U.S. Department of Health and Human Services

HRSA

Health Resources & Services Administration

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2023

Bureau of Primary Health Care

Health Center Program

Health Center Program School-Based Service Expansion

Funding Opportunity Number: HRSA-23-097

Funding Opportunity Type(s): New

Assistance Listings Number: 93.527

Application Due Date in Grants.gov: March 31, 2023

Supplemental Information Due Date in EHBs: May 1, 2023

Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately!

HRSA will not approve deadline extensions for lack of registration.

Registration in all systems may take up to 1 month to complete.

Issuance Date: March 1, 2023

Marylen Rimando
Public Health Analyst, Bureau of Primary Health Care
Office of Policy and Program Development
Phone: (301) 594-4300
Contact: BPHC Contact Form
SBSE Technical Assistance webpage

See Section VII for a complete list of agency contacts.

Authority: Section 330 of the Public Health Service Act (42 U.S.C. § 254b)

508 COMPLIANCE DISCLAIMER

Note: Persons using assistive technology may not be able to fully access information in this file. For assistance, email or call one of the HRSA staff listed in Section VII. Agency Contacts.

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for the fiscal year (FY) 2023 Health Center Program School-Based Service Expansion (SBSE). The purpose of this funding is to expand access to primary health care services, including mental health services, through Health Center Program award recipients' new and/or existing service delivery sites located at schools. Health centers will accomplish this by establishing new Health Center Program service delivery sites located at schools inclusive of mental health services and/or expanding mental health and other required and additional primary health care services at existing Health Center Program service delivery sites located at schools.

Health centers can use SBSE funding to establish their first school-based service site. Health centers may also propose to expand services by adding a new school-based service site, expanding services at an existing school-based service site, or both.

Funding Opportunity Title:	Health Center Program School-Based Service Expansion (SBSE)
Funding Opportunity Number:	HRSA-23-097
Due Date for Applications – **Grants.gov**:	March 31, 2023 (11:59 p.m. ET)
Due Date for Supplemental Information – **HRSA Electronic Handbooks (EHBs)**	May 1, 2023 (5 p.m. ET)
Anticipated FY 2023 Total Available Funding:	$25 million
Estimated Number and Type of Awards:	Approximately 70 grants
Estimated Annual Award Amount:	Up to $350,000 per award for applicants that propose a new school-based service site; and up to $250,000 per award for applicants that propose to expand services at an existing school-based service site, subject to the availability of appropriated funds
Cost Sharing/Match Required:	No

Period of Performance:	September 1, 2023 through August 31, 2025 (2 years)
Eligible Applicants:	Organizations that are Health Center Program operational (H80) grant award recipients that propose to establish new school-based service site(s) or expand services at existing school-based service site(s) that currently or will offer mental health services. See Section III of this notice of funding opportunity (NOFO) for complete eligibility information.

Application Guide

You (the applicant organization/agency) are responsible for reading and complying with the instructions included this NOFO and in HRSA's *SF-424 Two-Tier Application Guide*. Visit HRSA's How to Prepare Your Application page for more information.

Technical Assistance

Application resources and frequently asked questions are available at the SBSE Technical Assistance webpage. HRSA will hold a pre-application technical assistance (TA) webinar that will provide an overview of the NOFO and an opportunity for applicants to ask questions. Visit the SBSE Technical Assistance webpage for webinar details. HRSA will record the webinar and it will be available on the SBSE Technical Assistance webpage.

The HRSA Primary Health Care Digest is a weekly email newsletter containing information and updates pertaining to the Health Center Program, including competitive funding opportunities. Organizations interested in seeking funding under the Health Center Program are encouraged to subscribe.

Health center strategic partners are available to assist you in preparing a competitive application, including National Training and Technical Assistance Partners (NTTAPs) and Primary Care Associations (PCAs). The School-Based Health Alliance (SBHA) NTTAP provides resources on school-based health services. The Health Information Technology, Evaluation, and Quality Center (HITEQ) NTTAP has information that may support your development of school-based electronic health records. Two NTTAPs provide technical assistance on clinical workforce: the STAR^2 Center and Community Health Center, Inc. (CHC). For a list of HRSA-supported training and technical assistance partners, refer to HRSA's Strategic Partnerships webpage.

The National Health Service Corps (NHSC) has resources for provider recruitment. Use your status as an NHSC site to post vacancies with the Health Workforce Connector, as well as recruit and retain clinicians.

Table of Contents

I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity for current Health Center Program award recipients to apply for funding under the FY 2023 Health Center Program School-Based Service Expansion (SBSE). The purpose of SBSE funding is to expand access to primary health care services, including mental health services, through Health Center Program award recipients' new and/or existing service delivery sites located at or on the grounds of schools.[1] For the purpose of this NOFO, such sites are referred to as school-based service sites.

Health centers can use SBSE funding to establish their first school-based service site. Health centers may also choose to expand mental health and other primary health care services by adding a new school-based service site to their Health Center Program scope of project, expanding services at an existing school-based service site, or both.

For more details, see Program Requirements and Expectations.

2. Background

The Health Center Program is authorized by Section 330 of the Public Health Service Act ([42 U.S.C. § 254b](42 U.S.C. § 254b)). For the purpose of this NOFO, health centers are defined as those receiving Health Center Program operational funding under Sections 330(e), (g), (h) and/or (i), otherwise referred to as H80 funding.

In 2021, approximately 42 percent of Health Center Program award recipients operated more than 3,400 school-based service sites, providing services to more than 767,000 patients.[2] School-based service sites are convenient access points for high-quality, primary health care, mental health services, and preventive care to children and adolescents who live in underserved communities.[3] Expanding mental health services leads to improved health outcomes, such as a reduction in depressive episodes and suicide risk among adolescents.[4] Access to school-based health services can have a positive impact on physical and mental health, as well as academic outcomes.[5]

This investment builds upon more than 150 awards made to Health Center Program award recipients in [FY 2021](FY 2021) and [FY 2022](FY 2022) to expand access to health services at schools. Health centers will use FY 2023 SBSE funds to expand mental health and other required and additional primary health care services at new or existing school-based service sites within their service areas. Award recipients will increase the total

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[1] Preschool (defined as a school readiness program targeted to children ages 3 and up) through secondary school (i.e., high school).
[2] 2022 UDS Data Report https://data.hrsa.gov/tools/data-reporting/program-data/national.
[3] Love (2019). Twenty Years of School-Based Health Care Growth and Expansion. https://www.healthaffairs.org/doi/10.1377/hlthaff.2018.05472.
[4] Arenson (2019). The Evidence for School-Based Health Centers: A Review. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6381423/.
[5] Bersamin (2016). Measuring Success: Evaluation Designs and Approaches to Assessing the Impact of School-Based Health Centers. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4693147/.

number of patients served at school-based service sites as part of the federal government's commitment to improve the health and well-being of children and adolescents through expanded access to school-based health services.[6]

II. Award Information

1. Type of Application and Award

Type(s) of applications sought: New

HRSA will provide funding in the form of a grant.

2. Summary of Funding

HRSA estimates approximately $25 million to be available annually to fund approximately 70 awards. You may apply for a ceiling amount of up to $350,000 per year for applicants that propose new school-based service site(s); and up to $250,000 per year for applicants that propose to expand services at existing school-based service site(s).[7]

The period of performance is September 1, 2023 through August 31, 2025 (2 years). Funding beyond the first year is subject to the availability of appropriated funds for SBSE in subsequent fiscal years, satisfactory progress, and a decision that continued funding is in the best interest of the Federal Government.

If funded, HRSA will award SBSE funding as a new grant award, separate from your Health Center Program operational (H80) award. Under 45 CFR § 75.302, you must document use of SBSE funds separately and distinctly from other Health Center Program funds and other federal award funds.

While SBSE funding will be issued as a new award, all uses of SBSE funds must align with your current approved Health Center Program scope of project. Your scope of project includes the approved service sites, services, providers, service area, and target population, which are supported (wholly or in part) under your total approved health center budget. You must comply with all Health Center Program requirements as described in the Health Center Program Compliance Manual and applicable law and regulations.[8]

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[6] HHS Press Office (March 2022). HHS Secretary Xavier Becerra, Education Secretary Miguel A. Cardona Announce a Joint Effort to Develop and Share Resources to Ensure Children Have Access to School-based Health Services.

[7] If you propose to expand services at one or more existing school-based service sites, the maximum federal funding that you can apply for is $250,000. If you propose to establish one or more new school-based service sites, alone or in addition to expansion of services at one or more existing school-based service sites, the maximum federal funding that you can apply for is $350,000. A new site may be a fixed site at a school or a new mobile unit that will provide health care services at school(s).

