

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

Federal Office of Rural Health Policy

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

Announcement Type: Initial: New and Competing Continuation

Announcement Number: HRSA-15-063

Catalog of Federal Domestic Assistance (CFDA) No. 93.155

FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2015

Application Due Date: March 30, 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: January 29, 2015

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2/2/15 – Modification – update to application due date in Executive Summary and Section IV.3 to March 30, 2015.

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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 the fiscal year (FY) 2015 Rapid Response Rural Data Analysis and Issue Specific Rural Research Studies program. 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 nonprofit 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-15-063
Due Date for Applications:	March 30, 2015
Anticipated Total Annual Available Funding:	\$450,000
Estimated Number and Type of Award(s):	Up to 1 cooperative agreement
Estimated Award Amount:	Up to \$450,000 per year
Cost Sharing/Match Required:	No
Project Period:	July 1, 2015 - June 30, 2018 (3 years)
Eligible Applicants:	All domestic public and private entities, nonprofit and for-profit, are eligible to apply. Eligible entities may include, but are not limited to, public and private institutions for higher education, public and private health research organizations, foundations, tribes and tribal organizations, and faith based entities. [See Section III-1 of this funding opportunity announcement (FOA) for complete eligibility information.]

All applicants 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/sf424rrguide.pdf>, except where instructed in this funding opportunity announcement to do otherwise. A short video for applicants explaining the new *Application Guide* is available at <http://www.hrsa.gov/grants/apply/applicationguide/>.

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I. Funding Opportunity Description

1. Purpose

This announcement solicits applications for the Rapid Response Rural Data Analysis and Issue Specific Rural Research Studies program. 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 nonprofit entities 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.

Due to the nature of rural policy analysis and formulation, rural organizations, health care providers, and stakeholders (such as HHS, Congress, states, and for-profit and nonprofit entities) often require timely information that is available only through specialized analysis of databases of information compiled by the CMS, other Federal and State agencies, or private organizations. Most of these databases are available to the public for a fee; however, they are very large and complex. In order to analyze specific components of the data, the data must often be "scrubbed" or otherwise refined by trained data analysts. Analysis of the data requires statistical programs be written specifically for each inquiry or study. 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.

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 short-run policy needs, often in one to two days.

Furthermore, the ever-changing nature of the rural policy environment often necessitates quick research and analysis of emerging policy issues. The requested studies are expected to be similar in scope and subject matter to those funded at FORHP's Rural Health Research Centers (RHRCs). Examples of their current projects can be found at <http://www.ruralhealthresearch.org/>. However, the studies funded under this award are expected to have significantly shorter timeframes for completion (typically 9 to 12 months) and the studies will begin immediately upon the identification of the study subject, not 1-2 years in advance as with the RHRC studies. Because the subject area of the studies funded under this award cannot be determined until the need for the study arises and because of the accelerated time frame for completion, these issue-specific studies require a greater level of effort and staffing.

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 (OPPS) that resulted from the OPPS hold-harmless payments. In each of these cases, the analyses required access to and familiarity with data sets that would have been prohibitive for the vast majority of rural health care providers and organizations to complete in a timely manner. Examples of past issue-specific rural research studies include *Change in Profitability and Financial Distress of Critical Access Hospitals from Loss of Cost-Based Reimbursement*, *Implications for Beneficiary Travel Time if Financially-Vulnerable Critical Access Hospitals Close*, and *Rural/Urban Differences in Inpatient Related Costs and Use among Medicare Beneficiaries*. These studies are publically available at 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.

In addition to the usual monitoring and technical assistance provided under the cooperative agreement, **HRSA Program responsibilities shall include:**

- 1) Provide consultation 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) Provide guidance and assistance in identifying key organizations through which to share information on emerging policy issues;

- 3) Participate, as appropriate, 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, provide comments, recommendations, and approvals for documents, curricula, program plans, budgets, work to be contracted out (including the work plan), key personnel (including consultants and contractors), work plan revisions, etc. prior to printing, dissemination or implementation.

The cooperative agreement recipient's responsibilities shall include:

- 1) 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 using available data sets 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.
- 2) 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.
- 3) Identify key organizations through which to share information on emerging policy issues
- 4) Disseminate project deliverables that result from any meetings, training activities or workgroups conducted during the period of the cooperative agreement.
- 5) Identify opportunities for disseminating information about programs that coordinate both health and human services.

2. Summary of Funding

This program will provide funding during Federal fiscal years 2015 – 2017. Approximately \$450,000 is expected to be available annually to fund one (1) awardee. Applicants may apply for a ceiling amount of up to \$450,000 per year. The project period is three (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 program in subsequent fiscal years, satisfactory awardee performance, and a decision that continued funding is in the best interest of the Federal Government.

