domestic faith-based and community-based organizations, tribes, and tribal organizations are also eligible to apply. See Section III.1 of this notice of funding opportunity (NOFO) for complete eligibility information.
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Application Guide

You (the applicant organization/agency) are responsible for reading and complying with the instructions included in this NOFO and in [HRSA's SF-424 R&R Application Guide](#). Visit [HRSA's How to Prepare Your Application page](#) for more information.

Technical Assistance

HRSA has scheduled the following webinar:

Tuesday, November 8, 2022

1–2 p.m. ET

Weblink: <https://hrsa.gov.zoomgov.com/j/1600011267?pwd=YStEQk5Kb0h6VGxzRHVCUHBYS2prdz09>

Attendees without computer access or computer audio can use the dial-in information below

Call-In Number: 1-833-568-8864

Passcode: 40087164

HRSA will record the webinar. For a recording of the webinar, please email ruralopioidresponse@hrsa.gov

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I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity to apply for funding under the Rural Communities Opioid Response Program-Evaluation (RCORP-Evaluation). The purpose of this cooperative agreement is to evaluate the impact of rural behavioral health strategies and methods employed under the RCORP initiative, and to develop evaluation tools and resources for use in rural communities to inform future community-led rural health initiatives.

The RCORP-Evaluation cooperative agreement has three primary goals, which are to:

1. Analyze, synthesize, and disseminate data and information to relevant stakeholders regarding the extent to which the RCORP initiative has improved health care in rural areas;
2. Strengthen the capacity of RCORP award recipients to collect, report, and disseminate data to enhance the quality and sustainability of their behavioral health care activities; and
3. Enhance rural communities' ability to anticipate, prepare for, and respond to emerging behavioral health care issues, including substance use disorder (SUD)/opioid use disorder (OUD)-related issues that would further negatively affect rural communities.

[For more details, see Program Requirements and Expectations.](#)

2. Background

This program is authorized by Section 711(b)(5) of the Social Security Act (42 U.S.C. 912(b)(5)), which grants HRSA's Federal Office of Rural Health Policy (FORHP) authority to "administer grants, cooperative agreements, and contracts to provide TA and other activities as necessary to support activities related to improving health care in rural areas."

The RCORP-Evaluation cooperative agreement will continue and enhance the RCORP evaluation efforts that began in FY 2019 under [HRSA-19-083](#). RCORP is a multi-year, \$575 million initiative administered by HRSA that provides community-based grants and technical assistance to rural communities to address behavioral health care needs, including SUD. Since its inception in FY 2018, RCORP has provided services to over 1,500 rural communities across 47 states and two territories. RCORP is one of the activities explicitly included in the [HHS Overdose Prevention Strategy](#) released in October 2021. Visit [here](#) to learn more about the RCORP initiative.

The RCORP programs currently within the scope of the RCORP evaluation include:

- [RCORP-Implementation](#)
- [RCORP-MAT Expansion](#)
- [RCORP-Neonatal Abstinence Syndrome](#)
- [RCORP-Psychostimulant Support](#)
- [RCORP-Behavioral Health Care Support](#)
- [RCORP-MAT Access](#)
- [RCORP-Rural Centers of Excellence on Substance Use Disorders](#)
- [RCORP-Behavioral Health Care Technical Assistance](#)

Over the course of the four-year period of performance, HRSA may fund new programs under RCORP, and these programs would also be incorporated into the RCORP evaluation.

Given the scale and impact RCORP has had on the rural behavioral health care field, it is important to assess RCORP's effects on **health outcomes, sustainability, capacity, and access**, to ensure the strategies and methods maintain positive outcomes. The data and information collected, analyzed, and disseminated as part of this cooperative agreement will enable relevant stakeholders to more efficiently identify and address evolving behavioral health/SUD needs and target limited resources. Finally, even within rural communities, there exist behavioral health care disparities, including among racial/ethnic minorities. As a result, the RCORP-Evaluation cooperative agreement recipient will help assess the extent to which RCORP strategies are reaching the most at-risk and high-need populations and advancing behavioral health equity. These efforts will contribute to the general knowledge of rural behavioral health care and identify successful service delivery models that work in rural areas. Additionally, the evaluation activities will help track rural communities' progress towards meeting Healthy People 2030 objectives.

It is expected that the RCORP-Evaluation cooperative agreement recipient will align evaluation activities with other FORHP- and HRSA-wide evaluation initiatives to ensure consistency in data/information reporting.

II. Award Information

1. Type of Application and Award

Type(s) of applications sought: Competing Continuation, New

HRSA will provide funding in the form of a cooperative agreement. A cooperative agreement is a financial assistance mechanism where HRSA anticipates substantial involvement with the recipient during performance of the contemplated project.

In addition to the usual monitoring and technical assistance (TA) provided directly to award recipients, HRSA program involvement will include:

- Participate and provide guidance and input in the planning and development of RCORP evaluation activities;
- Review the evaluation approach and provide input on the approach during the period of performance;
- Review and provide guidance and input on resources and publications developed under the cooperative agreement prior to public dissemination for format, tone, and expected impact;
- Help facilitate the collaboration and communication between the RCORP-Evaluation cooperative agreement recipient, the RCORP award recipients, the RCORP-Behavioral Health Care Technical Assistance (RCORP-BHCTA) cooperative agreement recipient, the RCORP-Centers of Excellence on Substance Use Disorder, and other stakeholders relevant to the RCORP initiative;
- Help facilitate collaboration and communication between the RCORP-Evaluation cooperative agreement recipient and other FORHP- or HRSA-wide evaluation efforts;
- Provide RCORP award recipient materials and award recipient-reported data to the RCORP-Evaluation cooperative agreement recipient for analysis;
- Create and submit the performance measure data collection package to the Office of Management and Budget (OMB); and
- Identify opportunities and provide guidance on strategies for disseminating information about programs, activities, and resources, including key organizations through which the RCORP-Evaluation cooperative agreement recipient may share information.

