U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Health Resources and Services Administration

Federal Office of Rural Health Policy
Hospital-State Division

Small Rural Hospital Improvement Grant Program (SHIP)

Announcement Type: Competing Continuation
Funding Opportunity Number: HRSA-16-018

Catalog of Federal Domestic Assistance (CFDA) No. 93.301

FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2016

Application Due Date: December 15, 2015

Ensure SAM.gov and Grants.gov registrations and passwords are current immediately!
Deadline extensions are not granted for lack of registration.
Registration in all systems, including SAM.gov and Grants.gov,
may take up to one month to complete.

Release Date: October 14, 2015

Issuance Date*:* October 14, 2015

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Authority: Section 1820(g)(3) of the Social Security Act, 42 U.S.C. 1395i-4

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA), Federal Office of Rural Health Policy is accepting applications for fiscal year (FY) 2016 Small Rural Hospital Improvement Program. The purpose of this program is to help small rural hospitals of less than 50 beds implement quality and operational improvement efforts.

Funding Opportunity Title:	Small Rural Hospital Improvement Grant Program (SHIP)
Funding Opportunity Number:	HRSA-16-018
Due Date for Applications:	December 15, 2015
Anticipated Total Annual Available Funding:	$14,571,000
Estimated Number and Type of Award(s):	Approximately 47 grants
Estimated Award Amount:	Approximately $9,000 per hospital/year
Cost Sharing/Match Required:	No
Project Period:	June 1, 2016 through May 31, 2019 (3 years)
Eligible Applicants:	State Offices of Rural Health in each state will be the official grantee of record, as they will act as a fiscal intermediary for all hospitals within their state. See Section III-1 of this funding opportunity announcement (FOA) for complete eligibility information.

Application Guide

All applicants 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 FOA to do otherwise. A short video for applicants explaining the *Application Guide* is available at http://www.hrsa.gov/grants/apply/applicationguide/.

Technical Assistance

A TA webinar is scheduled for Thursday, October 22, 2015 at 2 PM ET. Call is expected to last no more than one hour. Meeting call-in # 301-945-0789.

Table of Contents

I. Program Funding Opportunity Description

1. Purpose

This announcement solicits applications for the Small Rural Hospital Improvement Grant Program (SHIP). The purpose of the SHIP is to help small rural hospitals of 49 beds or less, do any or all of the following: 1) enable the purchase of equipment and/or training to help hospitals attain value-based purchasing provision in the Patient Protection and Affordable Care Act (ACA); 2) aid small rural hospitals in joining or becoming accountable care organizations, or create shared savings programs per the ACA; and 3) enable small rural hospitals to purchase health information technology, equipment, and/or training to comply with meaningful use, ICD-10 standards, and payment bundling.

2. Background
This program is authorized by Section 1820 (g)(3) of the Social Security Act, amended by section 3129 of the ACA. The SHIP was first authorized by the Balanced Budget Refinement Act of 1999 of the Social Security Act to help small rural hospitals meet the costs of implementing data systems required to meet requirements of the Medicare Prospective Payment System (PPS). Funding for this program was first provided by the Labor/HHS Appropriations Act for FY 2002 in which conference report language expanded the purpose of this grant program to also help small rural hospitals comply with provisions of HIPPA and reduce medical errors while supporting quality improvement.

In 2010, the ACA authorized SHIP funds to help eligible hospitals meet value-based purchasing goals for their organization, enable small rural hospitals to become or join accountable care organizations (ACO) or become shared savings programs, and purchase health information technology, equipment, and/or training to comply with meaningful use, ICD-10 standards, and payment bundling.

II. Award Information

1. Type of Application and Award
Type(s) of applications sought: Competing Continuation.

Funding will be provided in the form of a grant.

2. Summary of Funding

This program will provide funding during federal fiscal years 2016 – 2018. Approximately $14,571,000 is expected to be available annually to fund approximately 47 recipients. Applicants may apply for a ceiling amount of up to $9,000 per eligible hospital/year, though the final amount awarded will be dependent upon HRSA appropriation of funds. The actual amount available will not be determined until enactment of the final FY 2016 Federal budget. This program announcement is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds can be awarded in a timely manner. The project period is three (3) years. Funding beyond the first year is dependent on the availability of appropriated funds for SHIP in

subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the federal government.

