

American Recovery and Reinvestment Act of 2009,
Community Health Peer Learning Program (CHP)

Office of the National Coordinator for Health Information Technology
Department of Health and Human Services

Release Date: February 3, 2015

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Opportunity Overview

Funding Opportunity Announcement Title: Community Health Peer Learning Program

Federal Funding Agency: Office of the National Coordinator for Health Information Technology (ONC), U.S. Department of Health and Human Services (HHS)

Announcement Type: New Award

Funding Opportunity Number: CLP-CL-15-001

Catalog of Federal Domestic Assistance (CFDA) Number: 93.727

Statutory Authority: American Recovery and Reinvestment Act of 2009, Division A, Title XIII - Health Information Technology, Subtitle C—Public Health Service Act (PHSA), Title XXX, Subtitle B, Section 3011

Funding available: \$1,700,000

Anticipated number of awards: One (1) award

Period of Performance: Two (2) years (24 months)

Important Dates: Table 1 summarizes important information regarding this FOA, including the required submission and award dates.*

Table 1.FOA Summary Information

Public FOA Release	February 3, 2015
Notice of Intent to Apply Due	March 2, 2015 at 11:59 PM ET*
Applications Due	April 6, 2015 at 11:59 PM ET*
Estimated Award Announcements	May 1, 2015
Anticipated Project Start Date	June 1, 2015

* All times are Eastern Time.

ONC will conduct an informational session to provide information related to this FOA. The purpose of the session is to:

- Discuss the background, purpose and scope of services requested in the FOA;
- Explain the eligibility and application requirements;
- Describe the application review process; and
- Provide an opportunity for interested parties to ask questions about the FOA.

Further details about the informational session – including the date, time, and instructions for joining – are available at: <http://healthit.gov/newsroom/community-health-peer-learning-program>

Executive Summary

This funding opportunity announcement (FOA) describes a full and open competition to make a single award, through a cooperative agreement, with the Office of the National Coordinator for Health Information Technology (ONC). The awardee will manage the Community Health Peer Learning Program, funded under the American Recovery and Reinvestment Act of 2009 (Recovery Act), Division A, Title XIII - Health Information Technology, Subtitle C—Public Health Service Act (PHSA), Title XXX, Subtitle B, Section 3011.

U.S. Department of Health and Human Services (HHS) activities support efforts to increase access to health care, protect those in greatest need, expand educational opportunities, and modernize the nation's infrastructure. Total funding available under this FOA is \$1,700,000. The Community Health Peer Learning Program will leverage and build upon health care delivery and practice transformation programs that have been introduced or have been updated since the Affordable Care Act (ACA) was signed into law on March 30, 2010. The goal of the Community Health Peer Learning Program is to identify data solutions, accelerate local progress, and disseminate local learning to other communities through the development of shared learning resources around population health challenges.

1. Funding Opportunity Description

1.1 Purpose and Background

1.1.1 Purpose

The purpose of this FOA is to address health challenges at the population level through a community-based collaborative approach. The Community Health Peer Learning Program supports HHS efforts to promote the development of a nationwide health information infrastructure built on the sustainable efforts of local providers and communities.

During the initial phase of the program, the awardee will release a call for applications to identify and select up to ten (10) communities¹ across the care management continuum to participate in the Community Health Peer Learning Program. During the following twelve to eighteen months, selected communities will complete a peer learning program to achieve the following:

¹ For the purpose of this FOA, the definition of community may include, but is not limited to the following: a unified body of individuals living in a particular area with geographic boundaries; people with common characteristics or persons having common clinical and/or health interests.

- Develop and begin the implementation² of an impactful, measurable, and actionable community work plan to improve the use of health information through data aggregation, data portability, and data analysis on a self-identified population health challenge³.
- Access and cultivate cross-community partnerships around population health challenges through peer learning, subject matter expert (SME) guidance, stakeholder engagement,⁴ and development and dissemination of key resources highlighting best practices, case studies, and scalable strategies to assist with implementing the actionable community work plan.

1.1.2 Background

The U.S. Department of Health and Human Services (HHS) has a critical responsibility to advance the connectivity of electronic health information and the interoperability of health information technology (health IT). This work has become particularly pressing with the need to address the national priority of better and more affordable health care, leading to improved population health. Achieving this goal requires a strong, flexible health IT ecosystem that can support transparency and decision-making through enhancing the use of data, reducing redundancy, and informing payment reform, all of which will help transform care delivery.

Previously, grantees under the Beacon Community Cooperative Agreement Program Funding Opportunity Announcement of 2009, HHS-2010-ONC-BC-004, worked to demonstrate how health IT investments and meaningful use of electronic health records (EHR) advanced the vision of patient-centered care, while achieving the three-part aim of better health, better care, and lower costs. ONC provided \$250 million over three years to 17 communities throughout the United States that had made inroads in the development of secure, private, and accurate systems of EHR adoption and health information exchange. Each of the 17 communities actively pursued the following areas of focus:

1. Building and strengthening the health IT infrastructure and exchange capabilities within communities, positioning each community to pursue a new level of sustainable health care quality and efficiency;

² Beginning implementation may include activities such as signed participation agreements and data exchange actions based on existing HIT infrastructure. Additional information on implementation will be included in the solicitation to communities.

³ Population health challenge is defined as addressing communities' health inequities or disparities on health status and improving overall quality of care.

⁴ Stakeholders may include, but are not limited to, primary care providers (PCPs), practicing clinicians, hospitals, public and private payers, consumers, local and state public health departments, safety net providers, community- and non-government-based organizations, long term care and support services, employers, academic institutions, charitable foundations, industry, laboratories, pharmacies, employers, quality improvement organizations, hospital associations, government entities, and medical societies.

