

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

HRSA

Health Resources & Services Administration

Federal Office of Rural Health Policy
Hospital State Division

Rural Veterans Health Access Program

Funding Opportunity Number: HRSA-19-023

Funding Opportunity Type: New

Catalog of Federal Domestic Assistance (CFDA) Number: 93.241

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2019

Letter of Intent Due Date: November 30, 2018

Application Due Date: February 12, 2019

*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 14, 2018

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Authority: Title XVIII, Section 1820(g)(6) of the Social Security Act (42 U.S.C. 1395i-4).

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for fiscal year (FY) 2019 Rural Veterans Health Access Program (RVHAP). The purpose of this cooperative agreement is to provide funding to states to work with providers and other partners to improve access to needed health care services and to improve the coordination of care for veterans living in rural areas. Award recipients can implement a variety of strategies to improve the capacity of critical access hospitals (CAHs), and other rural health care organizations to provide services that meet the needs of veterans living in rural areas. Award recipients can also assist providers in making connections to the Department of Veterans Affairs (VA) system to coordinate care for rural veterans using community health care providers as well as the VA system

Funding Opportunity Title:	Rural Veterans Health Access Program
Funding Opportunity Number:	HRSA-19-023
Due Date for Applications:	February 12, 2019
Anticipated Total Annual Available FY 2019 Funding:	\$900,000
Estimated Number and Type of Awards:	Up to three cooperative agreements
Estimated Award Amount:	Up to \$300,000 per year subject to the availability of appropriated funds
Cost Sharing/Match Required:	No
Period of Performance:	August 1, 2019 through July 31, 2022 (3 years)
Eligible Applicants:	Only states (current Medicare Rural Hospital Flexibility Program award recipients in states with certified critical access hospitals) are eligible to apply for funding under this notice. The Governor designates the eligible applicant from each state. 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

Day and Date: Monday, November 26, 2018

Time: 2 – 3 p.m.

Call-In Number: 1-888-730-9142

Participant Code: 7852922

Weblink: https://hrsa.connectsolutions.com/rural_veterans_hap_ta/

Playback Number: 1-866-367-6718

Passcode: 65900

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I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity to apply for funding under the Rural Veterans Health Access Program (RVHAP). The purpose of this cooperative agreement is to provide funding to states to work with providers and other partners to improve access to needed health care services and to improve the coordination of care for veterans living in rural areas. Award recipients can implement a variety of strategies to improve the capacity of critical access hospitals (CAHs) and other rural health care organizations to provide services that meet the needs of veterans living in rural areas. Award recipients can also assist providers in making connections to the Department of Veterans Affairs (VA) system to coordinate care for rural veterans using community health care providers as well as the VA system.

2. Background

This program is authorized by Title XVIII, Section 1820(g)(6) of the Social Security Act (42 U.S.C. 1395i-4).

A disproportionate share of veterans are living in rural America. According to the [National Center for Veterans Analysis and Statistics](#) and the [Veterans Health Administration - Office of Rural Health](#) (VHA-ORH) there are 4.7 million veterans living in rural areas, with 2.8 million enrolled in the VA health care system. Veterans face the same challenges of any rural resident, which include limited broadband, greater geographic distances to travel for care, and fewer options for care, particularly specialty care. Veterans also face challenges in care coordination if they are accessing care in multiple locations from multiple health care systems (e.g., through the VA system and through community providers).

The Health Resources and Services Administration's (HRSA) Federal Office of Rural Health Policy is collaborating with the VHA-ORH's [Veterans Rural Health Resource Centers](#) (VRHRCs) to achieve the goals of this project and strengthen the partnership between CAHs, other rural health providers, and the VA system.

VRHRCs are the VHA-ORH's field-based satellite offices, which serve as hubs of rural health care. Pursuant to [38 USC § 7308](#) VRHRCs' mission is to:

- Improve understanding of the challenges faced by veterans living in rural areas
- Identify disparities in the availability of health care to veterans living in rural areas
- Formulate practices or programs to enhance the delivery of health care to veterans living in rural areas
- Develop special practices and products for the benefit of veterans living in rural areas and for implementation of such practices and products in the VA system-wide

The VRHRCs are located within the VA medical centers in Iowa City, Iowa; Salt Lake City, Utah; and White River Junction, Vermont. VRHRCs conduct rural focused

research, develop and pilot test innovations in the delivery of care and services to rural veterans, disseminate VHA-ORH Rural Promising Practices through mentored implementation, and provide technical assistance and program consultation on programs, pilots, projects and issues affecting rural veterans to internal and external stakeholders.