Effective December 26, 2014, all administrative and audit requirements and the cost principles that govern federal monies associated with this award will be subject to the Uniform Guidance 2 CFR 200 as codified by HHS at 45 CFR 75, which supersede the previous administrative and audit requirements and cost principles that govern federal monies.

Up to 15% of the SHIP grant can be allocated for Indirect Costs.

III. Eligibility Information

1. Eligible Applicants

The State Office of Rural Health (SORH) in each state will be the official grantee of record, as they will act as a fiscal intermediary for all hospitals within their state. This is a competing continuation announcement. Eligible applicants include current SORHs receiving SHIP, as well as SORHs not previously funded who meet eligibility requirements

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

Applications that exceed the ceiling amount will be considered non-responsive and will not be considered for funding under this announcement.

Any application that fails to satisfy the deadline requirements referenced in *Section IV.3* will be considered non-responsive and will not be considered for funding under this announcement.

The SORH will be the official grantee of record and they will act as a fiscal intermediary for all hospitals within their state. SHIP funds are geared towards assisting eligible small rural hospitals which are essential access points for Medicare and Medicaid beneficiaries. Eligible small rural hospitals are non-federal, short-term general acute care facilities that are located in a rural area of the US and the territories, including faith-based hospitals. For the purpose of this program:

1) "eligible small rural hospital" is defined as a non-Federal, short-term general acute care hospital that: (i) is located in a rural area as defined in 42 U.S.C. 1395ww(d) and (ii) has 49 available beds or less, as reported on the hospital's most recently filed Medicare Cost Report;,
2) "rural area" is defined as either: (1)located outside of a Metropolitan Statistical Area (MSA); (2) located within a rural census tract of a MSA, as determined under the Goldsmith Modification or the Rural Urban Commuting Areas (RUCAs) or (3) is being treated as if being located in a rural area pursuant to 42 U.S.C. 1395(d)(8)(E); and,
3) Eligible SHIP hospitals may be for-profit or not-for-profit, including faith-based. Hospitals in U.S. territories as well as tribally operated hospitals under Titles I

and V of P.L. 93-638 are eligible to the extent that such hospitals meet the above criteria.

In regards to hospitals determining their eligibility and to request a hospital application, hospitals should contact their SORH. More about the SHIP, eligibility, and a list of SORH contacts can be found at http://www.hrsa.gov/ruralhealth/about/hospitalstate/stateoffices.html. To facilitate the awards process, eligible hospitals must submit a hospital application to their SORH by the SORH designated deadline.

Any eligible small rural hospital in the U.S. Territories may contact the FORHP SHIP Program Coordinator for more information. Eligible hospitals within the Territories that do not have access to a SORH, must apply for the SHIP grant program individually.

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 the applicant's **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* applicants for this FOA to apply electronically through Grants.gov. Applicants must download the SF-424 application package associated with this FOA following the directions provided at Grants.gov.

2. Content and Form of Application Submission

Section 4 of HRSA's *SF-424 Application Guide* provides instructions for the budget, budget justification, 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. All applicants are responsible for reading and complying with the instructions included in HRSA's *SF-424 Application Guide* except where instructed in the FOA to do otherwise.

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 **80 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 FOA. Standard OMB-approved forms that are included in the application package are NOT included in the page limit. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) will not be

counted in the page limit. **We strongly urge applicants to take appropriate measures to ensure the 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 the announcement.

Program-Specific Instructions
In addition to application requirements and instructions in Section 4 of HRSA's *SF-424 Application Guide* (including the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract), please 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 and well organized so that reviewers can understand the proposed project.

   Use the following section headers for the Narrative:

   ▪ *INTRODUCTION -- Corresponds to Section V's Review Criterion(1)*
    This section should briefly describe the purpose of the proposed project. It should summarize your project's goals and expected outcomes by investment category.

