U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

HRSA
Health Resources & Services Administration

HIV/AIDS Bureau
Division of Policy and Data

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*Ryan White HIV/AIDS Program - Data Integration, Systems,
and Quality Technical Assistance*
Funding Opportunity Number: HRSA-20-070
and
Ryan White HIV/AIDS Program - TargetHIV
Funding Opportunity Number: HRSA-20-094
Funding Opportunity Type: New
Assistance Listings (CFDA) Number: 93.914

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2020

Application Due Date: January 22, 2020

*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, including SAM.gov and Grants.gov,
may take up to 1 month to complete.*

Issuance Date: November 15, 2019

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Authority: Sections 2606 and 2654(b) of the Public Health Service (PHS) Act (42 U.S.C. §§ 300ff-16 and 300ff-54(b)), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (P.L 111-87)

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA), HIV/AIDS Bureau (HAB) Division of Policy and Data (DPD) is accepting applications for fiscal year (FY) 2020 for the *Ryan White HIV/AIDS Program - Data Integration, Systems, and Quality Technical Assistance (HRSA-20-70)* and the *Ryan White HIV/AIDS Program - TargetHIV (HRSA-20-094).* The purpose of these programs is to fund the development and dissemination of training and technical assistance (T/TA) to support RWHAP recipients and sub-recipients with the development and implementation of HIV care programs.

HRSA will award one cooperative agreement for each program, with each addressing one of the following two T/TA focus areas:
- The Data Integration, Systems, and Quality (DISQ) Technical Assistance (TA) Program (HRSA-20-070) provides on-site and virtual T/TA to RWHAP recipients and subrecipients to increase data-related capacity and improve the completeness, accuracy, and consistency of program data. This includes, but is not limited to, data related to the RWHAP Services Report (RSR), the AIDS Drug Assistance Program (ADAP) Data Report (ADR), AIDS Education and Training Center (AETC) Report, HIV Quality Measures (HIVQM) Module, and Ending the HIV Epidemic module. In addition, the DISQ Program provides on-site and virtual T/TA on data integration activities, including, but not limited to extracting and linking data from external data systems to support overall data quality, completeness, and accuracy, as well as clinical and programmatic development.
- The TargetHIV (HRSA-20-094) provides readily accessible, up-to-date T/TA tools and resources via a web-based platform.

Funding Opportunity Title:	*Ryan White HIV/AIDS Program- FV* (HRSA-20-070) *and* *Ryan White HIV/AIDS Program- TargetHIV* (HRSA-20-094)
Due Date for Applications:	January 22, 2020
Anticipated Total Annual Available FY 2020 Funding:	HRSA-20-070 - up to $800,000 HRSA-20-094 - up to $700,000
Estimated Number and Type of Award(s):	HRSA-20-070- One (1) cooperative agreement HRSA-20-094 One (1) cooperative agreement
Estimated Award Amount:	HRSA-20-070 - up to $800,000 annually HRSA-20-094 - up to $700,000 annually
Cost Sharing/Match Required:	No

Period of Performance:	HRSA-20-070	July 1, 2020 through June 30, 2025
	HRSA-20-094	July 1, 2020 through June 30, 2025
	Each period of performance is for five (5) years.	
Eligible Applicants:	Eligible applicants are public and nonprofit private entities, including institutions of higher education and academic health science centers involved in addressing HIV related issues on a national scope. 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.	

Application Guide

You (the applicant organization/agency) are responsible for reading and complying with the instructions included in HRSA's *SF-424 Application Guide,* available online at http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf, except where instructed in this NOFO to do otherwise.

Technical Assistance

HRSA has scheduled the following technical assistance webinar:

Date: Monday, December 9, 2019
Time: 1:00 -3:00 PM Eastern Time
URL: https://hrsa.connectsolutions.com/nofowebinar-hrsa-20-070and-094/
Conference Number: 888-790-6569
Participant Code: 50047996

The webinar will be recorded and should be available for viewing by Friday, December 13, 2019 at the TargetHIV website: https://targethiv.org/library/nofos.

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I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity to apply for funding under the *Ryan White HIV/AIDS Program- Data Integration, Systems, and Quality Technical Assistance and the Ryan White HIV/AIDS Program – TargetHIV.* The purpose of these national training and technical assistance (T/TA) programs is to fund a series of activities to provide support to HRSA's RWHAP recipients and subrecipient providers. These activities will support several program focus areas intended to enhance access to high quality HIV care and support services for people with HIV who are low income and underserved in the United States. HRSA will award one cooperative agreement for each of the following announcement numbers:

- **HRSA-20-070** -The Technical Assistance Provider funded under HRSA-20-070 will be responsible for providing on-site and virtual T/TA to Ryan White HIV/AIDS Program (RWHAP) recipients and subrecipients to increase data-related capacity and improve the completeness, accuracy, and consistency of program data.
- **HRSA-20-094** -The Technical Assistance Provider funded under HRSA-20-094 will be responsible for disseminating training and technical assistance resources to address the needs of providers of HIV care and support services.

 Organizations may choose to submit applications for both announcement numbers and potentially receive both of the awards. **You must apply to the announcement number that corresponds to your selected activities as stated above. If you are applying for both announcement numbers, you must submit a separate application for each.** Collaborations to secure specific expertise are encouraged. HRSA will review all applications utilizing the review criteria for each announcement number as described in Section V.1.

A. Ryan White HIV/AIDS Program – Data Integration, Systems, and Quality (DISQ) Technical Assistance (HRSA-20-070):

The purpose of the Data Integration, Systems, and Quality (DISQ) Technical Assistance program is to provide onsite and virtual technical assistance to RWHAP recipients and subrecipients to increase data-related capacity and improve the ease, completeness, timeliness, and accuracy of program data. This technical assistance program will improve RWHAP recipients' and sub-recipients' capacity to meet data-related program requirements and enhance their ability to use data to increase program efficiency and effectiveness.

The goal of DISQ is to improve program datasets by:
- Enhancing processes that recipients and subrecipients use to (a) collect, (b) integrate, (c) report, and (d) utilize data, and
- Increasing overall data quality.

There are six primary objectives to reach these goals:
- Ensure broad understanding and use of current HRSA HAB data requirements among all recipients and subrecipients.
- Assist recipients in using T/TA tools to train their subrecipients.
- Increase the use of automatic data transfer between various data systems to reduce duplication of effort and increase data quality.
- Increase recipients' testing of their systems during the year to help identify system problems and improve quality.
- Develop T/TA curricula and tools that will help recipients and subrecipients analyze data to identify disparities in care and/or develop specific steps to improve health outcomes.
- Develop effective tools and strategies using adult-learning methodologies for ongoing T/TA, outreach, collaborations, clear communication, and information sharing/dissemination that meaningfully involve communities served by the RWHAP and are culturally and linguistically relevant.

The RWHAP has two major data reporting systems—the Ryan White Services Report (RSR) and the AIDS Drug Assistance Program (ADAP) Data Report (ADR)—as well as several smaller data reporting systems: the AIDS Education and Training Center (AETC) Report, HIV Quality Management (HIVQM) Module, and Ending the HIV Epidemic Triannual Module. RWHAP recipients and subrecipients use these data for a myriad of purposes including, but not limited to, planning, prioritizing, targeting, and monitoring programs and resources, identifying and addressing gaps in care and services, and monitoring indicators of care and treatment among clients served by RWHAP. In addition, to meet RWHAP grant requirements, recipients and subrecipients submit de-identified data to HRSA HAB for their respective program(s).

RSR and ADR Reports: RWHAP recipients and sub-recipients are required to submit de-identified client-level data annually in RSR and ADR data reports.

Recipients and subrecipients collect and manage client-level data in an array of data collection systems, including electronic health records (EHR), CAREWare, or other electronic systems (e.g., scheduling systems, laboratory report systems). The complexity of the recipients' and subrecipients' data collection systems can make it challenging to analyze data for comprehensive program and clinical improvement. In addition, data collection standards vary from system to system and integration of these systems may require individual TA to create successful data submissions.