In addition to adhering to all applicable federal regulations and public policy requirements, the cooperative agreement recipient's responsibilities will include:

Program Goal 1: Analyze, synthesize, and disseminate data and information regarding the impact of the RCORP initiative on rural communities.

- Provide timely analysis and synthesis of RCORP award recipient-reported data and information reported to HRSA;
- Utilize RCORP award recipient-reported data, in conjunction with secondary data sources, to determine progress, trends, technical assistance needs, successes, and emerging areas of concern;

- In collaboration with HRSA, identify and communicate technical assistance needs gleaned from RCORP award recipient-reported data to the RCORP-BHTCA recipient and RCORP-Centers of Excellence on Substance Use Disorder in an ongoing and timely manner;
- Utilize various platforms, **including a public-facing website**, to provide RCORP award recipients, rural communities, and the broader public with regularly updated data and information about the impact of RCORP on rural communities;
- Develop materials including, but not limited to, one-pagers, presentations, and posters, for various audiences to highlight key qualitative and quantitative findings from the RCORP initiative and their relevance to the broader rural behavioral health care field;
- Assess the extent to which RCORP programs are reaching the most disadvantaged sub-populations within rural communities; and
- In collaboration with HRSA, ensure that activities are aligned with and complement other FORHP- or HRSA-wide evaluation efforts.

Program Goal 2: Strengthen the capacity of RCORP award recipients to collect, report, and disseminate data to enhance the quality and sustainability of their behavioral health care activities.

- Provide regular and responsive technical assistance to RCORP award recipients to strengthen their ability to collect accurate and timely behavioral health care data, including data they are required to report to HRSA;
- Provide technical assistance to RCORP award recipients on how to disseminate data/information through a variety of mediums to secure community buy-in for their behavioral health care activities and inform their communities---and the broader public---about their efforts; and
- Develop materials including, but not limited to, one-pagers and presentations, that synthesize best practices in behavioral health care data collection identified by RCORP award recipients.

Program Goal 3: Enhance rural communities' ability to anticipate, prepare for, and respond to emerging behavioral health care issues, including SUD/ODU-related issues that would further negatively affect rural communities.

- In collaboration with HRSA, provide data-driven recommendations for how to strengthen existing RCORP programs and target future RCORP funding to better meet the needs of rural communities;

- Identify and publicly disseminate examples of promising/innovative practices related to behavioral health care service delivery, sustainability strategies, and other pertinent topics and their replicability and applicability to other rural communities; and
- Provide written recommendations for future rural behavioral health care research topics, based on existing gaps in the literature and trends identified during the analysis of RCORP award recipient-reported data.

2. Summary of Funding

HRSA estimates approximately \$5,000,000 to be available annually to fund one recipient. The actual amount available will not be determined until enactment of the final FY 2023 federal appropriation. You may apply for a ceiling amount of up to \$5,000,000 annually (reflecting direct and indirect costs) per year. This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and award funds appropriately.

The period of performance is September 1, 2023 through August 31, 2027 (4 years). Funding beyond the first year is subject to the availability of appropriated funds for RCORP-Evaluation in subsequent fiscal years, satisfactory progress, and a decision that continued funding is in the best interest of the Federal Government.

HRSA may reduce or take other enforcement actions regarding recipient funding levels beyond the first year if the cooperative agreement recipient is unable to fully succeed in achieving the goals listed in application.

All HRSA awards are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements at [45 CFR part 75](#).

III. Eligibility Information

1. Eligible Applicants

Eligible applicants include domestic public or private, non-profit and for-profit entities. Domestic faith-based and community-based organizations, tribes, and tribal organizations are also eligible to apply.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

HRSA may not consider an application for funding if it contains any of the non-responsive criteria below:

- Exceeds the funding ceiling amount
- Fails to satisfy the deadline requirements referenced in [Section IV.4](#)

NOTE: Multiple applications from an organization are not allowed. HRSA will only accept and review your **last** validated electronic submission before the [Grants.gov application due date](#).

IV. Application and Submission Information

1. Address to Request Application Package

HRSA **requires** you to apply electronically. HRSA encourages you to apply through [Grants.gov](#) using the SF-424 Research and Related (R&R) workspace application package associated with this notice of funding opportunity (NOFO) following the directions provided at [Grants.gov: HOW TO APPLY FOR GRANTS](#). If you use an alternative electronic submission, see [Grants.gov: APPLICANT SYSTEM-TO-SYSTEM](#).

Form Alert: For the [Project Abstract Summary](#), applicants using the SF-424 R&R Application Package are encountering a “Cross-Form Error” associated with the Project Summary/Abstract field in the “Research and Related Other Project Information” form, Box 7. To avoid the “Cross-Form Error,” you must attach a blank document in Box 7 of the “Research and Related Other Project Information” form and use the Project Abstract Summary Form in workspace to complete the Project Abstract Summary. See Section IV.2.i [Project Abstract](#) for content information.

The NOFO is also known as “Instructions” on Grants.gov. You must select “Subscribe” and provide your email address for HRSA-23-045 in order to receive notifications including modifications, clarifications, and/or republications of the NOFO on Grants.gov. You will also receive notifications of documents placed in the RELATED DOCUMENTS tab on Grants.gov that may affect the NOFO and your application. *You are ultimately responsible for reviewing the [For Applicants](#) page for all information relevant to this NOFO.*

2. Content and Form of Application Submission

Application Format Requirements

Section 4 of HRSA's [SF-424 R&R Application Guide](#) provides general instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, and certifications. You must submit the information outlined in HRSA [SF-424 R&R Application Guide](#) in addition to the program-specific information below. You are responsible for reading and complying with the instructions included in this NOFO and HRSA's [SF-424 R&R Application Guide](#). You must submit the application in the English language and in the terms of U.S. dollars (45 CFR § 75.111(a)).

See Section 8.5 of the HRSA [SF-424 R&R Application Guide](#) for the Application Completeness Checklist to assist you in completing your application.

Application Page Limit

The total of uploaded attachment pages that count against the page limit shall be no more than the equivalent of **50 pages** when printed by HRSA.