III. Eligibility Information

1. Eligible Applicants

All domestic public and private entities, nonprofit and for-profit, 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, foundations, tribes and tribal organizations, and faith-based entities.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Dun and Bradstreet Universal Numbering System Number and System for Award Management (formerly, Central Contractor Registration)

Applicant organizations must obtain a valid DUNS number and provide that number in their application. 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/awardee organization has 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://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 R&R 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. 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.

NOTE: Multiple applications from an organization are not allowable.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA *requires* applicants for this funding opportunity announcement to apply electronically through Grants.gov. Applicants must download the SF-424 Research and Related (R&R) application package associated with this funding opportunity following the directions provided at [Grants.gov](https://www.grants.gov).

2. Content and Form of Application Submission

Section 4 of HRSA's [SF-424 R&R 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 R&R Application Guide](#) except where instructed in the funding opportunity announcement to do otherwise.

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, 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 you to print your application to ensure it 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 R&R 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 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.

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.

- ***NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion #1***
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***
Propose methods that will be used to meet each of the previously-described program requirements and expectations in this funding opportunity announcement. 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.

- ***WORK PLAN -- Corresponds to Section V's Review Criteria #2 and #4***
Describe the activities or steps that will be used to achieve each of the activities proposed in the methodology section. 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.

- *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 Work Plan, and approaches that will be used to resolve such challenges.

- *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criteria #2, #3, and #5*

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. 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 must 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:

- **Agency for Healthcare Research and Quality:**
 - Healthcare Cost and Utilization Project
 - Nationwide Inpatient Sample
- **American Dental Association:**
 - Masterfile of Dentists
- **American Medical Association:**
 - Physician Masterfile
- **American Hospital Association:**
 - AHA Abridged Guide of U.S. Hospitals
- **American Academy of Nurse Practitioners:**
 - Professional Data
- **American Academy of Physician Assistants:**
 - Census Survey/Membership Opinion Survey
- **American Dental Association:**
 - Survey of Dental Practices
- **American Osteopathic Association:**
 - Physician Masterfile
- **Claritas, Inc.:**
 - Pop-Facts database for Census Tracts, Zip Codes, and Minor Civil Divisions
 - Healthcare Solution Series for Census Tracts and Zip Codes
 - Trendline
- **National Council for Prescription Drug Programs:**
 - Monthly data on 70,000 pharmacies
- **Office of Management and Budget:**
 - Metropolitan and Micropolitan Statistical Area Definitions
- **Pitney Bowes-MapInfo:**

- MapMarkerPlus street geography and address data for the U.S.
- **U.S. Department of Agriculture, Economic Research Service:**
 - Rural-Urban Continuum Codes
 - Urban Influence Codes
 - County Typology Codes
- **U.S. Department of Commerce, Bureau of the Census:**
 - American Community Survey
 - Consolidated Federal Funds Report
 - Current Population Survey
 - 2010 Census Summary Files 1,2,3 and 4
 - Congressional District Summary File
 - Summary Files for Outlying Areas
 - Topologically Integrated Geographic Encoding and Referencing (TIGER) System
 - Census of Agriculture
 - Daytime Population
 - Economic Census
 - Census Summary Tape Files
 - Intercensal Population Estimates
- **U.S. Department of Commerce, Bureau of Economic Analysis:**
 - Personal Income
- **U.S. Department of Health and Human Services, Centers for Disease Control and Prevention:**
 - AIDS Public Information Data Set
 - Detailed Natality
 - Detailed Mortality
 - National Health Interview Survey
- **U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services:**
 - Hospital Cost Reporting Information System
 - Hospital Cost Reporting Information System – Skilled Nursing Facility File
 - Case Mix Index File
 - Provider Specific File
 - Provider of Services Files
 - Medicare SNF Cost Report and Hospital-Based SNF Cost Report
 - HMO Market Penetration Report File
 - Hospital Market Service Area File
 - Prescription Drug Plan (PDP) Enrollment Data
 - Medicare Advantage, Cost, PACE, Demo, and Prescription Drug Plan Organizations
 - County-level Medicare Advantage Enrollment
 - Outpatient Standard Analytic Files, Research Identifiable Files
- **U.S. Department of Health and Human Services, Health Resources and Services Administration:**
 - Health Professional Shortage Area (HPSA) Primary Care Designations
 - Area Health Resource File (AHRF)
 - National Health Service Corps Physicians
 - National Health Service Corp Dentists
 - HRSA/BPHC's Uniform Data System (UDS)

- Bureau of Health Care Delivery and Assistance Network (BHCDANET): Federally Qualified Health Center List
- **U.S. Department of Health and Human Services, Indian Health Service (IHS):**
 - Indian Health Service Facility List
- **U.S. Department of Labor, Bureau of Labor Statistics:**
 - Local Area Unemployment Statistics
 - Occupational Employment Statistics (OES) Survey
- **U.S. Department of Veterans Affairs:**
 - Facilities Listing Report
 - 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*

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.