   ▪ *NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion(1)*
    ASSESSMENT OF STATEWIDE USE OF SHIP FUNDS
    Provide an overview of the needs of small rural hospitals in your state relating to the purpose of the SHIP grant and explain how SHIP activities complement other statewide work with small hospitals in the state. State Offices of Rural Health must certify that the activities they undertake using SHIP resources do not duplicate activities funded with Medicare Rural Hospital Flexibility grant (Flex).

    HOSPITAL APPLICANT INFORMATION
    This section will provide a general overview of the hospital applicants in the state to be funded and activities in which they will engage. The information should be provided in the form of a spreadsheet. Applicants should list all new hospital applicants, returning applicants, and those hospitals not returning from FY 15. Within these categories, alphabetize the hospitals and provide the full physical address, county, and names of both CEOs and Hospital Coordinator of SHIP Project(s).

    Within the same spreadsheet, provide the information below for each new and returning hospital:

    a) Critical Access Hospital (CAH) designation (yes or no);
    b) Bed count (staffed or licensed);
    c) Amount requested in dollars and the amount requested by percent of award that each hospital will spend on: 1) value-based purchasing; 2) accountable care organizations or

shared savings; and/or 3) payment bundling/PPS. Also, list the purchase(s) of each hospital under their respective category. Hospitals may select more than one category to fund, provided they follow investment priorities described in the Methodology section below. Recommended purchases per category may include:

Value-Based Purchasing
- Training and/or software related specifically to the implementation and reporting of: quality improvement measures;
- Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) training and/or software;
- Efficiency training (Six Sigma, Lean, or other approved form of training) areas such as: ER efficiency, patient satisfaction, or efficiencies to clinical care delivery areas.

Accountable Care Organizations/Shared Savings
- Computerized provider entry systems; Consultant pharmacy services; Hardware/software related to the purchase of a disease registry;
- Efficiency training (Six Sigma, Lean, or other approved form of training) in areas such as: non-clinical operations, board organization/operation, or multi-hospital/network formation projects.
- Coordination of care training

Payment Bundling/PPS
- ICD-10 Software and/or training; Purchase of the quality health reporting software/training QI training (Six Sigma, Lean, or other approved form of training) in areas such as: finance, operations, or multi-hospital/network formation projects

d) A process measure correlating to above purchase. Sample selection measures may include:

Value-Based Purchasing
- Training related to quality data collection;
- Implementation and completion of HCAHPS training;
- Completion of efficiency training and project implementation with selection of a measure and target.

Accountable Care Organizations/Shared Savings
- Implementation and/or training regarding use of a computerized provider entry system;
- Implementation of a pharmacy consultant with selection of a process measure to improve upon;
- Implementation and/or training regarding use of a disease registry;
- Completion of efficiency training, with the selection of a measure to improve upon based upon an activity as a result of this training.
- Decreased patient readmission

Payment Bundling/PPS

- Installation and use of ICD-10;
- Implementation of an efficiency training project with activity and measure selection, as a result of this training.

e) Indicate if a hospital is participating in an existing network, or will form a new network for a specific activity;

f) Indicate if the hospital is requesting:
   a. Direct funding;
   b. Full or partial network funding; or
   c. Funding to be released to the SORH.

g) Provide the totals for the following:
   a. Number of eligible hospitals;
   b. Number of returning hospitals;
   c. Number of new hospitals;
   d. Number of hospitals not-returning, and reason;
   e. Amount of funds for the state in dollars and percent expended in each category: 1) Value-Based Purchasing; 2) Accountable Care Organizations/Shared Savings; and 3) Payment Bundling/PPS

h) Each hospital must provide the ink or electronic signature of both the CEO and Hospital Coordinator of SHIP Project(s) regarding the use of that specific hospital's funds to the SORH. Applications may be scanned and can be electronic or contain an original ink signature.

- *METHODOLOGY -- Corresponds to Section V's Review Criterion(2)*
  In narrative format, describe the proposed methods by which the state SHIP director will collect, compile, and report information, as well as disperse funds, lead or plan any activities, and if applicable, work with any consultants or technical assistance providers. Activities, programs, and initiatives (i.e., formation of networks, trainings/group purchasing) for the proposed project period should be specific, realistic, measurable, and achievable within a specified timeframe.