Forms that DO NOT count in the page limit:

- Standard OMB-approved forms included in the workspace application package do not count in the page limit. The abstract is the standard form (SF) "Project Abstract Summary." It does not count in the page limit.
- The indirect cost rate agreement does not count in the page limit.

If there are other attachments that do not count against the page limit, this will be clearly denoted in Section IV.2.vi Attachments.

If you use an OMB-approved form that is not included in the workspace application package for HRSA-23-045, it may count against the page limit. Therefore, we strongly recommend you only use Grants.gov workspace forms associated with this NOFO to avoid exceeding the page limit.

- HRSA will flag any application that exceeds the page limit and redact any pages considered over the page limit. The redacted copy of the application will move forward to the objective review committee.

It is important to take appropriate measures to ensure your application does not exceed the specified page limit.

Applications must be complete and validated by Grants.gov under HRSA-23-045 before the [deadline](#).

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification

- 1) You certify on behalf of the applicant organization, by submission of your proposal, that neither you nor your principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- 2) Failure to make required disclosures can result in any of the remedies described in [45 CFR § 75.371](#), including suspension or debarment. (See also 2 CFR parts 180 and 376, and 31 U.S.C. § 3354).
- 3) If you are unable to attest to the statements in this certification, you must include an explanation in *Attachment #6: Other Relevant Documents*.

See Section 4.1 viii of HRSA's [SF-424 R&R Application Guide](#) for additional information on all certifications.

Program Requirements and Expectations

In addition to the cooperative agreement responsibilities listed in [Section II](#) of the NOFO, the cooperative agreement recipient is expected to:

- Adhere to HRSA guidelines pertaining to acknowledgement and disclaimer on all products produced by HRSA award funds, per Section 2.2 of the HRSA's [SF-424 Application Guide](#) (Acknowledgement of Federal Funding);
- Adhere to and utilize HRSA's definition of rural counties, as defined by the [Rural Health Grants Eligibility Analyzer](#);
- Adhere to Section 508 of the Rehabilitation Act of 1973, as amended;
- Allow HRSA to obtain all data produced under the cooperative agreement (e.g., evaluation data, information, reports, and other resources) as required by 45 CFR § 75.322(d) during and beyond the period of performance (e.g., through a restricted file);
- Participate in weekly monitoring and planning calls with HRSA Project Officer;
- Coordinate technical assistance, resources, and dissemination strategies with the RCORP-Behavioral Health Care Technical Assistance cooperative agreement recipient; the RCORP-Rural Centers of Excellence on Substance Use Disorders; and other relevant stakeholders;
- Respond to HRSA and RCORP award recipient requests, comments, and questions in a timely manner;
- HRSA anticipates re-competing this cooperative agreement in FY 2027. In the event that the cooperative agreement recipient does not receive the award in FY 2027, they should help ensure a smooth handoff and transition to the new award recipient;

- If additional RCORP grant programs are funded in future fiscal years, incorporate those programs into the evaluation scope of work; and
- Maintain a public-facing website that contains regularly updated data and information about the impact of RCORP on rural communities.

Program-Specific Instructions

In addition to application requirements and instructions in Section 4 of HRSA’s [SF-424 R&R Application Guide](#) (including the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract), include the following:

i. **Project Abstract**

Use the Standard OMB-approved Project Abstract Summary Form that is included in the workspace application package. Do not upload the abstract as an attachment or it may count toward the page limit. See [Form Alert](#) in Section IV.1 Application Package. For information required in the Project Abstract Summary Form, see Section 4.1.ix of HRSA’s [SF-424 R&R Application Guide](#).

NARRATIVE GUIDANCE

To ensure that you fully address the review criteria, the table below provides a crosswalk between the narrative language and where each section falls within the review criteria. Any forms or attachments referenced in a narrative section may be considered during the objective review.

<u>Narrative Section</u>	<u>Review Criteria</u>
Introduction	(1) Need
Needs Assessment	(1) Need
Methodology	(2) Response and (4) Impact
Work Plan	(2) Response
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (4) Impact
Organizational Information	(5) Resources/Capabilities
Budget Narrative	(6) Support Requested

ii. **Project Narrative**

This section provides a comprehensive description of all aspects of the proposed project. It should be succinct, self-explanatory, consistent with forms and attachments, and organized in alignment with the sections and format below so that reviewers can understand the proposed project.

Successful applications will contain the information below. Please use the following section headers for the narrative:

- **INTRODUCTION** -- Corresponds to Section V's Review Criterion #1---[NEED](#)

This section should succinctly state the applicant's qualifications and experience conducting evaluations of large-scale rural health initiatives and how the proposed methodology will advance the program's [stated goals](#).

- **NEEDS ASSESSMENT** -- Corresponds to Section V's Review Criterion #1---[NEED](#)

This section should provide a detailed discussion of the challenges and/or gaps related to:

- Assessing and disseminating the impact of the RCORP initiative, given the diversity of RCORP programs, communities served, consortium member types, etc.;
- Assessing and disseminating the impact of the technical assistance and other resources and tools developed by the RCORP-Behavioral Health Care Technical Assistance and RCORP-Rural Centers of Excellence on Substance Use Disorders cooperative agreement recipients;
- Rural award recipients' ability to collect and report timely and accurate behavioral health care data;
- Rural communities' capacity to leverage data to anticipate, prepare for, and respond to emerging behavioral health care issues, including SUD/ODU-related issues;
- Research on/knowledge of behavioral health care needs in rural communities and rural-appropriate service delivery models; and
- Research on/knowledge of behavioral health care disparities within rural communities.

- *METHODOLOGY -- Corresponds to Section V's Review Criteria #2 and 4--
[RESPONSE AND IMPACT](#)*

Please include the following in this section:

- Methods that you will use to implement each of the previously described [project goals and corresponding cooperative agreement responsibilities](#). It is strongly encouraged that you use the subheadings “Program Goal 1,” “Program Goal 2,” and “Program Goal 3.” Please also address how you will address the previously described [program requirements and expectations](#) in this NOFO;
- Justification for why you selected the proposed methods/approach to fulfilling the project goals and cooperative agreement responsibilities; and
- Description of how strategies implemented during the period of performance will continue to have an impact after federal funding ends, including how evaluation activities will enhance HRSA and rural communities’ ability to identify and respond to future behavioral health care trends, needs, and disparities.

