

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



Federal Office of Rural Health Policy
Policy and Research Division

***Rapid Response Rural Data Analysis and
Issue Specific Rural Research Studies***

Funding Opportunity Number: HRSA-18-035
Funding Opportunity Types: New, Competing Continuation
Catalog of Federal Domestic Assistance (CFDA) Number: 93.155

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2018

Application Due Date: February 20, 2018

*Ensure your 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 1 month to complete.*

Issuance Date: November 14, 2018

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

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA), Federal Office of Rural Health Policy (FORHP) is accepting applications for fiscal year (FY) 2018 Rapid Response Rural Data Analysis and Issue Specific Rural Research Studies. The purpose of this program is to assist rural communities with conducting rapid data analyses and short term issue-specific rural research studies to understand the impact of current and proposed policies and regulations as well as provide information that will improve access to health care and population health in rural America. Due to the nature of rural policy analysis and formulation, rural organizations and health care providers often require timely information that is available only through specialized analysis of databases of information compiled by the Centers for Medicare and Medicaid Services (CMS), other federal and state agencies, or private organizations. Most rural groups and individuals do not have the capacity to store the data sets, the staff expertise to refine and analyze the data nor the technology necessary to run statistical analyses. Findings from these analyses will be used to help inform rural health care providers and stakeholders such as the U.S. Department of Health and Human Services (HHS), Congress, states, and for-profit and non-profit entities that set policies impacting rural communities.

Funding Opportunity Title:	Rapid Response Rural Data Analysis and Issue Specific Rural Research Studies
Funding Opportunity Number:	HRSA-18-035
Due Date for Applications:	February 20, 2018
Anticipated Total Annual Available FY18 Funding:	\$250,000
Estimated Number and Type of Award:	1 cooperative agreement
Estimated Award Amount:	Up to \$250,000 per year
Cost Sharing/Match Required:	No
Project Period/Period of Performance:	July 1, 2018 through June 30, 2021 (3 years)
Eligible Applicants:	<p>All domestic public and private entities, non-profit and for-profit, are eligible to apply. Eligible entities may include, but are not limited to, public and private institutions of higher education, public and private health research organizations, foundations, tribes and tribal organizations, and faith based entities.</p> <p>See Section III-1 of this notice of funding opportunity (NOFO), formerly known as the funding opportunity announcement (FOA), for complete eligibility information.</p>

Application Guide

You (the applicant organization/agency) are responsible for reading and complying with the instructions included in HRSA's *SF-424 R&R Application Guide*, available online at <http://www.hrsa.gov/grants/apply/applicationguide/sf424rrguidev2.pdf>, except where instructed in this NOFO to do otherwise. A short video explaining the *Application Guide* is available at <http://www.hrsa.gov/grants/apply/applicationguide/>.

Technical Assistance

The following technical assistance webinar has been scheduled:

Webinar

Day and Date: Tuesday, November 28, 2017

Time: 1 – 2 p.m. ET

Call-In Number: 1-866-919-6678

Participant Code: 28103016

Weblink:

https://hrsa.connectsolutions.com/rapid_response_rural_data_analysis_studies/

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I. Program Funding Opportunity Description

1. Purpose

This notice solicits applications for the Rapid Response Rural Data Analysis and Issue Specific Rural Research Studies program. The purposes of this program are to assist rural communities with (1) conducting rapid data analyses, and (2) short term issue-specific rural research studies to help communities and policymakers understand the impact of current and proposed policies and regulations as well as provide information that will improve access to health care and population health in rural America.

Due to the nature of rural policy analysis and formulation, rural organizations and health care providers often require timely information that is available only through specialized analysis of databases of information compiled by the Centers for Medicare and Medicaid Services (CMS), other federal and state agencies, or private organizations. The awardee is responsible for collaborating with HHS agencies to compile and analyze the data that is requested in a timely manner. The awardee will also collaborate with rural stakeholders to determine what data sets are needed. These collaborative efforts are vital as most rural groups and individuals do not have the capacity to store the data sets, the staff expertise to refine and analyze the data nor the technology necessary to run statistical analyses.