  SORHs are strongly encouraged to assist hospitals form networks on an intra and/or inter-state basis to purchase equipment and training.

  SHIP funds should be prioritized by Critical Access Hospitals in the following manner:

  1) HCAHPS or ICD-10 activities (one or the other or both, in no particular order), if a hospital has yet to implement either activity, and
  2) If a hospital has implemented both HCAHPS and ICD-10, then that hospital may select a different activity listed on the SHIP Purchasing Menu, contained within the hospital application.

  If a hospital is currently using all equipment and/or services listed on the SHIP Purchasing Menu, the hospital may select an alternative piece of equipment and/or service provided:

1) The purchase will optimally affect a hospital's transformation into an accountable care organization, increase value based purchasing objectives, aid in the adoption of ICD-10, support care transitions/coordination; and
2) The hospital receives permission from both their state SHIP director and the SHIP Director's FORHP project officer.

<u>Non-CAHs</u> will select ICD-10 as a priority and then among the activities listed on the SHIP Purchasing Menu. If a non-CAH has completed all Purchasing Menu activities, it may engage in a different purchase, provided:

1) The purchase will optimally affect a hospital's transformation into an accountable care organization, increase value based purchasing objectives, aid in the adoption of ICD-10; and,
2) The hospital receives permission from their state SHIP director.

Hospitals must have their CEO and individual who will be responsible for the SHIP-funded purchase and/or project sign the SHIP application in ink (copies may be scanned or faxed) or electronically and provide that to the SORH. These signatures will attest to the accuracy of each hospital's prioritized purchase(s) – certifying each hospital's engagement in HCAHPS, ICD-10, or other activity. Critical Access Hospitals not participating in HCAHPS or ICD-10 may still receive SHIP funds, provided those CAHs spend SHIP funds on HCAHPS or ICD-10 related activities.

- *WORK PLAN -- Corresponds to Section V's Review Criterion(2)*
  The Work Plan covers all three years of the project period. Describe required activities and any other activities, actions or steps that will be used to achieve overall goals and objectives. As appropriate, identify collaborations with key partners, stakeholders, and networks in planning, designing, and implementing all activities.

  The Work Plan should contain these key points:

  a) A summary at the state level of the proposed activities of the hospital applicants, and how the grant funds will be used regarding each of the three funding categories. The activities proposed should directly correlate with the identified needs of the SHIP including one or more of the following: 1) Value-Based Purchasing, 2) Accountable Care Organizations/Shared Savings, and 3) Payment Bundling/PPS.

  b) List the goal(s) and objective(s) for each budget period and the associated evaluative method(s) and measures that will indicate success.

  c) Administration and Management of Hospital Awards:
     - Describe the application process the SORH will use to make awards to the hospitals and identify the responsible staff for this process;
     - Provide a sample of the entire hospital application to the SORH (that the hospital completes), and include the SORH deadline for the hospital application;
     - State the approximate length of time anticipated, in weeks, for all awards to be provided to hospital applicants; Describe the process the SORH will use to solicit reporting information from the hospitals, prior to, during, and at the end

of each year of the grant such as outreach and engagement of hospital administrators, staff and community representatives, program partners, and other stakeholders in order to identify and implement program refinements and improvements

- *RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criterion(2)*
  Discuss challenges that are likely to be encountered in designing and implementing the activities described in the SHIP work plan, and approaches that will be used to resolve such challenges. Include any anticipated problems with implementation of hospital activities (i.e., selection of measures) and/or network development.

- *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criterion(3)*
  Applicants must describe the strategies and measures that will be used to evaluate performance during the project period. The applicant should describe how progress toward meeting grant-funded activities and goals will be tracked, measured, and evaluated. Since outcomes will not be known, please explain any assumptions made in developing the project work plan and discuss the anticipated performance measures and desired outcomes of grant-funded activities.

  Describe the data collection strategy to collect, analyze and track data to measure performance, and determine impact or outcomes. Explain how the data will be used to improve performance. Sample process measures per ACA category might include:

  Value-Based Purchasing
  Training related to quality data collection; Implementation and completion of HCAHPS training; Completion of efficiency training and project implementation with selection of a measure and target.