2. Translating investments in health IT to measurable improvements in cost, quality, and population health; and
3. Developing innovative approaches to performance measurement, technology, and care delivery to accelerate evidence generation for new approaches.

Collectively, the 17 Beacon Communities touched nearly 9,000 providers and over 8 million patient lives.

Today, progressive changes to the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs and the establishment of new programs under the ACA require the use of health IT to improve and coordinate care, develop and sustain data infrastructure necessary for multi-payer value-based payment, and integrate clinical and claims data to enable data analytics for informed decision making and streamlined reporting. These improvements depend on information that is useful and accessible to those who provide, receive, and coordinate care.

As a result, it is important that the Community Health Peer Learning Program supports the advancement of health IT. The Community Health Peer Learning Program will facilitate this work and provide funding to communities experiencing population health challenges to demonstrate a vision of the future where hospitals, clinicians, and patients can achieve measurable improvements in health care delivery, safety, and efficiency through the improved use of information.

1.2 Program Description

The Community Health Peer Learning Program involves funding an awardee or organization, a Community Health Program Manager external to ONC, to work with ONC, communities, national experts, local technical experts, consumers, and other stakeholders to facilitate shared community learning and problem solving through a collaborative learning program. Participant program communities will focus on advancing population health management approaches through the improved use of health IT within and across local, regional, and state settings. Communities further along the population health management implementation continuum—who have demonstrated effective use of health information—will participate in disseminating replicable strategies and approaches. Shared learning resources will be disseminated and made broadly available post-award.

1.3 Project Approach

1.3.1 Program Overview

The Community Health Peer Learning Program will fund one award of \$1,700,000 through a cooperative agreement with ONC. The awardee will work with selected communities to identify challenges and develop strategies related to population health through a collaborative peer learning program. These challenges and strategies will be captured through learning guides and case studies to be shared and disseminated broadly.

Peer Learning Communities

The awardee will identify, through a public call for application, communities with population health management challenges that can be addressed through improved use of information, such as data aggregation, data portability, or data analysis to improve the overall population health within the community.

Communities participating in the Community Health Peer Learning Program will consist of two broad program categories:

- *Participating*. Participating Communities will identify a population health management challenge and act in partnership with community and state stakeholders to establish strategies to create an impactful, measureable, and actionable plan around community-level data aggregation, portability, and analysis. Communities must demonstrate the ability to leverage existing community-based resources and health IT infrastructure and systems. Participating Communities will be selected using a public call for applications process that is led and managed by the awardee.
- *Subject Matter Expert (SME)* communities will be those that can provide concise and substantive evidence about their successful experiences addressing population health management challenges, where success was achieved through improved use of information.

Selected communities will receive funding through a sub-recipient agreement to support active and meaningful participation as members of the Community Health Peer Learning Program.

Types of participation may include:

- For *Participating Communities*, participation will allow the community to work with SME Communities, national experts, local technical experts, consumers, other stakeholders, the awardee, and ONC to develop an impactful and actionable plan to address and improve a self-identified population health management challenge. Participating Communities will participate in two (2) national meetings with SME Communities, ONC, and other stakeholders.
 - Sub-recipient agreements will supplement program activities such as participant travel expenses, community-level meeting support, and development of work products, including, but will not be limited to, case studies and community work plans.
- For *SME Communities*, participation will allow the awardee and ONC to conduct an in-depth assessment of key strategies leading to successful population health outcomes and document the data-specific processes, infrastructure, and systems that contributed to the community's success. Work products will include development of an in-depth learning guide for use by all Community Health Peer Learning Program participants and ONC.
 - Sub-recipient agreements will supplement program activities such as participant travel expenses, participation, and development of work products that may include, but will not be limited to webinars and an in-depth learning guide.

1.4 Program Detail

The first year of the program will include the following activities:

- Establishing the cooperative agreement and onboarding the awardee.
- Designing the communications, strategy, and project management plans for a nationwide call for applications. The call for applications will seek communities that have identified a population-level health management challenge that can be improved through the enhanced use of meaningful and actionable data related to population health and health care system reform.
- Selecting communities to participate in the Community Health Peer Learning Program. Participating Communities must articulate a population-level health management challenge that has the following characteristics:
 - The health management challenge must be likely to respond to interventions that will result in potential improvement in population health, quality of care, and decreased costs within the next three to five years;
 - Data for measuring the health management challenge must be available for major segments of the population at the community, state, and/or sub-state level; and
 - High population health management burden and societal costs should be reduced, through strategies such as:
 - Integrating long-term and post-acute care settings;
 - Sharing electronic care planning across settings;
 - Implementing quality measure reporting across community care settings; and
 - Aggregating clinical and claims data to support value-based payment models.
- Conducting pre-meeting functions, including, but not limited to:
 - Incorporating SME Communities in-depth learning through interviewing and capturing significant strategies and processes to facilitate an agenda for the two (2) meetings to assist Participating Communities in developing their action plans;
 - Partnering with SME Communities to produce 1-3 webinars highlighting challenges, and creating an in-depth learning guide to inform the meetings;
 - Creating program specific resources, such as:
 - An implementation case study on each Participating Community; and
 - An SME in-depth learning guide to inform meetings and which can be shared broadly through ONC.
- Establishing, managing, and closing-out all aspects of two 3-5 day in-person meetings of Participating and SME Communities, local/state/federal partners, and experts supporting the program.
- Providing substantive, appropriate management reporting throughout the project.