AETC Report: Annually, eight regional AETC recipients upload a series of Excel files that include information on training content and participation in training events that occurred in the previous fiscal year.

HIVQM Module: Recipients can use this tool to enter or upload aggregate data on the HRSA HAB Performance Measures. The HIVQM is voluntary and provides recipients and their subrecipients an easy-to-use and structured platform to continually monitor their performance in serving clients, set goals for performance measures and quality improvement projects, and obtain reports that compare providers regionally and nationally against other providers. As HRSA HAB further develops the HIVQM Module to allow reporting of sociodemographic stratifications and further utilizes data import

functionality, recipients and subrecipients may benefit from T/TA in generating Excel files for this data system.

Ending the HIV Epidemic Triannual Module: HRSA HAB anticipates implementing additional data collection, including a specific module that can facilitate recipient and subrecipient monitoring of progress toward national goals related to the Ending the HIV Epidemic initiative. Recipients and subrecipients will benefit from TA in extracting aggregate information from their local data systems in a standardized format that can be entered or uploaded into the Triannual Module on the number of clients receiving specific services and the number of clients who were prescribed antiretroviral medications.

Applications must demonstrate how the T/TA will function in the complex environments for the different data systems. HRSA recommends applicants review the current RSR, ADR, AETC, and HIVQM Instruction Manuals as they write their application. Manuals are available on the TargetHIV website: https://targethiv.org/library/topics/data-reporting.

B. Ryan White HIV/AIDS Program – TargetHIV (HRSA-20-094):

The purpose of TargetHIV is to serve RWHAP recipients, subrecipients, and HIV providers by providing readily accessible, up-to-date T/TA tools and resources through a web-based platform. In addition, TargetHIV includes a helpdesk offering online support (http://www.targethiv.org/).

The goal of TargetHIV is to provide a central, web-based location for products that address the T/TA needs of providers of HIV care and support services. There are five primary objectives to reach this goal:

* Advertise and promote multimedia T/TA products. This includes, but is not limited to, webcasts, podcasts, and web-based learning modules developed by RWHAP funded T/TA programs.
* Prepare, build, start, host, and update RWHAP recipient- and subrecipient-developed T/TA design content, forms, workflows, structures, and products, including (but not limited to) an anticipated HRSA HAB Recipient Online Compilation of Best Practice Strategies and Interventions, currently under development. This product will allow recipients, subrecipients, and other HIV providers access to a current and comprehensive set of evidence-informed interventions, evidence-based interventions, and emerging strategies and other T/TA products that can be modified for local use.
* Provide a platform to examine the usefulness of current T/TA products for RWHAP recipients, including identifying the strengths and weaknesses of frequently used T/TA products, and identify T/TA needs.
* Provide an online helpdesk to assist with the identification and dissemination of products and resources resulting from other RWHAP T/TA activities.
* Support access to key resources on federal, state, local, and tribal issues related to the current and changing health care landscape for RWHAP recipients and subrecipients and people with HIV.

HRSA will charge the selected recipient under HRSA-20-094 with developing and delivering creative communication tools designed to facilitate information sharing, self-learning, and collaborative TA.

2. Background

These programs are authorized by Sections 2606 and 2654(b) of the Public Health Service (PHS) Act (42 U.S.C. § 300ff-16; and § 300ff-54(b)), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (P.L 111-87).

The RWHAP supports a comprehensive system of care that ensures ongoing access to high quality HIV care, treatment, and support services to ensure people with HIV who are low-income achieve positive health outcomes. The RWHAP works toward these goals by funding direct service, local, and state programs that provide core medical and support services, health care provider training, and TA to help funded programs address implementation and emerging HIV care issues. The RWHAP's Data Integration, Systems and Quality Technical Assistance Program and the TargetHIV Program are two national HRSA HAB TA programs designed to assist RWHAP recipients with improving the effectiveness of HIV care programs.

Ending the HIV Epidemic: A Plan for America

In February 2019, the Administration announced a new initiative, Ending the HIV Epidemic: A Plan for America. This 10-year initiative beginning FY 2020 seeks to achieve the important goal of reducing new HIV infections in the United States to fewer than 3,000 per year by 2030. The first phase of the initiative will focus on 48 counties, Washington, D.C., San Juan, PR, and 7 states that have a substantial rural HIV burden. By focusing on these jurisdictions in the first phase of the initiative, the U.S. Department of Health and Human Services (HHS) plans to reduce new HIV infections by 75 percent within five years. Across the United States, the initiative will promote and implement the four Pillars to substantially reduce HIV transmissions – Diagnose, Treat, Prevent, and Respond. The initiative is a collaborative effort among key HHS agencies, primarily HRSA, the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), the Indian Health Service (IHS), and the Substance Abuse and Mental Health Services Administration (SAMHSA).

National HIV/AIDS Strategy: Updated to 2020

The National HIV/AIDS Strategy for the United States: Updated to 2020 (NHAS 2020) is a 5-year plan that details principles, priorities, and actions to guide the national response to the HIV epidemic. The RWHAP promotes robust advances and innovations in HIV health care using the National HIV/AIDS Strategy to end the epidemic as its framework. Therefore, to the extent possible, activities funded by RWHAP focus on addressing these four goals:

1) Reduce new HIV infections;
2) Increase access to care and improve health outcomes for people with HIV;
3) Reduce HIV-related health disparities and health inequities; and
4) Achieve a more coordinated national response.

To achieve these shared goals, recipients should align their organization's efforts, within the parameters of the RWHAP statute and program guidance, to ensure that people with HIV are linked to and retained in care, and have timely access to HIV treatment and the supports needed (e.g., mental health and substance use disorders services) to achieve HIV viral suppression

HIV Care Continuum
Diagnosing and linking people with HIV to HIV primary care, and ensuring people with HIV achieve viral suppression are important public health steps toward ending the HIV epidemic in the United States. The HIV care continuum has five main "steps" or stages that include: HIV diagnosis, linkage to care, retention in care, antiretroviral use, and viral suppression. The HIV care continuum provides a framework that depicts the series of stages a person with HIV engages in from initial diagnosis through their successful treatment with HIV medication. It also demonstrates the proportion of individuals with HIV who are engaged at each stage. The HIV care continuum allows recipients and planning groups to measure progress and to direct HIV resources most effectively. RWHAP recipients are encouraged to assess the outcomes of their programs along this continuum of care. Recipients should work with their community and public health partners to improve outcomes across the HIV care continuum. HRSA encourages recipients to use the performance measures developed for the RWHAP at their local level to assess the efficacy of their programs and to analyze and improve the gaps along the HIV care continuum.

According to recent data from the 2017 Ryan White Services Report (RSR), the RWHAP has made tremendous progress toward ending the HIV epidemic in the United States. From 2010 to 2017, HIV viral suppression among RWHAP patients who have had one or more medical visits during the calendar year and at least one viral load with a result of <200 copies/mL reported, has increased from 69.5 percent to 85.9 percent; additionally, racial/ethnic, age-based, and regional disparities have decreased.[1] These improved outcomes mean more people with HIV in the United States will live near normal lifespans and have a reduced risk of transmitting HIV to others.[2] Scientific advances have shown antiretroviral therapy (ART) preserves the health of people with HIV and prevents sexual HIV transmission. This means that people who take ART daily as prescribed and achieve and maintain an undetectable viral load have effectively no risk of sexually transmitting the virus to an HIV-negative partner. Such findings underscore the importance of supporting effective interventions for linking people with HIV into care, retaining them in care, and helping them adhere to their ART.

Integrated Data Sharing and Use
HRSA and CDC's Division of HIV/AIDS Prevention support integrated data sharing, analysis, and utilization for the purposes of program planning, needs assessments, unmet need estimates, reporting, quality improvement, the development of your HIV care continuum, and public health action. HRSA strongly encourages RWHAP

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[1] Health Resources and Services Administration. Ryan White HIV/AIDS Program Annual Client-Level Data Report 2017. http://hab.hrsa.gov/data/data-reports. Published December 2018. Accessed April 1, 2019.