- *WORK PLAN -- Corresponds to Section V's Review Criterion #2--[RESPONSE](#)*

This section describes the processes that you will use to achieve the strategies in the “Methodology” section. Note that while the “Methodology” section of the Project Narrative centers on the overall strategy for fulfilling the required activities, the work plan is more detailed and focuses on the tasks, activities, and timelines by which you will execute your strategy.

The work plan should span the four-year period of performance and, at a minimum, include the following information:

- Each previously described [cooperative agreement recipient responsibility](#).
 - Tasks/activities associated with each previously described [cooperative agreement responsibility](#).
 - Products associated with each previously described [cooperative agreement responsibility](#).
- Timeline for completing each activity and/or deliverable. At a minimum, timelines should be broken down into quarters. It is not acceptable to list “ongoing” as a timeframe.
- Staff who will be responsible for completing each activity and/or deliverable.

It is strongly recommended that you submit the work plan in a table format. Please provide your work plan in **Attachment 1**. (It is appropriate to refer reviewers to **Attachment 1** in this section instead of including the work plan twice in the application.)

- **RESOLUTION OF CHALLENGES** -- Corresponds to Section V's Review Criterion #2---[RESPONSE](#)

Discuss challenges that you are likely to encounter in designing and implementing the evaluation activities described in [Section II](#), and approaches that you will use to resolve such challenges. As appropriate, provide short examples from previous evaluations, including challenges and successful resolutions.

- **EVALUATION AND TECHNICAL SUPPORT CAPACITY** -- Corresponds to Section V's Review Criteria #3 and 4---[EVALUATIVE MEASURES](#) and [IMPACT](#)

Describe the plan for your project's performance evaluation that will contribute to continuous quality improvement. The program performance evaluation should monitor ongoing processes and the progress towards the goals and objectives of the project. Include descriptions of the inputs (e.g., organizational assets, collaborative partners, key personnel, budget, and other resources), key processes, and expected outcomes of the funded activities.

Additionally, clearly describe how evaluation results and lessons learned will be communicated to RCORP award recipients and other relevant stakeholders. Please include examples of mediums/platforms for disseminating this information and experience using these such platforms.

- **ORGANIZATIONAL INFORMATION** -- Corresponds to Section V's Review Criterion #5---[RESOURCES AND CAPABILITIES](#)

Please provide the following organizational information in this section:

- Brief description of your organization's current mission and structure, and scope of current activities;
- Description of previous or current experience in evaluating largescale rural behavioral health care programs. Include relevant individuals on staff, materials published, and/or other tools and resources developed;
- Description of previous or current experience in evaluating the quality and effectiveness of technical assistance provided to rural health organizations. Include relevant individuals on staff, materials published, and/or other tools and resources developed;
- Description of your organization's ability to remain flexible and adapt to changing HRSA, grant recipient, and rural community priorities and needs;

- Overview of your organization’s capacity to collaborate closely with HRSA, other RCORP award and cooperative agreement recipients, and other rural stakeholders to implement the evaluation activities;
- Description of your organization’s ability to provide overall financial and programmatic management; and
- Discussion of how the organization will, properly account for the federal funds and document all costs.

Additionally, please include the following attachments:

- One-page organizational chart (**Attachment 2**) that clearly shows the internal hierarchy among project staff at the applicant organization as well as the applicant organization’s relationship to any external organizations that will be actively involved in the project;
- Staffing plan (**Attachment 3**) that should at a minimum include a Project Director¹ that devotes sufficient time and resources (at least 0.50 FTE is recommended) to the project and an individual responsible for coordinating with the RCORP-Behavioral Health Care Technical Assistance and RCORP-Rural Centers of Excellence on Substance Use Disorders cooperative agreement recipients. The staffing plan should contain the following information and include all key personnel listed in the work plan:
 - Name
 - Title
 - Organizational affiliation
 - Relevant certifications and degrees
 - Full-time Equivalent (FTE) dedicated to this project
 - Roles/responsibilities on the project
 - Timeline and process for hiring or onboarding, if applicable
 - **NOTE: If a staff member has yet to be hired (TBH), please put “TBH” in lieu of a name and detail the process and timeline for hiring and onboarding the new staff, as well as the qualifications and expertise required by the position.**
- One-page biosketches for all key personnel reflected in the work plan (**Attachment 4**). The biosketches should demonstrate that staff have the necessary expertise and qualifications for executing their designated roles and responsibilities on the project.
- Signed and dated letter(s) of commitment from any external organizations formally collaborating (i.e., through a contractual agreement) on this project (**Attachment 5**). The letter(s) should include the following:

¹ The Project Director is the point person on the award and makes staffing, financial, and other decisions to align project activities with project outcomes. You should detail how the Project Director will facilitate collaborative input and engagement with HRSA, other organizations, and rural communities to complete the proposed work plan during the period of performance.

- Commitment to working with the applicant organization on the project;
- Anticipated time commitment and duration of involvement on the project;
- Anticipated roles/responsibilities on the project; and
- Relevant experience, qualifications, and/or expertise that align with their roles and responsibilities on the project.

iii. **Budget**

The directions offered in the [SF-424 R&R Application Guide](#) may differ from those offered by Grants.gov. Follow the instructions in Section 4.1.iv of HRSA's [SF-424 R&R Application Guide](#) and the additional budget instructions provided below. A budget that follows the *R&R Application Guide* will ensure that, if HRSA selects your application for funding, you will have a well-organized plan and, by carefully following the approved plan, may avoid audit issues during the implementation phase.

