

Notice of Funding Opportunity  
Application due March 20, 2025

# HRSA

Health Resources & Services Administration

Bureau of Health Workforce








Division of Medicine and Dentistry, Medical Training and Geriatrics Branch

# Primary Care Training and Enhancement—Residency Training in Street Medicine (PCTE- RTSM)

Opportunity number: HRSA-25-078



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# Before you begin

If you believe you are a good candidate for this funding opportunity, secure your [SAM.gov](#) and [Grants.gov](#) registrations now. If you are already registered, make sure your registrations are active and up-to-date.

## **SAM.gov registration (this can take several weeks)**

You must have an active account with SAM.gov. This includes having a Unique Entity Identifier (UEI).

[See Step 2: Get Ready to Apply](#)

## **Grants.gov registration (this can take several days)**

You must have an active Grants.gov registration. Doing so requires a Login.gov registration as well.

[See Step 2: Get Ready to Apply](#)

## **Apply by the application due date**

Applications are due by 11:59 p.m. Eastern Time on March 20, 2025.



To help you find what you need, this NOFO uses internal links. In Adobe Reader, you can go back to where you were by pressing Alt + Left Arrow (Windows) or Command + Left Arrow (Mac) on your keyboard.



# Step 1:

# Review the Opportunity

## In this step

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# Basic information

## Health Resources and Services Administration

Bureau of Health Workforce

Division of Medicine and Dentistry, Medical Training and Geriatrics Branch

Enhancing primary care residency training, focusing on people experiencing homelessness.

## Summary

The purpose of the Primary Care Training and Enhancement—Residency Training and Street Medicine (PCTE-RTSM) Program is to enhance training in [street medicine](#) for residents enrolled in accredited [primary care residency](#) programs.

## Funding details

**Application Types:** New

**Expected total available funding in FY 2025:** \$9,500,000

**Expected number and type of awards:** 19 grants.

**Funding range per award:** Up to \$500,000 per year.

We plan to fund 19 awards in five 12-month budget periods for a total five-year period of performance of July 1, 2025 to June 30, 2030. Your request for each of years two through five cannot exceed your request for year one.

The program and estimated awards depend on the future appropriation of funds and are subject to change based on the availability and amount of appropriations.



### Have questions?

Go to [Contacts and Support](#).

## Key facts

**Opportunity name:** Primary Care Training and Enhancement—Residency Training in Street Medicine (PCTE-RTSM)

**Opportunity number:** HRSA-25-078

**Announcement version:** New

**Federal assistance listing:** 93.884

**Statutory authority:** 42 USC §293k (Section 747(a)(1)(A) of the Public Health Service Act)

## Key dates

**NOFO issue date:** December 20, 2024

**Informational webinar:** Visit BHW's [open opportunities](#) website to learn more.

**Application deadline:** March 20, 2025

**Expected award date is by:** July 1, 2025

**Expected start date:** July 1, 2025

See [other submissions](#) for other time frames that may apply to this NOFO.

# Eligibility

## Who can apply

You can apply if your organization is an accredited public or nonprofit private hospital, school of medicine or osteopathic medicine, or a public or private nonprofit entity which the Secretary has determined is capable of carrying out such grant or contract, which for this NOFO is an entity that operates an [ACGME](#)-accredited [primary care](#) residency training program.

## Types of eligible organizations

If otherwise eligible, these types of domestic\* organizations may apply.

- Public institutions of higher education.
- Private nonprofit institutions of higher education.
- Nonprofits with or without a 501(c)(3) IRS status.

### **Individuals are not eligible applicants under this NOFO.**

“Domestic” means located in the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Northern Mariana Islands, American Samoa, Guam, the U.S. Virgin Islands, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau.

## Other eligibility criteria

### ACGME accreditation

The applicant organization’s training program must be accredited by the ACGME in family medicine, internal medicine, pediatrics, or combined internal medicine and pediatrics (“med-peds”). You must provide documentation of your ACGME accreditation in [Attachment 1](#).

### Trainee eligibility

To receive support under this program, a trainee must be enrolled in the ACGME-accredited training program and be one of the following:

- A U.S. citizen or non-citizen national.
- An individual lawfully admitted for permanent residence to the United States.
- Any other “qualified alien” under section 431(b) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. 104-193, as amended.

## Project Director (PD) eligibility

The proposed PD must be board certified physician in a [primary care specialty](#), and employed by, on staff of, or hold an academic appointment with the applicant organization. The PD should dedicate approximately 20% of their time to grant activities, whether charged to the grant as salary or provided to the project as an in-kind contribution. Your application should indicate the time commitment and qualifications of the PD in the [project narrative](#). HRSA recognizes only one PD.

## Completeness and responsiveness criteria

We will review your application to make sure it meets these basic requirements to move forward in the competition.

We will not consider an application that:

- Is from an organization that does not meet all [eligibility criteria](#).
- Requests funding above the award ceiling shown in the [funding range](#).
- Is submitted after the [deadline](#).
- Is incomplete/fails to include all the required information.

## Application limits

You may not submit more than one application. If you submit more than one application, we will only accept the last on-time submission.

## Cost sharing

This program has no cost-sharing requirement. If you choose to share in the costs of the project, we will not consider it during merit review. We will hold you accountable for any funds you add, including through reporting.



# Program description

## Purpose

The purpose of the Primary Care Training and Enhancement—Residency Training in Street Medicine (PCTE-RTSM) Program is to enhance training in [street medicine](#) for residents enrolled in accredited [primary care](#) residency programs. Awardees may use funds to support enrolled Graduate Medical Education (GME) residents.

## Background

In fiscal year 2022, the Department of Housing and Urban Development reported that around 653,100 Americans were experiencing homelessness on a single night.<sup>[1]</sup> In a prior assessment in 2021, an estimated 1,214,000 people in 940,000 households in the U.S. experienced sheltered homelessness at some point during the year.<sup>[2]</sup>

Among people experiencing homelessness, the most prevalent comorbid conditions are tobacco use (77%), followed by depression (58%), drug use disorder (56%), anxiety disorder (50%), hypertension (44%), and alcohol use disorder (43%).<sup>[3]</sup>

Such individuals face particular challenges in obtaining medical care, often leading to greater and more complex medical needs, including higher rates of chronic conditions, more severe illness, and high rates of mental health and substance use disorders.

[Street medicine](#) focuses on bringing care and resources to people, outside of traditional clinical settings. By bringing health care to people experiencing homelessness, providers can build rapport with these individuals and begin bridging them into the services they need.<sup>[4]</sup>

Clinicians caring for patients experiencing homelessness must understand the implications and challenges related to the [Social Determinants of Health](#) (SDoH) in diagnosis, treatment, and continuing management of patients.<sup>[5]</sup> They must be trained to make appropriate referrals and consultations with a multi-disciplinary team, including social workers and other professionals equipped to help patients address SDoH.<sup>[6]</sup> Legal consultation and referral may at times be necessary and establishment of medical-legal partnerships can facilitate these interactions.<sup>[7]</sup>

Current health professions curricula do not adequately prepare health care providers to deliver appropriate, unbiased primary care for people experiencing homelessness.<sup>[8]</sup> This funding opportunity seeks to prepare physician-trainees to provide more empathetic, interprofessional, patient-centered primary care for people experiencing homelessness.