[2] National Institute of Allergy and Infectious Diseases (NIAID). Preventing Sexual Transmission of HIV with Anti-HIV Drugs. In: ClinicalTrials.gov [Internet]. Bethesda (MD): National Library of Medicine (US). 2000- [cited 2016 Mar 29]. Available from: https://clinicaltrials.gov/ NCT00074581 NLM Identifier: NCT00074581.

Division of Policy and Data recipients to:

- Follow the principles and standards in the [Data Security and Confidentiality Guidelines for HIV, Viral Hepatitis, Sexually Transmitted Disease, and Tuberculosis Programs: Standards to Facilitate Sharing and Use of Surveillance Data for Public Health Action.](#)
- Establish data sharing agreements between surveillance and HIV programs to ensure clarity about the process and purpose of the data sharing and utilization.

Integrated HIV data sharing, analysis, and utilization approaches by state and territorial health departments can help further progress toward reaching the NHAS 2020 goals and improve outcomes on the HIV care continuum.

HRSA strongly encourages complete CD4, viral load (VL) and HIV nucleotide sequence reporting to the state and territorial health departments' HIV surveillance systems to benefit fully from integrated data sharing, analysis, and utilization. State and health departments may use CD4, VL, and nucleotide sequence data to identify cases, stage of HIV disease at diagnosis, and monitor disease progression. These data can also be used to evaluate HIV testing and prevention efforts, determine entry into and retention in HIV care, measure viral suppression, monitor prevalence of antiretroviral drug resistance, detect transmission clusters and understand transmission patterns, and assess unmet health care needs. Analyses at the national level to monitor progress toward ending the HIV epidemic can only occur if all HIV-related CD4, VL, and HIV nucleotide sequence test results are reported by all jurisdictions. CDC requires the reporting to the National HIV Surveillance System (NHSS) all HIV-related CD4 results (counts and percentages), all VL results (undetectable and specific values), and HIV nucleotide sequences.

Minority HIV/AIDS Funds from the HHS Secretary's Office (MHAF), HAB Technical Assistance, and Special Projects of National Significance (SPNS) Program

Through the MHAF and through HAB technical assistance cooperative agreements, HRSA has a number of projects that may be useful for RWHAP recipients to consider. Some select examples are:

- **Building Futures: Youth Living with HIV** at https://targethiv.org/library/hrsa-hab-building-futures-supporting-youth-living-hiv
- **The Center for Engaging Black MSM Across the Care Continuum (CEBACC)** at https://targethiv.org/cebacc
- **E2i: Using Evidence-Informed Interventions to Improve Health Outcomes among People Living with HIV** at https://targethiv.org/e2i
- **Using Community Health Workers to Improve Linkage and Retention in Care** at https://targethiv.org/chw

Below are additional examples for specific populations, co-morbidities, and program areas: https://targethiv.org/help/ta-directory

Through its SPNS Program, HRSA's HAB funds demonstration project initiatives focused on the development of effective interventions to respond quickly to emerging

needs of people with HIV receiving assistance under the RWHAP. Through these demonstration projects, SPNS evaluates the design, implementation, utilization, cost, and health related outcomes of innovative treatment models, while promoting dissemination, replication and uptake of successful interventions. SPNS findings have demonstrated promising new approaches to linking and retaining into care underserved and marginalized people with HIV. All RWHAP recipients are encouraged to review and integrate a variety of SPNS evidence-informed tools within their HIV system of care in accordance with the allowable service categories defined in [PCN 16-02 Ryan White HIV/AIDS Program Services: Eligible Individuals and Allowable Uses of Funds](...) as resources permit. SPNS related tools may be found at the following locations:

1. **Integrating HIV Innovative Practices (IHIP) (https://targethiv.org/ihip)**
   Resources on the IHIP website include easy-to-use training manuals, curricula, case studies, pocket guides, monographs, and handbooks, as well as informational handouts and infographics about SPNS generally. IHIP also hosts technical assistance (TA) training webinars designed to provide a more interactive experience with experts, and a TA help desk exists for you to submit additional questions and share your own lessons learned.

2. **Replication Resources from the SPNS Systems Linkages and Access to Care (https://targethiv.org/library/replication-resources-spns-systems-linkages-and-access-care)**
   There are Intervention manuals for patient navigation, care coordination, state bridge counselors, data to care, and other interventions developed for use at the state and regional levels to address specific HIV care continuum outcomes among hard-to-reach people with HIV.

3. **Dissemination of Evidence Informed Interventions (https://targethiv.org/library/dissemination-evidence-informed-interventions)**
   The Dissemination of Evidence-Informed Interventions initiative runs from 2015-2020 and disseminates four adapted linkage and retention interventions from prior SPNS and the Minority HIV/AIDS Funds (MHAF) from the HHS Secretary's Office initiatives to improve health outcomes along the HIV care continuum. The end goal of the initiative is to produce four evidence-informed care and treatment interventions (CATIs) that are replicable, cost-effective, capable of producing optimal HIV care continuum outcomes, and easily adaptable to the changing healthcare environment. Manuals are currently available at the link provided and will be updated on an ongoing basis.

II. Award Information

1. Type of Application and Award

Types of applications sought: New.

HRSA expects to provide funding in the form of one cooperative agreement under HRSA-20-070 and one cooperative agreement under HRSA-20-094. A cooperative

agreement is a financial assistance mechanism where substantial involvement is anticipated between HRSA and the recipient during performance of the contemplated project.

In collaboration with the recipient, **HRSA's programmatic involvement will include**:
- Contributing to and reviewing documents including training curricula, publications, and other resources prior to printing, dissemination, or implementation;
- Collaborating in the design, operation, direction, and evaluation of program focus area TA activities, including meetings, training activities, or workshops;
- Providing assistance and collaboration in the management and technical performance of activities to ensure the identification of organizations in need of assistance;
- Coordinating the T/TA efforts in the planning, development, and implementation of the various phases of these projects;
- Ensuring integration into HAB programmatic and data reporting efforts;
- Facilitating relationships with RWHAP recipients and other external stakeholders;
- Anticipating and responding to the impact of changes in the health care environment on the T/TA needs of recipients and subrecipients; and
- Collecting and analyzing data relative to national health issues, unmet need, marketplace conditions, special populations, and other key health indicators to guide current/future strategic planning, developmental efforts, and work plan activities.

Under HRSA-20-070 and HRSA-20-094, the cooperative agreement recipient's responsibilities will include:
- Providing T/TA to maximally assist RWHAP recipients and subrecipients to design and deliver HIV care programs;
- Establishing measures and methods for obtaining feedback from recipients, evaluating the process and outcome of cooperative agreement activities, and using feedback and evaluation findings to improve future work;
- Modifying activities as necessary in keeping with the changing trends and needs of the RWHAP recipients, subrecipients, and other providers of HIV care and support services;
- Coordinating with HRSA to address the T/TA needs of the target audience and assist with new/emerging strategic initiatives; and
- Negotiating with HRSA to update existing work plans at least annually, and, as needed, integrate new priorities during the funding period (e.g., through monthly strategy discussion calls, or other communication as needed)

Applicants applying to RWHAP DISQ (HRSA-20-070) have the following additional responsibilities:
- Planning, executing, and evaluating the T/TA activities; and
- Working with TargetHIV (i.e., website for hosting tools, webcasts, trainings and other resources to assist RWHAP-funded programs) to ensure all materials, tools, resources, products from the projects, and any webcasts are located and made available on the site.

Applicants applying for RWHAP TargetHIV (HRSA-20-094) have the following additional responsibilities:
- Disseminating T/TA information and tools to RWHAP recipients and subrecipients, as applicable; and
- Ensuring T/TA delivered to RWHAP recipients and subrecipients is well articulated and coordinated with other T/TA resources.

2. Summary of Funding

HRSA expects a total of approximately $1,500,000 to be available annually to fund one cooperative agreement for each of the following announcement numbers: HRSA-20-070 and HRSA-20-094.