Reminder: The Total Project or Program Costs are the total allowable costs (inclusive of direct **and** indirect costs) you incur to carry out a HRSA-supported project or activity. Total project or program costs include costs charged to the award and costs borne by you to satisfy a matching or cost-sharing requirement, as applicable.

The RCORP-Evaluation budget and budget narrative should reflect proposed expenditures for each of the four years of the cooperative agreement. Applicant organizations are strongly encouraged to demonstrate how their budget will maximize their capacity to implement the proposed project (e.g., by limiting indirect costs).

As required by the Consolidated Appropriations Act, 2022 (P.L. 117-103), "None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II." See Section 4.1.iv Budget – Salary Limitation of HRSA's [SF-424 R&R Application Guide](#) for additional information. Note that these or other salary limitations may apply in the following fiscal years, as required by law.

iv. **Budget Justification Narrative**

See Section 4.1.v of HRSA's [SF-424 R&R Application Guide](#).

v. **Attachments**

Provide the following items in the order specified below to complete the content of the application. **Unless otherwise noted, attachments count toward the [application page limit](#).** Your indirect cost rate agreement and proof of non-profit status (if applicable) will not count toward the page limit. **Clearly label each attachment.** You must upload attachments into the application. HRSA and the objective review committee will not open/review any *hyperlinked* attachments.

Attachment 1: Work Plan

Please attach a work plan that includes all the information requested in [Section IV.2.ii. Project Narrative](#). It is strongly recommended that the work plan be provided in a table format.

Attachment 2: Project Organizational Chart

Provide a one-page organizational chart that clearly shows the internal hierarchy among project staff at the applicant organization as well as the applicant organization's relationship to any partner organizations that will be involved in the project.

Attachment 3: Staffing Plan

Please attach a staffing plan that includes all the information requested in [Section IV.2.ii. Project Narrative](#).

Attachment 4: Staff Biosketches (see Section 4.1.vi. of HRSA's [SF-424 R&R Application Guide](#))

Please include one-page biosketches for all key personnel reflected in the work plan.

Attachment 5: Letters of Commitment

Signed and dated letter(s) of commitment from any external organizations formally collaborating on this project. See [Section IV.2.ii. Project Narrative](#) for more information.

Attachment 6-15: Other relevant documents

Include here any other documents that are relevant to the application (e.g., indirect cost rate agreements)

3. Unique Entity Identifier (UEI) and System for Award Management (SAM)

Effective April 4, 2022:

- The UEI assigned by [SAM](#) has replaced the Data Universal Numbering System (DUNS) number.
- Register at [SAM.gov](#) and you will be assigned a UEI.

You must register with SAM and continue to maintain active SAM registration with current information at all times when you have: an active federal award, an active application, or an active plan under consideration by an agency (unless you are an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or you have an exception approved by the agency under 2 CFR § 25.110(d)). For your SAM registration, you must submit a notarized letter appointing the authorized Entity Administrator.

If you are chosen as a recipient, HRSA will not make an award until you have complied with all applicable SAM requirements. If you have not fully complied with the requirements by the time HRSA is ready to make an award, you may be deemed not qualified to receive an award, and HRSA may use that determination as the basis for making an award to another applicant.

If you have already completed Grants.gov registration for HRSA or another federal agency, confirm that the registration is still active and that the Authorized Organization Representative (AOR) has been approved.

The Grants.gov registration process requires information in two separate systems:

- System for Award Management (SAM) (<https://sam.gov/content/home> | [SAM Knowledge Base](#))
- Grants.gov (<https://www.grants.gov/>)

For more details, see Section 3.1 of HRSA's [SF-424 R&R Application Guide](#).

If you fail to allow ample time to complete registration with SAM or Grants.gov, you will not be eligible for a deadline extension or waiver of the electronic submission requirement.

4. Submission Dates and Times

Application Due Date

The application due date under this NOFO is **Friday, January 27, 2023 at 11:59 p.m. ET**. HRSA suggests you submit your application to Grants.gov at least **3 calendar days before the deadline** to allow for any unforeseen circumstances. See Section 8.2.5 – Summary of emails from Grants.gov in HRSA's [SF-424 R&R Application Guide](#) for additional information.

5. Intergovernmental Review

RCORP-Evaluation is subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

See Section 4.1 ii of HRSA's [SF-424 R&R Application Guide](#) for additional information.

6. Funding Restrictions

You may request funding for a period of performance of up to 4 years, at no more than \$5,000,000 per year (inclusive of direct **and** indirect costs). This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and

award funds appropriately. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

The General Provisions in Division H of the Consolidated Appropriations Act, 2022 (P.L. 117-103) apply to this program. See Section 4.1 of HRSA's [SF-424 R&R Application Guide](#) for additional information. Note that these and other restrictions will apply in the following fiscal years, as required by law.

You cannot use funds under this notice for the following purposes:

- To acquire real property;
- For construction;
- Foreign travel;
- To pay for any equipment costs not directly related to the purposes for which the grant is awarded; and/or
- Provision of clinical services.

You are required to have the necessary policies, procedures, and financial controls in place to ensure that your organization complies with all legal requirements and restrictions applicable to the receipt of federal funding including statutory restrictions on specific uses of funding. It is imperative that you review and adhere to the list of statutory restrictions on the use of funds detailed in Section 4.1 of HRSA's [SF-424 R&R Application Guide](#). Like all other applicable grants requirements, the effectiveness of these policies, procedures, and controls is subject to audit.

Be aware of the requirements for HRSA recipients and subrecipients at 2 CFR § 200.216 regarding prohibition on certain telecommunications and video surveillance services or equipment. For details, see the [HRSA Grants Policy Bulletin Number: 2021-01E](#).

All program income generated as a result of awarded funds must be used for approved project-related activities. Any program income earned by the recipient must be used under the addition/additive alternative. You can find post-award requirements for program income at [45 CFR § 75.307](#).

V. Application Review Information

1. Review Criteria

HRSA has procedures for assessing the technical merit of applications to provide for an objective review and to assist you in understanding the standards against which your application will be reviewed. HRSA has indicators for each review criterion to assist you in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation.