The PCTE-RTSM Program addresses these national challenges by funding existing primary care graduate medical education residency programs to include clinical rotations to train residents in street medicine, to provide care to people experiencing homelessness.

## Program goal

The goal of the PCTE-RTSM Program is to increase the number of physicians trained in a primary care specialty (i.e., family medicine, internal medicine, pediatrics, and combined internal medicine-pediatrics) who are prepared to provide care for people experiencing homelessness, by bringing care to people outside of traditional clinical settings.

## Program objectives

To accomplish the program goal, projects must meet the following objectives:

- Develop or enhance trainings, clinical rotations, and didactic and clinical curricula content to train residents in street medicine to provide sensitive and quality care for people experiencing homelessness. Attention to mental health and substance use disorders is expected.
- Increase residents' knowledge and skills to meet the unique needs of people experiencing homelessness and assist patients with navigation of the medical, behavioral health, legal, and social support systems related to clinical care.
- Increase residents' knowledge and skills to work in interprofessional teams, including chronic disease management, mental health, substance use, and medical-legal interprofessional teams, to address the SDoH that impact patient care.

## Program requirements and expectations

If you receive an award, you must meet the following requirements and expectations in carrying out your training program. You should address all these requirements in the [project narrative](#) section of your application and follow the more detailed instructions throughout that section.

- Build or expand a targeted curriculum that focuses on delivering primary care services to a population experiencing homelessness.
- Provide residents with training in the prevention, identification, diagnosis, treatment, and referral of services for behavioral health conditions, with a focus on substance use disorders and Medication for Opioid Use Disorder (MOUD) as part of their primary care training.

- Provide experiential training in the use of an interprofessional team to provide treatment for health conditions experienced by homeless populations, specifically focusing on the treatment of chronic conditions.
- Develop partnerships between academic, community-based organizations (CBOs), and other service providers to develop clinical rotations for residents to learn to provide care for homeless populations, including at least two one-month rotations that focus on providing health care to the homeless.
- Provide residents with a robust education in SDoH as they relate to the causes, epidemiology, and treatment of health conditions experienced by homeless populations.
- Provide residents with didactic and experiential learning experiences about cultural and linguistic competency.
- Provide training to residents regarding how to interact with the legal systems that may impact their patients' care, through partnerships with legal-aid organizations or medical legal partnerships.
- Ensure that residents have a National Provider Identifier (NPI) number.
- Maintain ACGME accreditation of the qualifying residency program, and promptly report to HRSA any change in accreditation status.
- Participate in federally designed evaluations to assess program effectiveness and efficiency upon request.

# Award information

## Funding policies and limitations

### Policies

- We will only make awards if this program receives funding. If Congress appropriates funds for this purpose, we will move forward with the review and award process.
- Support beyond the first budget year will depend on:
  - Appropriation of funds.
  - Satisfactory progress in meeting the project's objectives.
  - A decision that continued funding is in the government's best interest.
- If we receive more funding for this program, we may:
  - Fund more applicants from the rank order list.

- Extend the period of performance.
- Award supplemental funding.

## Maintenance of effort

Federal funds must add to any existing non-federal funds for your proposed activities. If you receive an award, you will have to spend at least as much as you spent in the last fiscal year before the award. PHSA Section 797(b) requires this. We will enforce these statutory requirements through all available mechanisms. You must provide supporting documentation in [Attachment 5](#).

## General limitations

- For guidance on some types of costs we do not allow or restrict, see Project Budget Information in section 3.1.4 of the [R&R Application Guide](#). You can also see 45 CFR part 75, or any superseding regulation, [General Provisions for Selected Items of Cost](#).
- You cannot earn profit from the federal award. See [45 CFR 75.400\(g\)](#).
- Congress's current appropriations act includes a salary limitation, which applies to this program. As of January 2024, the salary rate limitation is \$221,900. Note this limitation may apply in future years and will be updated.

See [Manage Your Grant](#) for other information on costs and financial management.

## Indirect costs

Indirect costs are costs you charge across more than one project that cannot be easily separated by project. For example, this could include utilities for a building that supports multiple projects.

Per [45 CFR 75.414](#), indirect costs for training awards cannot exceed 8 percent of modified total direct costs (MTDC).

For modified total direct costs, we use the definition at [2 CFR 200.1](#). MTDC means all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$50,000 of each subaward (regardless of the period of performance of the subawards under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs, and the portion of each subaward in excess of \$50,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs and with the approval of the cognizant agency for indirect costs.

## Program income

Program income is money earned as a result of your award-supported project activities. You must use any program income you generate from awarded funds for approved project-related activities. Find more about program income at [45 CFR 75.307](#).



# Step 2:

# Get Ready to Apply

## In this step

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# Get registered

## SAM.gov

You must have an active account with SAM.gov to apply. This includes having a Unique Entity Identifier (UEI). SAM.gov registration can take several weeks. Begin that process today.

To register, go to [SAM.gov Entity Registration](#) and select Get Started. From the same page, you can also select the Entity Registration Checklist to find out what you'll need to register.

When you register or update your SAM.gov registration, you must agree to the [financial assistance general certifications and representations](#). You must agree to those for grants specifically, as opposed to contracts, because the two sets of agreements are different. You will have to maintain your registration throughout the life of any award.

## Grants.gov

You must also have an active account with [Grants.gov](#). You can see step-by step instructions at the Grants.gov [Quick Start Guide for Applicants](#).

**Need Help?** See [Contacts and Support](#).

# Find the application package

The application package has all the forms you need to apply. You can find it online. Go to [Grants Search at Grants.gov](#) and search for opportunity number HRSA-25-078.

After you select the opportunity, we recommend that you click the Subscribe button to get updates.

# Application writing help

Visit HHS [Tips for Preparing Grant Proposals](#).

Visit [HRSA's How to Prepare Your Application](#) page for more guidance.

## Join the webinar

For more information about this opportunity, join the technical assistance (TA) webinar. The webinar will provide an overview of pertinent information in the NOFO and an opportunity for you to ask questions. Visit the HRSA Bureau of Health Workforce's [open opportunities](#) website to learn more about the resources available for this funding opportunity.





# Step 3:

# Prepare Your Application

## In this step

Application contents and format

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# Application contents and format

Applications include five main components. This section includes guidance on each.

Application page limit: 60 pages.