The awardee will be required to staff a rapid-response data analysis team capable of responding within 1-2 days to an estimated one-to-two requests per month from rural health stakeholders; the awardee will also be expected to design and complete one-to-two (depending on scope) 9-12 month short term issue-specific rural health studies per year of funding received. Findings from these analyses will be used to help inform rural health care providers and stakeholders such as the U.S. Department of Health and Human Services (HHS), Congress, states, and for-profit and non-profit entities (such as insurance companies and professional associations, respectively) that set policies impacting rural communities.

2. Background

This program is authorized by Section 711(b) of the Social Security Act, (42 U.S.C. 912(b)), as amended. The Health Resources and Services Administration's (HRSA) Federal Office of Rural Health Policy (FORHP) is the focal point for rural health activities within HHS. FORHP is statutorily required to advise the Secretary on the effects of current policies and proposed statutory, regulatory, administrative and budgetary changes in Medicare and Medicaid programs on the financial viability of small rural hospitals, the ability of rural areas to attract and retain physicians and other health professions and access to and the quality of health care in rural areas.

Rapid Response Rural Data Analysis and Issue Specific Rural Research Studies program presents an opportunity to tackle a new set of public health challenges. HHS identified three public health priorities: mental health, substance abuse (particularly the opioid abuse epidemic), and childhood obesity. The Rapid Response Rural Data Analysis and Issue Specific Rural Research Studies program provides data and

analyses to inform rural health care providers and stakeholders such as HHS, Congress, states, and for-profit and non-profit entities that set policies impacting rural communities. In addition, the program provides for specialized analyses of database information provided by the Centers for Medicare and Medicaid Services, other federal and state agencies, or private organizations. This data may include topics related to the priorities of mental illness, opioid abuse, and childhood obesity.

Rapid Response Data Analysis

In order to acquire the information from the data sets needed to identify trends, problems and progress in rural health care financing and access to care in rural areas, rural groups must rely on organizations that have the data storage capacity, personnel and technology resources to provide the information to meet immediate policy needs, often in one to two days – hence the need for the rapid response function of the awardee. Examples of past data analyses that facilitated rural policy development are: identifying the number of Rural Health Clinics (RHCs) and Critical Access Hospitals (CAHs) located in Health Professional Shortage Areas (HPSAs); analyzing the number of CAH patient days that are swing bed admissions vs. acute care admissions; and estimating the amount of Medicare payments made to rural hospitals paid under the Outpatient Prospective Payment System that resulted from hold-harmless payments. Each of these analyses required access to and familiarity with data sets that would have been prohibitively expensive for the vast majority of rural health care providers and organizations to analyze in a timely manner.

Issue Specific Research Studies

At the same time, the ever-changing nature of the rural policy environment sometimes necessitates short-term research and analysis of emerging policy issues. This work is more elaborate than rapid response needs, requiring data construction and analyses that involve more resources than the 1-2 day rapid response work described above. This work is expected to be completed in 9-12 months. Examples of past short term issue-specific rural research studies include “2012-14 Profitability of Urban and Rural Hospitals by Medicare Payment Classification” and “Geographic Variation in the Profitability of Urban and Rural Hospitals”; these and other examples have been disseminated as Policy Briefs under the current award (HRSA cooperative agreement U1GRH07633), at <http://www.ruralhealthresearch.org/>.

II. Award Information

1. Type of Application and Award

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

Funding will be provided in the form of a cooperative agreement. A cooperative agreement, as opposed to a grant, is an award instrument of financial assistance where substantial involvement is anticipated between HRSA and the recipient during performance of the contemplated project.

HRSA Program responsibilities will include:

- 1) Provide collaboration and guidance in planning, operation and evaluation activities, including the identification and selection of policy issues and the analysis of key information sources from which to draw upon for the synthesis analysis;
- 2) Collaborate with rural stakeholders to provide guidance and assistance in identifying key organizations through which to share information on emerging policy issues;
- 3) Collaborate with rural stakeholders in the planning and implementation of any meetings, training activities or workgroups conducted during the period of the cooperative agreement;
- 4) Provide assistance in identifying opportunities for disseminating information about programs that coordinate both health and human services, and;
- 5) Review methods supporting document preparation for appropriate rigor and soundness and provide comments on documents, curricula, program plans, budgets, work to be contracted out (including the work plan), work plan revisions, etc. prior to printing, dissemination or implementation.