  Accountable Care Organizations/Shared Savings
  Implementation and/or training regarding use of a computerized provider entry system; Implementation of a pharmacy consultant with selection of a process measure to improve upon; Implementation and/or training regarding use of a disease registry; Completion of efficiency training, with the selection of a measure to improve upon based upon an activity as a result of this training.

  Payment Bundling/PPS
  Installation and use of ICD-10 or implementation of an efficiency training project, with activity and measure selection, as a result of this training.

  The process/evaluative measures may also include a statewide aggregate of measures listed on the SHIP Hospital Application/SHIP Purchasing Menu, as well as measures based upon efficiency and effectiveness concerning the administration of the SHIP grant (i.e., timeliness of fund dispersion, percentage of funds spent, number and types of networks formed, etc.). If applicable, applicant should describe best practices of the SHIP process (replicable, measurable, demonstrated impact). Statewide evaluative measures should assess whether the program objectives were met.

- *ORGANIZATIONAL INFORMATION -- Corresponds to Section V's Review Criterion(5)* Provide information on the applicant organization's current mission and structure, scope of current activities, and provide an organizational chart that identifies the SORH within larger organization as well as sub-components of SORH (as applicable). Describe how the unique needs of rural communities are routinely assessed and monitored regarding possible SHIP purchases (equipment and training). Describe relationships, if applicable, regarding how the SHIP may complement the Flex program.

NARRATIVE GUIDANCE

In order to ensure that the Review Criteria are fully addressed, 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
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (5) Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested – the budget section should include sufficient justification to allow reviewers to determine the reasonableness of the support requested.

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iii. Budget
See Section 4.1.iv of HRSA's *SF-424 Application Guide.* Please note: the directions offered in the SF-424 Application Guide differ from those offered by Grants.gov. Please follow the instructions included the Application Guide.

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 Consolidated and Further Continuing Appropriations Act, 2015, Division G, § 203, (P.L. 113-235) 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." Please 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 will apply in FY 2016, as required by law.

iv. Budget Justification Narrative
See Section 4.1.v. of HRSA's *SF-424 Application Guide*. In addition, the SHIP program requires the following:

Provide a narrative that explains the amounts requested for each line in the budget. The budget justification should specifically describe how each item will support the achievement of proposed objectives, activities, programs, and initiatives. The budget period is for ONE year. However, the applicant **must** submit one-year budgets for each of the subsequent budget periods within the requested project period at the time of application. Line item information must be provided to explain the costs entered in the SF-424A. For subsequent budget years, the justification narrative should highlight any changes from year one or clearly state that substantive budget changes are not expected during the project period. The budget justification MUST be concise. Do NOT use the budget justification to expand the project narrative. The budget justification must clearly differentiate between costs that will use federal funds and costs that will use matching non-federal funds.

Please note the following for your Budget Justification narrative:
- Personnel costs are only for the oversight of the award and do not include hospital personnel costs.

- Travel funds are not allowable.

* Indirect Costs: For the purposes of this program, SORHs may request the lesser of 15% or their indirect cost rate. The indirect cost rate agreement must be included (Attachment #1) but will not count toward the page limit.

v. Attachments
Please 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. **Each attachment must be clearly labeled**.

Attachment 1: Indirect Cost Rate Allocation Agreement or Plan.
If indirect costs are requested, attach current HHS Cost Rate Allocation Agreement or plan. However, if plan is lengthy, summarize provisions pertaining to SHIP grant and provide a formula for determining 15% indirect charge (i.e. percent of salary and benefits). Not counted in the page limit.

Attachment 2: Staffing Plan

Applicants must include a staffing plan and provide a justification for the plan that includes education and experience qualifications and rationale for the amount of time (percent of FTE) being requested for *each* staff position.

Attachment 3: Job Descriptions for Key Personnel
Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff.

Attachment 4: Biographical Sketches of Key Personnel
Include biographical sketches for persons occupying the key positions described in Attachment 3, not to exceed two pages in length. In the event that a biographical sketch is included for an identified individual who is not yet hired, please include a letter of commitment from that person with the biographical sketch.