Submit your information in English and express budget figures using U.S. dollars.

**Make sure you include each of these:**

Components	Submission Form	Included in the page limit?
<a href="#">Project abstract</a>	Use the Project Abstract Summary Form.	No
<a href="#">Project narrative</a>	Research and Related Other Project Information	Yes
<a href="#">Budget narrative</a>	Use the Research and Related Budget form. (Line L)	Yes
<a href="#">Attachments</a>	Insert each in the Other Attachments form.	Yes, unless otherwise marked.
<a href="#">Other required forms</a>	Upload using each required form.	Indicated in the other required forms section.

See the [application checklist](#) for a full list of all application requirements. See [form instructions](#) for more detail on completing each form.

## Required format

You must format your narratives and attachments using our required formats for fonts, size, color, format, and margins. See the formatting guidelines in section 3.2 of the [R&R Application Guide](#).

## Project abstract

Complete the information in the Project Abstract Summary Form. Include a short description of your proposed project. Include the needs you plan to address, the proposed services, and the population groups you plan to serve. When applicable,

identify if you are requesting a [funding priority](#) or [preference](#). For more information, see section 3.1.2 of the [R&R Application Guide](#).

## Project narrative

In this section, you will describe all aspects of your project. Project activities must comply with the [nondiscrimination requirements](#).

Use the section headers and the order that follow.

### Introduction and purpose

**See merit review criterion 1: [Purpose and need](#)**

Briefly describe the purpose of your project. Include the demographics of the community and populations that participants will serve, such as data on the SDoH, behavioral health, and primary care needs that the project will address.

### Need

**See merit review criterion 1: [Purpose and need](#)**

- Describe your residency program and unmet needs this program will address. Include the need to develop or enhance trainings, clinical rotations, and clinical curriculum content to train residents to care for people experiencing homelessness, specifically focusing on the treatment of chronic conditions and mental health and substance use disorders in non-traditional treatment settings.
- Provide information on existing services and gaps in services that may exist.
- Use demographic data to support your descriptions and explanations, as applicable.

### Approach

**See merit review criterion 2: [Response](#)**

- Tell us how you will address your stated needs and meet the [program requirements and expectations](#) described in this NOFO.
- Describe how you will enhance your curricula to increase residents' knowledge of and competence to care for people experiencing homelessness. Curricula should cover the treatment of chronic conditions, behavioral health needs, and SDoH's impact on the ability to provide treatment for health conditions.
- Describe how you will establish the two one-month required rotations to train residents in street medicine to provide care for people experiencing homelessness.

- Describe your plans for training residents in interprofessional teams, including behavioral health, and medical-legal teams.
- Explain how you will provide training in the social and legal needs of people experiencing homelessness, through partnerships with legal aid organizations or [medical-legal partnerships](#) (MLP).
- Describe your proposed training project. Include related items such as faculty hiring, support staff hiring, clinical space, and contractual services. Include costs for these items in your [budget and budget narrative](#).
- Explain your strategies to improve residents' cultural competence to meet the needs of people experiencing homelessness. Include strategies based on the [National Standards for Culturally and Linguistically Appropriate Services \(CLAS\) in Health and Health Care Standards](#).

## High-level work plan

### See merit review criterion 2: [Response](#)

- Describe how you will achieve the program's [goal](#), each of the [three objectives](#), and the [program requirements and expectations](#) during the period of performance.
- Provide a timeline that includes each activity and identifies who is responsible for each.
- Include the extent to which the applicant will work with stakeholders to address the Objectives and the Requirements of this NOFO.
- Describe the locations of clinical sites (for example, medical vans serving people experiencing homelessness) in [Attachment 4](#). Describe the supervision and support you will provide to the residents at clinical rotation sites.
- You will also include a more detailed work plan in your [standardized work plan \(SWP\)](#). See Standard Forms.

## Resolving challenges

### See merit review criterion 2: [Response](#)

Discuss challenges that you are likely to encounter in designing and carrying out the activities in the work plan. Explain approaches that you'll use to resolve them. Such challenges might include:

- Recruitment of residents.
- Providing primary care services to people experiencing homelessness, including those with chronic conditions, substance use disorders (SUD) and other behavioral health disorders.
- Barriers to residents' access to education and training in your program.

- Supervision and support of residents at sites other than the academic home.
- Safety of residents and faculty at clinical sites.

## Performance reporting and evaluation

See merit review criteria 3: [Impact](#) and 4: [Resources and capabilities](#)

- **Outcomes.** Describe the expected outcomes (desired results) of the funded activities.
- **Performance measurement and reporting.** See [Report on Your Grant](#) for performance measure requirements and examples of reporting forms.
  - Describe how you will collect and report required performance data accurately and on time.
  - Describe how you will manage and securely store data.
    - Include how you will report National Provider Identifier (NPI) numbers for participants. Project trainees in eligible disciplines must apply for and report on an NPI.
  - Describe your process to track trainees after program completion for up to one year.
  - Describe how you will monitor and analyze performance data to support continuous quality improvement.
- **Program evaluation.** The evaluation should examine processes and progress towards the [program goal](#), program [objectives](#), and expected outcomes. Evaluations must follow the [HHS Evaluation Policy](#), as well as the standards and best practices described in OMB Memorandum [M-20-12](#). Describe your plan to evaluate the project. Include:
  - The evaluation questions, methods, data to be collected, and timeline for implementation.
  - The evaluation barriers and your plan to address them.
  - The evaluation capacity of your organization and staff. Include experience, skills, and knowledge.
  - How you will disseminate results, how you will assess whether your dissemination plan is effective, whether the results are national in scope, and the extent of potential replication.
- See [reporting](#) for more information.

## Sustainability

### See merit review criterion 3: [Impact](#)

We expect you to sustain key project elements that improve practices and outcomes for the target population. Propose a plan for project sustainability after the period of federal funding ends.

Describe the actions you'll take to:

- Highlight key elements of your project. Examples include training methods or strategies that have been effective.
- Obtain future sources of funding.
- Determine the timing to become self-sufficient.
- Discuss challenges that you'll likely encounter in sustaining the program. Include how you expect to resolve these challenges.

## Organizational information

### See merit review criterion 4: [Resources and capabilities](#)

- Briefly describe your mission, structure, and the scope of your current activities. Explain how they support your ability to carry out the program requirements.
- Discuss how you'll follow the approved plan, account for federal funds, and record all costs to avoid audit findings.
- Describe how you'll assess the unique needs of the trainees you serve.
- Describe the organizations you will partner with to fulfill the [program goal](#) and meet the training [objectives](#). Include key agreements and letters of support in [Attachment 8](#) and [Attachment 9](#).
- Include a project organizational chart in [Attachment 2](#).
- Include a staffing plan and job descriptions for key faculty and staff in [Attachment 3](#).
- Include biographical sketches for key staff using the Research & Related Senior/Key Person Profile form. See [other required forms](#).