You may apply for ceiling amounts (includes both direct and indirect, facilities and administrative costs) as follows:
- HRSA-20-070 (Data Integration, Systems, and Quality TA) $800,000 per year
- HRSA-20-094 (TargetHIV) $700,000 per year

The actual amount available will not be determined until enactment of the final FY 2020 federal appropriation. 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 in a timely manner. The period of performance is July 1, 2020, through June 30, 2025 (5 years). Funding availability in subsequent fiscal years is dependent on the availability of appropriated funds for these programs, and will also be determined by satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government.

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 are public and nonprofit entities, including institutions of higher education and academic health science centers. Faith-based and community-based organizations, tribes and tribal organizations are eligible to apply for these funds.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other Eligibility Information

HRSA will consider any application that exceeds the ceiling amount non-responsive and will not consider it for funding under this notice.

HRSA will consider any application that fails to satisfy the deadline requirements referenced in Section IV.4 non-responsive and will not consider it for funding under this notice.

NOTE: An organization may apply for both announcement numbers. If you are applying for both announcement numbers, you must submit a separate application for each.
Be sure to submit the application under the correct announcement number.
As a reminder:

Announcement Number	Title
HRSA-20-070	Data Integration, Systems, and Quality TA
HRSA-20-094	TargetHIV

If for any reason (including submitting to the wrong funding opportunity number or making corrections/updates), an application is submitted more than once prior to the application due date, HRSA will only accept your **last** validated electronic submission, under the correct funding opportunity number, prior to the grants.gov application due date as the final and only acceptable application.

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 workspace application package associated with this notice of funding opportunity (NOFO) following the directions provided at http://www.grants.gov/applicants/apply-for-grants.html.

The NOFO is also known as "Instructions" on Grants.gov. You must provide your email address when reviewing or preparing the workspace application package in order to receive notifications including modifications and/or republications of the NOFO on Grants.gov before its closing date. You will also receive notifications of documents placed in the RELATED DOCUMENTS tab on Grants.gov that may affect the NOFO and your application. Responding to an earlier version of a modified notice may result in a less competitive or ineligible application. *Please note you are ultimately responsible for reviewing the For Applicants page for all information relevant to desired opportunities.*

2. Content and Form of Application Submission

Section 4 of HRSA's *SF-424 Application Guide* provides instructions for the budget, budget narrative, staffing plan and personnel requirements, assurances, certifications, and abstract. You must submit the information outlined in the Application Guide in addition to the program-specific information below. You are responsible for reading and complying with the instructions included in HRSA's *SF-424 Application Guide* except where instructed in the NOFO to do otherwise. 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 *Application Guide* for the Application Completeness Checklist.

Application Page Limit
The total size of all uploaded files may not exceed the equivalent of **50 pages** when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support required in the *Application Guide* and this NOFO. Standard OMB-approved forms that are included in the workspace application package do not count in the page limit. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) do not count in the page limit. **We strongly urge you to take appropriate measures to ensure your application does not exceed the specified page limit.**

Applications must be complete, within the specified page limit, and validated by Grants.gov under the correct funding opportunity number prior to the deadline to be considered under this notice. <u>Be sure to submit the application under the correct announcement number.</u> The two (2) announcement numbers included in this funding opportunity are stated in the table below:

Announcement Number	Title
HRSA-20-070	Data Integration, Systems, and Quality TA
HRSA-20-094	TargetHIV

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification
   1) You, on behalf of the applicant organization certify, 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. 3321).
   3) Where you are unable to attest to the statements in this certification, an explanation shall be included in **Attachment 10**: Other Relevant Documents.

See Section 4.1 viii of HRSA's *SF-424 Application Guide* for additional information on all certifications.

Program-Specific Instructions
In addition to application requirements and instructions in Section 4 of HRSA's *SF-424 Application Guide* (including the budget, budget narrative, staffing plan and personnel requirements, assurances, certifications, and abstract), include the following:

i. Project Abstract
See Section 4.1.ix of HRSA's *SF-424 Application Guide*.

In addition to the requirements listed in the *SF-424 Application Guide*, please indicate the project title as either "*Ryan White HIV/AIDS Program – Data Integration, Systems, and Quality TA*" or "*Ryan White HIV/AIDS Program – TargetHIV*" and include the following information:

- A summary of the proposed activities for the announcement number under which you are applying.
- The funding amount requested for the five-year period of performance.

ii. Project Narrative
This section provides a comprehensive framework and description of all aspects of the proposed project. It should be succinct, self-explanatory, consistent with forms and attachments, and well organized so that reviewers can understand the proposed project.

A. Instructions for the Ryan White HIV/AIDS Program – Data Integration, Systems, and Quality Technical Assistance Application (HRSA-20-070)

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

- *INTRODUCTION -- Corresponds to Section V's Review Criterion #1 Need*

  Briefly describe how the proposed project responds to the expectations for the Data Integration, Systems, and Quality (DISQ) program, as outlined in Section I of this NOFO. Include a discussion that exhibits an expert understanding of the RWHAP, particularly related to data reporting and programmatic requirements, by internal and consulting staff.

- *NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion #1 Need*

  Describe the need for T/TA for data integration, systems, quality, virtually and in person, as outlined in Section I to help RWHAP recipients and subrecipients increase data-related capacity and improve the ease, timeliness, and quality of program data for local use and to meet data reporting grant requirements for RSR, ADR, AETC, HIVQM Module, and Ending the HIV Epidemic Triannual Module. Provide a description of the need for DISQ, as outlined by HRSA HAB. Use and cite demographic data, whenever possible, to support the information provided. Include data/information gathering methods. Include findings from the information gathering in as much detail as possible to illustrate the need for your program focus area.

- *METHODOLOGY -- Corresponds to Section V's Review Criteria #2 Response, and #4 Impact*

  Describe how you will assess, in collaboration with HRSA, best practices for identifying the needs of recipients/subrecipients related to data integration, data systems, and data quality.

  Briefly describe your ability and expertise in identifying potential RWHAP recipients and subrecipients in need of T/TA, based on assessments of unmet needs, HIV prevalence data, targeted outreach, geomapping, or other techniques aimed at locating areas of greatest need for these types of T/TA. Include findings from the information gathering in as much detail as possible to illustrate the need for T/TA resources provided by the DISQ program. Outline how the project will contribute to the current national HIV environment, as well as serve as a complement to the RWHAP.

  Propose methods that will be used to address the stated needs and meet the previously described program requirements and expectations for the DISQ program in Section I of the NOFO. As appropriate, include development of effective tools and strategies using adult learning strategies for both virtual and in-person T/TA, outreach, collaborations, clear communication, and information sharing/dissemination with efforts to involve: RWHAP recipients, subrecipients, people with HIV and their families, and communities of culturally, linguistically, socio-economically and geographically diverse backgrounds, if applicable. Include a plan to disseminate reports, products, and/or project outputs so project information is provided to key target audiences.

- *WORK PLAN -- Corresponds to Section V's Review Criteria #2 Response and #4 Impact*

  Describe the activities or steps that will be used to achieve each of the activities proposed during the entire project period in the Methodology section. Discuss how the activities you propose will meet the goal and objectives for the DISQ program. Describe how your activities support the required strategies for this program focus area. Explain how your organization will deliver the T/TA elements or activities to RWHAP recipient and subrecipients.

  - Describe in narrative the activities you propose for DISQ, and how and where the activities will take place.
  - Discuss how these activities will contribute to meeting the purpose of the DISQ T/TA.
  - Discuss any collaboration that will take place between your agency and other organizations or individuals in order to accomplish these activities.
  - Describe how you will develop and deliver creative T/TA tools designed to facilitate information sharing, self-learning, and collaboration virtually and/or in person.
  - Complete a work plan table (include as **Attachment 1**) that corresponds with the work plan narrative. Include your project goal, objectives, and activities,

along with action steps and target audience. The work plan must meet criteria as a SMART work plan (**S**pecific, **M**easurable, **A**chievable, **R**ealistic, and **T**ime bound). Include measurable outcomes, target dates and responsible staff members. Your work plan must include appropriate milestones (e.g., a significant or important event in the grant budget period) and any products to be developed. HRSA will use these plans to evaluate progress in the event of an award.