II. Award Information

1. Type of Application and Award

Type of applications sought: New

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

HRSA Program involvement will include:

- Advising on performance measures to ensure HRSA can capture any cross cutting outcomes among the award recipients.
- Facilitating partnerships with the VHA-ORH.
- Facilitating sharing of best practices and resources to other relevant stakeholders.

The cooperative agreement recipient's responsibilities will include:

- Collaborating with HRSA and the VHA-ORH (including the VRHRCs) in implementing the program objectives, measuring program progress, and assessing program effectiveness.
- Executing the activities to meet the goals of this project, in conjunction with ongoing discussions and input from HRSA.
- Engaging with providers and stakeholders within your state to increase access to care and coordination of care for rural veterans.
- Sharing best practices and resources developed to benefit interested stakeholders.

2. Summary of Funding

HRSA expects approximately \$900,000 to be available annually to fund three recipients. You may apply for a ceiling amount of up to \$300,000 total cost (includes both direct and indirect, facilities and administrative costs) per year. The period of performance is August 1, 2019 through July 31, 2022 (3 years). Funding beyond the first year is subject to the availability of appropriated funds for RVHAP in subsequent fiscal years, 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](#).

Limitations on indirect cost rates

Authorizing legislation (Title XVIII, §1820(g)(4) of the Social Security Act (42 U.S.C. 1395i-4), as amended) limits indirect costs under this program. Indirect costs will be budgeted and reimbursed at the lesser of 15 percent of total direct costs or the applicant's negotiated Indirect Cost Rate Agreement (ICRA). The 15 percent limit comes to approximately 13.04 percent of the Total Project Costs, inclusive of direct and indirect costs. This limitation on indirect cost rates is a requirement of this federal award and, as required in [45 CFR § 75.351-353](#), the limitation includes subrecipients.

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

Only states (current Medicare Rural Hospital Flexibility Program award recipients in states with certified critical access hospitals) are eligible to apply for funding under this notice. HRSA will accept only one application from each state. The Governor designates the eligible applicant from each state.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

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: Multiple applications from an organization are not allowable.

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](https://www.grants.gov) using the SF-424 workspace application package associated with this NOFO following the directions provided at <http://www.grants.gov/applicants/apply-for-grants.html>.

If you're reading this notice of funding opportunity (NOFO) (also known as "Instructions" on Grants.gov) and reviewing or preparing the workspace application package, you will automatically be notified in the event HRSA changes and/or republishes the NOFO on Grants.gov before its closing date. 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 **30 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.

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification

- 1) The prospective recipient certifies, by submission of this proposal, that neither it nor its principals is 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 the prospective recipient is unable to attest to the statements in this certification, an explanation shall be included in **Attachment #7: 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](#).

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.

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***
Briefly describe the purpose of your proposed project.
- ***NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion (1) Need***
The purpose of this section is to outline the health care gaps for rural veterans within your state.
 - Describe the rural veteran population in your state, referencing any data sets, for example:
https://www.va.gov/vetdata/docs/Maps/VetPop16_PopStateFY17.pdf.
 - Discuss the demographics of the rural veteran population in your state, including age and gender.
 - Discuss existing resources to assist veterans to receive mental health care, crisis intervention, care for post-traumatic stress disorder (PTSD) or other health care services deemed necessary within their rural communities, where applicable.
 - Describe any existing efforts to coordinate care for veterans receiving care from community providers and providers in the VA system, where applicable.
 - Discuss gaps in rural veterans' ability to receive care within their own communities and describe how this project will complement but not supplant existing programs, where applicable.

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

This section should outline your approach as the award recipient to work with providers and partners in addressing the gaps indicated above to improve access to care and needed services for veterans and care coordination for veterans receiving care from multiple systems.