Reviewers will evaluate and score the merit of your application based upon these criteria.

Six review criteria are used to review and rank RCORP-Evaluation applications. Below are descriptions of the review criteria and their scoring points.

Criterion 1: NEED (10 points) – Corresponds to Section IV's [Introduction](#) and [Needs Assessment](#) sections

- The extent to which the applicant succinctly and clearly states their qualifications and experience conducting evaluations of large-scale rural health initiatives and how their proposed methodology will advance the program's stated goals;
- The extent to which the applicant demonstrates an understanding of the key challenges and gaps in assessing and disseminating the impact of rural behavioral health programs and technical assistance;
- The extent to which the applicant demonstrates an understanding of the gaps in the research/knowledge of behavioral health care needs in rural communities and rural-appropriate service delivery models;
- The extent to which the applicant demonstrates an understanding of the gaps in research/knowledge of behavioral health care disparities within rural communities;
- The extent to which the applicant comprehensively describes the challenges/gaps surrounding rural award recipients' ability to collect and report timely and accurate behavioral health care data; and
- The extent to which the applicant comprehensively describes the challenges/gaps surrounding rural communities' capacity to leverage data to anticipate, prepare for, and respond to emerging behavioral health care issues, including SUD/ODU-related issues.

Criterion 2: RESPONSE (40 points) – Corresponds to Section IV’s [Methodology](#), [Work Plan](#), and [Resolution of Challenges](#) sections

Methodology (20 points)

- The extent to which the applicant proposes clear, effective, and feasible methods to implement each of the [project goals and corresponding cooperative agreement responsibilities](#); and
- The extent to which the applicant provides a strong justification for the selection of their methods/approach to fulfilling each of the [project goals and corresponding cooperative agreement responsibilities](#).

Work Plan (15 points)

- The extent to which the work plan spans a four-year period of performance;
- The extent to which the work plan includes feasible timeframes for all activities/tasks/products;
- The extent to which activities/tasks/deliverables support each of the [project goals and corresponding cooperative agreement responsibilities](#);
- The extent to which appropriate staff members are assigned to activities/tasks/deliverables; and
- The clarity and completeness of the work plan.

Resolution of Challenges (5 points)

- The extent to which the applicant identifies and describes key challenges that they are likely to encounter in designing and implementing the evaluation activities described in [Section II](#); and
- The innovativeness and feasibility of the applicant’s proposed approach for resolving such challenges.

Criterion 3: EVALUATIVE MEASURES (5 points) – Corresponds to Section IV’s [Evaluation and Technical Support Capacity](#) section

- The quality and comprehensiveness of the applicant’s proposed plan for the program performance evaluation that will contribute to continuous quality improvement;
- The thoroughness and specificity of the applicant’s plan to monitor ongoing processes and the progress towards the goals and objectives of the project; and
- The reasonableness of inputs into the program performance evaluation (e.g., organizational profile, collaborative partners, key personnel, budget, and other resources), key processes, and expected outcomes of the funded activities.

Criterion 4: IMPACT (10 points) – Corresponds to Section IV’s [Methodology](#) and [Evaluation and Technical Support Capacity](#) sections

- The extent to which the proposed project has a public health impact and the project will be effective, if funded;
- The effectiveness of plans for dissemination of evaluation results and lessons learned to relevant stakeholders, including examples of mediums/platforms for disseminating this information; and
- The thoroughness with which the applicant describes how the strategies implemented during the period of performance will continue to have an impact after federal funding ends, including how evaluation activities will enhance rural communities’ ability to identify and respond to future behavioral health care trends, needs, and disparities.

Criterion 5: RESOURCES/CAPABILITIES (30 points) – Corresponds to Section IV’s [Organizational Information](#) section

Organizational capacity/expertise (15 points)

- The extent to which the applicant demonstrates their capacity to successfully implement the proposed work plan;
- The extent to which the applicant has previous or current experience in evaluating largescale rural behavioral health care programs, including experience evaluating the quality and effectiveness of technical assistance programs;
- The quality and clarity of the applicant’s organizational chart;
- The thoroughness which the applicant demonstrates that they have the ability to remain flexible and adapt to changing grant recipient and rural priorities and needs;
- (If applicable) The completeness and thoroughness of any signed and dated letter(s) of commitment from any external organizations formally collaborating (i.e., through a contractual agreement) on the project;
- The capacity of the applicant to collaborate closely with HRSA, other RCORP award and cooperative agreement recipients, and other rural stakeholders to implement the evaluation activities and ensure efforts are aligned with other FORHP- and HRSA-wide evaluation initiatives; and
- The extent to which the applicant demonstrates their ability to provide overall financial and programmatic management, including properly accounting for the federal funds and documenting all costs.

Personnel (15 points)

- The extent to which the applicant demonstrates the Project Director will provide sufficient time and resources to the project (a 0.50 or higher FTE is recommended);
- The extent to which the Project Director has the capacity and expertise to serve as the point person on the award; make staffing, financial, and other decisions to align project activities with project outcomes; and facilitate collaborative input and engagement with HRSA, other partner organizations, and rural communities to complete the proposed work plan during the period of performance;
- The extent to which the applicant designates an individual responsible for coordinating with the RCORP-Behavioral Health Care Technical Assistance and RCORP-Rural Centers of Excellence on Substance Use Disorders cooperative agreement recipients;
- The extent to which the staffing plan is clear, comprehensive, and includes all key personnel cited in the work plan;
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives; and
- The extent to which biosketches for all **hired** key personnel reflected in the work plan are included and demonstrate that staff have the necessary expertise and qualifications for executing their designated roles and responsibilities on the project.

Criterion 6: SUPPORT REQUESTED (5 points) – Corresponds to Section IV's [Budget and Budget Narrative](#) sections

- The reasonableness of the proposed budget for each year of the period of performance in relation to the objectives, the complexity of the evaluation activities, and the anticipated results;
- The extent to which the applicant demonstrates how their budget will maximize their capacity to implement the proposed project (e.g., by limiting indirect costs); and
- The extent to which the applicant provides a budget and budget narrative for each year of the four-year period of performance.