At the end of year two, the Community Health Peer Learning Program Participating and SME Communities will have completed a peer learning program with the awardee and ONC. ONC expects to realize the following achievements as a result of this process:

- Developed an impactful, measureable, and actionable plan to implement solutions to specific population-level health management challenges using improved data access and flow.
- Worked with the awardee to develop resources, such as the implementation case study for Participating Communities and an in-depth learning guide from SME Communities. These resources will be shared with the Community Health Learning Program participants and more broadly.
- Accessed and cultivated cross-community partnerships that address multiple population health challenges through peer learning, SME guidance, and program learning.

1.5 Project Evaluation

1.5.1 Project Evaluation and Measurement

This FOA provides applicants with flexibility to propose methods that support and enable communities to engage in innovative and novel approaches through a peer learning program that addresses population health challenges. However, ONC will measure the success of the awardee through milestones, including, but are not limited to, the following:

1. Successful program implementation within defined timelines and budget to include:
 - a. Release of public call for applications,
 - b. Selection of Participating and SME Communities,
 - c. Pre-/post meeting workshops/calls/webinars, and
 - d. Organizing and managing all aspects of the two (2) national meetings.
2. Total number of Participating Communities developing and implementing processes and system-level changes in relation to identified information and data aggregation, flow, and use around population health management challenges.
 - a. Percentage of Participating and SME Communities successfully meeting determined milestones and/or reporting on success measures.
3. Total number of ONC-approved program resources developed, generated, and created, such as case studies, webinars, and in-depth learning guides.
 - a. Potential metrics could include, but are not limited to:
 - i. Number of Community Health Peer Learning Program resources downloaded, cited, or shared by social media cites within 6 months of posting.
 - b. Produced resources that can be used across program communities:
 - c. Minimum number of three (3) communities represented within each resource, and
 - d. Number of resources that are generalizable across Participating and SME Communities and at the national level.
 - e. Specific challenge resources that address nationally-recognized problems that are represented across multiple program communities.
 - f. Minimum number of population health management resources made available to the public via 508 compliance and working with ONC to post on HealthIT.gov.

For each of the milestones, ONC will work with the awardee and determine the appropriate targets and reporting requirements.

Additional requirements can be found in subsequent sections.

2 Award Information

2.1 Summary of Funding

Type of Award	Cooperative Agreement
Total Amount of Funding Available	\$1,700,000
Number of Awards	One (1) award
Project Period of Performance:	Two (2) years (24 months)
Estimated Start Date	June 1, 2015

ONC reserves the right to increase the award under this announcement, consistent with Agency policy, if additional funding becomes available after the original selection is made. Any additional funding will be made no later than twelve (12) months after the original selection decision.

2.2 Performance Evaluation

The Awardee's performance will be evaluated on a continuous basis by ONC to ensure that the project is meeting program objectives.

2.3 Award Type

The funding instrument used for this program will be the cooperative agreement, an award type in which substantial ONC programmatic involvement with the grantee ("grantee" and "awardee" are used interchangeably throughout this document) is anticipated during the performance of the activities. Under the cooperative agreement, ONC's objective is to support and stimulate the grantee's activities by involvement in the program and otherwise working with the grantee in a partnership role; it is not to assume direction, prime responsibility, or a dominant role in the activities. Consistent with this concept, the dominant role and prime responsibility resides with the grantee for the project as a whole, although specific tasks and activities may be shared among the grantee and the ONC as defined below.

3. Eligibility Information

3.1 Eligible Applicants

Applicants must be a United States-based for profit or nonprofit institution, organization, agency, or group thereof.

4. Application and Submission Information

4.1 Address to Request Application Package

The applicants will be able to download a copy of the application packet, complete it off-line, and then upload and submit the application electronically via: <http://www.grants.gov>.

APPLICATIONS WILL NOT BE ACCEPTED THROUGH ANY WEBSITE AND WILL NOT BE ACCEPTED THROUGH PAPER MAIL, COURIER, OR DELIVERY SERVICE.

- THE APPLICANTS ARE STRONGLY ENCOURAGED TO COMPLETE AND SUBMIT APPLICATIONS AS FAR IN ADVANCE OF THE SUBMISSION DEADLINE AS POSSIBLE. THE APPLICATION INCLUDING ALL REQUIRED ATTACHMENTS AND INCLUDED FILES FOR POTENTIAL CONSIDERATION IN THE REVIEW PROCESS MUST BE RECEIVED BY 11:59 PM EASTERN TIME ON THE DATE SPECIFIED IN SECTION 4.3: SUBMISSION DATES AND TIMES BELOW. All applicants should have a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number and register in the Systems for Award Management (SAM). Allow a minimum of five (5) days to complete the SAM registration.
- Grants.gov will automatically send each applicant a tracking number and date of receipt verification electronically once the application has been successfully received and validated in Grants.gov. After your application is retrieved by ONC from Grants.gov, a return receipt will be emailed to the awardee contact. This will be in addition to the validation number provided by Grants.gov.

4.2 Content and Form of Application Submission

4.2.1 Project Abstract

Applicants must include an abstract of the application of no more than two (2) pages, single spaced, and has a maximum of 500 words. This abstract is often submitted to provide information to the public and Congress and should present a high-level project summary.

Applicants should prepare a clear, accurate, and concise abstract that can be understood without reference to other parts of the application and which gives a description of the proposed project, including: the project's goal(s), objectives, overall approach (including partnerships), anticipated outcomes, products, and duration.