The cooperative agreement recipient's responsibilities will include:

- 1) Adherence to HRSA guidelines pertaining to acknowledgement and disclaimer on all products produced by HRSA award funds, per Section 2.2 of the Application Guide (**Acknowledgement of Federal Funding**).
- 2) Provide the public with a vehicle for performing data analysis and interpretation on rural health services. This will include the distribution of research findings as a tool to inform the public including, but not limited to, national, state, and local policymakers, state-based entities, and/or individual rural health care providers. The awardee will determine the feasibility of conducting the data analyses and interpretations, and when appropriate, complete the analyses and share the results with the public. The awardee must also identify potential data analysis and research projects to be conducted under this award.
- 3) Identify up to two rural policy research issues for which there is a need for study in a time frame that cannot be accommodated by the current Rural Health Research Centers and does not duplicate their work. The awardee will be responsible for completing the research projects within the 9-12 month time frame of this award.
- 4) Identify key organizations and collaborative opportunities in which information can be shared on emerging policy issues.

- 5) Disseminate project deliverables that result from any meetings, training activities or collaborative workgroups conducted during the period of the cooperative agreement.
- 6) Identify opportunities for disseminating information about programs that coordinate both health and human services.

2. Summary of Funding

Approximately \$250,000 is expected to be available annually to fund one (1) recipient. You may apply for a ceiling amount of up to \$250,000 total cost (includes both direct and indirect, facilities, data costs, and administrative costs) per year. The actual amount available will not be determined until enactment of the final FY 2018 federal appropriation. This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds awarded in a timely manner. The project period is July 1, 2018 through June 30, 2021 (3 years). Funding beyond the first year is dependent on the availability of appropriated funds for Rapid Response Rural Data Analysis and Issue Specific Rural Research Studies in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government.

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

III. Eligibility Information

1. Eligible Applicants

Eligible applicants include domestic public or private, non-profit and for-profit entities. Faith-based and community-based organizations, tribes, and tribal organizations are eligible to apply. Eligible entities may include, but are not limited to, public and private institutions for higher education, public or private health research organizations, and foundations.

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 notice.

Any application that fails to satisfy the deadline requirements referenced in *Section IV.4* will be considered non-responsive and will not be considered for funding under this notice.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA **requires** you to apply electronically through Grants.gov. You must use the SF-424 Research and Related (R&R) application package associated with this NOFO following the directions provided at <http://www.grants.gov/applicants/apply-for-grants.html>.

Effective December 31, 2017 - You **must** use the [Grants.gov Workspace](#) to complete the workspace forms and submit your application workspace package. After this date, you will no longer be able to use PDF Application Packages.

HRSA recommends that you supply an email address to Grants.gov on the grant opportunity synopsis page when accessing the notice of funding opportunity (NOFO) (also known as “Instructions” on Grants.gov) or application package. This allows Grants.gov to email organizations that supply an email address in the event the NOFO is changed and/or republished on Grants.gov before its closing date. Responding to an earlier version of a modified notice may result in a less competitive or ineligible application. *Please note you are ultimately responsible for reviewing the [Find Grant Opportunities](#) page for all information relevant to desired opportunities.*

2. Content and Form of Application Submission

Section 4 of HRSA’s [SF-424 R&R Application Guide](#) provides instructions for the budget, budget narrative, staffing plan and personnel requirements, assurances, certifications, and abstract. You must submit the information outlined in the *R&R Application Guide* in addition to the program-specific information below. You are responsible for reading and complying with the instructions included in HRSA’s [SF-424 R&R Application Guide](#) except where instructed in the NOFO to do otherwise. Applications must be submitted in the English language and must be in the terms of U.S. dollars (45 CFR § 75.111(a)).