2. Review and Selection Process

The objective review process provides an objective evaluation of applications to the individuals responsible for making award decisions. The highest ranked applications receive consideration for award within available funding ranges. HRSA may also

consider assessment of risk and the other pre-award activities described in Section 3 below. See Section 5.3 of HRSA's [SF-424 R&R Application Guide](#) for more details.

3. Assessment of Risk

HRSA may elect not to fund applicants with management or financial instability that directly relates to the organization's ability to implement statutory, regulatory, or other requirements ([45 CFR § 75.205](#)).

HRSA reviews applications receiving a favorable objective review for other considerations that include past performance, as applicable; cost analysis of the project/program budget; assessment of your management systems, ensuring continued applicant eligibility; and compliance with any public policy requirements, including those requiring just-in-time submissions. HRSA may ask you to submit additional programmatic or administrative information (such as an updated budget or "other support" information) or to undertake certain activities (such as negotiation of an indirect cost rate) in anticipation of an award. However, even at this point in the process, such requests do not guarantee that HRSA will make an award. Following review of all applicable information, HRSA's approving and business management officials will determine whether HRSA can make an award, if special conditions are required, and what level of funding is appropriate.

Award decisions are discretionary and are not subject to appeal to any HRSA or HHS official or board.

HRSA is required to review and consider any information about your organization that is in the [Federal Awardee Performance and Integrity Information System \(FAPIIS\)](#). You may review and comment on any information about your organization that a federal awarding agency previously entered. HRSA will consider your comments, in addition to other information in [FAPIIS](#) in making a judgment about your organization's integrity, business ethics, and record of performance under federal awards when completing the review of risk as described in [45 CFR § 75.205 HHS Awarding Agency Review of Risk Posed by Applicants](#).

HRSA will report to FAPIIS a determination that an applicant is not qualified ([45 CFR § 75.212](#)).

VI. Award Administration Information

1. Award Notices

HRSA will release the Notice of Award (NOA) on or around the start date of September 1, 2023. See Section 5.4 of HRSA's [SF-424 R&R Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

See Section 2.1 of HRSA's [SF-424 R&R Application Guide](#).

If you are successful and receive an NOA, in accepting the award, you agree that the award and any activities thereunder are subject to:

- all provisions of [45 CFR part 75](#), currently in effect or implemented during the period of the award,
- other federal regulations and HHS policies in effect at the time of the award or implemented during the period of award, and
- applicable statutory provisions.

Accessibility Provisions and Non-Discrimination Requirements

Should you successfully compete for an award, recipients of federal financial assistance (FFA) from HHS must administer their programs in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age and, in some circumstances, religion, conscience, and sex (including gender identity, sexual orientation, and pregnancy). This includes ensuring programs are accessible to persons with limited English proficiency and persons with disabilities. The HHS Office for Civil Rights (OCR) provides guidance on complying with civil rights laws enforced by HHS. See [Providers of Health Care and Social Services](#) and [HHS Nondiscrimination Notice](#).

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. For guidance on meeting your legal obligation to take reasonable steps to ensure meaningful access to your programs or activities by limited English proficient individuals, see [Fact Sheet on the Revised HHS LEP Guidance](#) and [Limited English Proficiency](#).
- For information on your specific legal obligations for serving qualified individuals with disabilities, including reasonable modifications and making services accessible to them, see [Discrimination on the Basis of Disability](#).
- HHS-funded health and education programs must be administered in an environment free of sexual harassment. See [Discrimination on the Basis of Sex](#).

- For guidance on administering your program in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see [Conscience Protections for Health Care Providers](#) and [Religious Freedom](#).

Please contact the [HHS Office for Civil Rights](#) for more information about obligations and prohibitions under federal civil rights laws or call 1-800-368-1019 or TDD 1-800-537-7697.

The HRSA Office of Civil Rights, Diversity, and Inclusion (OCRDI) offers technical assistance, individual consultations, trainings, and plain language materials to supplement OCR guidance and assist HRSA recipients in meeting their civil rights obligations. Visit [OCRDI's website](#) to learn more about how federal civil rights laws and accessibility requirements apply to your programs, or contact OCRDI directly at HRSACivilRights@hrsa.gov.

Executive Order on Worker Organizing and Empowerment

Pursuant to the Executive Order on Worker Organizing and Empowerment (E.O. 14025), HRSA strongly encourages applicants to support worker organizing and collective bargaining and to promote equality of bargaining power between employers and employees. This may include the development of policies and practices that could be used to promote worker power. Applicants can describe their plans and specific activities to promote this activity in the application narrative.

Requirements of Subawards

The terms and conditions in the NOA apply directly to the recipient of HRSA funds. The recipient is accountable for the performance of the project, program, or activity; the appropriate expenditure of funds under the award by all parties; and all other obligations of the recipient, as cited in the NOA. In general, the requirements that apply to the recipient, including public policy requirements, also apply to subrecipients under awards, and it is the recipient's responsibility to monitor the compliance of all funded subrecipients. See [45 CFR § 75.101 Applicability](#) for more details.

Data Rights

All publications developed or purchased with funds awarded under this notice must be consistent with the requirements of the program. Pursuant to [45 CFR § 75.322\(b\)](#), the recipient owns the copyright for materials that it develops under an award issued pursuant to this notice, and HHS reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use those materials for federal purposes, and to authorize others to do so. In addition, pursuant to [45 CFR § 75.322\(d\)](#), the Federal Government has the right to obtain, reproduce, publish, or otherwise use data produced under this award and has the right to authorize others to receive, reproduce, publish, or otherwise use such data for federal purposes, e.g., to

make it available in government-sponsored databases for use by others. If applicable, the specific scope of HRSA rights with respect to a particular grant-supported effort will be addressed in the NOA. Data and copyright-protected works developed by a subrecipient also are subject to the Federal Government's copyright license and data rights.