## Budget and budget narrative

### See merit review criterion 5: [Support requested](#)

Your **budget** should follow the instructions in section 3.1.4 of the [R&R Application Guide](#) and any specific instructions listed in this section.

HHS now uses the definitions for [equipment](#) and [supplies](#) in 2 CFR 200.1. The new definitions change the threshold for equipment to the lesser of the recipient's capitalization level or \$10,000 and the threshold for supplies to below that amount.

**Reminder:** Indirect costs for training awards cannot exceed 8% of modified total direct costs. The total project or program costs are all allowable (direct and indirect) costs incurred for the HRSA award activity or project. This includes costs charged to the award and non-federal funds used to satisfy any matching or cost sharing requirement (which may include maintenance of effort, if applicable).

The **budget narrative** supports the information you provide in the Research and Related Budget Form. See [other required standard forms](#). Your budget should show a well-organized plan. The merit review committee reviews both.

The budget narrative includes an itemized breakdown and a clear justification of the requested costs. As you develop your budget, consider:

- Any faculty development costs.
- If the costs are reasonable and consistent with your project's purpose and activities.
- The restrictions on spending funds. See [funding policies and limitations](#).
- The budget amount for each year of the period of performance **must not exceed the year one request**. If a successful applicant requests funds for years two through five that exceed the year one request, then we will reduce the budget for years two through five down to the year one amount.

To create your budget narrative, see detailed instructions in section 3.1.5 of the [R&R Application Guide](#). Follow these additional instructions specific to this NOFO.

## Participant and trainee support costs

If you include participant or trainee support costs:

- List tuition, fees, health insurance, travel, and other costs.
- Identify the number of participants and trainees.
- Separate these costs from others so we can identify them easily.
- Include a sub-total entitled "Total Participant and Trainee Support Costs" with the summary of these costs.

## Preceptor costs

Preceptors can be either your employee, contractor, or consultant. Preceptor costs are unique and different than trainee costs, which are for your residents. They provide supervision and mentorship to residents during clinical training, and their costs—such

as salary or stipends—are distinct from trainee costs, which cover the expenses directly related to supporting the trainees, like salaries, tuition, or stipends.

Allowable preceptor costs may include:

- stipends (other than to employees)
- percentage of salary (for employee time spent on award activities).
- continuing education, other trainings, and fees
- travel

Note: You cannot require students to pay for preceptor costs.

- If the preceptor is an employee, specify those costs under section B, Other Personnel; section D, Travel; and Section F, Other Direct Costs.
- If the preceptor is a consultant or contractor, lists those costs under section F, Other Direct Costs (e.g., Consultant Services or Subawards/Contractual Costs).
- Include the number of preceptors in your budget narrative.

## Consultant services

Identify each consultant, the services they will perform, the total number of days they will work, travel costs, and the total estimated costs.

## Legal Services

Grant funds cannot be used for legal services for patients.

## Attachments

**Place your attachments in order in the Attachments form.**

### Attachment 1: Accreditation documentation

**Required. Counts toward page limit.**

You must provide documentation of your residency program's ACGME accreditation. Please do not provide only the web link to the accreditation body's website. HRSA will not open any links included in the application. A copy of the ACGME letter must be included in Attachment 1.

### Attachment 2: Project organizational chart

**Required. Counts toward page limit.**

Provide a one-page diagram that shows the full project's organizational structure. Include all aspects, not just the applicant organization.



## Attachment 3: Staffing plan and job descriptions

**Required. Counts toward page limit.**

See Section 3.1.7 of the [R&R Application Guide](#).

Include a staffing plan that shows the staff positions that will support the project and key information about each. Justify your staffing choices, including education and experience qualifications and your reasons for the amount of time you request for each staff position.

For key personnel, attach a one-page job description. It must include the role, responsibilities, and qualifications.

## Attachment 4: Clinical community-based rotations table

**Required. Counts toward page limit.**

Provide a table of the clinical community-based rotation sites where your residents will train to provide health care for people experiencing homelessness. This could include shelters, motels, encampments, temporary housing, and mobile medical vans.

Community-based Clinical Rotation Sites								
Clinical training site name	Full address	County	Is site located in a <a href="#">tribal facility</a> ? (Y/N)	Is site located in a rural area as determined by FORHP, using the <a href="#">Rural Health Grants Eligibility Analyzer</a> ? (Y/N)	Is site located in a Primary Care HPSA with a score of 17 or greater as listed at <a href="#">HPSA-Find</a> ? (Y/N and score)	Does the clinical site serve homeless populations? (Y/N)	Length of rotation	Number of residents to be trained by year

## Attachment 5: Maintenance of effort documentation

**Required. Counts toward page limit.**

Specify the non-federal funds that support proposed activities. These include cash, in-kind, or other contributions. Do not include any federal funds. See [maintenance of effort](#) requirement.

Use the sample format below to provide the maintenance of effort documentation.

FY Before Application:	First FY of Award:
Actual non-federal expenditures	Estimated non-federal expenditures
\$	\$

## Attachment 6: Funding preference documentation

**As applicable. Counts toward page limit.**

Provide documentation that proves you qualify for the funding preference.

[funding preference](#) See [selection process](#) for information about how this applies.

Do not submit this attachment if you do not qualify.

## Attachment 7: Funding priority documentation

**As applicable. Counts toward page limit.**

Provide documentation that proves you qualify for the funding priority.

See [funding priority](#) for information about how to qualify.

See [selection process](#) for information about how this applies.

Do not submit this attachment if you do not qualify.

## Attachment 8: Letters of agreement, memoranda of understanding, and contracts

**As applicable. Counts toward page limit.**

Provide any documents that describe working relationships between your organization and other organizations and programs you cite in the proposal. Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and partners and any deliverables. Make sure any letters of

agreement are signed and dated. Organizational relationships that are necessary to carry out the proposal must be included here.

## Attachment 9: Letters of support

**As applicable. Counts toward page limit.**

You may provide letters of support from organizations or departments involved in the proposed project. Letters of support can also be from individuals within your institution who hold the authority to speak for the organization or department, such as a CEO or chair.

Recommenders should indicate an understanding of and commitment to the project. Recommenders should sign and date their letters of support.

## Attachments 10 to 15: Other documents as applicable

**Optional. Counts toward page limit.**

You may submit other documents that you think are necessary to support your application.

## Other required standard forms

You will need to complete some other forms. Upload the forms listed at Grants.gov. You can find them in the NOFO [application package](#) or review them and any available instructions at [Grants.gov Forms](#). See the [application checklist](#) for a full list of all application requirements.