[8] Requirements are stated in 42 U.S.C. § 254b (section 330 of the PHSA), as well as in corresponding grants regulations (45 C.F.R. part 75), grants policy (HHS Grants Policy Statement), and program regulations (42 C.F.R. parts 51c and 56).

HRSA will assess your performance based on progress reports and your increase in the total number of patients served at school-based service site(s) aggregated to the health center level that you report in the Uniform Data System (UDS). Performance assessments may result in continued, reduced, or discontinued funding beyond the initial 2 years of funding. If funding is continued, this initial award may be supplemented and/or further funding may be made available under your H80 award.

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 must:

- Be a Health Center Program award recipient[9] with an active H80 grant award.

- Propose to operate a new school-based service site in your health center's current service area or currently operate a school-based service site, as evidenced by:
  - School Commitment Documentation signed by school or school district officials specifying support for each proposed new or existing school-based service site.
  - Form 5B: Service Sites indicates "school" site setting for each proposed new or existing school-based service site.

- Propose new and/or expanded services at one or more school-based service sites. If you do not already provide mental health services at each proposed school-based service site, you must propose to expand mental health services (in-person or virtual visit) at each proposed school-based service site.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

HRSA may not consider an application for funding if it contains any of the non-responsive criteria below:

- Exceeds the funding ceiling amount of $250,000, or $350,000 if proposing new school-based service site(s), as outlined in Section II.2.

- Fails to satisfy the deadline requirements referenced in Section IV.4.

- Fails to include all documents indicated as required for eligibility in Section IV.2.ii and Section IV.2.vi. This includes the Project Narrative and School Commitment

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[9] Organizations funded under Section 330(e), (g), (h), and/or (i) of the Public Health Service Act.

Documentation (signed by school or school district officials for each school-based service site proposed).

NOTE: Multiple applications from an organization are not allowed.

HRSA will only accept and review your first validated electronic submission, under the correct funding opportunity number, in Grants.gov. Applications submitted after the first Grants.gov submission will be marked as duplicates and considered ineligible for review. If you wish to change information submitted in your Grants.gov application, you may do so in the HRSA Electronic Handbooks (EHBs) application phase.

If you wish to change information submitted in EHBs, you may reopen and revise your application. You must ensure that the application is resubmitted to HRSA before the EHBs deadline or HRSA will not consider it 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 and the EHBs. You must use a two-phase submission process associated with HRSA-23-097 and follow the directions provided at Grants.gov: How to Apply for Grants **and** in EHBs.

- **Phase 1 – Grants.gov** – Required information must be submitted and validated via Grants.gov with a due date of *March 31, 2023* **at 11:59 p.m. ET**; **and**

- **Phase 2 – EHBs** – Supplemental information must be submitted via EHBs with a due date of *May 1, 2023* **at 5 p.m. ET**.

Only applicants who successfully submit the workspace application package associated with this NOFO in Grants.gov (Phase 1) by the due date may submit the additional required information in EHBs (Phase 2).

The NOFO is also known as "Instructions" on Grants.gov. You must select "Subscribe" and provide your email address for HRSA-23-097 in order to receive notifications including modifications, clarifications, and/or republications of the NOFO on Grants.gov. You will also receive notifications of documents placed in the RELATED DOCUMENTS tab on Grants.gov that may affect the NOFO and your application. *You are ultimately responsible for reviewing the For Applicants page for all information relevant to this NOFO.*

2. Content and Form of Application Submission

Application Format Requirements

Section 5 of HRSA's *SF-424 Two-Tier Application Guide* provides general instructions for the budget, budget narrative, staffing plan and personnel requirements, assurances, and certifications. You must submit the information outlined in the *SF-424 Two-Tier Application Guide* in addition to the program-specific information below. You are responsible for reading and complying with the instructions included in this NOFO and

HRSA's *SF-424 Two-Tier Application Guide*. You must submit the application in the English language and budget figures expressed in U.S. dollars (45 CFR § 75.111(a)).

The following application components must be submitted in Grants.gov:

- Application for Federal Assistance (SF-424)
- Project Abstract Summary Form
- Project/Performance Site Locations
- Grants.gov Lobbying Form
- Key Contacts

The following application components must be submitted in EHBs:

- Project Narrative
- Budget Information – Non-Construction Programs (SF-424A)
- Budget Narrative and Table of Personnel Paid with Federal Funds
- Program-Specific Forms
- Attachments

See Section 9.5 of the HRSA *SF-424 Two-Tier Application Guide* for the Application Completeness Checklist to assist you in completing your application.

Application Page Limit

The total of uploaded attachment pages that count against the page limit shall be no more than the equivalent of **60 pages** when printed by HRSA.

Forms that DO NOT count in the Page Limit

- Standard OMB-approved forms included in the workspace application package and program-specific forms in EHBs **do not** count in the page limit.

- The abstract is the standard form (SF) "Project_Abstract Summary." It **does not** count in the page limit.

- The Indirect Cost Rate Agreement **does not** count in the page limit.

- The proof of non-profit status (if applicable) **does not** count in the page limit.

If there are other attachments that do not count against the page limit, this will be clearly denoted in Section IV.2.vi Attachments.

If you use an OMB-approved form that is not included in the workspace application package or EHBs application for HRSA-23-097, it may count against the page limit. Therefore, we strongly recommend you only use Grants.gov workspace and EHBs forms associated with this NOFO to avoid exceeding the page limit.

➢ HRSA will redact any pages considered over the page limit. The redacted copy of the application will move forward to the objective review committee.

It is important to ensure your application does not exceed the specified page limit. See Appendix B: Applicant Page Limit Checklist for additional information.

Applications must be complete, validated by Grants.gov, and submitted under HRSA-23-097 before the Grants.gov and EHBs [deadlines](#).

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification

1) You certify on behalf of the applicant organization, by submission of your proposal, that neither you nor your principals are 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. § 3354).

3) If you are unable to attest to the statements in this certification, you must include an explanation in [Attachment 5: Other Relevant Documents](#).

See Section 5.1 viii of HRSA's *SF-424 Two-Tier Application Guide* for additional information on all certifications.

Program Requirements and Expectations

<u>Program Requirements</u>

You must use SBSE funding to increase the number of patients served at school-based service sites.[10] You will accomplish this by expanding one or more of the following services at one or more new or existing school-based service site(s):

- General primary medical care,
- Mental health,
- Substance use disorder,
- Oral health,
- Vision, and/or
- Enabling (e.g., case management, health education, transportation).[11]

To address the youth mental health crisis,[12] you must provide mental health services at each school-based service site included in your application. If you do not already provide mental health services at a proposed school-based service site, you must propose to add such services directly or by contract through your SBSE application.[13]

You may use SBSE funds to expand services at existing school-based service site(s) or establish services at newly proposed school-based service site(s), including mobile sites. If you propose a new school-based service site, the site must:

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[10] Reported annually in UDS as the total number of "school-based service site patients" aggregated to the health center level. See Table 4 in the [2022 UDS Manual](#) for more information.
[11] See [Form 5A Service descriptors](#).
[12] See the [White House Fact Sheet](#) on actions to address youth mental health crisis (July 2022).
[13] You will certify on a form in EHBs that you are or will be providing mental health services at each site included in the SBSE application.

- Be located within your current service area,
- Be open and operational within 120 days of award, and
- Provide mental health services.

If you do not verify that each proposed new school-based service site is operational within 120 days of award, HRSA will place a condition on your award, which will provide additional time to open the site. If you do not resolve a site-related condition within the specified timeframe, HRSA may terminate all, or part, of your SBSE award per 45 CFR § 75.371.

All uses of SBSE funds must align with your Health Center Program scope of project. To comply with Health Center Program requirements, your health center must retain authority and control over the services provided at the school-based service site. Services must be provided directly by or on behalf of the health center.[14]

You are responsible for maintaining compliance with all Health Center Program requirements and all other applicable federal, state, and local laws and regulations, including those regarding the provision of health services for children and adolescents in schools and minor consent laws.

<u>Program Expectations</u>

Activities conducted with SBSE funding should address issues of equity,[15] defined as consistent and systematic fair, just, and impartial treatment of all individuals, including individuals who belong to underserved communities that have been denied such treatment.[16]

Consider your team's cultural and clinical competence,[17] the barriers to children and adolescents needing health care, and the health-related social needs experienced by children and adolescents such as food insecurity, housing insecurity, financial strain, intimate partner violence, lack of transportation/access to public transportation, immigration status, and other social determinants that may affect access to care, contribute to poor health outcomes, and exacerbate health disparities.[18]

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[14] See the Health Center Program Compliance Manual.