The applicant must place the following information at the top of the Project Abstract. (This information is not included in the 500 word maximum):

- Project Title
- Applicant Name
- Applicant Address
- Contact Name
- Contact Phone Numbers (Voice, Fax)
- E-Mail Address
- Web Site Address, if applicable

4.2.2 Project Narrative

The Project Narrative is an important aspect of the application. It is used to determine whether the application meets the minimum requirements for funding, and it will serve as primary basis for the review. The Project Narrative must provide a clear and concise description of goals, objectives, strategy, and outcomes. The narrative must provide the reader with an understanding of how the applicant will:

- Develop and disseminate learning resources;
- Support, design and convene the Community Health Peer Learning Program;
- Engage and support program communities;
- Partner with ONC throughout the program;
- Describe plans to share results with other communities and states and territories; and
- Describe how this work can improve individual and community health outcomes.

The Project Narrative must be double-spaced, printable on 8 ½” x 11” pages with 1” margins on all sides, use either Calibri or Time New Roman font, and use a font size of not less than 11 point. Smaller font sizes may be used to fill in the Standard Forms and Sample Formats, and also for exhibits and figures, though all text in exhibits and figures must not be below 8 point font. Project Narratives should be no more than 15 pages. ONC will not review Project Narrative pages beyond the allowed 15 pages. The Project Abstract will not be counted as part of the narrative. Key Staff Resumes/Curriculum Vitae (CV) are required and should be referenced in the Project Narrative, with resume/CV copies placed in Appendix B. Neither Appendix A nor Appendix B will be counted toward the Project Narrative’s 15-page limit.

The project narrative must conform to the following outline and include the information required under each section:

- Project Abstract (<500 words)
- Understanding the Program Purpose (<1 page)
- Organizational Capacity and Project Management Acumen (<4 pages)
- Proposed Approach and Work Plan (<4 pages)
- Sub-recipient Award Management, Evaluation, and Feedback Structure (<2 pages)
- Collaborator Involvement and Partnerships (<1 page)
- Process for Dissemination of Learning Resource (<2 pages)

- Budget Justification and Budget Forms (<1 page)
- APPENDIX A: Copies of Letters of Commitment/Support
- APPENDIX B: Key Staff/Partner Resumes/CVs

Project Abstract:

Section 1: Understanding the Program Purpose (<1 page)

This section must describe, from the applicant’s perspective, the benefits of making these funds available to communities. This section may contain:

- Defined core set of community-level population health management challenges,
- Topics the applicant understands are prominent, and
- Defined measures of success considered feasible and appropriate.

Section 2: Organizational Capacity and Project Management Acumen (<4 pages)

This section must clearly demonstrate that the organizational and personnel capabilities of the applicant support its ability to implement the program. It also must demonstrate the applicant’s ability to bring together all of the resources, including the technical infrastructure and capabilities, to perform the proposed work. This section must include:

- The organization’s capabilities relevant to the program, including the partners and collaborative relationships with healthcare stakeholders the applicant has that will support the program’s success.
- Relevant organizational resources available to perform the proposed work, such as leveraging previous technical infrastructure investments, facilities, equipment, and related resources. Provide written descriptions of types of resources or tools developed or created and describe their impact on success related to improving measured outcomes.
- Demonstration of program management acumen, including a work breakdown structures and approach to completing deliverables, how the call for applications will be developed, how scope will be developed and controlled, data collection and reporting, project management techniques, communications methods and strategies, and partnership building.
- Specify who would have day-to-day responsibility for key tasks such as: program leadership; monitoring the program’s on-going progress; preparing management and status reports; communicating with program communities, other collaborating organizations, and ONC.
- The capabilities of the applicant not included in other portions of the project narrative, such as any current or previous relevant experience and/or the record of the project team in conducting similar or applicable proposed activities.
- Demonstration of support from key program partners. For example, a letter of support or a letter of commitment from specific healthcare stakeholders. All such documents should be included in a referenced bulleted list highlighting importance of partnership to the success of the program within this section. Copies of letters should be placed within Appendix A.
- A description of the qualifications of the proposed key staff. Resumes/CVs are required and should be included as attachments within Appendix B.

Section 3: Proposed Approach and Work Plan (<4 pages)

- This section must set out the approach and strategy proposed to address the applicant's Understanding of Program Purpose. It also must explain the timeline in a way that fully demonstrates feasibility and includes clear benchmarks and performance metrics to achieve program goals. This section must also include: A clear and concise description of the applicant's approach for establishing and engaging community members within the peer learning program to address a population health management challenge.
- The work plan must clearly show the relationship of each work plan element with that of the proposed approach. The plan also must include tasks, activities, dependencies, timelines, resources, partners, deliverables, and major milestones. It also must align with the proposed budget and correlate to proposed design specification of the Community Health Peer Learning Program. The work plan also should specify the tasks and activities that the applicant expects partners and ONC staff to perform.
- Five key applicant evaluation criteria through which ONC can measure applicant success.
- Any major barriers the applicant anticipates encountering and approaches to overcome them.

Section 4: Sub-recipient Award Management, Evaluation, and Feedback Structures

(<2 pages)

This section must demonstrate the applicant's ability to manage a national program with respect to measurement, reporting, evaluation, and employing mechanisms for gathering and incorporating feedback. This section should:

- Describe the applicant's approach to monitor and track community progress on program tasks and objectives;
- Present a clear description of program success criteria and how program outcomes and impact will be measured, evaluated, and reported; and
- Describe four key elements, at minimum, the applicant would use as a set of criteria for measuring programmatic success.

Section 5: Collaborator Involvement and Partnerships (<1 page)

This section must describe the role and composition of any strategic partners and collaborators the applicant plans to involve in implementing the approach and work plan and detail why their contribution is integral to program success.