See Section 8.5 of the [SF-424 R&R 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 including biographical sketches (biosketches), and letters of commitment and support required in HRSA’s [SF-424 R&R Application Guide](#) and this NOFO. Standard OMB-approved forms that are included in the application package do not count in the page limitation. Biographical sketches **do** count in the page limitation. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) will not be counted in the page limit. **We strongly urge you to take appropriate measures to ensure your application does not exceed the specified page limit.**

Applications must be complete, within the specified page limit, and validated by Grants.gov under the correct funding opportunity number prior to the deadline to be considered under this notice.

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification

- 1) The prospective recipient certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- 2) Failure to make required disclosures can result in any of the remedies described in 45 CFR § 75.371, including suspension or debarment. (See also 2 CFR parts 180 and 376, and 31 U.S.C. 3321).
- 3) Where the prospective recipient is unable to attest to the statements in this certification, an explanation shall be included in Attachment 8: Other Relevant Documents.

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

Program-Specific Instructions

In addition to application requirements and instructions in Section 4 of HRSA's [SF-424 R&R Application Guide](#) (including the budget, budget narrative, 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 R&R 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.

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

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

This section should briefly describe the purpose of the proposed project.

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

This section should describe issues facing rural communities and health care providers with specific emphasis on the challenges resulting from recent and sometimes rapidly changing health care policies. In addition, please discuss emerging issues in rural health policy that might benefit from data analysis and interpretation and groups that have an interest in those issues. Demographic data should be used and cited whenever possible to support the information provided. This section should help reviewers understand how rural decision makers and policy leaders will be served by the proposed project.

- *METHODOLOGY -- Corresponds to Section V's Review Criterion #2 Response*
Propose methods that will be used to meet each of the previously described program requirements and expectations in this notice of funding opportunity. Activities should emphasize the changing rural environment including:

1) Providing the public with a vehicle for performing data analysis and interpretation on rural health services. This will include the distribution of research findings as a tool to inform the public including, but not limited to, national, state, and local policy makers, state-based entities, and/or individual rural health care providers. The awardee will then determine the feasibility of conducting the data analyses and interpretations using available data sets and, when appropriate, complete the analyses and share the results with the public in a timely fashion. The awardee must also identify potential data analysis and research projects to be conducted under this award.

2) Identify up to two rural policy research issues for which there is a need for study in a timeframe that cannot be accommodated by the current Rural Health Research Centers and does not duplicate their work. The awardee will be responsible for completing the research projects within the 9-12 month timeframe of this award.

3) Propose a strategy to collaborate with and collect data from stakeholder organizations, Centers for Medicare and Medicaid Services, other federal and state agencies, or private organizations to inform rural health policy-making efforts. Highlight any instances in which the data collected may include topics related to the HHS priorities of mental health, opioid abuse, and childhood obesity.

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

Describe the activities or steps that will be used to achieve each of the activities proposed in the methodology section. Also, describe what strategies will be used to create and establish collaborative relationships with HHS agencies and rural stakeholders. Use a time line that includes each activity and identifies responsible staff. The applicant must also provide plans for dissemination of project results and/or the extent to which project results may be national in scope. The applicant must clearly describe how the project activities are replicable beyond the effort of the program. Finally, applicants should include a clear sustainability plan of how program efforts would continue beyond the period of federal funding.

- *RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criterion #2 Response*

Discuss challenges that you are likely to encounter in designing and implementing the activities described in the work plan, and approaches that you will use to resolve such challenges.

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

Describe experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature. Applicants must demonstrate significant experience with quickly responding to requests for rural data analysis. Also, describe any previous or projected collaborative partnerships that have been formed. Due to the rapid nature of policy development and the needs for data in short periods of time, the turnaround time for the data analyses may be as short as one or two days. Past experience should include rural-specific analyses. Many data sets do not explicitly separate data between rural and urban, or use definitions of rural that may not correspond to the definition needed for a particular analysis. Therefore, it is important that applicants have the ability to manipulate or reorganize data sets to accommodate rural-specific analyses. In addition, applicants must demonstrate that they have substantial experience working with large, national data sets such as the following:

Table of National Data Sets
<ul style="list-style-type: none"> • Agency for Healthcare Research and Quality <ul style="list-style-type: none"> o Healthcare Cost and Utilization Project o Nationwide Inpatient Sample
<ul style="list-style-type: none"> • American Dental Association <ul style="list-style-type: none"> o Masterfile of Dentists
<ul style="list-style-type: none"> • American Medical Association <ul style="list-style-type: none"> o Physician Masterfile
<ul style="list-style-type: none"> • American Hospital Association (AHA) <ul style="list-style-type: none"> o AHA Abridged Guide of U.S. Hospitals
<ul style="list-style-type: none"> • American Academy of Nurse Practitioners <ul style="list-style-type: none"> o Professional Data
<ul style="list-style-type: none"> • American Academy of Physician Assistants <ul style="list-style-type: none"> o Census Survey/Membership Opinion Survey
<ul style="list-style-type: none"> • American Dental Association <ul style="list-style-type: none"> o Survey of Dental Practices
<ul style="list-style-type: none"> • American Osteopathic Association <ul style="list-style-type: none"> o Physician Masterfile
<ul style="list-style-type: none"> • Claritas, Inc. <ul style="list-style-type: none"> o Pop-Facts database for Census Tracts, Zip Codes, and Minor Civil Divisions

<ul style="list-style-type: none"> o Healthcare Solution Series for Census Tracts and Zip Codes o Trendline
<ul style="list-style-type: none"> • National Council for Prescription Drug Programs <ul style="list-style-type: none"> o Monthly data on 70,000 pharmacies
<ul style="list-style-type: none"> • Office of Management and Budget <ul style="list-style-type: none"> o Metropolitan and Micropolitan Statistical Area Definitions
<ul style="list-style-type: none"> • Pitney Bowes-MapInfo <ul style="list-style-type: none"> o MapMarkerPlus street geography and address data for the U.S.
<ul style="list-style-type: none"> • U.S. Department of Agriculture, Economic Research Service <ul style="list-style-type: none"> o Rural-Urban Continuum Codes o Urban Influence Codes o County Typology Codes
<ul style="list-style-type: none"> • U.S. Department of Commerce, Bureau of the Census <ul style="list-style-type: none"> o American Community Survey o Consolidated Federal Funds Report o Current Population Survey o 2010 Census Summary Files 1,2,3 and 4 o Congressional District Summary File o Summary Files for Outlying Areas o Topologically Integrated Geographic Encoding and Referencing System o Census of Agriculture o Daytime Population o Economic Census o Census Summary Tape Files o Intercensal Population Estimates
<ul style="list-style-type: none"> • U.S. Department of Commerce, Bureau of Economic Analysis <ul style="list-style-type: none"> o Personal Income
<ul style="list-style-type: none"> • U.S. Department of Health and Human Services, Centers for Disease Control and Prevention <ul style="list-style-type: none"> o AIDS Public Information Data Set o Detailed Natality o Detailed Mortality o National Health Interview Survey
<ul style="list-style-type: none"> • U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services <ul style="list-style-type: none"> o Hospital Cost Reporting Information System o Hospital Cost Reporting Information System – Skilled Nursing Facility (SNF) File

<ul style="list-style-type: none"> o Case Mix Index File o Provider Specific File o Provider of Services Files o Medicare SNF Cost Report and Hospital-Based SNF Cost Report o HMO Market Penetration Report File o Hospital Market Service Area File o Prescription Drug Plan Enrollment Data o Medicare Advantage, Cost, Programs of All-Inclusive Care for the Elderly (PACE), Demo, and Prescription Drug Plan Organizations o County-level Medicare Advantage Enrollment o Outpatient Standard Analytic Files, Research Identifiable Files
<ul style="list-style-type: none"> • U.S. Department of Health and Human Services, Health Resources and Services Administration <ul style="list-style-type: none"> o Health Professional Shortage Area Primary Care Designations o Area Health Resource File o National Health Service Corps Physicians o National Health Service Corp Dentists o Uniform Data System o Bureau of Health Care Delivery and Assistance Network: Federally Qualified Health Center List
<ul style="list-style-type: none"> • U.S. Department of Health and Human Services, Indian Health Service <ul style="list-style-type: none"> o Indian Health Service Facility List
<ul style="list-style-type: none"> • U.S. Department of Labor, Bureau of Labor Statistics <ul style="list-style-type: none"> o Local Area Unemployment Statistics o Occupational Employment Statistics Survey
<ul style="list-style-type: none"> • U.S. Department of Veterans Affairs <ul style="list-style-type: none"> o Facilities Listing Report o Veterans by County

The applicant must also describe prior experience in communicating complex public policy issues to varied audiences in ways that identify the key rural concerns within the broader issue. Provide examples of this experience within the application. The applicant must provide a feasible and effective method to monitor and evaluate the project results. Evaluative measures must 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.