[15] See Executive Order 13985 on Advancing Racial Equity and Support for Underserved Communities Through the Federal Government, 86 FR 7009, at § 2(a) (Jan. 20, 2021).

[16] Such as Black, Latino, Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.

[17] See the HRSA Office of Health Equity and National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care for additional information.

[18] HHS defines social determinants of health as the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Social determinants of health can be grouped into 5 domains: economic stability; education access and quality; health care access and quality; neighborhood and built environment; and social and community context. See Healthy People 2030 for more information.

All Health Center Program service delivery sites, including school-based service sites, must include in-person services.[19] For information about telehealth[20] and your health center scope of project, see PAL 2020-01.

In addition, if you use broadband or telecommunications services for the provision of health care, HRSA encourages you to seek discounts through the Federal Communication Commission's Universal Service Program. For information about such discounts, see the Rural Health Care Program. The Affordable Connectivity Program (ACP) and Lifeline are federal government programs that help eligible households pay for internet services and internet connected devices. Patients living on tribal lands may be eligible for additional benefits through ACP.

HRSA encourages you to use evidence-based practices[21] in your provision of primary health services.

Program-Specific Instructions

In addition to application requirements and instructions in Sections 4 and 5 of HRSA's *SF-424 Two-Tier Application Guide* (including the budget, budget narrative, staffing plan and personnel requirements, assurances, certifications, and abstract), include the following:

 i. *Project Abstract* (Submit in Grants.gov)

Use the Standard OMB-approved Project Abstract Summary Form that is included in the workspace application package. Do not upload the abstract as an attachment or it may count toward the page limit. For information required in the Project Abstract Summary Form, see Section 5.1.ix. of HRSA's *SF-424 Two-Tier Application Guide*. In addition, indicate the school(s) and school district(s) where your school-based service site(s) will be or is located (indicating if a site will be new) and how your SBSE project will impact the youth mental health crisis.

NARRATIVE GUIDANCE

To ensure that you fully address the review criteria, the table below provides a crosswalk between the narrative language and where each section falls within the review criteria. Any forms or attachments referenced in a narrative section will be considered during the objective review.

Narrative Section	Review Criteria
Need section of the Project Narrative	(1) Need

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[19] See PIN 2008-01: Defining Scope of Project and Policy for Requesting Changes.
[20] See HRSA Office of Rural Health webpage, "What is Telehealth?"
[21] "Evidence-based" refers to resources that are published intervention evaluations or studies that have evidence in effectiveness, feasibility, reach, sustainability, and transferability. See examples at Healthy People 2030 and SAMHSA Evidence-Based Practices Resource Center.

Narrative Section	Review Criteria
Response section of the Project Narrative Attachments and forms listed in the Response section of the Project Narrative	(2) Response
Collaboration section of the Project Narrative Attachments listed in the Collaboration section of the Project Narrative	(3) Collaboration
Resources/Capabilities section of the Project Narrative	(4) Resources/Capabilities
Evaluative Measures section of the Project Narrative	(5) Evaluative Measures
Support Requested section of the Project Narrative Attachments and forms listed in the Support Requested section of the Project Narrative, including the Budget Narrative	(6) Support Requested

ii. *Project Narrative* (Submit in EHBs – required for eligibility)

This section provides a description of all aspects of the proposed project. It should be succinct, self-explanatory, consistent with forms and attachments, and organized in alignment with the sections and format below so that reviewers can understand the proposed project.

Use the following section headers for the narrative: Introduction, Need, Response, Collaboration, Resources/Capabilities, Evaluative Measures, and Support Requested.

INTRODUCTION – *Not Scored*

Provide the following information on **each** school-based service site where new or expanded services will occur. For applications proposing multiple school-based service sites, include a table or another easily readable format.

- The name of each school-based service site and whether each site is new (proposed as a new site on Form 5B in this application) or already in your health center scope of project, including whether the site is a mobile unit.[22]

- The name and address of the school where each school-based service site is or will be located. For mobile sites, provide a list of the schools the mobile unit will visit.

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[22] If you will use SBSE funds to replace an existing mobile unit, that would be considered an existing site.

- For each proposed school-based service site, whether you currently provide mental health services or if you are proposing to expand mental health services in this application.[23]

NEED – *Corresponds to Section V's* *Review Criterion #1*

1) Describe the school(s) where service expansion will occur, including relevant information about the school(s) (e.g., Title I, community school) and demographics of the student population (e.g., number of students, age range).

2) Describe barriers to care affecting the children and adolescents attending the school(s) and in the community where your school-based service site is or will be located, including:

   a) Availability of health providers;

   b) Affordability of health care;

   c) Uninsured rate;

   d) Language access;

   e) Geographic barriers or access to public transportation; and

   f) Other access barriers not mentioned above.

3) Describe and provide data on the most significant clinical and health-related social needs affecting the children and adolescents attending the school(s) and in the community where your school-based service site is or will be located. Sources of data may include, but are not limited to, your current needs assessment, UDS Mapper, The Children's Health and Education Mapping Tool, National Survey of Children's Health (NSCH), Youth Risk Behavioral Surveillance System (YRBSS), and community health or school needs assessments.[24] Describe needs as they relate to the following:

   a) Mental health and well-being of students.

   b) Health care delivery, including general primary medical care, mental health and substance use disorder services, oral health care, vision services, and continuity of care.

   c) Health conditions (e.g., asthma, anxiety, depression, childhood obesity, smoking, substance use).

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[23] If you do not already provide mental health services at each proposed school-based service site, you must propose to expand mental health services (in-person or virtual visit) at each school-based service site included in your SBSE application. This is an eligibility requirement.

[24] You may also find relevant data specific to your health center's service area zip codes using the Service Area Status workbook, which can be downloaded from the Advancing Health Center Excellence webpage.

d) Other factors that impact health-related social needs, including those reported in UDS (e.g., food insecurity, housing instability, financial strain).

RESPONSE – *Corresponds to Section V's [Review Criterion #2](#)*

1) Describe the new or expanded services[25] that you will provide as a result of SBSE funding (consistent with your [Project Work Plan](#) included in the Project Overview Form submitted in EHBs). Specifically address:

   a) The mental health services that are or will be provided at each school-based service site, how you will ensure students have access to these services, and how they will contribute to addressing the mental health needs of the student population. Note that you must make mental health services available at each proposed school-based service site (onsite by staff or contractors or via telehealth).

   b) How you will ensure that expanded services will be implemented and/or each proposed new site will be open and operational within 120 days of award.

   c) How each proposed new or expanded service responds to the clinical and health-related social needs and barriers to care identified in the [NEED](#) section of the Project Narrative.

   d) The service delivery method[26] for each proposed new or expanded service (directly and/or through a formal written contract or agreement in which the health center will pay for the service). If you propose to expand services through a formal written contract or agreement,[27] describe those agreements in [Attachment 4: Summary of Contracts and Agreements](#).

   e) Whether each proposed new or expanded service will be available in-person, virtually, or both, and how such services, including mental health, will be patient-centered and integrated with other school-based health services, as applicable. Note that all Health Center Program service delivery sites, including school-based service sites, must include in-person services.[28]

   f) How you will ensure that school-based patients and individuals who are not students have access to your health center's full range of services provided, including services not available at the school-based service site.

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[25] You are responsible for maintaining compliance with all applicable federal, state, and local laws and regulations, including those regarding the provision of health services for children and adolescents in schools and minor consent laws.

[26] Refer to [Form 5A service delivery methods](#) for guidance.

[27] Note that you cannot meet the requirement to provide mental health services at each school-based service site through a formal written referral arrangement for which the health center does not pay (Column III).

[28] See the [Program Expectations](#) section for more information.

g) If you received an SBSS award in September 2021 or May 2022, explain how this proposal builds on and is distinct from the service expansion resulting from that award.

2) Describe how you will ensure culturally affirming care that takes into account individual patient preferences, language, age, culture, values, and needs (including mental health needs) to facilitate equitable access to school-based health services.

3) On the Project Overview Form, provide the number of patients served across all of your school-based service sites in calendar year 2022 (consistent with UDS-reported data) and the number of patients you estimate to be served across all of your school-based service sites in calendar year 2024. The 2024 estimate should include the patient growth expected from the SBSE funding. In the narrative, describe:

a) How you determined the estimated number of school-based patients for 2024;[29]

b) How the estimated number of patients is achievable, given the local health care landscape, school environment, and/or workforce capacity;

c) If applicable, how one-time funding for minor alteration and renovation (A/R)[30] and/or equipment will enable you to provide expanded services and increase the number of patients served at your school-based service site(s).