- Discuss the methods you will employ to improve health care for rural veterans by targeting at least one of these three objectives:
 1. Increasing care coordination for veterans seeking care both at the VA system and from other community providers, including through the VA [Community Care](#) program.
 2. Increasing access to mental health services, substance use disorder services, or other health care services deemed necessary to meet the needs of veterans living in rural areas.
 3. Increasing access to crisis intervention services and the detection of PTSD, traumatic brain injury, and other signature injuries for veterans in rural areas and for referral of such veterans to medical facilities operated by the VA.

Solutions can include education, resource development, regional approaches, networks, health information technology, telehealth or telemedicine. If any networks are developed, they must include CAHS, and may include providers within the VA system, other rural hospitals, rural health clinics, Federally Qualified Health Centers (FQHCs), home health agencies, community mental health centers and other providers of mental health services, pharmacists, social service providers, local government, or other providers deemed necessary to meet the needs of veterans. For any projects involving telehealth, you can find information on the Telehealth Resource Centers and other telehealth resources at [HRSA Telehealth Programs](#).

Engaging with the VA is a focus of the project. Include the letter acknowledging support from a VRHRC as **Attachment #4**. To facilitate state partnerships with the VA, discuss how you will consult or collaborate with one of the three [VRHRCs](#) (listed below) on activities to ensure that these funds complement existing VHA-ORH work and improve the health for veterans in rural areas. In addition to the focus areas below, the VRHRCs also assist with navigating partnership with the VA system.

- White River Junction: research and care coordination
 - Iowa City: health information exchange, opioids, telehealth, and FQHC pilots
 - Salt Lake City: geriatric care, Native American veterans, and telehealth
- Discuss how you have engaged providers and partners in the development of your proposal and how they will be a part of the project implementation.
 - Discuss how you will get input from key stakeholders, including rural veterans during the project planning and implementation.
 - Describe how you will share best practices implemented or resources developed during your project so that they will benefit interested stakeholders.

- Propose a plan for project sustainability after the period of federal funding ends. HRSA expects recipients to sustain key elements of their projects, e.g., strategies or services and interventions, which have been effective in improving practices and those that have led to improved outcomes for the target population.
- *WORK PLAN -- Corresponds to Section V's Review Criterion (2) Response*
The work plan provides a succinct overview of the project's goals, objectives, activities and projected outcomes in table format. The work plan must include each activity, responsible staff, partners or contractors, timeframe for completing the activity, progress or process measures, and the intended outcome.
- *RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criterion (2) Response*
 - Discuss challenges that you are likely to encounter in implementing your project and approaches that you will use to resolve such challenges.
- *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criterion (3) Evaluative Measures*
 - Describe the plan for monitoring the progress of the program and strategies that will contribute to continuous quality improvement.
 - Describe your capacity to work with HRSA and the VHA-ORH to adjust measures, collect data and demonstrate the impact of the program.
- *ORGANIZATIONAL INFORMATION -- Corresponds to Section V's Review Criterion (5) Resources and Capabilities*
 - Succinctly describe your organization's current mission and structure, scope of current activities, and provide an organizational chart (include as **Attachment #6**). Describe how these elements contribute to your organization's ability to conduct the program requirements and meet program expectations.
 - Include a staffing plan and job descriptions for key personnel as **Attachment #2**. Include biographical sketches for all key personnel as **Attachment #3**.
 - Discuss any sub-contracts that you will use to achieve project goals and describe your oversight role.
 - Discuss the capability of your organization to follow the approved plan, as outlined in the application, properly account for the federal funds, and document all costs to avoid audit findings.

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.	
<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
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative (below)	(6) Support Requested – the budget section should include sufficient justification to allow reviewers to determine the reasonableness of the support requested.

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.

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.

Limitations on indirect cost rates

Authorizing legislation (Title XVIII, §1820(g)(4) of the Social Security Act (42 U.S.C. 1395i-4), as amended) limits indirect costs under this program. Indirect costs will be budgeted and reimbursed at the lesser of 15 percent of total direct costs or the applicant's negotiated Indirect Cost Rate Agreement (ICRA). The 15 percent limit comes to approximately 13.04 percent of the Total Project Costs, inclusive of direct and indirect costs. This limitation on indirect cost rates is a requirement of this federal award and, as required in [45 CFR § 75.351-353](#), the limitation includes subrecipients.