Attachment 5: Work Plan
Provides a detailed summary at the state level regarding proposed applicant activities, how funds will be utilized during each budget period, activities and a timeline that describes funds disbursement processes and the use of SHIP Hospital Networks.

Attachment 6: Organizational Chart
Provide a one-page figure that depicts the organizational structure of the SHIP program within the SORH.

Attachment 7: Accomplishment Summary*
One to three paragraphs describing previous year activities. A well planned accomplishment summary can provide a record of accomplishments. The accomplishments of competing continuation applicants are carefully considered during the review process; therefore, applicants are advised to include previously stated activities, programs and initiatives in their application and emphasize the progress made in attaining these goals and objectives. Because the Accomplishment Summary is considered when applications are reviewed and scored, competing continuation applicants who do not include an Accomplishment Summary may not receive as high a score as applicants who do. The Accomplishment Summary will be evaluated as part of *Review Criterion #5*: *Resources/Capabilities*.

The accomplishment summary should be a brief presentation of the accomplishments, in relation to the objectives of the program during the *current FY 15* budget period. The report should include:

(1) The period covered.
(2) Specific Objectives – Briefly summarize the specific goal /objectives of the project.
(3) Results – Describe the program activities and any results for each objective.
(4) Current or anticipated challenges in meeting the activities, programs, initiatives, goals and objectives for the remaining current FY 15 budget period and discuss how they will be addressed / resolved.
(5) The reason and amount (if any) of FY 14 unobligated balance (UOB) carried forward into the FY 15 budget period and plan to expend UOB before end of the budget period.

* Because of the shortened FY 15 budget period, the Accomplishment Summary may be presented as a brief narrative and table of activities, challenges, and timelines.

Attachment 8: Hospital Applicant Form
A sample application is available through the Technical Assistance and Services Center (TASC) website, https://www.ruralcenter.org/ship

Attachment 9: State Spreadsheet of SHIP Applicants
All statewide participating hospital information must be included in this attachment.

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

3. Dun and Bradstreet Universal Numbering System Number and System for Award Management

Applicant organizations must obtain a valid DUNS number and provide that number in their application. Each applicant 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 it has 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 an applicant/recipient organization has 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://fedgov.dnb.com/webform/pages/CCRSearch.jsp)
- 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*.

Applicants that fail to allow ample time to complete registration with SAM or Grants.gov 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 FOA is *December 15, 2015 at 11:59 P.M. Eastern Time*.

See Section 8.2.5 – Summary of e-mails from Grants.gov of HRSA's *SF-424 Application Guide* for additional information.

5. Intergovernmental Review

SHIP is a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR 100. See Executive Order 12372 in the HHS Grants Policy Statement.

See Section 4.1 ii of HRSA's *SF-424 Application Guide* for additional information.

6. Funding Restrictions

Applicants responding to this announcement may request funding for a project period of up to three (3) years. Applicants should budget approximately $9,000 per hospital, though the final amount awarded will be dependent upon HRSA appropriation of funds. 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.

Federal funds provided through this grant program may <u>not</u> be used for the following purposes:
   (1) To provide health care services (including providing cash payments regarding such care);
   (2) To purchase ambulances and any other vehicles or major communications equipment;
   (3) To purchase or improve real property; or
   (4) To conduct any activity regarding a certificate of need.

The SHIP program is subject to the General Provisions of P. L. 113-235. The General Provisions in Division G of the Consolidated and Further Continuing Appropriations Act, 2015 (P.L. 113-235) 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 FY 2016, as required by law.

V. Application Review Information

1. Review Criteria

Procedures for assessing the technical merit of applications have been instituted to provide for an objective review of applications and to assist the applicant in understanding the standards against which each application will be judged. Critical indicators have been developed for each review criterion to assist the applicant in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation. Review criteria are outlined below with specific detail and scoring points.

These criteria are the basis upon which the reviewers will evaluate the application. The entire proposal will be considered during objective review.

Review Criteria are used to review and rank applications. SHIP has 6 review criteria:

Criterion 1: **Need (15 points)**
Items in this criterion address the Introduction (3 points) and Needs Assessment (12 points) sections of the Program Narrative.