Section 6: Process for Dissemination of Learning Resources (<2 pages)

This section must fully describe the ways in which the program is broadly applicable to and/or replicable in other communities, states, and territories by explaining how the results of the program will be disseminated, replicated, and used nationally. The section must:

- Clearly describe the applicant's understanding of the community learning process to support a population health management analysis;
- Discuss how the applicant will develop resources such as case studies, webinars, white papers, and how these resources can and will be disseminated across the program and to local, state, and federal partners;
- Present the applicant's ability to distill complex technical issues, such as health IT and policy challenges, as well as the applicant's ability to synthesize recommendations and

lessons learned to community, state, and federal partners through required reports and presentations.

Section 7: Budget Justification and Budget Forms (<1 page)

All applicants must provide a detailed proposed budget that includes all costs necessary to complete their proposed project activities. The budget narrative/justification must include the allowable costs that will be incurred in support of the cooperative agreement. Costs may not be incurred until the beginning date of the award, as indicated on the official Notice of Award. Whether direct or indirect, costs must be allowable, allocable, reasonable, and necessary under the applicable OMB Cost Circulars: (See, <http://www.whitehouse.gov/omb/circulars>) and based on programmatic requirements for administering the program as outlined in the Recovery Act.

The duration of this award is for a maximum of 24 months (2 Years). The budget and justification must reflect the costs for the entire project period and must include:

- An explanation of how the proposed budget supports the proposed program and is reasonable to meet the program's needs and is as cost-efficient as possible;
- How proposed costs support program activities; and
- A description of how the proposed expenditures align with the work plan.

Budget Forms:

All applicants must complete the following budget forms to include the costs associated with the proposed project activities. These forms will be submitted through grants.gov as part of the application package and will include:

- Application for Federal Assistance SF-424,
- Budget Information for Non-Construction Programs SF-424A,
- Assurances for Non-Construction Programs SF-424B, and
- Disclosure of Lobbying Activities SF-LLL.

Note that these forms do not replace program-specific guidance provided in this funding opportunity announcement with additional instructions found under Appendix A.

Appendix A: Letters of Commitment/Support

Include confirmation of the commitments to the project (should it be funded) made by key collaborating organizations and agencies. Any organization that is specifically named to have a significant role in carrying out the program should be considered an essential collaborator.

Appendix B: Key Staff Resumes/CVs

Include key staff and Partner Resumes and CVs here. Include only those Resumes and CVs for Key staff referenced under Organizational Capacity and Project Management Acumen.

4.3 Submission Dates and Times

Applications must be submitted electronically via <http://www.grants.gov> by 11:59 P.M. Eastern Time April 6, 2015.

4.4 Application Responsiveness and Completeness Criteria

Applicants that do not meet the following completeness criteria will be administratively eliminated and will not be sent forward for objective review:

- The applicant meets the eligibility criteria.
- The application is received by the deadline required by 11:59 P.M. Eastern Time April 6, 2015 through <http://www.grants.gov>.
- The application meets the formatting and length requirements.
- The application presents a defined core set of community-level population health management challenges and topics that the applicant understands.
- Appendices and attachments are not used as a mechanism to exceed page limits of the Project Narrative.

4.5 Notice of Intent to Apply

Applicants are strongly encouraged to submit a non-binding e-mail notice of intent to apply for this funding opportunity to assist ONC in planning for the application review process by 11:59 P.M. Eastern Time, March 2, 2015. Only the primary applicant should submit this notice. This notice should simply identify the name of the applicant organization, the city and state in which the applicant organization is located, and identify the Funding Opportunity Announcement number CLP-CL-15-001 and Title: Community Health Peer Learning Program.

Notices of Intent should be sent to CommunityHealthFOA@hhs.gov by 11:59 P.M. Eastern Time, March 2, 2015.

4.6 How to Apply Information

4.6.1 Address to Request Application Submission

Application materials will be available for download at <http://www.grants.gov>. ONC requires full applications for all announcements to be submitted electronically through <http://www.grants.gov>.

APPLICATIONS WILL NOT BE ACCEPTED THROUGH ANY OTHER WEBSITE AND WILL NOT BE ACCEPTED THROUGH PAPER MAIL, COURIER, OR DELIVERY SERVICE.

APPLICANTS ARE STRONGLY ENCOURAGED TO COMPLETE AND SUBMIT APPLICATIONS AS FAR IN ADVANCE OF THE SUBMISSION DEADLINE AS POSSIBLE. THE APPLICATION INCLUDING ALL REQUIRED ATTACHMENTS AND INCLUDED

FILES FOR POTENTIAL CONSIDERATION IN THE REVIEW PROCESS MUST BE RECEIVED BY 11:59 P.M. EASTERN TIME ON APRIL 6, 2015.

4.6.2 Application procedures

- Applicants must access the electronic application for this program via <http://www.grants.gov>. Search the downloadable application page by the Funding Opportunity Number CLP-CL-15-001 or CFDA number (93.727).
- Applicants should have a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number and register in the Systems for Award Management (SAM). Allow a minimum of five (5) days to complete the registration.
- Submit all documents electronically, including all information included on the SF424 and all necessary assurances and certifications.
- Ensure that the application complies with any page limitation requirements described in this FOA Guidance.
- After electronically submitting your application, an automatic email notification will be sent to confirm that the application was received. This notification does not provide assurance that your application was complete, only that the application was received.
- After ONC reviews the submission, a return receipt will be emailed to the applicant, indicating the files that were received and able to be successfully opened and read. Organizations applying for federal grants will need to be registered with the System for Award Management (SAM). You can register with the SAM online at <http://www.sam.gov>.

If you have already registered with SAM but have not renewed your registration in the last twelve (12) months, you will need to renew your registration at <http://www.sam.gov>.