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

Provide relevant information on the applicant organization's current mission and structure, scope of current activities, and an organizational chart, and describe how these all contribute to the ability of the organization to conduct the program requirements and meet program expectations. Describe how the unique needs of target populations of the communities served are routinely assessed and improved.

NARRATIVE GUIDANCE	
To ensure that you fully address the review criteria, this table provides a crosswalk between the narrative language and where each section falls within the review criteria.	
<u>Narrative Section</u>	<u>Review Criteria</u>
Introduction	(1) Need
Needs Assessment	(1) Need
Methodology	(2) Response
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.

iii. **Budget**

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

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

The Consolidated Appropriations Act, 2017, (P.L. 115-31) Division H, § 202, states “None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II.” Please see Section 4.1.iv Budget – Salary Limitation of HRSA’s [SF-424 R&R Application Guide](#) for additional information. Note that these or other salary limitations may apply in FY 2018, as required by law.

iv. Budget Narrative

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

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: Work Plan

Attach the work plan for the project that includes all information detailed in Section IV. ii. Project Narrative. If funds will be sub-awarded or expended on contracts, describe how your organization will ensure the funds are properly documented.

Attachment 2: Staffing Plan and Job Descriptions for Key Personnel (see Section 4.1.vi. of HRSA’s [SF-424 R&R Application Guide](#))

Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff. Also, please include a description of your organization’s time keeping process to ensure that you will comply with the federal standards related to documenting personnel costs.

Attachment 3: Biographical Sketches of Key Personnel

Include biographical sketches for persons occupying the key positions described in Attachment 2, not to exceed two pages in length. 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 4: Letters of Agreement, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts (project-specific)

Provide any documents that describe working relationships between your organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and any deliverable. Letters of agreement must be signed and dated.

Attachment 5: Project Organizational Chart

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

Attachment 6: Tables, Charts, etc.

To give further details about the proposal (e.g., Gantt or PERT charts, flow charts, etc.).

Attachment 7: Progress Report

(FOR COMPETING CONTINUATIONS ONLY)

A well-documented progress report is a required and important source of material for HRSA in preparing annual reports, planning programs, and communicating program-specific accomplishments. The accomplishments of competing continuation applicants are carefully considered; therefore, you are advised to include previously stated goals and objectives in your application and emphasize the progress made in attaining these goals and objectives. HRSA program staff reviews the progress report after the competing continuation applications are reviewed by the objective review committee.

The progress report should be a brief presentation of the accomplishments, in relation to the objectives of the program during the current project period. The report should include:

- (1) The period covered (dates).
- (2) Specific Objectives - Briefly summarize the specific objectives of the project.
- (3) Results - Describe the program activities conducted for each objective. Include both positive and negative results or technical problems that may be important.

Attachments 8-15: 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.).

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

You must obtain a valid DUNS number, also known as the Unique Entity Identifier, for your organization/agency and provide that number in the application. You must also register with the System for Award Management (SAM) and continue to maintain active SAM registration with current information at all times during which you have an active federal award or an application or plan under consideration by an agency (unless the applicant is an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the agency under 2 CFR § 25.110(d)).

HRSA may not make an award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time HRSA is ready to make an award, HRSA may determine that the applicant is not qualified to receive an award and use that determination as the basis for making an award to another applicant.

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

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

- Dun and Bradstreet (<http://www.dnb.com/duns-number.html>)
- System for Award Management (SAM) (<https://www.sam.gov>)
- Grants.gov (<http://www.grants.gov/>)

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

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

4. Submission Dates and Times

Application Due Date

The due date for applications under this NOFO is *February 20, 2018 at 11:59 p.m. Eastern Time*.