- *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 activities described in the methodology and work plan sections of the narrative. Also, note any relevant challenges in meeting the expectations for DISQ outlined in Section I of this NOFO. Discuss the strength of your methodology in identifying and responding to these challenges. Discuss relevant challenges encountered in implementing similar work plans, and how these were resolved. Discuss approaches you will use to resolve such challenges.

- *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criteria #3 Evaluative Measures and #5 Resources/ Capabilities*

  List the outcome evaluation questions that the project will address. Consider elements that relate to changes in knowledge, skills, and practice or organizational structure. Describe how you plan to monitor your goals and objectives. Describe the methods you plan to use to collect data. Describe current experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature. As part of this section, discuss the effectiveness of methods proposed to monitor and evaluate the project and project results. Please include any developed evaluation tools as **Attachment 6** (optional).

- *ORGANIZATIONAL INFORMATION -- Corresponds to Section V's Review Criterion #5 Resources/Capabilities*

  Provide information on your current mission and structure, scope of current activities, and an organizational chart (**Attachment 4**). Discuss expertise of staff as it relates to the scope of work proposed. Include a discussion that demonstrates that internal and consultant staff have an expert understanding of the RWHAP, particularly related to legislative and programmatic requirements.

  Describe how these all contribute to the ability of your organization to conduct the program requirements and meet program expectations. Discuss your organization's capacity and specific areas of organizational expertise. Describe the organizational level of experience and understanding of the current and future health care funding and organizational environment in which RWHAP recipients operate. Describe collaborative efforts with partners, local recipients and their HAB program staff, and other pertinent agencies that enhance your ability to accomplish proposed projects. Explain how these ensure broad national scope

and secure specific expertise. Describe past performance managing collaborative federal grants at the national level, including percentage of products and tasks completed in full and on time within each year of the project period for the past 2 completed years. Describe the estimated percentage of total agency budget that funding for this cooperative agreement would make up, and note other sources of funding the applicant organization receives. Describe the level of experience and number of years' experience in developing and disseminating informational materials, and providing capacity building assistance to HIV related organizations and constituencies on a national level. Include biographical sketches, not to exceed two pages in length, for key personnel on the project, as **Attachment 3**. If you include a biographical sketch for an individual not yet hired, also include a letter of commitment signed by the individual.

B. Instructions for the Ryan White HIV/AIDS Program – TargetHIV Application (HRSA-20-094)

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

- *INTRODUCTION -- Corresponds to Section V's Review Criterion #1 need*

  Briefly describe how the proposed project responds to the expectations for TargetHIV, as outlined in Section I of this NOFO. Briefly describe your organization and its expertise in managing a central, web-based platform for T/TA products that address the needs of providers of HIV care on a national scope. Include a discussion that exhibits an expert understanding of HRSA, the RWHAP, and TargetHIV.

- *NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion #1 Need*

  Describe the need for a central, web-based platform for T/TA products that address the needs of providers of HIV care and support services as outlined in Section I. Use and cite demographic data whenever possible to support the information provided. Include data/information gathering methods. Include findings from the information gathering in as much detail as possible to illustrate the need for TargetHIV.

- *METHODOLOGY -- Corresponds to Section V's Review Criteria #2 Response and #4 Impact*

  Describe how you will assess, in collaboration with HRSA, best practices for identifying the needs of recipients, subrecipients, and providers of HIV care and support services related to TargetHIV.

  Briefly describe your ability and expertise in identifying potential recipients for T/TA and promoting appropriate T/TA tools, based on unmet needs assessments, HIV prevalence data, targeted outreach with RWHAP recipients, geospatial mapping, or other techniques aimed at locating areas of greatest need for T/TA. Outline how

TargetHIV will contribute to the current response to the HIV epidemic, as well as serve as a complement to the RWHAP.

Propose methods that you will use to address the stated needs and meet the program goals and objectives described in Section I of this NOFO. Describe the strategies that will be used to identify, collect, update and disseminate evidence informed HIV care resources and T/TA materials. Describe the process that you use to ensure that all materials and information available on the TargetHIV website will be current and updated timely. Outline proposed plans for outreach and engagement with RWHAP recipients and other HIV care stakeholders to promote resources and T/TA opportunities offered through TargetHIV. Describe all methods for advertising and promoting products, resources and T/TA. Describe your proposed plan to track TargetHIV usage and assess user engagement.

- *WORK PLAN -- Corresponds to Section V's Review Criteria #2 Response and #4 Impact*

Describe activities or steps that you will use to achieve each of the activities proposed during the entire project period in the Methodology section. Discuss how the activities you propose will meet the goal and objectives for TargetHIV.

Describe how your activities support the required strategies for TargetHIV. Use a timeline that includes each activity and identifies responsible staff. As appropriate, identify meaningful support and collaboration with key stakeholders in planning, designing, and implementing all activities, including development of the application. Explain how your organization will disseminate the T/TA elements or activities to RWHAP recipients and subrecipients via TargetHIV.

Describe in narrative the activities proposed for TargetHIV and how and where the activities will take place. Discuss how these activities will contribute to meeting the purpose of TargetHIV. Discuss any collaboration that will take place between your organization and other organizations or individuals in order to accomplish these activities.

Describe how you will develop and deliver creative communication tools designed to facilitate information sharing, self-learning, and collaborative T/TA. Complete a work plan table (include as **Attachment 1**) that corresponds with the work plan narrative. Include your project goal, objectives, and activities along with action steps and target audience. The work plan must meet criteria as a SMART work plan (**S**pecific, **M**easurable, **A**chievable, **R**ealistic, and **T**ime bound). Include measurable outcomes, target dates and responsible staff members. Your work plan must include appropriate milestones, (e.g., a significant or important event in the cooperative agreement budget period) and any products to be developed. HAB will use these plans to evaluate progress in the event of an award.

- *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 activities described in the methodology and work plan sections of the narrative. Note any relevant challenges in meeting the expectations for TargetHIV outlined in section I of this NOFO.

  Discuss relevant challenges encountered in implementing similar work plans, and how these were resolved. Discuss the approaches and strengths of your methodology in identifying and responding to these challenges.

- *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criteria #3 Evaluative Measures and #5 Resources/Capabilities*

  List the outcome evaluation questions that will be addressed by the project. Consider elements that relate to changes in knowledge and skills, and changes in practice or organizational structure. Describe how you plan to monitor your goals and objectives. Describe the methods you plan to use to collect data. Describe current experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature. As part of this section, discuss the effectiveness of methods proposed to monitor and evaluate the project and project results. Please include any developed evaluation tools as **Attachment 6** (optional).

- *ORGANIZATIONAL INFORMATION -- Corresponds to Section V's Review Criterion #5 Resources/Capabilities*

  Provide information on your organization's current mission and structure, scope of current activities, and an organizational chart (**Attachment 4**). Discuss expertise of staff as it relates to the scope of work proposed. Include a discussion that demonstrates that internal and consultant staff have an expert understanding of the RWHAP, particularly related to legislative and programmatic requirements.

  Describe your organization's ability to meet the program goals and objectives described in Section I of this NOFO. Discuss your organization's capacity and expertise collecting, maintaining, and disseminating materials on evidence informed interventions and resources for HIV care providers. Describe your organization's level of experience and number of years' experience developing, designing, and managing web-based platforms, and developing and disseminating HIV care informational materials. Describe your organization's ability to advertise, promote, and host multi-media T/TA activities designed to improve HIV care. Describe your organization's collaborative efforts with local and national partners, HRSA and other pertinent organizations and agencies involved in HIV care that enhance your ability to accomplish the proposed project. Describe past performance managing collaborative federal grants at the national level. Describe the estimated percentage of total agency budget that funding for this cooperative agreement would make up, and note other sources of funding the applicant organization receives. Include biographical sketches, not to exceed two pages in

length, for key personnel on the project, as **Attachment 3**. If you include a biographical sketch for an individual not yet hired, also include a letter of commitment signed by the individual.