***COLLABORATION** – Corresponds to Section V's Review Criterion #3*

1) Describe your collaboration with the school(s) and school district(s) where the school-based service site is or will be located (consistent with Attachment 1: School Commitment Documentation).[31]

2) Describe collaboration and coordination with other providers/organizations serving the children and adolescents attending the school where the school-based service site is or will be located, including organizations addressing health-related social needs.

3) If you are proposing a new school-based service site (consistent with Form 5B: Service Sites), in Attachment 3: Health Center Letter of Support, include either letters of support from Health Center Program award recipients and look-alikes within your service area that demonstrate support for the proposed new school-based service site(s) or documentation that you have requested a letter of support from each health center in your service area, if any.[32] Providing a letter or

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[29] When estimating patients, note that students who only receive screening services, including COVID-19 testing, or mass treatments such as vaccinations or fluoride treatments at a school do not count as school-based patients in UDS. See Table 4 in the 2022 UDS Manual for more information.

[30] Your response should align with, and not duplicate, the project-related information in the A/R Project Cover Page(s).

[31] Documentation must be signed by school and/or school district officials for each school-based service site included in the application. This is an eligibility requirement.

[32] If you cannot obtain a requested letter of support from other health centers, include documentation of efforts made to obtain the letter.

documentation of a request helps to ensure that other health centers are aware of plans to add sites in the service area.

RESOURCES/CAPABILITIES – Corresponds to Section V's Review Criterion #4

1) Describe the skills, capabilities, and expertise that qualify your health center to carry out the expansion of school-based services, including:

   a) If you currently operate school-based service site(s), describe the location, hours of operation, patient age range, personnel, services provided, when the school-based service site began providing services, and clearly indicate which site(s) are included in this application.

   b) If you do not currently operate a school-based service site, clearly indicate this and describe your health center's experience with:

   - Providing the proposed services to children and adolescents at your current, non-school-based service delivery site(s),
   - Delivering health care and engaging in health-related activities for children and adolescents in schools and other locations that do not meet the definition of a service site, and
   - Successfully opening new sites within required timeframes (e.g., 120 days of award).

2) Describe how the proposed personnel (direct hire and contracted) listed in the Budget Narrative are essential and sufficient to ensure access to mental health services and success of the proposed project at the school-based service site(s). In addition, describe how you will overcome potential workforce shortage challenges to ensure timely access to these providers and support staff.

3) Describe the capabilities and expertise of key health center management staff to oversee and ensure successful service expansion, promote health workers' well-being, and maintain collaborative relationships.

EVALUATIVE MEASURES – Corresponds to Section V's Review Criterion #5

1) Describe how you will measure your success on the following:

   a) Number of patients served at school-based service site(s),[33]

   b) Mental health services provided to school-based service site patients, and

   c) Other service expansion at the school-based service site(s).

2) Describe how your Quality Improvement/Quality Assurance (QI/QA) program will support the proposed project, including:

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[33] Reported annually in UDS as "school-based service site patients". For more information, see the 2022 UDS Manual.

a) How evidence-based resources[34] have informed your service expansion at the school-based service site(s),

b) How you will incorporate new school-based services, personnel, patient records, and standards of care into your QI/QA program, and

c) How you will use QI/QA reports for SBSE project improvement.

SUPPORT REQUESTED – *Corresponds to Section V's Review Criterion #6*

1) Provide a consistent budget presentation (i.e., SF-424A, Budget Narrative, and Equipment List and Minor A/R Budget Justification, if applicable) that aligns with and will clearly support the success of the proposed SBSE project.

iii. *Budget* (Submit in EHBs)

Follow the instructions included in Section 5.1.iv of HRSA's *SF-424 Two-Tier Application Guide* and the additional budget instructions provided below. A budget that follows the *Guide* will ensure that, if HRSA selects your application for funding, you will have a well-organized plan and, by carefully following the approved plan, may 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) you incur to carry out a HRSA-supported project or activity. Total project or program costs include costs charged to the award and costs borne by you to satisfy a matching or cost-sharing requirement as applicable.

In addition, this program requires the following:

You must present the total budget for the project, which includes SBSE funds (up to $250,000, or $350,000 if proposing a new school-based service site) and all non-federal funds that will support the proposed project. You have discretion about how you propose to allocate the total budget between SBSE federal funds and other funding that supports the project, provided that the projected budget complies with all applicable HHS policies and other federal requirements.[35]

In year 1, you may use up to $150,000 of your maximum funding request (see Section II.2) for one-time costs necessary to expand services at the school-based service site, including:

- Minor alteration/renovation at the school-based service site (as defined in Appendix A, the total federal and non-federal cost of the alteration/renovation project must be less than $500,000, excluding the cost of moveable equipment), and/or
- Moveable equipment for the school-based service site (as defined in Appendix A, the per-unit cost of equipment is $5,000 or more). Note that items requiring

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[34] As applicable, include a citation referencing the evidence-based resource(s) you are using, adopting, or adapting.
[35] See Chapter 17: Budget of the Compliance Manual.

installation, attachment to a stationary structure, or connection to utilities are considered minor alteration/renovation.

Budget Information Form (SF-424A)

Complete the Budget Information Form in EHBs after the SF-424 Basic Information. The budget information in these sections must correspond to the total cost of the SBSE project for year 1, except Section E, which records year 2.

- In Section A – Budget Summary: Under New or Revised Budget, enter the SBSE federal funding requested in the Federal column (up to $250,000, or $350,000 if proposing a new school-based service site). Enter the federal funding requested in the same proportions for all population types for which you currently receive Health Center Program section 330 funding (Community Health Center – 330(e), Migrant Health Center – 330(g), Health Care for the Homeless – 330(h), and/or Public Housing Primary Care – 330(i)). Funding will be awarded based on current proportions. Enter all other project costs in the Non-Federal column. Estimated Unobligated Funds are not applicable for this funding opportunity.

- In Section B – Budget Categories: Enter an object class category (line item) budget for year 1, broken out by federal and non-federal funding. The amounts for each category in the Federal and Non-Federal columns, as well as the totals, should align with the Budget Narrative. Up to $150,000 of your maximum funding request may be used for equipment and/or minor A/R. If requesting funds for minor A/R, include that amount on the construction line.

- In Section C – Non-Federal Resources: Not including the SBSE federal funding request, enter the amount of all other sources of funding for year 1. The total in Section C must be consistent with the Non-Federal Total in Section A.

- In Section D – Forecasted Cash Needs (optional): Enter the amount of cash needed by quarter during the first year for both the federal request and all other sources, if desired.

- In Section E – Budget Estimates of Federal Funds Needed for the Balance of the Project: Enter the federal funds requested (up to $250,000, or $350,000 if proposing a new school-based service site) for Year 2 in the (a) First column. The other columns must remain $0.

- In Section F – Other Budget Information (only if applicable): Explain amounts for individual object class categories that may appear to be out of the ordinary in Direct Charges. Enter the type of indirect rate (provisional, predetermined, final, fixed, or de minimis) that will be in effect during the period of performance. If you include indirect costs in your budget, you must provide a copy of your current indirect cost rate agreement in Attachment 5: Other Relevant Documents. If you do not have a current indirect cost rate agreement and wish to claim indirect costs, you may claim up to 10 percent indirect costs by declaring an intention to use the 10 percent de minimis rate.

As required by the Consolidated Appropriations Act, 2023 (P.L. 117-328), Division H, § 202, "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." Effective January 2023, the salary rate limitation is **$212,100.** Note that these or other salary rate limitations may apply in the following fiscal years, as required by law.

iv.   *Budget Narrative* (Submit in EHBs)

See Section 5.1.v. of HRSA's *SF-424 Two-Tier Application Guide*. In addition, this program requires the following:

The Budget Narrative must be consistent with the information provided in the SF-424A, the Project Narrative, and other forms and attachments. You must present a budget for each year of the 2-year project, which includes SBSE funds (up to $250,000 annually, or $350,000 if proposing a new school-based service site) and all non-federal funds that will support the proposed project. Justify how the costs for each line item will contribute to the goals and objectives of the SBSE project. See the SBSE Technical Assistance webpage for an example Budget Narrative.