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

Attach the work plan for the project that includes all information detailed in Section IV.ii. Project Narrative. If you will make subawards 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](#))

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

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: VHA-ORH VRHRC Letter of Support

Provide a letter of support from a VHA-ORH VRHRC.

Attachment 5: Letters of Agreement, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts (project-specific)

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 6: Project Organizational Chart

Provide a one-page figure that depicts the organizational structure of the project.

Attachments 7 – 15: Other Relevant Documents

Include here any other documents that are relevant to the application, including tables, charts or 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](#).

UPDATED [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. Read the [updated FAQs](#) to learn more.

[SAM.gov](#) is experiencing high volume and delays. If you have tried to create or update your SAM.gov registration but have not been able to complete the process, you may not be able to apply for a HRSA funding opportunity via Grants.gov in a timely manner prior to the application deadline. If so, please email DGPwaivers@hrsa.gov, per the instructions in Section 3.6 of your HRSA 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 due date for applications under this NOFO is *February 12, 2019 at 11:59 p.m. Eastern Time*. HRSA suggests submitting applications to Grants.gov at least **3 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

RVHAP is not a program 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

You may request funding for a period of performance of up to three years, at no more than \$300,000 per year (inclusive of direct **and** indirect costs). 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) apply to this program. Please see Section 4.1 of HRSA’s [SF-424 Application Guide](#) for additional information. Note that these or other restrictions will apply in the following FY, as required by law.

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.

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

7. Other Submission Requirements

Letter of Intent to Apply

The letter should identify your organization and its intent to apply, and briefly describe the proposal. HRSA will **not** acknowledge receipt of letters of intent. This letter should concisely describe a project idea that involves one of the Veterans Rural Health Resource Centers (Iowa City, Salt Lake City, and White River) and should be no longer than one page.

Send the letter via email by November 30, 2018 to:

HRSA Digital Services Operation (DSO)

Please use the HRSA opportunity number as email subject (HRSA-19-023)

HRSA_DSO@hrsa.gov; copy obouloute@hrsa.gov

Although HRSA encourages letters of intent to apply, they are not required. You are eligible to apply even if you do not submit a letter of intent.

V. Application Review Information

1. Review Criteria

HRSA has procedures for assessing the technical merit of applications to provide for an objective review of applications 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. See the review criteria outlined below with specific detail and scoring points.

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.

Review criteria are used to review and rank applications. RVHAP has six review criteria:

Criterion 1: NEED (15 points) – Corresponds to Section IV’s Introduction and Need

The extent to which the applicant:

- Clearly and succinctly describes the proposed project.
- Clearly describes the rural veteran population in their state and includes data in the discussion.
- Clearly describes the existing resources to assist veterans to receive mental health care, crisis intervention, care for PTSD or other health care services deemed necessary within their rural communities, where applicable.
- Clearly discusses any existing work around efforts to coordinate care for veterans receiving care from community providers and providers in the VA system, where applicable.

- Clearly explains the gaps in rural veterans' ability to receive care within their own communities and describes how this project will complement but not supplant existing programs, where applicable.

Criterion 2: RESPONSE (35 points) – Corresponds to Section IV's Methodology, Work Plan and Resolution of Challenges

Program Plan (10 points)

The extent to which the applicant:

- Clearly describes the methods they will employ to improve health care for rural veterans.
- Thoroughly addresses at least one of the three objectives:
 - Increasing care coordination for veterans seeking care both at the VA system and from other community providers, including through the VA [Community Care](#) program.
 - Increasing access to mental health services or other health care services deemed necessary to meet the needs of veterans living in rural areas.
 - Increasing access to crisis intervention services and the detection of PTSD, traumatic brain injury, and other signature injuries of veterans of OIF and OEF for veterans in rural areas and for referral of such veterans to medical facilities operated by the Department of Veterans Affairs.

Stakeholder Engagement (15 points)

The extent to which the applicant:

- Thoroughly describes how they will partner with a VRHRC to meet project goals.
- Clearly explains how they have engaged providers and partners in the development of the proposal and how they will be a part of the project implementation.
- Details the process to gather input from key stakeholders, including rural veterans, during the project planning and implementation.