See Section 8.2.5 – Summary of emails from Grants.gov of HRSA's [SF-424 R&R Application Guide](#) for additional information.

5. Intergovernmental Review

Rapid Response to Requests for Rural Data Analysis and Issue Specific Rural Research Studies is a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100. See Executive Order 12372 in the [HHS Grants Policy Statement](#).

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

6. Funding Restrictions

You may request funding for a project period of up to 3 years, at no more than \$250,000 per year (inclusive of direct **and** indirect costs). Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

The General Provisions in Division H of the Consolidated Appropriations Act, 2017 (P.L. 115-31) apply to this program. Please see Section 4.1 of HRSA's [SF-424 R&R Application Guide](#) for additional information. Note that these or other restrictions will apply in FY 2018, as required by law.

You are required to have the necessary policies, procedures and financial controls in place to ensure that your organization complies with all legal requirements and restrictions applicable to the receipt of federal funding including statutory restrictions on use of funds for lobbying, executive salaries, gun control, abortion, etc. Like those for all other applicable grants requirements, the effectiveness of these policies, procedures and controls is subject to audit.

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

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 you in understanding the standards against which your application will be judged. Critical indicators have been developed for each review criterion to assist you in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation. Review criteria are outlined below with specific detail and scoring points.

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

Review criteria are used to review and rank applications. The Rapid Response to Requests for Rural Data Analysis and Issue Specific Rural Research Studies has six (6) review criteria:

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

- The detail in which the purpose of the proposed project is described.
- The extent to which the application demonstrates the problem and associated contributing factors to the problem.
- The extent to which the application demonstrates a strong understanding of the issues facing rural communities and health care providers with specific emphasis on the challenges resulting from rapidly changing health care policies.
- The extent to which the application shows familiarity with emerging issues in national rural health policy that might benefit from data analysis and interpretation, and identifies stakeholder groups that have an interest in those issues.

Criterion 2: RESPONSE (25 points) – Corresponds to Section IV’s Methodology, Work Plan, and Resolution of Challenges

- The extent to which the proposed project responds to the “Purpose” included in the program description.
- The strength of the proposed goals and objectives and their relationship to the identified project.
- The extent to which the activities (scientific or other) described in the application are capable of addressing the problem and attaining the project objectives.
- The extent to which the applicant clearly describes approaches for conducting the data analyses and research project(s) in the short time frames required under this award.
- The extent to which the applicant proposes a strategy to collect data from stakeholder organizations, Centers for Medicare and Medicaid Services, other federal and state agencies, or private organizations to inform rural health policy-making efforts, which may include topics related to the HHS priorities of mental health, opioid abuse, and childhood obesity.
- The extent to which the applicant discusses relevant challenges that they may encounter when creating and implementing the activities described as in the work plan. The extent to which the applicant discusses possible solutions that would be implemented to resolve such challenges.
- The extent to which the applicant proposes strategies for working with rural groups to identify potential data analysis and research projects to be conducted under this award.

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

- The strength and effectiveness of the method proposed to monitor and evaluate the project results.
- Evidence that the evaluative measures will be able to assess:
 - to what extent the program objectives have been met, and
 - to what extent these can be attributed to the project.
- The extent to which the applicant demonstrates prior experience in communicating complex public policy issues to varied audiences in ways that identify the key rural concerns within the broader issue.

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

- The feasibility and effectiveness of plans for dissemination of project results.
- The extent to which project results may be national in scope.
- The degree to which the project activities are replicable.
- The sustainability of the program beyond the period of federal funding.
- A clear time line is provided that includes each activity and identifies responsible staff.

Criterion 5: RESOURCES/CAPABILITIES (40 points) – Corresponds to Section IV's Evaluation and Technical Support Capacity and Organizational Information

- The extent to which project personnel are qualified by training and/or experience to implement and carry out the project.
- The capabilities of the applicant organization and the quality and availability of facilities and personnel to fulfill the needs and requirements of the proposed project.
- The extent to which the applicant describes how the unique needs of target populations of the communities served are routinely assessed and improved.
- The extent to which the applicant describes how the organization has the capacity to carry out the work. Clear examples of published materials and previous work of a similar nature should be included.