Your budget narrative must:

- Demonstrate that you will use SBSE funds for costs that will expand access to health care services at service delivery sites located at schools.
- Clearly detail proposed costs for each line item on the SF-424A Budget Information Form, with calculations for how you derive each cost.
- Include a Table of Personnel to be Paid with Federal Funds, as shown in the example provided in HRSA's *SF-424 Two-Tier Application Guide*.
- Not include ineligible costs. See the funding restrictions listed in Section IV.6.
- Align with the minor A/R project budget justification uploaded to the Project Cover Page and Equipment List Form, as applicable. See Appendix A: One-Time Funding Request Information for more information.
- Provide HRSA with sufficient information to determine that you will use SBSE funds separately and distinctly from other Health Center Program support (e.g., H80 awards). If you received an SBSS award in FY 2021 or 2022, explain how this award will support costs that are not included in the previous SBSS project (H2E award).

v.   *Program-Specific Forms* (Submit in EHBs)

Phase 2 of your application requires the submission of supplemental information in EHBs. To access complete instructions and preview the forms to be completed in EHBs, visit the SBSE Technical Assistance webpage.

Project Overview Form (Required)

H80 Verification

Enter your Health Center Program grant number where indicated (H80CSXXXXX). This is an eligibility requirement.

Project Work Plan

Complete the project work plan in EHBs to describe the SBSE activities that you will conduct over the 2-year period of performance. Your work plan should be consistent with the information in other application components (e.g., Project Narrative, Budget Narrative) and will include:

- **Service Category** – Select the service(s) you propose to add/expand:

  - General primary medical care
  - Mental health
  - Substance use disorder
  - Oral health
  - Vision
  - Enabling (e.g., case management, health education, transportation)

- **Activity Category** – For each selected service to be added/expanded, select the categories and subcategories of activities you are proposing:

  - Access to Services
    - Provision of new or expanded services
    - Adding new site(s)
    - Adding mobile unit(s)
    - Identifying and addressing access barriers
    - Enhancing telehealth infrastructure and integration where necessary to ensure access to and/or optimize patient-centered care for school-based patients[36]
    - Executing minor alteration/renovation (A/R)
    - Other (specify)

  - Quality, Patient Care, and Safety
    - Clinical effectiveness and quality improvement
    - Implement strategies to identify and address disparities and inequities in care delivery and health outcomes
    - Continuity of care, including referral arrangements and follow-up
    - Patient and provider safety

  - Workforce
    - Recruitment, hiring, onboarding, retention, well-being, and engagement of personnel (direct-hire and/or contracted)
    - Training and professional development
    - Integrating multidisciplinary teams
    - Other (specify)

  - Patient Experience and Health-Related Social Needs
    - Establishing new/strengthening existing partnerships and referrals to address health-related social needs

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[36] Note that all Health Center Program service delivery sites, including school-based service sites, must include in-person services.

- Engaging with students and families
- Patient-centered care coordination
- Systematically collecting and analyzing data on social risk factors that impact health outcomes and inform case management
- Other (specify)

  o Other (specify)
     - Other (specify)

- **Activity Description** – Provide a brief narrative for each of your proposed activities, including how each activity will support service expansion at/of school-based service sites.

To complete the Project Work Plan, you must select at least one service category and at least one activity category and subcategory per selected service category. You will then describe the specific activities you plan to complete within the selected activity subcategories. You may select multiple service categories, activity categories, and subcategories.

You must select mental health services as a service category if you do not already provide mental health services directly or by contract at each school-based service site included in the application. If you are proposing new school-based service site(s), ensure that the Project Work Plan outlines activities that will clearly enable each proposed new site to be open and operational within 120 days of award. Refer to the SBSE Technical Assistance webpage for a sample work plan.

Patient Impact

Provide the number of patients served across all of your school-based service sites in calendar year 2022 (consistent with your 2022 UDS-reported data). Provide an estimate of the number of patients to be served across all of your school-based service sites in calendar year 2024.[37] The 2024 estimate should reflect the patient growth expected from the SBSE funding. When estimating patients, note that students who only receive screening services or mass treatments such as vaccinations or fluoride treatments at a school do not count as school-based patients in UDS.

Scope of Project

Evaluate your current scope of project in light of your proposed project.[38] If your scope requires changes based on your proposed project, indicate if changes will be required to your Form 5A: Services provided and/or Form 5C: Other Activities/Locations.

Note: You do not indicate on this form if changes to Form 5B: Service Sites will be required because you can add new school-based service site(s) through this application (see Form 1B: Funding Request Summary and Form 5B: Service Sites).

If a change is required to Form 5A: Services Provided and/or Form 5C: Other

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[37] Patient estimates for SBSE are not added to your overall health center patient target.
[38] You can view your scope of project in the Approved Scope section of your H80 grant folder in EHBs.

Activities/Locations, provide an overview of the change along with a timeline for making the necessary request(s). Access the technical assistance materials on the Scope of Project webpage and contact your H80 program specialist for guidance in determining if a scope adjustment or change in scope will be necessary.

You must submit scope adjustment and change in scope requests for new services (e.g., direct provision of mental health services) and/or other activities/locations outside of the SBSE application. You should allow 60 days for HRSA to review your request and obtain approval before implementing change(s).

You must certify that mental health services are provided directly or by contract at each proposed school-based service site, or that you are proposing to add such services at each proposed site through this application.[39] Use the Scope of Project section of this form to indicate if you will need to request a scope adjustment or change in scope to add mental health services at the school-based site(s).

Form 1B: Funding Request Summary (Required)

Before completing Form 1B, complete the SF-424A: Budget Information Form. See the Budget section for instructions on completing the SF-424A.

SBSE Funding Request

The form displays the SBSE funding request, pre-populated from the SF-424A Budget Information Form, Section A.

- The maximum amount of federal funding that can be requested is $250,000, or $350,000 if proposing a new school-based service site.

- If changes are required, modify the appropriate section of the SF-424A.

One-time Funding

Up to $150,000 may be requested for equipment and/or minor A/R in year 1 only. See Appendix A for requirements.

- Indicate if you are requesting one-time funds for:

  o Equipment purchases (no minor A/R),
  o Minor A/R with equipment,
  o Minor A/R without equipment, or
  o Not applicable (funding for equipment and minor A/R not requested).

- If you select equipment, you must enter the amount requested for equipment on the equipment line in Section B of the SF-424A. This will make the Equipment List Form available for you to complete.

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[39] For this application, mental health services cannot be provided only through formal written referral arrangements for which the health center does not pay (Column III).

- If you select minor A/R, you must enter the amount requested for minor A/R on the construction line in Section B of the SF-424A. This will make the Minor A/R Project Cover Page and Other Requirements for Sites Forms available for you to complete.

New Sites

Indicate if you are proposing to add a new school-based service site (permanent or mobile) within your existing service area to address identified school-based service expansion needs. This will make Form 5B available for you to complete.

Existing Sites

Indicate if you are proposing to expand services at an existing school-based service site in your scope of project. If so, you will select each site where school-based service expansion will occur on a separate form. You can only pick sites from scope with a "school" site setting.[40] This will generate a list of the site(s) you selected for the SBSE application for confirmation.

School Information and Certification

Enter the name of the school district(s) where your school-based service expansion will occur.

You must certify that you have included School Commitment Documentation for each proposed school-based service site (each new or existing site included in your application).

Form 5B: Service Sites (Required for Addition of New Sites)

You may add new school-based service sites through this application. The addition of a service delivery site located at a school is required if you do not currently operate school-based service site(s) where you will implement your proposed SBSE project. For each new school-based service site, you must provide a street address with suite number (if applicable), location type,[41] site setting (must be "school"), site operational date (no later than 120 days after award); and total hours of operation per week. You may not list "to be determined," provide a post office box, or otherwise fail to specify the service site address. For details, see the Instructions for Form 5B: Service Sites.

If you are proposing a new mobile unit, the mobile unit is the service site. For the site address, include the address where the mobile unit is parked, which may be an existing administrative or service site in your H80 scope, a school, or another location. Select school as the site setting. Do not list the locations where the mobile unit will provide health care services in Form 5B. List the schools where the mobile unit will provide services in the Project Narrative, and include School Commitment Documentation for

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[40] If you need to change the site setting for an existing mobile site that will be used as a school-based service site, you may adjust the site setting to school through the self-update module in EHBs. See instructions to change a field in Form 5B.

[41] The location type refers to a mobile site, a permanent, fixed site open year-round, or a seasonal site that is open less than 12 months of the year, such as a school-based site that is closed during the summer when school is not in session.

each school or school district. If you are proposing to provide services to schools using an existing mobile unit, do not enter the mobile site on Form 5B as a new site. Instead, pick the existing mobile site from scope.

Ensure that your new school-based service site(s) meet the definition of a service site. See the Scope of Project webpage for additional information. Providing intermittent services at locations using portable equipment is not considered a service site. Additionally, locations where all services are exclusively delivered via telehealth would not meet the "in-person" criterion of the service site definition and therefore, would not be considered service sites under PIN 2008-01: Defining Scope of Project and Policy for Requesting Changes.