Forms	Submission Requirement
SF-424 R & R (Application for Federal Assistance) form	With application.
Research and Related Other Project Information	With application.
Standardized Work Plan (SWP) form	With application.
Research and Related Senior/Key Person Profile (Expanded) form	With application.
Research and Related Budget form	With application.
R & R Subaward Budget Attachment(s) Form	If applicable, with the application.

Forms	Submission Requirement
Project/Performance Site Locations(s) form	With application.
Disclosure of Lobbying Activities (SF-LLL) Form	If applicable, with the application or before the award.
BHW Program Specific Data Form	With application.

## Form instructions

### SF-424 R&R form

**Does not count toward the page limit.**

Follow the instructions for Application for Federal Assistance in section 3.1.1 of the [R&R Application Guide](#).

### Research and Related Other Project Information

**Only the project narrative counts toward the page limit.**

In addition to the requirements in the [project narrative](#) section, you will provide some additional information in this form.

- Complete sections 1 through 6.
- Upload a blank document in item 7: Project Summary/Abstract to avoid a cross-form error with your Project Abstract Summary Form.
- Upload your project narrative in item 8.
- Leave items 9, 10, and 11 blank.
- If you have more than 10 subawards, you may use item 12 to add subaward budgets that could not fit in your R&R Subaward Budget Attachment(s) Form.

### Standardized work plan form

**Does not count toward the page limit.**

- In addition to the requirements in [the high-level work plan section of the project narrative](#), follow these instructions:
- Submit your work plan through the SWP form. Provide a detailed work plan that demonstrates your experience or ability implementing a project of the proposed scope.
- Follow the instructions in the SWP form and in the [high-level work plan section of the project narrative](#).

- The **goal** and three **objectives** in your SWP must exactly match the ones listed in the program description and copied as stated as the SWP goal. The goal for the PCTE-RESM program is to increase the number of physicians trained in a primary care specialty (family medicine, internal medicine, pediatrics and combined internal medicine-pediatrics [med-peds]) to provide care for people experiencing homelessness.
- All three [program objectives](#) must be included in each budget period.
- All sub-objectives should fit within one of the existing program objectives.
- For the person responsible for each activity, use job titles instead of names.

## Research and Related Senior/Key Person Profile (Expanded) form

**The attached biographical sketches do not count toward the page limit.**

In addition to the requirements in [Project Narrative, Organizational Information](#), follow these instructions Include biographical sketches for people who will hold the key positions.

- Try to use no more than two pages per person.
- Do not include non-public, [personally identifiable information](#)
- If you include someone you have not hired yet, include a letter of commitment from that person with their biographical sketch.
- Upload sketches in this form.
- Include:
  - Name and title.
  - Education and training: For each entry include Institution and location, degree and date earned, if any, and field of study.
  - Section A, Personal Statement. Briefly describe why the individual's experience and qualifications make them well-suited for their role.
  - Section B, Positions and Honors. List in chronological order previous and current positions. List any honors. Include present membership on any federal government public advisory committee.
  - Section C, Other Support. This section is optional. List selected ongoing and completed projects during the last three years. Begin with any projects relevant to the proposed project. Briefly indicate the overall goal of the projects and responsibilities of the person.
  - Other information. If applicable, include language fluency and experience working with populations that are culturally and linguistically different from their own.

Please note, the [R&R Application Guide](#) states that biographical sketches count toward the page limit. However, per this Notice of Funding Opportunity, your biographical sketches will not count toward the page limit.

## Research and Related Budget form

**Only the budget narrative counts toward the page limit.**

In addition to the requirements in the [budget and budget narrative section](#), follow these instructions:

Complete the Research and Related Budget Form. Follow the instructions in section 3.1.4 of the [R&R Application Guide](#).

You will complete the form for each 12-month budget year for the proposed five-year period of performance. After completing the first budget period in the form, you may click “Add Period” to move to the next.

## R&R Subaward Budget Attachment(s) Form

**Only the subaward budget narratives count toward the page limit.\*.**

You will also complete R&R Subaward Budget Attachments for each subaward you propose. These include subcontracts. You will attach these using the R&R Subaward Budget Attachment(s) Form.

To complete the budget forms, follow the instructions in Grants.gov

If you have more than 10 subawards, you may upload the extra budget forms in the Research and Related Other Project Information form in Item 12, Other Attachments.

## Project/Performance Site Location(s) form

**Counts toward the page limit.**

Follow the form instructions in Grants.gov.

## Disclosure of Lobbying Activities (SF-LLL) Form

**Does not count toward the page limit.**

Follow the form instructions in Grants.gov.

## BHW Program Specific Data Form

**Does not count toward the page limit.**

Follow the form instructions in Grants.gov.



# Step 4:

# Learn About Review and Award

## In this step

Application review	<a href="#">32</a>
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Award notices	<a href="#">40</a>

# Application review

## Initial review

We review each application to make sure it meets [eligibility](#) criteria, including the [completeness and responsiveness](#) criteria. If your application does not meet these criteria, it will not be funded.

Also, we will not review any pages over the page limit.

## Merit review

A panel reviews all applications that pass the initial review. The members use these criteria.

Criterion	Total number of points = 100
1. Purpose and need	15 points
2. Response	35 points
3. Impact	20 points
4. Resources and capabilities	20 points
5. Support requested	10 points

### Criterion 1: Purpose and need

#### 15 points.

See Project Narrative [Introduction and Purpose](#) and [Need](#) sections.

The panel will review your application for:

- How well it describes the purpose of your project, including the demographics of the community and populations that residents will serve, such as data on the SDoH and primary care needs that the project will address.
- How well it provides information on existing training and gaps that may exist.

### Criterion 2: Response

#### 35 points.

See Project Narrative [Approach](#), [High-Level Work Plan](#), and [Resolving Challenges](#) sections.



## Approach (15 points)

The panel will review your application for how well it:

- Describes how you will address your stated needs, as well as the program requirements and expectations described in this NOFO.
- Describes how you will enhance curricula to train residents in street medicine to provide care people experiencing homelessness, including addressing SDoH and behavioral health needs.
- Describes how you will implement the required rotations to serve people experiencing homelessness.
- Describes your plans for faculty hiring, support staff hiring, clinical space, and any contractual services in the proposed project.
- Describes how you will train residents in interprofessional teams including behavioral health and medical-legal teams.
- Explains your strategies to improve residents' cultural competence to meet the needs of people experiencing homelessness. Your strategies should draw on the [CLAS](#) in Health and Health Care Standards.

## High-level work plan (15 points)

The panel will review your application for how well it:

- Describes how you will achieve the goal and [three program objectives](#) of this NOFO and describes how you will meet the Program Requirements and expectations.
- Provides in the SWP a timeline for each of the five budget years by quarter that includes each activity and identifies who is responsible for each by their title.
- Provides requested information about the community-based rotations.
- Provides [Attachment 4](#): Clinical Community-based Rotations Table. Table should be clear and complete.
- Describes how you will work with community-based sites to assure adequate supervision and logistical support for residency rotations.
- Describe how you will work with stakeholders to address the Objectives and the Requirements of this NOFO.