Human Subjects Protection

Certificate of Confidentiality: Institutions and investigators are responsible for determining whether research they conduct is subject to Section 301(d) of the Public Health Service (PHS) Act. Section 301(d), as amended by Section 2012 of the 21st Century Cures Act, P.L. 114-255 (42 U.S.C. 241(d)), states that the Secretary shall issue Certificates of Confidentiality (Certificates) to persons engaged in biomedical, behavioral, clinical, or other research activities in which identifiable, sensitive information is collected. In furtherance of this provision, HRSA-supported research commenced or ongoing after December 13, 2016 in which identifiable, sensitive information is collected, as defined by Section 301(d), is deemed issued a Certificate and therefore required to protect the privacy of individuals who are subjects of such research. Certificates issued in this manner will not be issued as a separate document, but are issued by application of this term and condition to the award. For additional information which may be helpful in ensuring compliance with this term and condition, see Centers for Disease Control and Prevention (CDC) Additional Requirement 36 (<https://www.cdc.gov/grants/additional-requirements/ar-36.html>).

3. Reporting

Award recipients must comply with Section 6 of HRSA's [SF-424 R&R Application Guide](#) and the following reporting and review activities:

- 1) **Progress Reports:** The recipient must submit a Non-Competing Continuation (NCC) progress report to HRSA **annually**. More information will be available in the NOA.
- 2) **Final Closeout Report:** A final report is due within 90 days after the period of performance ends. Additional information will be provided upon receipt of award.
- 3) **Federal Financial Report:** The Federal Financial Report (SF-425) is required no later than January 30 for each budget period. The report is an accounting of expenditures under the project that year. HRSA will provide more specific information in the Notice of Award.
- 4) **Integrity and Performance Reporting:** The NOA will contain a provision for integrity and performance reporting in [FAPIS](#), as required in [45 CFR part 75 Appendix XII](#).

Note that the OMB revisions to Guidance for Grants and Agreements termination provisions located at [2 CFR § 200.340 - Termination](#) apply to all federal awards effective August 13, 2020. No additional termination provisions apply unless otherwise noted.

VII. Agency Contacts

You may request additional information and/or technical assistance regarding business, administrative, or fiscal issues related to this NOFO by contacting:

Kimberly Dews
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
Phone: 301-443-0655
Email: kdews@hrsa.gov

You may request additional information regarding the overall program issues and/or technical assistance related to this NOFO by contacting:

Kamu Aysola
Attn: RCORP-Evaluation
Federal Office of Rural Health Policy
Health Resources and Services Administration
Phone: 301-443-5217
Email: kaysola@hrsa.gov

You may need assistance when working online to submit your application forms electronically. Always obtain a case number when calling for support. For assistance with submitting the application in Grants.gov, contact Grants.gov 24 hours a day, 7 days a week, excluding federal holidays at:

Grants.gov Contact Center
Phone: 1-800-518-4726 (International callers dial 606-545-5035)
Email: support@grants.gov
[Self-Service Knowledge Base](#)

Successful applicants/recipients may need assistance when working online to submit information and reports electronically through [HRSA's Electronic Handbooks \(EHBs\)](#). Always obtain a case number when calling for support. For assistance with submitting in the EHBs, contact the HRSA Contact Center, Monday–Friday, 7 a.m. to 8 p.m. ET, excluding federal holidays at:

HRSA Contact Center

Phone: (877) 464-4772 / (877) Go4-HRSA

TTY: (877) 897-9910

Web: <http://www.hrsa.gov/about/contact/ehbhelp.aspx>

VIII. Other Information

Technical Assistance

See [TA details](#) in Executive Summary.

Tips for Writing a Strong Application

See Section 4.7 of HRSA's [SF-424 R&R Application Guide](#).

APPENDIX: Page Limit Worksheet

The purpose of this worksheet is to give you a tool to ensure the number of pages uploaded into your application is within the specified [page limit](#). (Do not submit this worksheet as part of your application.)

The Standard Forms listed in column 1 do not count against the page limit; however, attachments to the Standard Forms listed in column 2 do count toward the page limit. For example, the Budget Narrative Attachment Form does not count, however the attachment uploaded in that form does count against the page limit.

Standard Form Name <i>(Forms themselves do not count against the page limit)</i>	Attachment File Name <i>(Unless otherwise noted, attachments count against the page limit)</i>	# of Pages <i>Applicant Instruction – enter the number of pages of the attachment to the Standard Form</i>
Application for Federal Assistance (SF-424 - Box 14)	Areas Affected by Project (Cities, Counties, States, etc.)	<i>My attachment = ___ pages</i>
Application for Federal Assistance (SF-424 - Box 16)	Additional Congressional District	<i>My attachment = ___ pages</i>
Application for Federal Assistance (SF-424 - Box 20)	Is the Applicant Delinquent On Any Federal Debt?	<i>My attachment = ___ pages</i>
Attachments Form	Work Plan	<i>My attachment = ___ pages</i>
Attachments Form	Project Organizational Chart	<i>My attachment = ___ pages</i>
Attachments Form	Staffing Plan	<i>My attachment = ___ pages</i>
Attachments Form	Staff Biosketches	<i>My attachment = ___ pages</i>
Attachments Form	Letters of Commitment	<i>My attachment = ___ pages</i>
Attachments Form	Other Attachments	<i>My attachment = ___ pages</i>
Project/Performance Site Location Form	Additional Performance Site Location(s)	<i>My attachment = ___ pages</i>
Project Narrative Attachment Form	Project Narrative	<i>My attachment = ___ pages</i>

Standard Form Name (Forms themselves do not count against the page limit)	Attachment File Name (Unless otherwise noted, attachments count against the page limit)	# of Pages Applicant Instruction – enter the number of pages of the attachment to the Standard Form
Budget Narrative Attachment Form	Budget Narrative	<i>My attachment = ___ pages</i>
# of Pages Attached to Standard Forms		<i>Applicant Instruction Total the number of pages in the boxes above.</i>
Page Limit for HRSA-23-045 is 50 pages		My total = ___ pages