Because the purpose of SBSE funds is to increase access to school-based services in your existing H80 service area, you may not expand your service area through this application. Note the following requirements as of the NOFO release date:

- Site Physical Address – The zip code of the Site Physical Address (where the school-based service site will be located or where a new mobile unit will be parked) must be included in your current service area, based on the Service Area Zip Codes listed across all current sites in scope (on Form 5B).

- Service Area Zip Codes – All Service Area Zip Codes listed for any proposed new site(s) must be included in your existing service area, based on the Service Area Zip Codes listed across all current sites in scope (on Form 5B).   .

Equipment List and Minor A/R Forms (if applicable)

You may request up to $150,000 in year 1 for equipment and/or minor A/R if necessary to support your service expansion. If you are requesting funding for equipment purchases or for minor A/R activities, see Appendix A: One-Time Funding Request Information.

vi. Attachments *(Submit in EHBs)*

Provide the following items in the order specified below. Unless otherwise noted, attachments count toward the application page limit. Your indirect cost rate agreement and proof of non-profit status (if applicable) will not count toward the page limit. Clearly label each attachment. You must upload attachments into the application. HRSA and the objective review committee will not open/review any hyperlinked attachments.

Attachment 1: School Commitment Documentation *(required for eligibility)*

Upload a commitment letter (on school letterhead) or Memorandum of Understanding (MOU) signed by school and/or school district officials that specifies support for the proposed school-based service expansion and includes the school(s) name and address where the school-based service site is or will be located.

If you are proposing to use SBSE funds for multiple sites, include a letter or MOU from each school or school district. If your sites are located at multiple schools in the same school district, one letter or MOU is acceptable if it clearly states each school where

sites are or will be located. If you are proposing to provide services to schools using a mobile unit, include a letter or MOU from each school or school district where the mobile unit will provide services. Ensure that your school commitment documentation is consistent with the information in the [Project Narrative](#).

Attachment 2: Map of New School-Based Service Site Location (as applicable)

If you are proposing a new school-based service site, upload a map that clearly indicates the location of each proposed new site described in the [Project Narrative](#) and included on [Form 5B: Service Sites](#). The map should be zoomed in enough to demonstrate that the school-based service site will be located at or on the grounds of a school. You may need to upload more than one map if you propose multiple new sites. Resources you may use to help you create your map include Google Maps, [UDS Mapper](#), or [School Based Health Alliance Mapper](#).

Attachment 3: Health Center Letter of Support (as applicable)

If you are proposing a new school-based service site, upload letters of support from Health Center Program award recipients and look-alikes within your service area that demonstrate support for the proposed new school-based service site(s) or upload documentation that you reached out to other health centers to request a letter of support. Providing a letter or documentation of a request helps to ensure that other health centers are aware of plans to add sites in the service area.

Attachment 4: Summary of Contracts and Agreements (as applicable)

Upload a brief summary describing formal written contracts or agreements for your school-based service expansion. Include the name of each contractor and a brief description of the type of services provided, timeframe for the agreement, and the process for tracking and appropriate follow-up care for school-based patients.

Attachment 5: Other Relevant Documents (as applicable)

Upload your indirect cost rate agreement, if applicable. Include other relevant documents to support the proposed project, as desired.

3. Unique Entity Identifier (UEI) and System for Award Management (SAM)

Effective April 4, 2022:

- The UEI assigned by [SAM](#) has replaced the Data Universal Numbering System (DUNS) number.

- Register at [SAM.gov](#) and you will be assigned a UEI.

You must register with SAM and continue to maintain active SAM registration with current information at all times when you have: an active federal award, an active application, or an active plan under consideration by an agency (unless you are an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or you have an exception approved by the agency under 2 CFR §

25.110(d))**.** For your SAM registration, you must submit a notarized letter appointing the authorized Entity Administrator.

If you are chosen as a recipient, HRSA will not make an award until you have complied with all applicable SAM requirements. If you have not fully complied with the requirements by the time HRSA is ready to make an award, you may be deemed not qualified to receive an award, and HRSA may use that determination as the basis for making an award to another applicant.

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

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

- System for Award Management (SAM) (https://sam.gov/content/home | [SAM Knowledge Base](https://sam.gov/content/home))

- Grants.gov (https://www.grants.gov/)

For more details, see Section 3.1 of HRSA's *SF-424 Two-Tier 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 application due date under this NOFO in Grants.gov (Phase 1) is **March 31, 2023 at 11:59 p.m. ET**. The due date to complete all other required information in EHBs (Phase 2) is **May 1, 2023 at 5 p.m. ET**. HRSA suggests you submit your application to Grants.gov at least **3 calendar days before the deadlines** to allow for any unforeseen circumstances. See Section 9.2.5 – Summary of emails from Grants.gov in HRSA's *SF-424 Two-Tier Application Guide* for additional information.

5. Intergovernmental Review

The Health Center Program is subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

See Section 5.1.ii. of HRSA's *SF-424 Two-Tier Application Guide* for additional information.

6. Funding Restrictions

You may request funding for a period of performance of up to 2 years, at no more than $250,000 per year, or $350,000 per year if proposing a new school-based service site (inclusive of direct **and** indirect costs). Up to $150,000 may be used in Year 1 for minor A/R expenses and/or equipment, as desired. 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, 2023 (P.L. 117-328) apply to this program. See Section 5.1 of HRSA's *SF-424 Two-Tier Application Guide* for additional information. Note that these or other restrictions will apply in following fiscal years, as required by law.

You cannot use funds under this notice for the following purposes:[42]

- Costs already paid for by other Health Center Program funds;
- Costs not aligned with the SBSE purpose;
- Costs for services and activities that are not provided directly by or on behalf of the health center and health center project;
- Purchase or upgrade of an electronic health record (EHR) that is not certified to the latest standards of the Office of the National Coordinator for Health Information Technology Certification Program;[43]
- New construction activities, including additions or expansions;
- Major alteration or renovation (A/R) projects valued at $500,000 or greater in total federal and non-federal costs (excluding the cost of moveable equipment);
- Purchase and installation of trailers and pre-fabricated modular units;
- Concrete or asphalt paving of new areas outside of a building;
- Facility or land purchases; and
- Purchase of vehicles (mobile units are allowed).

Under existing law and consistent with Executive Order 13535 (75 FR 15599), health centers are prohibited from using federal funds to provide abortions, except in cases of rape or incest, or when a physician certifies that the woman has a physical disorder, physical injury, or physical illness that would place her in danger of death unless an abortion is performed. This includes all funds awarded under this notice and is consistent with past practice and long-standing requirements applicable to awards to health centers.

You are required to have the necessary policies, procedures, and financial and other internal controls[44] 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 specific uses of funding. It is imperative that you review and adhere to the list of statutory restrictions on the use of funds detailed in Section 5.1 of HRSA's *SF-424 Two-Tier Application Guide*. Like all other applicable grants requirements, the effectiveness of these policies, procedures, and controls is subject to audit.

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[42] For information about allowable expenses, see 45 CFR part 75 and the HHS Grants Policy Statement (HHS GPS).
[43] The Centers for Medicare and Medicaid Services and the ONC have established standards and other criteria for structured data. For additional information, refer to https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Certification.html.
[44] For more information see HRSA Internal Controls at a Glance.

Be aware of the requirements for HRSA recipients and subrecipients at 2 CFR § 200.216 regarding prohibition on certain telecommunications and video surveillance services or equipment. For details, see the [HRSA Grants Policy Bulletin Number: 2021-01E](#).

The non-federal share of the project budget includes all program income sources such as fees, premiums, third party reimbursements, and payments that are generated from the delivery of services, and from other revenue sources such as state, local, or other federal grants or contracts; private support; and income generated from fundraising and donations/contributions.

In accordance with section 330(e)(5)(D) of the PHS Act relating to the use of non-grant funds, health centers shall use non-grant funds, including funds in excess of those originally expected, "as permitted under this section [section 330]," and may use such funds "for such other purposes as are not specifically prohibited under this section [section 330] if such use furthers the objectives of the project."

V. Application Review Information

1. Review Criteria

HRSA has procedures for assessing the technical merit of applications to provide for an objective review and to assist you in understanding the standards against which your application will be reviewed. HRSA has indicators for each review criterion to assist you in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation.

Reviewers will evaluate and score the merit of the application based upon these criteria. Note that the review criteria summarize the items included in the project narrative along with information in the forms and attachments. The entire proposal will be considered during objective review.

Six review criteria are used to review and rank SBSE applications. Below are descriptions of the review criteria and their scoring points.