The extent to which the *Introduction (3 points)* describes clearly:
- The purpose for the proposed project, for each individual year of the grant; and
- The specific small rural hospital health and healthcare goals and expected outcomes expected by investment category.

The extent to which the *Needs Assessment (12 points)* describes clearly:
- The statewide assessment of needs of small rural hospitals and activities;
- The assessment techniques (quantitative and/or qualitative) used to determine the needs of small rural hospitals to be addressed with the grant funds;
- The inclusion of complete data pertaining to all hospital applicants, as detailed under *Hospital Applicant Information*;
- Details addressing the existence, use of, or lack of networks (items c, e, and f) ; and
- The small rural hospital landscape, percentage/number using HCAHPS, and ICD-10,.

Criterion 2: **Response (35 points)**
Items under this criterion address the Methodology (15 points), Work Plan (15 points) and Resolution of Challenges (5 points) sections of the Program Narrative.

The extent to which the *Methodology (15 points)* clearly describes:
- The methods by which the SHIP Director will collect, compile, and report information as well as disperse funds, lead or plan any activities, and work with any consultants or technical assistance providers;
- How expenditures will be prioritized by Critical Access Hospitals;
- How equipment or services will be provided;
- How the SORH will ensure receipt and accuracy of purchases and the SHIP application from participating hospitals.

The extent to which the *Work Plan (15 points)* clearly describes:

- Each activity, goal, objective (required and other), or steps to be taken during each budget period of the three (3) year project period;
- Dates of initiation and completion (or anticipated) for each project item;
- Number and type of staff (or responsible entity);
- All evaluative measures (anticipated and/or actual); and
- All outcome / impact (anticipated and/or actual)
- Format and use of networks/consortia, if relevant.
- Proposes activities appropriate, in alignment and well organized
- Provides adequate detail in identifying and describing CAH/State needs for Quality Improvement, Financial and Operational Improvement, and Population Health

- Proposes activities that are within the scope of SHIP

The extent to which the *Resolution of Challenges (5 points)* clearly describes:

- The challenges that are likely to be encountered in designing and implementing the activities described in the Work Plan as well as the specific approaches that will be used to resolve challenges that may be encountered.

Criterion 3: Evaluative Measures (10 points)
Items under this criterion address the Evaluation and Technical Support Capacity section of the program narrative.

The extent to which the *Evaluation Measures* clearly describe:

- The strength and effectiveness of the strategies and measures proposed to evaluate the SHIP work plan and results, and provides specific evidence that the evaluative measures will be able to asses to what extent the program objectives have been met.
- The data collection strategies that will be implemented by the SORH to assess whether program objectives were met, improve performance, and identify future SHIP hospital needs.
- Feasible and effective method(s) to monitor and evaluate the project results
- Evaluative measures that will be able to assess 1) to what extent the program objectives have been met and 2) to what extent these can be attributed to the project
- A self-assessment strategy through the course of the project to ensure project alignment with proposed goals.
- Sub-contract assessment process(es), as applicable.

Criterion 4: Impact (10 points)
Items under this criterion address the Work Plan section of the Program Narrative

The extent to which the activities proposed in the *Work Plan:*

- Are clear, specific, and contribute to the accomplishment of each activity, program and initiative;
- Outline goals and objectives that are reasonable, achievable, and measurable, given the level and experience of SORH staff, resources available and length of the project period to carry out the proposed activities.
- Proposes activities that stand out as best practices for SHIP (replicable, measurable, demonstrated impacted) including network/consortia, as applicable.

- Describes engagement of hospital administrators, staff and community representatives, program partners, and other stakeholders in order to identify and implement program refinements and improvements.

Criterion 5: Resources / Capabilities (20 points)
Items under this criterion address the Organizational Information and Organizational Chart (Attachment 6) (5 points), the Staffing Plan and Job Descriptions for Key Personnel (Attachments 2 and 3) (5 points), and the Accomplishment Summary (Attachment 7) (10 points).