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

- The reasonableness of the proposed budget for each year of the project period in relation to the objectives, the complexity of the research activities, and the anticipated results.
- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work.
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives.

2. Review and Selection Process

The independent review process provides an objective evaluation to the individuals responsible for making award decisions. The highest ranked applications receive consideration for award within available funding ranges. In addition to the ranking based on merit criteria, HRSA approving officials may also apply other factors in award selection, (e.g., geographical distribution), if specified below in this NOFO. HRSA may also consider assessment of risk and the other pre-award activities described in Section 3 below.

Please see Section 5.3 of HRSA's [*SF-424 R&R Application Guide*](#) for more details.

3. Assessment of Risk and Other Pre-Award Activities

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

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

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

Effective January 1, 2016, HRSA is required to review and consider any information about your organization that is in the [Federal Awardee Performance and Integrity Information System \(FAPIIS\)](#). You may review and comment on any information about your organization that a federal awarding agency previously entered. HRSA will consider any of your comments, in addition to other information in [FAPIIS](#) in making a judgment about your organization's integrity, business ethics, and record of performance under federal awards when completing the review of risk posed as described in [45 CFR § 75.205 HHS Awarding Agency Review of Risk Posed by Applicants](#).

A determination that an applicant is not qualified will be reported by HRSA to FAPIIS ([45 CFR § 75.212](#)).

4. Anticipated Announcement and Award Dates

HRSA anticipates issuing/announcing the award prior to the start date of July 1, 2018.

VI. Award Administration Information

1. Award Notices

HRSA will issue the Notice of Award prior to the start date of July 1, 2018. See Section 5.4 of HRSA's [SF-424 R&R Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

See Section 2.2 of HRSA's [SF-424 R&R Application Guide](#).

Human Subjects Protection:

Federal regulations ([45 CFR part 46](#)) require that applications and proposals involving human subjects must be evaluated with reference to the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained. If research involving human subjects is anticipated, you must meet the requirements of the HHS regulations to protect human subjects from research risks as specified in the Code of Federal Regulations, Title 45 – Public Welfare, Part 46 – Protection of Human Subjects ([45 CFR part 46](#)), available online at <http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html>.

3. Reporting

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

- 1) **Progress Report(s).** The recipient must submit a progress report to HRSA on an **annual** basis. Further information will be provided in the award notice.
- 2) **Quarterly Tracking Reports.** The awardee must submit a tracking report to HRSA on a quarterly basis. Further information will be provided in the award notice.
- 3) **Final Report.** A final report is due within 90 days after the project period ends. The final report collects program-specific goals and progress on strategies; core performance measurement data; impact of the overall project; the degree to which the awardee achieved the mission, goals and strategies outlined in the program; awardee objectives and accomplishments; barriers encountered; and responses to summary questions regarding the awardee's overall experiences over the entire project period.

VII. Agency Contacts

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

Kim Dews
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
5600 Fishers Lane, Mailstop 10SWH03
Rockville, MD 20857
Telephone: (301) 443-0655
E-mail: kdews@hrsa.gov

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

Curt Mueller
Director, Policy and Research Division, Federal Office of Rural Health Policy
Attn: Rapid Response Cooperative Agreement
Federal Office of Rural Health Policy
Health Resources and Services Administration
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 443-2810
Fax: (301) 443-2803
E-mail: cmueller@hrsa.gov

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

Grants.gov Contact Center
Telephone: 1-800-518-4726 (International Callers, please dial 606-545-5035)
Email: support@grants.gov
Self-Service Knowledge Base: <https://grants-portal.psc.gov/Welcome.aspx?pt=Grants>

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

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

VIII. Other Information

Technical Assistance

The following technical assistance webinar has been scheduled:

Webinar

Day and Date: Tuesday, November 28, 2017

Time: 1 – 2 p.m. ET

Call-In Number: 1-866-919-6678

Participant Code: 28103016

Weblink:

https://hrsa.connectsolutions.com/rapid_response_rural_data_analysis_studies/

IX. Tips for Writing a Strong Application

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