NARRATIVE GUIDANCE

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

Narrative Section	Review Criteria
Introduction	(1) Need
Needs Assessment	(1) Need
Methodology	(2) Response and (4) Impact
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (5) Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested – the budget section should include sufficient justification to allow reviewers to determine the reasonableness of the support requested.

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iii. Budget

See Section 4.1.iv of HRSA's *SF-424 Application Guide*. Please note: the directions offered in the SF-424 Application Guide may differ from those offered by Grants.gov. Follow the instructions included in the Application Guide and the additional budget instructions provided below. A budget that follows the Application Guide will ensure that, if HRSA selects the application for funding, you will have a well-organized plan and by carefully following the approved plan can 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), incurred by the recipient to carry out a HRSA-supported project or activity. Total project or program costs include costs charged to the award and costs borne by the recipient to satisfy a matching or cost-sharing requirement, as applicable.

In addition, the *Ryan White HIV/AIDS Program- TargetHIV and the Ryan White HIV/AIDS Program- Data Integration, Systems, and Quality Technical Assistance applications* require the following:

Program Specific Line Budget. Applicants must submit a separate program-specific line item budget for each year of the five-year project period. Upload the budget as an attachment to the application as **Attachment 7**. HRSA recommends that you convert or scan the budget into a PDF format for submission. Do not submit Excel spreadsheets. HRSA recommends that you submit a line item budget in table format, listing the program category costs. The budget should include personnel name and title, fringe benefits, total personnel costs, consultant costs by individual consultant, supplies, staff travel, other expenses by individual expense, total direct costs, indirect costs, and total costs. Include annual salary and total project FTE, as well as all costs by major activity. Note: If you include indirect costs in the budget, please attach a copy of your organization's indirect cost rate agreement as **Attachment 9**. Indirect cost rate agreements will not count toward the page limit.

The Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019 (P.L. 115-245), Division B, § 202 states, "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 Application Guide* for additional information. Note that these or other salary limitations may apply in the following FY, as required by law.

iv.   Budget Narrative
See Section 4.1.v. of HRSA's *SF-424 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.** Indirect cost rate agreements and proof of non-profit status, (if applicable), will not count toward the page limit. You must clearly label **each attachment**.

Attachment 1: Work Plan (Required)
  Attach the work plan for the project that includes all information detailed in Section IV.2.ii. Project Narrative. If you will make sub-awards or expend funds on contracts, describe how your organization will ensure proper documentation of funds.

Attachment 2: Staffing Plan and Job Descriptions for Key Personnel (see Section 4.1. of HRSA's *SF-424 Application Guide) (Required)*
  Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff. Also, please include a description of your organization's timekeeping process to ensure that you will comply with the federal standards related to documenting personnel costs.

Attachment 3: Biographical Sketches of Key Personnel (Required)
  Include biographical sketches for persons occupying the key positions described in Attachment 2, not to exceed two pages in length per person. In the event that

a biographical sketch is included for an identified individual not yet hired, include a letter of commitment from that person with the biographical sketch.

Attachment 4: Letters of Agreement, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts (project-specific) (Required, if applicable)
Provide any documents that describe working relationships between your organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and any deliverable. Make sure any letters of agreement are signed and dated.

Attachment 5: Project Organizational Chart (Required)
Provide a one-page figure that depicts the organizational structure of the project.

Attachment 6: Developed Evaluation Tools (optional)
Include any evaluation tools that you have developed.

Attachment 7: Program Specific Line Item Budget (Required)
Include the program specific line item budget for each year of the project period. Submit as a PDF document, not as an excel spreadsheet.

Attachment 8: 5th Year Budget
After using columns (1) through (4) of the SF-424A Section B for a 5-year period of performance, you will need to submit the budget for the 5th year as an attachment. Use the SF-424A Section B, which does not count in the page limit: however, any related budget narrative does count. See Section 4.1.iv of HRSA's *SF-424 Application Guide*.

Attachment 9: indirect Cost Rate Agreement (Required, if applicable)
If indirect costs are included in the budget, please attach a copy of your organization's indirect cost rate agreement. Indirect cost rate agreements will not count toward the page limit.

Attachments 10 – 15: Other Relevant Documents
Include any other documents that are relevant to the application, including letters of support. Letters of support must be dated and specifically indicate a commitment to the project/program, (in-kind services, dollars, staff, space, equipment, etc.).

3. **Dun and Bradstreet Data Universal Numbering System (DUNS) Number and System for Award Management**

You must obtain a valid DUNS number, also known as the Unique Entity Identifier, for your organization/agency and provide that number in the application. You must also register with the System for Award Management (SAM) and continue to maintain active SAM registration with current information at all times during which you have an active federal award or an application or plan under consideration by an agency, (unless the

applicant is an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the agency under 2 CFR § 25.110(d))**.**

HRSA may not make an award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time HRSA is ready to make an award, HRSA may determine that the applicant is not qualified to receive an award and 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 three separate systems:
- Dun and Bradstreet (http://www.dnb.com/duns-number.html)
- System for Award Management (SAM) (https://www.sam.gov)
- Grants.gov (http://www.grants.gov/)

For further details, see Section 3.1 of HRSA's *SF-424 Application Guide*.

SAM.GOV **ALERT:** For your SAM.gov registration, you must submit a notarized letter appointing the authorized Entity Administrator. The review process changed for the Federal Assistance community on June 11, 2018.

In accordance with the Federal Government's efforts to reduce reporting burden for recipients of federal financial assistance, the general certification and representation requirements contained in the Standard Form 424B (SF-424B) – Assurances – Non-Construction Programs, and the Standard Form 424D (SF-424D) – Assurances – Construction Programs, have been standardized federal-wide. Effective January 1, 2020, the updated common certification and representation requirements will be stored and maintained within SAM. Organizations or individuals applying for federal financial assistance as of January 1, 2020, must validate the federally required common certifications and representations annually through SAM located at SAM.gov.

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 due date for applications under this NOFO is *January 22, 2020 at 11:59 p.m. ET*. HRSA suggests submitting applications to Grants.gov at least **three (3) calendar days before the deadline** to allow for any unforeseen circumstances. See Section 8.2.5 – Summary of emails from Grants.gov of HRSA's *SF-424 Application Guide* for additional information.

5. Intergovernmental Review

Ryan White HIV/AIDS Program- TargetHIV and Ryan White HIV/AIDS Program- Data Integration, Systems, and Quality Technical Assistance are not programs 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 Application Guide* for additional information.

6. Funding Restrictions

Applicants responding to this announcement may request funding for a project period of up to five (5) years. **If you are applying for both announcement numbers, you must submit a separate application for each.** Each announcement number has a specific ceiling amount:

Announcement Number	Award Amount
HRSA-20-070 (Data Integration, Systems, and Quality TA)	$800,000 per year
HRSA-20-094 (TargetHIV)	$700,000 per year

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 B of the Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019 (P.L. 115-245), pursuant to the Continuing Appropriations Act, 2020, and Health Extenders Act of 2019 (P.L. 116-59), Division A, § 101(8), are in effect at the time this NOFO is posted. Please see Section 4.1 of HRSA's *SF-424 Application Guide* for additional information. Note that these or other restrictions will apply, as required by law in subsequent appropriations acts for FY 2020. HRSA will issue an NOA that references the final FY 2020 appropriations act.

You cannot use funds under this notice for the following purposes:
- Provision of direct health care or support services;
- Clinical research;
- International travel;
- Purchase or improvement of land;
- Construction; however, minor alterations and renovations to an existing facility to make to more suitable for the purposes of the award program are allowable with prior HRSA approval;
- Supplant funds for any other federal award or state funds;
- Cash payment to intended recipients of RWHAP services;
- Pre-exposure prophylaxis (PrEP) or Post-Exposure Prophylaxis (PEP) medications or the related medical services (see the June 22, 2016, RWHAP and PrEP program letter);
- Syringe Services Programs (SSPs). Some aspects of SSPs are allowable with HRSA's prior approval and in compliance with HHS and HRSA policy;

- Payment for any item or service to the extent that payment has been made (or reasonably can be expected to be made), with respect to that item or service, under any state compensation program, insurance policy, federal or state benefits program, or any entity that provides health services on a prepaid basis, (except for a program administered by or providing the services of the Indian Health Service); and
- Development of materials designed to promote or encourage, directly, intravenous drug use or sexual activity, whether homosexual or heterosexual.