The extent to which the *Organizational Information and Organizational Chart (5 points)* section:

- Provides sufficient information on the applicant organization's current mission and structure;
- Clearly describes the ability of the organization to meet the unique needs of rural communities; and
- Includes a sufficiently detailed organizational chart *(Attachment #6)* that includes a SORH Director (or similar title), and SHIP Director.
- Demonstrates applicant's capability to manage their State SHIP Program and related projects including effective management of subcontractors and other projects. as applicable

The extent to which the application's *Staffing Plan* and *Job Descriptions for Key Personnel (5 points, Attachments #2 and #3):*

- Identifies at least one SHIP Coordinator responsible for the program and that person(s) has appropriate skills and qualifications as evidenced by the biographical sketch/resume.

The extent to which competing continuation applicants include an *Accomplishment Summary (10 points, Attachment #7)* that describes clearly:

- The specific goals and objectives of the current FY 15 budget period;
- The specific program activities conducted for each objective;
- Actual or anticipated challenges in the current budget period and how they are being addressed/resolved; and,
- The reason and amount (if any) of FY 14 unobligated balance (UOB) carried forward into *curren*t FY 15 budget period and plan to expend UOB before end of current budget period.

Criterion 6: Support Requested (10 points)

The extent to which the *Budget Justification Narrative*:

- Explains the amount requested in each SF-424A object line category and describes how each item will support the achievement of proposed goals;
- Describes utilization of funds for each individual year of the three year grant, and appears reasonable and in alignment with the activities proposed in the Work Plan; and provides a detailed explanation as to the purpose of each contractual, how the costs were determined or estimated, and the specific contract deliverables.

2. Review and Selection Process

Please see Section 5.3 of HRSA's *SF-424 Application Guide*.
This program does not have any funding priorities, preferences or special considerations.

3. Anticipated Announcement and Award Dates

It is anticipated that awards will be announced prior to the start date of June 1, 2016.

VI. Award Administration Information

1. Award Notices

The Notice of Award will be sent prior to the start date of June 1, 2016. See Section 5.4 of HRSA's *SF-424 Application Guide* for additional information.

2. Administrative and National Policy Requirements

See Section 2 of HRSA's *SF-424 Application Guide* which lists administrative and policy requirements applicable to this grant. Applicants are responsible for familiarizing themselves with the contents of the HRSA *SF-424 Application Guide* and following the listed requirements.

3. Reporting

The successful applicant under this FOA must comply with Section 6 of HRSA's *SF-424 Application Guide* **and** the following reporting and review activity:

1) **Progress Report**(s). The recipient must submit a progress report to HRSA on an **annual** basis. Further information will be provided in the award notice.

VII. Agency Contacts

Applicants may obtain additional information regarding business, administrative, or fiscal issues related to this FOA by contacting:

Kimberly Dews
Grants Management Specialist
HRSA Division of Grants Management Operations, OFAM
Parklawn Building,
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 443-0655
Fax: (301) 594-6096
E-mail: kdews@hrsa.gov

Additional information related to the overall program issues and/or technical assistance regarding this funding announcement may be obtained by contacting:

Bridget Ware
SHIP Coordinator, Hospital State Division
Attn: SHIP
Federal Office of Rural Health Policy, HRSA
Parklawn Building, Room 17W-53B
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 443-3822
Fax: (301) 443-2803
E-mail: bware@hrsa.gov

Applicants may need assistance when working online to submit their application forms electronically. Applicants should 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, seven days a week, excluding federal holidays at:

Grants.gov Contact Center
Telephone: 1-800-518-4726   (International Callers, please dial 606-545-5035)
E-mail: support@grants.gov
iPortal: 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, 8:00 a.m. to 8:00 p.m. ET:

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

VIII. Other Information

Applicants are encouraged to utilize the TASC website: https://www.ruralcenter.org/tasc for more information

Technical Assistance:

A TA webinar is scheduled for Tuesday, October 22, 2015 at 2 PM ET. Call is expected to last no more than one hour. Meeting call-in # 301-945-0789.

IX. Tips for Writing a Strong Application

Applicants are encouraged to review the TASC grant writing manual at:
https://www.ruralcenter.org/tasc/resources/federal-grant-writing-manual

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