## Resolution of challenges (5 points)

The panel will review your application for how well it:

- Describes the obstacles and challenges you may face during project design and implementation. This includes the quality of your plan to deal with them.
- Responds to specific areas of potential challenge, including but not limited to:

- Recruiting residents.
- Providing services to people experiencing homelessness.
- Barriers to residents' access to education and training in your program.
- Supervising and supporting residents at sites other than the academic home.
- Safety of residents and faculty at clinical sites.

## Criterion 3: Impact

### 20 points.

See Project Narrative [Performance Reporting and Evaluation](#) and [Sustainability](#) sections.

### Performance reporting and evaluation (10 points)

The panel will review your application for how well it:

- Proposes an effective project that is likely to have a strong impact on the community and people served.
- Describes plans for effectively disseminating project results that could be replicated by others or be national in scope.
- Demonstrates strong and effective methods to monitor and evaluate project results.
- Includes measures that will assess how well program objectives have been met and to what extent the results are because of the project.
- Presents a quality plan to collect and manage data to ensure accurate and timely performance.
- Describes your process to collect and report NPI numbers for eligible participants. This includes a process to track residents after program completion for up to one year.
- Proposes a plan to use collected data for continuous quality improvement and to monitor and evaluate project results.
- Anticipates evaluation obstacles and explains how you propose to address them.

### Sustainability (10 points)

The panel will review your application for how well it:

- Proposes a solid plan for sustaining the project beyond the duration of federal funding.
- Describes likely challenges to be encountered in sustaining the program and describes logical approaches to resolving the challenges.

## Criterion 4: Resources and capabilities

### 20 points.

See Project Narrative [Organizational Information](#) and [Performance Reporting and Evaluation](#) sections.

The panel will review your application to determine the extent to which:

- Project staff have the training or experience to carry out the project.
- You have the capabilities to fulfill the needs of the proposed project, including the proposed grant activities, financial management, and evaluation.
- You have adequate facilities available to fulfill the needs of the proposed project.
- You demonstrate strong relationships with key partners through your project narrative, project organizational chart, and agreements and letters of support.
- You include a staffing plan and job descriptions for key faculty and staff in [Attachment 3](#).
- You include biographical sketches for key staff using the [Research & Related Senior/Key Person Profile form](#).

## Criterion 5: Support requested

### 10 points.

See [Budget and Budget Narrative](#) section.

The panel will review your application to determine :

- How reasonable the proposed budget is for each year of the period of performance.
- How reasonable are the costs, outlined in the budget and required resources sections, and how well they align with the project's scope.
- How sufficient the time is for key staff to spend on the project to achieve project objectives.

We do not consider **voluntary** cost sharing during merit review.

## Risk review

Before making an award, we review your award history to assess risk. We need to ensure all prior awards were managed well and demonstrated sound business practices. We:

- Review any applicable past performance.
- Review audit reports and findings.
- Analyze the budget.

- Assess your management systems.
- Ensure you continue to be eligible.
- Make sure you comply with any public policies.
- We may ask you to submit additional information.

As part of this review, we use SAM.gov Entity Information [Responsibility / Qualification](#) to check your history for all awards likely to be over \$250,000. You can comment on your organization's information in SAM.gov. We'll consider your comments before making a decision about your level of risk.

If we find a significant risk, we may choose not to fund your application or to place specific conditions on the award.

For more details, see [45 CFR 75.205](#).

## Selection process

When making funding decisions, we consider:

- The available funds.
- Assessed risk.
- Merit review results. These are key in making decisions but are not the only factor.
- The larger portfolio of agency-funded projects, including the diversity of project types and geographic distribution.
- The funding priorities, funding preferences, and special considerations.

We may:

- Fund out of rank order.
- Fund applications in whole or in part.
- Fund applications at a lower amount than requested.
- Decide not to allow a recipient to subaward if they may not be able to monitor and manage subrecipients properly.
- Choose to fund no applications under this NOFO.

## Funding priority

This program includes one funding priority imposed by PHSA, section 747(a)(3). A funding priority adds points to merit review scores if we determine that the application meets the criteria listed here. HRSA staff will judge whether priority criteria are met and assign points accordingly. Qualifying for a funding priority does not guarantee that your application will be successful.

If you request the funding priority, provide documentation that proves you qualify in [Attachment 7](#).

## Priority: Rural Training (5 points)

We will give you a funding priority if you can demonstrate that you train residents in rural areas, including for tribes or tribal organizations in rural areas. Applicants who meet the priority as determined by HRSA will receive five points.

To meet the funding priority qualification, use this table to provide documentation that you have trained residents in AY 2023 to 2024 in rural areas, including for tribes or tribal organizations in these areas.

Table: Funding priority qualification data, AY 2023 to 2024

Name of health care training site	Full street address of health care training site	County	Is the clinical rotation site designated a rural area by <a href="#">Rural Health Grants Analyzer?</a> Y/N	Is the clinical rotation site part of a federally recognized tribe or tribal organization in a rural area? Y/N

## Funding preferences

This program includes funding preferences imposed by 42 USC § 295j (Section 791 of the Public Health Service Act). This permits a funding preference for any qualified application ranked above the 20th percentile of proposals approved by the merit review panel and who meet the qualifications laid out below.

If we determine that your application qualifies for a funding preference, we will move it to a more competitive position among fundable applications. Qualifying for a funding preference does not guarantee that your application will be successful.

A funding preference is granted if any of three qualifications are met:

- A high rate of placement of graduates in practice settings that primarily focus on serving residents of [Medically Underserved Communities \(MUCs\)](#). You can find more information about MUCs, and where they are located, [here](#).
- During the two year period before the year you're applying for the grant, that there's been a significant increase in such placements.

- A new program having graduated less than three classes that also meet the [stated criteria for this qualification](#), as indicated below.

Only a single preference may be awarded regardless if the applicant meets one, two, or all three of the qualifications listed above.

To qualify for the funding preference, you must clearly indicate the basis for which you are requesting the funding preference in your [project abstract](#). Provide supporting documentation in [Attachment 6](#).

## Qualification 1: High MUC placement rate

You can request a funding preference if you have a high rate for placing residents who complete your program in practice settings that have the principal focus of serving MUCs.

To qualify for this funding preference, you must demonstrate that at least greater than or equal to 50% of your graduates for academic years (AYs) 2022 to 2023 and AY 2023 to 2024 are employed in [MUCs](#)

**Table: Example calculation:**

Step 1	Number of program completers in AY 22-23 employed in MUCs	+	Number of program completers in AY 23-24 employed in MUCs
Step 2	/ Divided by		
Step 3	Total number of program completers in AY 22-23	+	Total number of program completers in AY 23-24
Step 4	X Multiplied by 100		
Step 5	= Equals MUC Placement Rate		

## Qualification 2: Significant MUC placement rate increase

You can request funding preference if you have a significant increase for placing residents who complete your program in practice settings that serve in MUCs.