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 use of funds for lobbying, executive salaries, gun control, abortion, etc. Like those for all other applicable grants requirements, the effectiveness of these policies, procedures, and controls is subject to audit.

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 critical 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.

These criteria are the basis upon which the reviewers will evaluate and score the merit of the application. The entire proposal will be considered during objective review. HRSA-20-070 and HRSA-20-094 will be reviewed and scored separately.

Review criteria are used to review and rank applications. The *Ryan White HIV/AIDS Program – Data Integration, Systems, and Quality TA* and *Ryan White HIV/AIDS Program – TargetHIV* each has six review criteria. See the review criteria outlined below with specific detail and scoring points.

A. Review Criteria for the Data Integration, Systems, and Quality Technical Assistance Application (HRSA-20-070)

Criterion 1: NEED (10 points) – Corresponds to Section IV's Introduction and Need

Introduction (5 points):
- The extent to which the applicant's proposed project overview fully and clearly meets the expectations for the DISQ T/TA program
- The extent to which the applicant demonstrates an expert understanding of HRSA and RWHAP, particularly as it relates to data integration, systems, and quality

Needs Assessment (5 points):
- The extent to which the application clearly demonstrates the overall need for both virtual and in-person T/TA for data integration, systems, and quality

Criterion 2: RESPONSE (50 points) – Corresponds to Section IV's Methodology, Work Plan, and Resolution of Challenges

Methodology (20 points):
- The extent to which the applicant demonstrates a comprehensive understanding of methods to assess best practices for the identification of need
- The strength and scope of the applicant's ability and expertise in identifying potential RWHAP-funded recipients and subrecipients in need of T/TA
- The extent to which the applicant demonstrates ability and expertise in identifying appropriate T/TA for RWHAP-funded recipients and subrecipients
- The strength and feasibility of the applicant's proposed multiple methods to deliver T/TA virtually and in-person
- The strength of the proposed avenues for T/TA using adult learning strategies, including for persons who learn best through self-learning or for persons whose primary language is other than English
- The extent to which the applicant clearly describes how the project will contribute to the current national HIV environment and complement the RWHAP
- The extent to which the applicant demonstrates past effectiveness of the proposed methodology in the same or similar areas of need
- The extent to which the methodology will respond to the DISQ T/TA program expectations (including the feasibility of implementation) as outlined in Section IV and to the general requirements outlined in Section I
- The extent to which the project proposes to use the TargetHIV website to house all T/TA and T/TA products

Work Plan (15 points):
- The extent to which the proposed goals and objectives will meet the requirements of the specific focus area, (as outlined in Section IV), and correspond to the described methodology
- The extent to which the activities of the work plan are measurable and achievable
- The extent to which the timeline of the work plan is measurable and achievable
- The extent to which the work plan includes clear action steps, target populations, end dates, and responsible persons
- The extent to which the proposed T/TA will result in tools/products/resources that are designed for continued use after the life of this specific T/TA funding
- The strength and feasibility of each T/TA element/activity (as described in Section IV), and the strategies for delivering to RWHAP recipients and subrecipients for the specific program focus area
- The strength and clarity of the proposed activities to develop and deliver creative communication tools designed to facilitate information sharing, self-learning, and collaborative TA

Resolution of Challenges (15 points):
- The extent to which the applicant fully and clearly describes challenges in responding to the specific focus area and in meeting the expectations of this award
- The extent to which the applicant clearly describes how challenges noted in the Need section will be resolved
- The strength and feasibility of the approaches and methodology proposed to resolve challenges
- The extent to which the applicant clearly describes how these challenges were resolved in similar situations

Criterion 3: EVALUATIVE MEASURES (15 points) – Corresponds to Section IV's Evaluation and Technical Support Capacity

The strength and effectiveness of the methods proposed to monitor and evaluate the project results. Evidence that the evaluative measures will be able to assess: 1) to what extent the program objectives were met, and 2) to what extent the outcomes can be attributed to the project.
- The extent to which the proposed evaluation plan is clear and comprehensive
- The strength of the evaluation plan's assessment of how T/TA is used by the targeted RWHAP recipient(s) and/or subrecipient(s)
- The extent to which the evaluation plan and methods clearly demonstrate/show the impact of the T/TA program focus area or applicability of the T/TA
- The strength and feasibility of the project's evaluation methodology, using quantitative and qualitative information for the respective program focus area
- The extent to which the proposed evaluation methods will demonstrate the project's achievement of its objectives
- The strength and clarity of proposed method(s) to collect data
- The extent to which the applicant provides clear evidence that it has sufficient and appropriate resources to implement the T/TA and evaluation
- The extent to which the applicant demonstrates the expertise available within its organization to analyze the collected data
- The strength of the proposed methods' effectiveness in monitoring and evaluating the overall progress and results of the program

Criterion 4: IMPACT (10 points) – Corresponds to Section IV's Methodology and Work Plan

- Extent to which T/TA are national in scope and will meet the goals of the program focus area
- Extent to which the applicant demonstrates that the proposed methods will adequately meet the needs of those receiving the T/TA within each program focus area and are replicable

- The extent to which the applicant fully describes how they will distribute information on the success of the T/TA provided to RWHAP and other HIV providers
- The extent to which the applicant demonstrates how any tools and resources developed and deemed effective will be made available to the widest audience

Criterion 5: RESOURCES/CAPABILITIES (10 points) – Corresponds to Section IV's Evaluation and Technical Support, and Organizational Information

- The extent to which project personnel are qualified by training and/or experience to implement and carry out the project.
- The strength of the applicant organization's capabilities and the quality and availability of facilities and personnel to fulfill the needs and requirements of the proposed project. This should also include the attributes of any contracted organizations.
- The extent to which the organization's mission and structure, scope of current activities, capacity, and specific areas of organizational expertise relate to the proposed project, and contribute to the organization's ability to successfully carry out and meet the goals and objectives of this project.
- The extent to which the applicant demonstrates that internal and consultant staff have an expert understanding of the RWHAP, particularly related to legislative and programmatic requirements.
- The extent to which the applicant has demonstrated their performance in prior national level activities, including experience in the management of federal funds
- The extent to which the applicant's proposed collaborative efforts with other agencies will enhance the proposed project, including feasibility of proposed activities
- The extent to which an organizational chart is included and shows sufficient staffing for the project
- The extent to which the staffing plan, including training and experience of proposed staff, demonstrates the needed expertise to implement and carry out the project
- The strength of the expertise and attributes of any contracted organization(s), if applicable

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

The reasonableness of the proposed budget for each year of the project period in relation to the objectives, the complexity of the activities, and the anticipated results.
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives
- The extent to which the proposed budget is reasonable for each year of the project period in relation to objectives, the complexity of the activities, and the anticipated results
- The extent to which the budget clearly justifies the proposed staff, contracts, and other requested resources

- The extent to which any services provided by contracted organizations are reasonable, if applicable

B. Review Criteria for the TargetHIV Application (HRSA-20-094)

Criterion 1: NEED (10 points) – Corresponds to Section IV's Introduction and Need

Introduction (5 points):
- The extent to which the applicant's proposed project overview fully and clearly meets the expectations for TargetHIV.
- The extent to which the applicant demonstrates an expert understanding of HRSA, RWHAP, and the TargetHIV website.

Needs Assessment (5 points):
- The extent to which the application clearly demonstrates the overall need for the dissemination of T/TA resources.