4.6.3 Grants.gov Registration

Registration with Grants.gov can take several days. Applicants are strongly encouraged to locate and test current logins and passwords for this system well in advance of the deadline date. For assistance with Grants.gov, please contact them at support@Grants.gov or 1-800-518-4726 between 7:00 AM and 9:00 PM Eastern Time.

4.6.4 Applying Electronically through Grants.gov

All information needed to submit applications electronically through this site can be found at Grants.gov. Additionally, there are a variety of requirements that are critical to know and comply with in order to meet the application deadline and submission requirements:

- Applicants will be able to download a copy of the application packet, complete it off-line, and then upload and submit the application via the website.
- Applicants can access the electronic application for this program on [Grants.gov](http://www.Grants.gov). Applicants must search the downloadable application page by the Funding Opportunity CLP-CL-15-001 or CFDA number 93.727
- ONC strongly recommends that applicants not wait until the application due date to begin the application process through [Grants.gov](http://www.Grants.gov).
- To complete an application in [Grants.gov](http://www.Grants.gov), applicants must have a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number and be registered in the System for Award Management (SAM). Applicants should allow a minimum of five days

to complete the SAM registration. The DUNS number was required for the initial award, and the same number should be used for this supplemental program. It is critical to know that SAM registration requires an annual renewal. As a result, ONC strongly encourages applicants to ensure that their registrations are current or to renew their registrations well in advance of the application deadline. For more information or to check or renew registrations, go to <http://www.sam.gov>.

- Applicants must submit all documents electronically, including all information included on the SF424 and all necessary assurances and certifications.
- Prior to application submission, Microsoft Vista and Office 2007 users should review the Grants.gov compatibility information and submission instructions provided at Grants.gov (click on “Vista and Microsoft Office 2007 Compatibility Information”).
- After applications are submitted electronically, applicants will receive an automatic acknowledgement from Grants.gov that contains a Grants.gov Applications must be submitted via <http://www.grants.gov> no later than 11:59 PM EST on April 6, 2015.
- Applications that fail to meet the application due date will not be reviewed and will receive no further consideration.
- Grants.gov will automatically send applicants a tracking number. ONC will retrieve application forms from [Grants.gov](http://www.grants.gov).

4.6.5 Intergovernmental Review

Applications for these cooperative agreements are not subject to review by states under Executive Order 12372, “Intergovernmental Review of Federal Programs” (45 CFR 100). 40. Please check box “C” on item 19 of the SF 424 (Application for Federal Assistance) as Review by State Executive Order 12372, does not apply to these cooperative agreements.

4.6.6 Funding Restrictions

Funds under this announcement cannot be used for the following purposes:

- To supplant or replace current public or private funding;
- To supplant on-going or usual activities of any organization involved in the project;
- To purchase or improve land, or to purchase, construct, or make permanent improvements to any building;
- To reimburse pre-award costs; or
- To fund activities or costs directly prohibited by the Recovery Act.

5. Application Review Information

5.1 Criteria

Applications must be submitted electronically via <http://www.grants.gov> by 11:59 Eastern Time, April 6, 2015.

The Project Narrative Section of the Application must be double-spaced, printable on 8.5" X 11" plain white paper with 1" margins on all sides, use either Calibri or Time New Roman font, and use a font size of not less than 11 point. Smaller font sizes may be used to fill in the Standard Forms and Sample Formats, and also for exhibits and figures, though all text in exhibits and figures must not be below 8 point font. The Project Narrative must not exceed 15 pages.

All of the applicants must provide signed letters of commitment or letters of support as appropriate submitted under Appendix A and detailed budgets as part of the application.

5.2 Evaluation

Program and Project Management Leadership, Governance, and Evaluation Feedback structures.

Applicants should describe an existing and current organizational capacity to manage multiple advanced community-, state-, and national-level programs through sub-recipient and partnership processes. Successful applicants will demonstrate cross-functional capability and capacity to convene multi-stakeholder groups, facilitate pre-/post-meeting activity, and possess experience in disseminating learning resources. Applicants will demonstrate past and recent ability to design, implement, and manage program evaluations, including the implementation of performance, monitoring, and feedback structures for and with both internal and external partners and propose five key applicant evaluation criteria through which ONC can measure applicant success during the two-year program.

National program experience and ability to target healthcare stakeholders locally, with states, and at the federal level.

Applicants should specify and offer concrete examples of either recent projects with national scope and scale managed by and through the organization. Applicants will demonstrate understanding and familiarity with local and national health care reform efforts supporting public and population health management. The application should speak to the applicant's ability to build strong local, state, federal and national partnerships, including resulting resource development from such partnerships.

Strategy for achieving improved community-level population health management outcomes.

Applicants must demonstrate the ability to engage and synthesize complex health IT technical and policy recommendations. Lessons learned will inform community, state, and federal stakeholders through reports and presentations. Applicants must have a proven ability to leverage staff to support the proposed activities for this award should reflect the applicant's ability to work with selected disseminating a national strategy. Successful applicants must describe the approach to engage healthcare stakeholders, experts, and communities to identify challenges and develop solutions related to population health via participate with the program and propose, at minimum, four key elements the applicant would use as a peer learning program.

5.3 Objective Review Overview

Applications will be scored based on 100 available points. Reviewers will use the following criteria to evaluate applications received in response to this call for applications, with a maximum total score of between 0 - 100 points.