To qualify for this funding preference, you must demonstrate a 25-percentage point increase from AY 2022 to 2023 to AY 2023 to 2024.

**Table: Example calculation:**

Step 1	Number of program completers in AY 23-24 employed in MUCs	/ Divided by	Total Number of program completers in AY 23-24
Step 2	- Minus		
Step 3	Number of program completers in AY 22-23 employed in MUCs	/ Divided by	Total number of program completers in AY 22-23
Step 4	X Multiplied by 100		
Step 5	= Equals Percentage point difference		

## Qualification 3: New Training Programs

Qualification 3 serves as a pathway for new programs. To qualify, you must have graduated fewer than three classes and meet at least four of these seven criteria:

1. Your mission statement identifies a specific purpose of the program to preparing health professionals to serve underserved populations.
2. Your curriculum will help prepare practitioners to serve underserved populations.
3. You require substantial clinical training in MUCs.
4. At least 20% of your clinical faculty spends at least 50% of their time providing or supervising care in MUCs.
5. The entire program, or a substantial portion of it, is physically located in an MUC.
6. You provide trainee assistance, which is linked to service in MUCs following graduation, for trainees in the program.
7. You provide a placement method to help graduates find positions in MUCs.

To apply for this funding preference, submit a brief narrative entitled “New Program MUC Preference Request” in [Attachment 6](#). It must:

- Describe how your program meets at least four of the seven criteria mentioned above.
- State the year the program was established.
- Provide the total number of graduates for each year since the training program began,
- including the current year.

# Award notices

We issue Notices of Award (NOA) on or around the [start date](#) listed in the NOFO. See Section 4 of the [R&R Application Guide](#) for more information.

By drawing down funds, you accept the terms and conditions of the award.





# Step 5: Submit Your Application

## In this step

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Application checklist	<a href="#">43</a>

# Application submission and deadlines

Your organization's authorized official must certify your application. See the section on [finding the Application Package](#) to make sure you have everything you need.

Make sure you are current with SAM.gov and UEI requirements. When you register or update your SAM.gov registration, you must agree to the [financial assistance general certifications and representations](#), and specifically with regard to grants.

Make sure that your SAM.gov registration is accurate for both contracts and grants, as these registrations differ. See [information on getting registered](#). You will have to maintain your registration throughout the life of any award.

## Deadlines

**You must submit your application by March 20, 2025 at 11:59 p.m. ET.**

Grants.gov creates a date and time record when it receives the application.

## Submission method

### Grants.gov

You must submit your application through Grants.gov. You may do so using Grants.gov Workspace. This is the preferred method. For alternative online methods, see [Applicant System-to-System](#).

For instructions on how to submit in Grants.gov, see the [Quick Start Guide for Applicants](#). Make sure that your application passes the Grants.gov validation checks, or we may not get it. Do not encrypt, zip, or password protect any files.

**Have Questions?** Go to [Contacts and Support](#).

## Other submissions

### Intergovernmental review

This NOFO is not subject to [Executive Order 12372](#), Intergovernmental Review of Federal Programs. No action is needed.

# Application checklist

Make sure that you have everything you need to apply:

Form	See instructions	Included in page limit?
<b>Project Abstract Summary form</b>	<a href="#">Project abstractForm instructions</a>	No
<b>Research and Related Other Project Information</b>	<a href="#">Project narrativeForm instructions</a>	Only the attached project narrative
<b>Research and Related Budget form</b>	<a href="#">Budget &amp; budget narrative Form instructions</a>	Only the attached budget justification
<p><b>Attachments</b></p> <p>Include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> 1. Accreditation documentation</li> <li><input type="checkbox"/> 2. Project organizational chart</li> <li><input type="checkbox"/> 3. Staffing plan and job descriptions</li> <li><input type="checkbox"/> 4. Clinical community-based rotations table</li> <li><input type="checkbox"/> 5. Maintenance of effort documentation</li> <li><input type="checkbox"/> 6. Funding preference documentation</li> <li><input type="checkbox"/> 7. Funding priority documentation</li> <li><input type="checkbox"/> 8. Letters of agreement, memoranda of understanding, contracts</li> <li><input type="checkbox"/> 9. Letters of support</li> <li><input type="checkbox"/> 10 to 15. Other documents as applicable. If you have additional material to submit, such as explanations of mandatory disclosures, you can use this form.</li> </ul>	<a href="#">Attachments</a>	Yes
SF-424 R&R (Application for Federal Assistance)	<a href="#">Form instructions</a>	No

Form	See instructions	Included in page limit?
Standardized Work Plan (SWP)	<a href="#">Project narrative, high-level work plan Form instructions</a>	No
Research and Related Senior/Key Person Profile (Expanded)	<a href="#">Project narrative, organizational information Form instructions</a>	No
R&R Subaward Budget Attachment(s)	<a href="#">Form instructions</a>	Only the attached budget justification(s)
Project/Performance Site Locations(s)	<a href="#">Form instructions</a>	Yes*
Disclosure of Lobbying Activities (SF-LLL)	<a href="#">Form instructions</a>	No
BHW Program Specific Data Form	<a href="#">Form instructions</a>	No

\* Only what you attach in addition to these forms counts toward the page limit. The form itself does not count.



# Step 6:

# Learn What Happens After Award

## In this step

Post-award requirements and administration [46](#)

# Post-award requirements and administration

## Administrative and national policy requirements

There are important rules you need to know if you get an award. You must follow:

- All terms and conditions in the Notice of Award. We incorporate this NOFO by reference.
- The regulations at [45 CFR part 75](#), Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards, or any superseding regulations. Effective October 1, 2024, HHS adopted the following superseding provisions:
  - [2 CFR 200.1](#), Definitions, Modified Total Direct Cost.
  - [2 CFR 200.1](#), Definitions, Equipment.
  - [2 CFR 200.1](#), Definitions, Supplies.
  - [2 CFR 200.313\(e\)](#), Equipment, Disposition.
  - [2 CFR 200.314\(a\)](#), Supplies.
  - [2 CFR 200.320](#), Methods of procurement to be followed.
  - [2 CFR 200.333](#), Fixed amount subawards.
  - [2 CFR 200.344](#), Closeout.
  - [2 CFR 200.414\(f\)](#), Indirect (F&A) costs.
  - [2 CFR 200.501](#), Audit requirements.
- The [HHS Grants Policy Statement](#) (GPS). Your NOA will reference this document. If there are any exceptions to the GPS, they'll be listed in your Notice of Award.
- All federal statutes and regulations relevant to federal financial assistance, including those highlighted in [HHS Administrative and National Policy Requirements](#).
- See the requirements for performance management in [2 CFR 200.301](#).