Reviewers will evaluate and score:

Criterion 1: NEED (15 points) – *[Corresponds to Section IV.2.ii NEED](#)*

1) The strength of the applicant's description of the school(s) where service expansion will occur, including relevant information about the school(s) and demographics of the student population (e.g., number of students, age range).

2) The strength of the documented barriers to care affecting the children and adolescents attending the school(s) and in the community, including:

    a) Availability of health providers;

    b) Affordability of health care;

    c) Uninsured rate;

d) Language access;

e) Geographic barriers or access to public transportation; and

f) Other access barriers not mentioned above.

3) The strength of the documented clinical and health-related social needs affecting the children and adolescents attending the school(s) and in the community, including:

 a) Mental health and well-being of students;

 b) Health care delivery;

 c) Health conditions; and

 d) Other factors that impact health-related social needs.

Criterion 2: RESPONSE (30 points) – *Corresponds to Section IV.2.ii RESPONSE*

1) ***Work Plan (15 Points)*** The strength of the applicant's plan to provide new or expanded services (included in both the narrative and the Project Work Plan), including:

a) The mental health services that are or will be provided at each school-based service site, students' access to these services (onsite by staff or contractors or via telehealth), and how they will contribute to addressing the mental health needs of the student population;

b) How expanded services will be implemented and any new school-based service site(s) will be open and operational within 120 days of award.

c) How each proposed new or expanded service relates to the clinical and health-related social needs and barriers to care identified in the *NEED* section of the Project Narrative;

d) The service delivery method for each proposed new or expanded service, consistent with Attachment 4: Summary of Contracts and Agreements, if applicable;

e) Whether each proposed new or expanded service will be available in-person, virtually, or both, and how mental health and other services will be patient centered and integrated with other school-based health services (note that all Health Center Program service delivery sites, including school-based service sites, must include in-person services);

f) How school-based patients and individuals who are not students will have access to the health center's full range of services, including services not available at the school-based service site; and

g) How this proposal builds on and is distinct from the service expansion resulting from the SBSS award in September 2021 or May 2022, if applicable.

2) *Equitable Access (10 Points)* The strength of the applicant's plan to ensure culturally-affirming, patient-centered care that takes into account mental health needs to facilitate equitable access to school-based health services.

3) *Patient Increase (5 Points)* The reasonableness of the estimated increase in the number of school-based patients served (consistent with the Project Overview Form), including the extent to which:

   a) The estimated number of patients of school-based patients is achievable; and

   b) If applicable, proposed minor A/R and/or equipment purchases will enable the applicant to provide expanded services and increase the number of patients served at the school-based service site(s).

Criterion 3: COLLABORATION (15 points) – *Corresponds to Section IV.2.ii COLLABORATION*

1) The strength of collaboration with the school(s) and school district(s) where the school-based service site is or will be located (consistent with Attachment 1: School Commitment Documentation).

2) The strength of the collaboration and coordination with other providers/ organizations serving the children and adolescents attending the school where the school-based service expansion is proposed, including organizations addressing health-related social needs.

3) If applicable, the extent to which the applicant documents that they requested letters of support for the new school-based service site(s) from Health Center Program award recipients and look-alikes within the service area, or provides letter(s) of support in Attachment 3: Health Center Letter of Support.

Criterion 4: RESOURCES/CAPABILITIES (20 points) – *Corresponds to Section IV.2.ii RESOURCES/CAPABILITIES*

1) The extent of the skills, capabilities and expertise of the health center to successfully carry out the expansion of school-based services.

2) The extent to which the proposed personnel (direct hire and contracted) listed in the Budget Narrative are essential and sufficient to ensure access to mental health services and success of the proposed project at the school-based service site(s). In addition, the strength of the applicant's plan to overcome potential workforce shortage challenges and ensure timely access to these providers and support staff.

3) The extent of the capabilities and expertise of key health center management staff to oversee and ensure successful service expansion, promote health workers' well-being, and maintain collaborative relationships.

Criterion 5: EVALUATIVE MEASURES (10 points) – *Corresponds to Section IV.2.ii EVALUATIVE MEASURES*

1) The effectiveness of the applicant's strategy to measure success on the number of patients served, mental health services provided to school-based service site

patients, and other service expansion activities at the school-based service site(s).

2) The effectiveness of the applicant's QI/QA program to incorporate evidence-based resources, new school-based services, personnel, patient records, and standards of care, and use QI/QA reports for SBSE project improvement.

Criterion 6: SUPPORT REQUESTED (10 points) – *Corresponds to Section IV.2.ii SUPPORT REQUESTED*

1) The extent to which the applicant provides a detailed and consistent budget presentation (i.e., SF-424A, Budget Narrative, and Equipment List and Minor A/R Budget Justification, if applicable) that aligns with and will clearly support the proposed SBSE project.

2. Review and Selection Process

The objective review process provides an objective evaluation of applications to the individuals responsible for making award decisions. The highest ranked applications receive consideration for award within available funding ranges. HRSA may also consider assessment of risk and the other pre-award activities described in Section 3 below. See section 6.3 of HRSA's *SF-424 Two-Tier Application Guide* for more details. In addition to the ranking based on merit criteria, HRSA approving officials will apply other factors described below in selecting applications for award.

Rural/Urban Distribution of Awards

Aggregate awards in FY 2023 will be made to ensure that the ratio of rural to urban target populations is not less than two to three or greater than three to two as set forth in section 330(e)(6)(B) of the PHS Act. To ensure this distribution, HRSA may award funding to applications out of rank order.

Compliance Status[45]

You will not receive SBSE funding if you meet any of the following exclusion criteria at the time HRSA makes funding decisions:

- You are no longer an active Health Center Program (H80) award recipient under sections 330(e), (g), (h), and/or (i), or

- You have an active 30-day condition on your H80 award related to Health Center Program requirement area(s).

3. Assessment of Risk

HRSA may apply special conditions of award or 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).

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[45] See Chapter 2: Health Center Program Oversight of the Compliance Manual.

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

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

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 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 as described in 45 CFR § 75.205 HHS Awarding Agency Review of Risk Posed by Applicants.

HRSA will report to FAPIIS a determination that an applicant is not qualified ([45 CFR § 75.212](#)).

VI. Award Administration Information

1. Award Notices

HRSA will release the Notice of Award (NoA) on or around the start date of September 1, 2023. See Section 6.4 of HRSA's *SF-424 Two-Tier Application Guide* for additional information.

2. Administrative and National Policy Requirements

See Section 2.1 of HRSA's *SF-424 Two-Tier Application Guide*.

If you are successful and receive a NoA, in accepting the award, you agree that the award and any activities thereunder are subject to:

- All provisions of [45 CFR part 75](#), currently in effect or implemented during the period of the award,

- Other federal regulations and HHS policies in effect at the time of the award or implemented during the period of award, and

- Applicable statutory provisions.

Accessibility Provisions and Non-Discrimination Requirements

Should you successfully compete for an award, recipients of federal financial assistance (FFA) from HHS will be required to complete an HHS Assurance of Compliance form (HHS 690) in which you agree, as a condition of receiving the grant, to administer your programs in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, age, sex and disability, and agreeing to comply with federal conscience laws, where applicable. This includes ensuring that entities take meaningful steps to provide meaningful access to persons with limited English proficiency; and ensuring effective communication with persons with disabilities. Where applicable, Title XI and Section 1557 prohibit discrimination on the basis of sexual orientation, and gender identity. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html and https://www.hhs.gov/civil-rights/for-individuals/nondiscrimination/index.html.

- For guidance on meeting your legal obligation to take reasonable steps to ensure meaningful access to your programs or activities by limited English proficient individuals, see https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html and https://www.lep.gov.
- For information on your specific legal obligations for serving qualified individuals with disabilities, including providing program access, reasonable modifications, and to provide effective communication, see http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html.
- HHS funded health and education programs must be administered in an environment free of sexual harassment, see https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html.
- For guidance on administering your project in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see https://www.hhs.gov/conscience/conscience-protections/index.html and https://www.hhs.gov/conscience/religious-freedom/index.html.

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

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

Executive Order on Worker Organizing and Empowerment

Pursuant to the [Executive Order on Worker Organizing and Empowerment](#) (E.O. 14025), HRSA strongly encourages applicants to support worker organizing and collective bargaining and to promote equality of bargaining power between employers and employees. This may include the development of policies and practices that could be used to promote worker power. Applicants can describe their plans and specific activities to promote this activity in the application narrative.