The following criteria will be used to evaluate applications:

- 30 pts. Program Purpose & Strength of Proposed Approach and Work Plan
- 20 pts. Process for Development and Dissemination of Learning Resources
- 20 pts. Sub-recipient Award Management, Evaluation, and Feedback Structures
- 15 pts. Organizational Capacity and Project Management
- 10 pts. Communications and Facilitation Plan
- 5 pts. Reasonableness of Project Budget Justification

5.4 Objective Review Detail (Maximum total score range: 0 - 100 points)

1. **Program Purpose & Strength of Proposed Approach and Work Plan – 30 pts.**

- Is program of an appropriate length and intensity to effectively achieve outcomes? (20 pts.)
 - a. Program Proposal and Timeline
 - b. Program Leadership with ONC
 - c. Geographic and Community Diversity Experience
 - d. Opportunity to Leverage Assets
 - e. Health Information Technology and Population Health Experience
- Do a defined core set of community-level population health management challenges and topics express understanding of community-level issues? Are the proposed measures of success feasible and appropriate? (5 pts.)
 - a. Are the goals and objectives of the program reflected in the Proposed Approach and Work Plan?
 - b. Is the work plan logical, chronological, and achievable?
 - c. Does the approach and plan of action identify how population health management challenges will be addressed in partnership with participating program communities?
- Are the five key applicant evaluation criteria reasonable and effective? (5 pts.)

2. **Process for Development and Dissemination of Learning Resources – 20 pts.**

- Demonstrate organizational capacity, management, and ability to produce concise, clear, 508 compliant, relevant, and data driven materials (i.e., white papers, case studies, reports webinars).
- Demonstrate ability and understanding of how to share and broadly disseminate programmatic materials to scale learnings and promising practices.

3. **Sub-recipient Award Management, Evaluation and Feedback Structures – 20 pts.**

- Demonstrate organizational capacity, understanding, and ability to manage grant and programmatic reporting requirements of both internal and external agents.

- Demonstrate organizational capacity and ability to design, implement, and manage performance, monitoring, and feedback structures for and with internal and external agents.
 - Are four key elements, at a minimum, defined as a set of criteria the applicant can effectively use to measure programmatic success?
- 4. Organizational Capacity and Project Management – 15 pts.**
- Demonstrate organizational capacity to manage multiple state-, and national-level program(s).
 - Demonstrate organizational capacity, understanding, and ability to convene and provide for facilitation of multi-stakeholder groups.
 - Demonstrate organizational capacity to develop and implement project action plans and cooperative agreements.
 - Demonstrate organizational capacity to partner with individual, communities, organizations, state, and federal partners.
 - Provide four key elements, at minimum, the applicant would use as a set of criteria for measuring programmatic success reasonable and effective.
- 5. Communications and Facilitation Plan – 10 pts.**
- Demonstrate organizational understanding and capacity to manage multiple communications modes across communities, states, and national structures.
 - Demonstrate organizational ability to deliver programmatic messaging through a formal communications plan and outreach into smaller communities.
- 6. Reasonableness of Project Budget Justification – 5 pts.**
- Extent to which the budget is justified with respect to the adequacy and reasonableness of resources requested, and extent to which the amount of the budget allocated to administration is minimized, while still allowing coherent management of an integrated project.
 - Adequate justification to support costs included in budget.

5.5 Objective Review and Selection Process

An independent review panel of at least three individuals will evaluate applications that meet the initial screening criteria (i.e., are found to contain the required application elements). These reviewers will be experts in their field, and from academic institutions, non-profit organizations, and local and Federal government agencies. Based on the Application Review Criteria as outlined above, the reviewers will comment and score applications, focusing their comments and scoring decisions on the identified criteria. All applicants will receive a summary of the objective review panel's assessment of the application's merits and weaknesses.

The final award decision will be made by the Office of the National Coordinator for Health Information Technology (ONC). In making this award, the ONC will take into consideration: the merit of the proposed project as determined by objective review; compliance with programmatic and grants management requirements; the reasonableness of the estimated costs; and the likelihood that the proposed program will result in the benefits expected.

5.6 Discussions and Award

The Government may enter into discussions with a selected applicant for any reason deemed necessary, including, but not limited to, the following: (1) the budget is not appropriate or reasonable for the requirement; (2) only a portion of the application is selected for award; (3) the

Government needs additional information to determine that the applicant is capable of complying with the requirements in 2 CFR Part 200, Uniform Administrative Requirements and/or (4) special terms and conditions are required. Failure to resolve satisfactorily the issues identified by the Government will preclude award to the applicant.

For awards issued after December 26, 2014, the Financial Assistance regulations contained in 2 CFR 200 will be codified by 45 CFR 75 (HHS' financial assistance regulations).

5.7 Anticipated Announcement and Award Date

ONC anticipates that the award selection will be completed no later than three months after the FOA is released and that awards will be made in Fiscal Year 2015.

5.8 Award Administration Information

Type of Award	Cooperative Agreement
Total Amount of Funding Available	\$1,700,000
Number of Awards:	One (1) award
Project Period of Performance:	Two (2) years (24 months)
Estimated Start Date	June 1, 2015

5.9 Cost-Sharing or Matching

None required.

5.10 Performance Evaluation

The awardee's performance will be evaluated quarterly by ONC to ensure that the project is meeting program objectives.

ONC will work closely with a single awardee serving as the Community Health Program Manager through planning and implementation progresses in a collaborative way.

5.11 Public Material Use

Section 508-compliant materials developed through this funding will be made publicly available at the end of the project period, if not released over the course of the two (2) year program.

5.12 Intellectual Property/Copyrights

The Government reserves all rights granted by, and the recipient agrees to be bound by, Administrative Requirements, Cost Principles, and audit requirements as codified in 2 CFR Part

200 regarding rights in intangible property, 2 C.F.R. § 200.315, which is specifically incorporated herein. Generally, the recipient may copyright any work that is subject to copyright and was developed, or for which ownership was purchased, under this award. The Government reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use the work for Federal purposes, and to authorize others to do so. For any work owned by a third-party that was licensed by the recipient under this award, recipient will assure that said license also reserves for the Government a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use the work for Federal purposes, and to authorize others to do so.