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

iii. Budget

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 award-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.

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

The Consolidated Appropriations Act, 2014, Division H, § 203, (P.L. 113-76) 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 will apply in FY 2015, as required by law.

iv. Budget Justification 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. i. Project Narrative.

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

Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff.

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 and/or Description(s) of Proposed/Existing Contracts (project specific)

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

ACCOMPLISHMENT SUMMARY (FOR COMPETING CONTINUATIONS ONLY)

A well planned accomplishment summary can be of great value by providing a record of accomplishments. It is an 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 during the review process; therefore, applicants are advised to include previously stated goals and objectives 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 4: IMPACT.

The accomplishment summary 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 as actually funded.
- (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. Submission Dates and Times

Application Due Date

The due date for applications under this funding opportunity announcement is *March 30, 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 R&R Application Guide](#) for additional information.

4. 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 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.

5. Funding Restrictions

Applicants responding to this announcement may request funding for a project period of up to three (3) years, at no more than \$450,000 per year. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation of funds for the program, 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, Title V of the Consolidated Appropriations Act, 2014 (P.L. 113-76), 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 2015, as required by law.

All program income generated as a result of awarded grant funds must be used for approved project-related activities.

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. 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 Needs Assessment

The extent to which the applicant:

- 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.
- 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.
- Provides a clear focus on the information needed by national as well as State and local policy makers who are concerned with rural health care services.

Criterion 2: RESPONSE (25 points) – Corresponds to Section IV’s Methodology, Work Plan, and Evaluation and Technical Support

The extent to which the proposed project:

- Appropriately responds to the “Purpose” included in the program description.
- Clearly describes the proposed goals, objectives, and methods necessary to respond rapidly to requests for rural data analysis and conduct issue-specific rural research studies.
- Clearly describes approaches for conducting the data analyses and research project(s) in the short time frames required under this award.
- Proposes strategies for working with rural groups to identify potential data analysis and research projects to be conducted under this award.
- Demonstrates prior experience in communicating complex public policy issues to varied audiences in ways that identify the key rural concerns within the broader issue.
- Understands the broad implications of emerging issues in national rural health policy and demonstrates the ability to make that information available to the public in a variety of mediums.

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

The extent to which the applicant:

- Proposes a feasible and effective method to monitor and evaluate project results.

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

The extent to which the applicant adequately establishes:

- The feasibility and effectiveness of plans for dissemination of project results.
- The extent to which project results may be national in scope or of broad, national policy relevance.
- An understanding of the uses of rural data analyses and research projects as a mechanism to inform national rural health policy.
- Summarizes accomplishments under the existing Rapid Response to Requests for Rural data Analysis and Issue Specific Rural Research Studies Program, if applicable.

Criterion 5: RESOURCES/CAPABILITIES (40 points) – Corresponds to Section IV’s Organizational Information

The extent to which the applicant clearly explains and demonstrates the following:

- Project personnel are qualified by training and/or experience to implement and carry out the proposed 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.
- Substantial (more than five years) of experience working with large, national health care data sets. The experience must include specific examples of past projects that required rural-urban analyses with short turn-around times.
- The capability to immediately carry out the activities under this award and to respond to requests for rural data analysis upon award notification.

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

The extent to which:

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

2. Review and Selection Process

Please see Section 5.3 of HRSA's [SF-424 R&R Application Guide](#). Applicants have the option of providing specific salary rates or amounts for individuals specified in the application budget or the aggregate amount requested for salaries.

3. Anticipated Announcement and Award Dates

It is anticipated that awards will be announced prior to the start date of July 1, 2015.

VI. Award Administration Information

1. Award Notices

The Notice of Award will be sent prior to the start date of July 1, 2015. 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 of HRSA's [SF-424 R&R Application Guide](#).

3. Reporting

The successful applicant under this funding opportunity announcement must comply with Section 6 of HRSA's [SF-424 R&R Application Guide](#) and the following reporting and review activities:

- 1) **Progress Report.** The awardee 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

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

Kim Dews
Grants Management Specialist
HRSA Division of Grants Management Operations, OFAM
Parklawn Building
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 443-0655
E-mail: kdews@hrsa.gov
Attn : Rapid Response Cooperative Agreement

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

Sarah Bryce
Office of Rural Health Policy, HRSA
Parklawn Building
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 443-5982
Fax: (301) 443-2803
E-mail: sbryce@hrsa.gov
Attn : Rapid Response Cooperative Agreement

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/awardees 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 Call 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. Tips for Writing a Strong Application

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