## Nondiscrimination legal requirements

If you receive an award, you must follow all applicable nondiscrimination laws. You agree to this when you register in SAM.gov. You must also submit an Assurance of Compliance ([HHS-690](#)). To learn more, see the [Laws and Regulations Enforced by the HHS Office for Civil Rights](#).

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

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

## Executive Order on Worker Organizing and Empowerment

[Executive Order on Worker Organizing and Empowerment \(E.O. 14025\)](#) encourages worker organizing and collective bargaining and promotes equality of bargaining power between employers and employees.

You can support these goals by developing policies and practices that you could use to promote worker power.

## Cybersecurity

You must create a cybersecurity plan if your project involves both of the following conditions:

- You have ongoing access to HHS information or technology systems.
- You handle personal identifiable information (PII) or personal health information (PHI) from HHS.

You must base the plan on the [NIST Cybersecurity Framework](#). Your plan should include the following steps:

### Identify:

- List all assets and accounts with access to HHS systems or PII/PHI.

### Protect:

- Limit access to only those who need it for award activities.
- Ensure all staff complete annual cybersecurity and privacy training. Free training is available at 405(d): [Knowledge on Demand \(hhs.gov\)](#).
- Use multi-factor authentication for all users accessing HHS systems.
- Regularly backup and test sensitive data.

**Detect:**

- Install antivirus or anti-malware software on all devices connected to HHS systems.

**Respond:**

- Create an incident response plan. See [Incident-Response-Plan-Basics\\_508c.pdf \(cisa.gov\)](#) for guidance.
- Have procedures to report cybersecurity incidents to HHS within 48 hours. A cybersecurity incident is:
  - Any unplanned interruption or reduction of quality, or
  - An event that could actually or potentially jeopardize confidentiality, integrity, or availability of the system and its information.

**Recover:**

- Investigate and fix security gaps after any incident.

## Reporting

If you are funded, you will have to follow the reporting requirements in Section 4 of the [R&R Application Guide](#). The NOA will provide specific details.

You must also follow these program-specific reporting requirements:

- We will require a Performance Report annually via the Electronic Handbooks (EHBs).
- All HRSA recipients must collect and report performance data so that HRSA can meet its obligations under the Government Performance and Results Modernization Act of 2010 (GPRMA) and the Foundations for Evidence-Based Policymaking Act of 2018.
- The Annual Performance Report (APR) collects data on all academic year activities from July 1 to June 30. It is due to HRSA on July 31 each year. If award activity extends beyond June 30 in the final year of the grant, HRSA may require a Final Performance Report (FPR) to collect the remaining performance data. The FPR is due within 120 calendar days after the period of performance ends.
- You can find examples of APRs at [Report on Your Grant](#) on the HRSA website. Performance measures and reporting forms may change each academic year. HRSA will provide additional information in the Notice of Award (NOA).
- We will require progress reports quarterly and annually each year. These are derived from the [SWP](#).





# Contacts and Support

## In this step

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# Agency contacts

## Program and eligibility

### Steve Coulter, MD

Project Officer, Bureau of Health Workforce

Health Resources and Services Administration

Email your questions to: [PCTE-RTSM@hrsa.gov](mailto:PCTE-RTSM@hrsa.gov)

Call: 301-945-3336

## Financial and budget

### Reginal Baker

Grants Management Specialist

Division of Grants Management Operations, OFAAM

Health Resources and Services Administration

Email your questions to: [Rbaker@hrsa.gov](mailto:Rbaker@hrsa.gov)

Call: (301) 945-3937

## HRSA Contact Center

**Open Monday – Friday, 7 a.m. – 8 p.m. ET**, except for federal holidays.

**Call:** 877-464-4772 / 877-Go4-HRSA

**TTY:** 877-897-9910

[Electronic Handbooks Contact Center](#)

## Grants.gov

Grants.gov provides 24/7 support. You can call 1-800-518-4726, search the [Grants.gov Knowledge Base](#), or [email Grants.gov for support](#). Hold on to your ticket number.

## SAM.gov

If you need help, you can call 866-606-8220 or live chat with the [Federal Service Desk](#).

# Program-specific definitions

- ACGME: The Accreditation Council for Graduate Medical Education, the accreditation body for the graduate medical education of physicians, including residents.
- FORHP: The Federal Office of Rural Health Policy. FORHP is the office in HRSA that administers grant programs designed to build health care capacity at both the local and state levels. The office also coordinates activities related to rural health care within the Department of Health and Human Services and has the department-wide responsibility for analyzing the possible effects of policy on residents of rural communities.
- GME: Graduate Medical Education, the training of physicians at the resident and fellow levels. Such training is accredited by the ACGME.
- Medical-legal partnership (MLP): a collaboration between a health care organization and a public interest law organization to address health-harming social needs that have legal implications, consequences, and/or remedies.
- Unhoused populations, people experiencing homelessness: Individuals lacking a fixed, regular, nighttime residence. These people may be sheltered or unsheltered.
- Primary care specialties: For purposes of this NOFO, primary care specialties are limited to pediatrics, family medicine, internal medicine, and combined internal medicine-pediatrics (med-peds). Residency training for these specialties typically lasts three or four years.
- Resident: A physician enrolled in an ACGME-accredited post-graduate medical education program.
- Street medicine: Provision of health care, including primary medical and behavioral health care, to individuals experiencing homelessness.

## Helpful websites

- [HRSA Grants page](#)
- The [HRSA Manage Your Grant](#) webpage.
- [Bureau of Health Workforce Glossary](#)
- [HRSA HPSA Find tool](#)
- [HRSA MUA Find tool](#)
- [Corporation for Supportive Housing \(CSH\)](#)
- [National Health Care for the Homeless Council \(NHCHC\)](#)
- [National Center for Medical-Legal Partnership](#)

# Endnotes

1. The U.S. Department of Housing and Urban Development. The 2023 Annual Homelessness Assessment Report (AHAR) to Congress, Part 1. December 2023. Retrieved November 4, 2024 from: <https://www.huduser.gov/portal/sites/default/files/pdf/2023-AHAR-Part-1.pdf> ↑
2. The U.S. Department of Housing and Urban Development. The 2021 Annual Homelessness Assessment Report (AHAR) to Congress, Part 2. July 2023. Retrieved November 4, 2024 from: <https://www.huduser.gov/portal/sites/default/files/pdf/2021-AHAR-Part-2.pdf> ↑
3. Keshab Subedi and Shweta Ghimire. Comorbidity profiles of patients experiencing homelessness: A latent class analysis. PLoS One. 2022 May 24. Retrieved November 4, 2024 from: <https://pmc.ncbi.nlm.nih.gov/articles/PMC9128947> ↑
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