Requirements of Subawards

The terms and conditions in the NoA apply directly to the recipient of HRSA funds. The recipient is accountable for the performance of the project, program, or activity; the appropriate expenditure of funds under the award by all parties; and all other obligations of the recipient, as cited in the NoA. In general, the requirements that apply to the recipient, including public policy requirements, also apply to subrecipients under awards, and it is the recipient's responsibility to monitor the compliance of all funded subrecipients. See [45 CFR § 75.101 Applicability](#) for more details.

Health Information Technology (IT) Interoperability Requirements

Successful applicants under this NOFO agree that:

Where award funding involves:	Recipients and subrecipients are required to:
Implementing, acquiring, or upgrading health IT for activities by eligible clinicians in ambulatory settings, or hospitals, eligible under Sections 4101, 4102, and 4201 of the HITECH Act	Utilize health IT certified under the ONC Health IT Certification Program, if certified technology can support the activity. Visit https://www.healthit.gov/topic/certification-ehrs/certification-health-it to learn more.

3. Reporting

Award recipients must comply with Section 7 of HRSA's *SF-424 Two-Tier Application Guide* **and** the following reporting and review activities:

1) **Progress Reports**. You will submit semi-annual progress reports to describe accomplishments and barriers in implementing your proposed project. These reports will be informed by your [Project Work Plan](#), and may include updates on operational status of new site(s), activities to support the delivery of primary health care services, and progress of minor A/R (as applicable). More information will be available in the NoA.

2) **Non-Competing Continuation**. You will submit a non-competing continuation (NCC) progress report to trigger the release of year 2 funding (dependent upon

Congressional appropriation, satisfactory performance, and a determination that continued funding would be in the best interest of the Federal Government). You will receive an email via EHBs when it is time to begin working on the NCC.

3) **Final Report.** You will submit a final progress report, along with a final expenditure report, within 90 days of the end of the 2-year period of performance.

4) **Integrity and Performance Reporting.** The NoA will contain a provision for integrity and performance reporting in [FAPIIS](), as required in [45 CFR part 75 Appendix XII]().

Progress as demonstrated in your semi-annual progress reports and calendar years 2023 and 2024 UDS data related to your increase in the number of school-based service site patients[46] will inform HRSA's decision on whether and, if so, at what level to continue your SBSE funding beyond this award's initial 2-year period of performance. Note that the OMB revisions to Guidance for Grants and Agreements termination provisions located at [2 CFR § 200.340 - Termination]() apply to all federal awards effective August 13, 2020. No additional termination provisions apply unless otherwise noted.

VII. Agency Contacts

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

Brian Feldman
Senior Grants Management Specialist
Division of Grants Management Operations
Office of Federal Assistance Management (OFAM)
Health Resources and Services Administration
Phone: (301) 443-3190
Email: [bfeldman@hrsa.gov]()

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

Marylen Rimando
Public Health Analyst
Office of Policy and Program Development
Bureau of Primary Health Care (BPHC)
Health Resources and Services Administration
Phone: (301) 594-4300
Contact: [BPHC Contact Form]()
Web: [https://bphc.hrsa.gov/funding/funding-opportunities/school-based-service-expansion]()

You may need assistance when working online to submit your application forms

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[46] Reported annually in UDS as the total number of "school-based service site patients" aggregated to the health center level. See Table 4, line 24 in the [2022 UDS Manual]() for more information.

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
Phone: 1-800-518-4726 (International callers dial 606-545-5035)
Email: support@grants.gov
Self-Service Knowledge Base

For assistance with submitting the remaining information in the EHBs, contact the HRSA Contact Center, Monday–Friday, 7 a.m. to 8 p.m. ET, excluding federal holidays at:

HRSA Contact Center
Phone: (877) 464-4772 / (877) Go4-HRSA
TTY: (877) 897-9910
Web: BPHC Contact Form

VIII. Other Information

Technical Assistance

See TA details in Executive Summary.

Tips for Writing a Strong Application

See Section 5.7 of HRSA's *SF-424 Two-Tier Application Guide*.

Appendix A: One-Time Funding Request Information

Within the maximum award amount of $250,000, or $350,000 if proposing a new school-based service site, you may request to use up to $150,000 in funding for one-time costs for equipment and/or minor alteration/renovation (A/R), if necessary to expand services at the school-based service site(s). If requesting one-time funding, you must enter the amount on the SF-424A: Budget Information Form in the Equipment and/or Construction object class categories.

Note: Within 120 days of the Notice of Award, new school-based sites must be operational and begin providing services, regardless of the proposed one-time funding activities.

One-time funding cannot be used for new construction activities (e.g., additions or expansions, work that requires ground disturbance such as new parking surfaces or expansion of a building footprint), the installation of trailers/pre-fabricated modular units, or major A/R. For a minor A/R activity, the total federal and non-federal cost of the A/R project must be less than $500,000, excluding the cost of moveable equipment.

Equipment includes moveable items that are non-expendable, tangible personal property (including information technology systems) having a useful life of more than 1 year and a per-unit acquisition cost of $5,000 or more. Moveable equipment can be readily shifted from place to place without requiring a change in the utilities or structural characteristics of the space.

Any costs involving the attachment of equipment, flooring, paint, or carpeting to any stationary structure is considered alteration/renovation (not equipment) and must be included in your total A/R project costs.

Permanently affixed equipment (e.g., heating, ventilation, and air conditioning (HVAC), generators, signs in or on the existing building, lighting) is considered fixed equipment and is categorized as minor A/R (not equipment).

An allowable minor A/R project must be a stand-alone project consisting of work in an existing facility required to:

- Install fixed equipment;
- Modernize, improve, and/or reconfigure the interior arrangements or other physical characteristics of a facility;
- Repair and/or replace the exterior envelope;
- Improve accessibility such as curb cuts, ramps, or widening doorways; and/or
- Address life safety requirements.

If you are requesting one-time funding, you must complete the Equipment List Form (if proposing equipment), and the minor A/R Project Cover Page, Environmental Information Documentation (EID) Checklist, and Other Requirements for Sites forms with accompanying attachments (if proposing minor A/R). See the SBSE Technical Assistance webpage for detailed instructions for the required forms and attachments.

Appendix B: Applicant Page Limit Worksheet

The purpose of this worksheet is to give you a tool to ensure the number of pages uploaded into your application is within the specified page limit. Do not submit this worksheet as part of your application.

The Standard Forms listed in column 1 do not count against the page limit. Attachments listed in column 2 do count toward the page limit. Program-specific forms submitted in EHBs and the attachments uploaded to those forms do not count against the page limit. For example, the documents attached to the A/R Project Cover Page (A/R project budget, schematics) do not count towards the page limit. However, if you include them under Attachment 5, they do count toward the page limit.

Standard Form Name Submitted in Grants.gov or EHBs (Forms do not count against the page limit)	Attachment File Name (Unless otherwise noted, attachments count against the page limit)	Optional or Required	# of Pages Applicant Instruction – enter the number of pages of the attachment
Grants.gov Application for Federal Assistance (SF-424 - Box 14)	Areas Affected by Project (Cities, Counties, States)	Optional	*My attachment = ___ pages*
Grants.gov Application for Federal Assistance (SF-424 - Box 16)	Additional Congressional District	Optional	*My attachment = ___ pages*
Grants.gov Application for Federal Assistance (SF-424 - Box 20)	Is the Applicant Delinquent On Any Federal Debt?	Required if "Yes"	*My attachment = ___ pages*
Grants.gov Project/Performance Site Location Form	Additional Performance Site Location(s)	Optional	*My attachment = ___ pages*
EHBs	Project Narrative	Required	*My attachment = ___ pages*
EHBs	Budget Narrative	Required	*My attachment = ___ pages*
EHBs Appendices	Attachment 1: School Commitment Documentation	Required	*My attachment = ___ pages*

Standard Form Name Submitted in Grants.gov or EHBs *(Forms do not count against the page limit)*	Attachment File Name *(Unless otherwise noted, attachments count against the page limit)*	Optional or Required	# of Pages *Applicant Instruction – enter the number of pages of the attachment*
EHBs Appendices	Attachment 2: Map of New School-Based Service Site Location	As applicable	*My attachment = _____ pages*
EHBs Appendices	Attachment 3: Health Center Letter of Support	As applicable	*My attachment = ___ pages*
EHBs Appendices	Attachment 4: Summary of Contracts and Agreements	As applicable	*My attachment = ___ pages*
EHBs Appendices	Attachment 5: Other Relevant Documents	As applicable	*My attachment = ___ pages*
EHBs Program-Specific Forms	Varied attachments to forms, as applicable	Required as Applicable	*Does not count against the page limit.*
# of Pages Attached that Count Toward the Page Limit		Applicant Instruction: Total the number of pages in the boxes above.	
Page Limit for HRSA-23-097 is 60 pages		**My total = ____ pages**	