Work Plan (5 points)

The extent to which:

- The work plan provides a succinct overview of the project's goals, objectives, activities and projected outcomes in table format.
- The work plan includes each activity, responsible staff, partners or contractors, timeframe for completing the activity, progress or process measures, and the intended outcome.

Resolution of Challenges (5 points)

- The extent to which the applicant thoroughly describes the challenges that they are likely to encounter in implementing the project and clearly outlines the approaches to resolve such challenges.

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

The extent to which the applicant:

- Thoroughly describes the plan for monitoring the progress of the program.
- Clearly explains the strategies that will contribute to continuous quality improvement.
- Clearly explains their capacity to work with HRSA and the VHA-ORH to adjust measures, collect data and demonstrate the impact of the program.

Criterion 4: IMPACT (10 points) – Corresponds to Section IV’s Methodology

The extent to which the applicant:

- Thoroughly describes how they will share best practices implemented or resources developed to benefit interested stakeholders, as it relates to addressing gaps in access to care, needed services for veterans, and care coordination.
- Clearly explains a reasonable plan for project sustainability after the period of federal funding ends.

Criterion 5: RESOURCES/CAPABILITIES (15 points) – Corresponds to Section IV’s Organizational Information

The extent to which the applicant:

- Succinctly describes the organization’s current mission and structure (including an organizational chart), scope of current activities and explains how these elements contribute to the organization’s ability to conduct the program requirements and meet program expectations.
- Proposes an adequate staffing plan to meet the needs of the project.
- Includes key personnel with relevant skills to achieve the goals of the project.
- Thoroughly explains the role of any sub-contracts, and the applicant’s oversight role, to achieve program goals.
- Clearly describes the capability of the organization to follow the approved plan, as outlined in the application, properly account for the federal funds, and document all costs to avoid audit findings.

Criterion 6: SUPPORT REQUESTED (10 points) – Corresponds to Section IV’s Budget and Budget Narrative

- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work.
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives.

2. Review and Selection Process

The independent 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.

Special consideration of certain applications

This program includes special consideration, as authorized by Section 1820(g)(6)(B)(iv). A special consideration is the favorable consideration of an application by HRSA funding officials, based on the extent to which the application addresses the specific area of special consideration. HRSA will give special consideration in funding to applications submitted by states in which veterans make up a high percentage of the total population of the state. Such consideration shall be given without regard to the number of veterans of Operation Iraqi Freedom and Operation Enduring Freedom living in the areas in which mental health services and other health care services would be delivered under the application. Applications that do not receive special consideration will be given full and equitable consideration during the review process.

3. Assessment of Risk and Other Pre-Award Activities

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](#)).

4. Anticipated Announcement and Award Dates

HRSA anticipates issuing/announcing awards prior to the start date of August 1, 2019.

VI. Award Administration Information

1. Award Notices

HRSA will issue the Notice of Award prior to the start date of August 1, 2019.

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 Notice of Award (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.

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 on an **annual** basis. Further information will be available in the award notice.
- 2) **Integrity and Performance Reporting**. The Notice of Award 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 technical assistance regarding business, administrative, or fiscal issues related to this NOFO by contacting:

Olusola Dada
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
5600 Fishers Lane, Mailstop 10SWH03
Rockville, MD 20857
Telephone: (301) 443-0195
Email: odada@hrsa.gov

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

Owmy Bouloute
Public Health Analyst, Federal Office of Rural Health Policy
Attn: Rural Veterans Health Access Program
Federal Office of Rural Health Policy
Health Resources and Services Administration
5600 Fishers Lane, Room TBD
Rockville, MD 20857
Telephone: (301) 945-9675
Email: obouloute@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 following technical assistance:

Webinar

Day and Date: Monday, November 26, 2018

Time: 2 – 3 p.m.

Call-In Number: 1-888-730-9142

Participant Code: 7852922

Weblink: https://hrsa.connectsolutions.com/rural_veterans_hap_ta/

Playback Number: 1-866-367-6718

Passcode: 65900

Tips for Writing a Strong Application

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