Criterion 2: RESPONSE (50 points) – Corresponds to Section IV's Methodology, Work Plan, and Resolution of Challenges

Methodology (20 points):
- The extent to which the applicant demonstrates a comprehensive understanding of methods to assess best practices for the identification of need.
- The strength and scope of the applicant's ability and expertise in identifying potential RWHAP-funded recipients and subrecipients with relevant training and TA resources to be disseminated through the TargetHIV website.
- The extent to which the applicant demonstrates ability and expertise in identifying appropriate T/TA for RWHAP-funded recipients and subrecipients.
- The extent to which the applicant clearly describes how the project will contribute to the current national HIV environment and complement the RWHAP
- The extent to which the applicant demonstrates past effectiveness of the proposed methodology in the same or similar areas of need
- The extent to which the methodology will respond to both the specific program focus area expectations as outlined in Section IV and to the general requirements outlined in Section I
- The strength of the evaluation plan's assessment of how T/TA is used by the targeted RWHAP recipient(s) and/or subrecipient(s)
- The strength and feasibility of the project's evaluation methodology, using quantitative and qualitative information for the respective program focus area
- The strength of the proposed avenues using adult learning strategies for T/TA, including for persons who learn best through self-learning, or for persons whose primary language is other than English

Work Plan (15 points):
- The extent to which the proposed goals and objectives will meet the requirements of the specific focus area, (as outlined in Section IV), and correspond to the described methodology
- The extent to which the activities of the work plan are measurable and achievable

- The extent to which the timeline of the work plan is measurable and achievable
- The extent to which the work plan includes clear action steps, target populations, end dates, and responsible persons
- The strength and feasibility of the strategies for disseminating T/TA resources to RWHAP recipients, subrecipients, and other providers of HIV care and support services
- The strength and clarity of the proposed activities to develop and deliver creative communication tools designed to facilitate information sharing, self-learning, and collaboration

Resolution of Challenges (15 points):
- The extent to which the applicant fully and clearly describes challenges in responding to the specific focus area and in meeting the expectations of this award
- The extent to which the applicant clearly describes how challenges noted in the Need section will be resolved
- The strength and feasibility of the approaches and methodology proposed to resolve challenges
- The extent to which the applicant clearly describes how these challenges were resolved in similar situations

Criterion 3: EVALUATIVE MEASURES (15 points) – Corresponds to Section IV's Evaluation and Technical Support Capacity

The strength and effectiveness of the methods proposed to monitor and evaluate the project results. Evidence that the evaluative measures will be able to assess: 1) to what extent the program objectives were met, and 2) to what extent the outcomes can be attributed to the project.
- The extent to which the proposed evaluation plan is clear and comprehensive
- The extent to which the proposed evaluation methods will demonstrate the project's achievement of its objectives
- The strength and clarity of proposed method(s) to collect data
- The extent to which the applicant provides clear evidence that it has sufficient and appropriate resources to disseminate the T/TA resources and evaluation
- The extent to which the applicant demonstrates the expertise available within its organization to analyze the collected data
- The strength of the proposed methods' effectiveness in monitoring and evaluating the overall progress and results of the program

Criterion 4: IMPACT (10 points) – Corresponds to Section IV's Methodology and Work Plan

- Extent to which the applicant demonstrates that the proposed methods will adequately meet the needs of those receiving the T/TA within each program focus area and are replicable

- The extent to which the applicant fully describes how they will distribute information on the success of the T/TA provided to RWHAP and other HIV providers
- The extent to which the applicant demonstrates how any tools and resources developed and deemed effective will be made available to the widest audience

Criterion 5: RESOURCES/CAPABILITIES (10 points) – Corresponds to Section IV's Evaluation and Technical Support, and Organizational Information

- The extent to which project personnel are qualified by training and/or experience to implement and carry out the project.
- The strength of the applicant organization's capabilities of the applicant organization and the quality and availability of facilities and personnel to fulfill the needs and requirements of the proposed project. This should also include the attributes of any contracted organizations.
- The extent to which the organization's mission and structure, scope of current activities, capacity, and specific areas of organizational expertise relate to the proposed project, and contribute to the organization's ability to successfully carry out and meet the goals and objectives of this project.
- The extent to which the applicant demonstrates that internal and consultant staff have an expert understanding of the RWHAP, particularly related to legislative and programmatic requirements.
- The extent to which the applicant has demonstrated their performance in prior national level activities, including experience in the management of federal funds
- The extent to which the applicant's proposed collaborative efforts with other agencies will enhance the proposed project, including feasibility of proposed activities
- The extent to which an organizational chart is included and shows sufficient staffing for the project
- The extent to which the staffing plan, including training and experience of proposed staff, demonstrates the needed expertise to implement and carry out the project
- The strength of the expertise and attributes of any contracted organization(s), if applicable

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

The reasonableness of the proposed budget for each year of the project period in relation to the objectives, the complexity of the activities, and the anticipated results.
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives
- The extent to which the proposed budget is reasonable for each year of the project period in relation to objectives, the complexity of the activities, and the anticipated results

- The extent to which the budget clearly justifies the proposed staff, contracts, and other requested resources
- The extent to which any services provided by contracted organizations are reasonable, if applicable

2. Review and Selection Process

The objective review process provides an objective evaluation 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 Application Guide* for more details.

Funding Priorities

This program includes a funding priority. A funding priority is a favorable adjustment of combined review scores of individually approved applications when applications meet specified criteria. The Ryan White HIV/AIDS Program –TargetHIV and Ryan White HIV/AIDS Program- Data Integration, Systems, and Quality TA have one funding priority:

Priority 1: Program Compliance (5 Points)

You will be granted a funding priority if you are a competing continuation applicant who is assessed by HRSA to have satisfactorily accomplished the project activities and met reporting requirements during the most recent project period.

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.

Effective January 1, 2016, 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 any of 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 posed, 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 issue the Notice of Award (NOA) prior to the start date of July 1, 2020. See Section 5.4 of HRSA's *SF-424 Application Guide* for additional information.

2. Administrative and National Policy Requirements

See Section 2.1 of HRSA's *SF-424 Application Guide*.

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. 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 federally 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 data rights.

3. Reporting

Award recipients must comply with Section 6 of HRSA's *SF-424 Application Guide* **and** the following reporting and review activities:

1) **Progress Report**(s). The recipient must submit a progress report to HRSA every four months; further information will be available in the NOA.

2) **Integrity and Performance Reporting.** The NOA will contain a provision for integrity and performance reporting in FAPIIS, as required in 45 CFR part 75 Appendix XII.

VII. Agency Contacts

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

Nancy Gaines
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
5600 Fishers Lane, Mailstop 10SWH03
Rockville, MD 20857
Telephone: (301) 443-5382
Email: NGaines@hrsa.gov

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

Stacy Cohen
Branch Chief, Evaluation, Analysis, and Dissemination Branch
Attn: *Ryan White HIV/AIDS Program National Training and Technical Assistance Programs for Resource Dissemination and Data Enhancement*
HIV/AIDS Bureau
Health Resources and Services Administration
5600 Fishers Lane, Room 09N160
Rockville, MD 20857
Telephone: (301) 443-3259
Fax: (301) 443-8143
E-mail: SCohen@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
Telephone: 1-800-518-4726 (International Callers, please dial 606-545-5035)
Email: support@grants.gov
Self-Service Knowledge Base: https://grants-portal.psc.gov/Welcome.aspx?pt=Grants

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

HRSA Contact Center
Telephone: (877) 464-4772
TTY: (877) 897-9910
Web: http://www.hrsa.gov/about/contact/ehbhelp.aspx

VIII. Other Information

Technical Assistance

HRSA has scheduled the following technical assistance webinar:

Date: Monday, December 9, 2019
Time: 1:00 -3:00 PM Eastern Time
URL: https://hrsa.connectsolutions.com/nofowebinar-hrsa-20-070and-094/
Conference Number: 888-790-6569
Participant Code: 50047996

The webinar will be recorded and should be available for viewing by Friday, December 13, 2019 at the TargetHIV website: https://targethiv.org/library/nofos

Tips for Writing a Strong Application

See Section 4.7 of HRSA's *SF-424 Application Guide*.