6. Award Administration Information

6.1 Award Notices

A letter of notification acknowledging that an award was funded, but does not provide authorization for the applicant to begin performance and expend funds associated with the award until the start date of the award as indicated in the notice will be issued.

6.2 Notice of Award

The Notice of Grant Award (NGA) is then signed by the ONC Grants Management Officer. The successful applicants' Authorized Representatives will receive the NGA electronically from ONC. The NGA is considered the official authorizing award document.

The NGA will include the amount of funds awarded, the terms and conditions of the cooperative agreement, the effective date of the award, the budget period for which support will be given, the total project period timeframe and the total approved budget.

The NGA will provide pertinent instructions and information including, at a minimum, the following:

1. Legal name and address of performing organization or institution to whom ONC has issued an award under the terms of this request for applications;
2. Title of project;
3. Name(s) and institution(s) of Project Directors (PDs) chosen to direct and control approved activities;
4. Identifying award number assigned by the Department;
5. Project period, specifying the amount of time the Department intends to support the project without requiring re-competition for funds.
6. Total amount of Departmental financial assistance approved by ONC during the project period;
7. Legal authorities under which the award is issued;
8. Appropriate Catalog of Federal Domestic Assistance (CFDA) number;
9. Applicable award terms and conditions
10. Approved budget plan for categorizing allocable project funds to accomplish the stated purpose of the award; and
11. Other information or provisions deemed necessary by ONC to carry out its respective awarding activities or to accomplish the purpose of a particular award.

In accepting an ONC award, the recipient assumes legal, financial, administrative, and programmatic responsibility for administering the award in accordance with the terms and conditions of the award, as well as applicable laws, rules, regulations, and Executive Orders governing HHS assistance awards, all of which are to be incorporated into the award by reference. Failing to comply with these requirements may result in suspension or termination of the award and/or ONC's recovery of award funds.

6.3 Administrative and National Policy Requirements

The award is subject to OMB Uniform Guidance as codified in 2 CFR Part 200, Subparts B through D, and the Standard Terms and Conditions implemented through the HHS Grants Policy Statement located at <http://www.hhs.gov/asfr/ogapa/aboutog/hhsgps107.pdf>.

6.4 Reporting

All reporting requirements will be provided to the applicant of a successful application, adherence to which is a required condition of any award.

Semi-Annual expenditures must be submitted for each fiscal year during the period of performance (October 1 through September 30) using the SF-425, Federal Financial Report (FFR). Reports are due to HHS no later than April 30 of each year the award is active for funds expended between October and March, and no later than October 31 for funds expended between April and September. The semi-annual FFR will be submitted using the Online Data Collection (OLDC) system. ONC will not accept reports sent directly to the ONC Grants mailbox.

The FFR Cash Transaction Report is submitted via the Payment Management System (PMS) every calendar quarter for the life of the grant. The report must be submitted within 30 days after the end of the quarter (January 31, April 30, July 31, and October 31). Grantees are required to complete the FFR Cash Transaction Report via the Payment Management System each calendar quarter.

6.4.1 Performance Reports

The Awardee must submit semi-annual progress reports related to the program and overall program performance. A specific Performance Report format will be finalized between the Awardee and ONC following the award date.

6.5 Non-Disclosure Requirements

Because this cooperative agreement may require the grantee to have access to information relating to any and all aspects of grants management operations that may be of a technical, legal, sensitive and/or confidential nature and which may be the sole property of the U.S. Government, the grantee must ensure that all its personnel (to include chief executives, directors, any consultants, or sub-recipients or any other personnel that are substantially involved in the performance of this cooperative agreement) who will be personally and substantially involved in the performance of this cooperative agreement:

- Execute and submit Non-Disclosure Agreements prior to the commencement of any work on the cooperative agreement; and
- The grantee must put in place appropriate procedures for the protection of such information and must be liable to the Government for any misuse or unauthorized disclosure of such information by its personnel, as defined above.

6.6 Potential for Organizational and Personal Conflicts Of Interest (COI)

The term “organizational conflict of interest” means that the applicant (which term hereinafter must be deemed to include its chief executives, directors, any consultants, or sub-recipients or any other personnel that are substantially involved in the performance of this cooperative agreement) has interests in which:

1. May diminish its capacity to give impartial, technically sound, objective assistance and advise in performing this tasks;
2. May otherwise result in a biased work product under this cooperative agreement; or,
3. May result in an unfair competitive advantage to itself or others.

In accordance with Section 200.112 All applicants and Non-federal entities must disclose in writing any potential conflict of interest (COI) that they have with the HHS awarding agency and/or any other pass-through entities. The applicant must notify the HHS awarding agency and their respective grants management officer (GMO) when they believe a COI may exist. If after award, an awarded grantee discovers a COI, with respect to this cooperative agreement, it must make an immediate and full disclosure in writing to the grants management officer. The disclosure must include identification of the conflict, the manner in which it arose, and a description of the action the grantee has taken, or proposed to take, to avoid, eliminate, or neutralize the conflict.

In the event the grantee was aware of an organizational COI prior to award of the cooperative agreement and did not disclose the conflict to the GMO or becomes aware of an organizational COI after award of this cooperative agreement and does not disclose the COI within ten (10) days of becoming aware of such conflict, the Government may terminate the cooperative agreement and the grantee not be entitled to reimbursement of any cost incurred in performing the cooperative agreement or payment of any fee there under.

The rights and remedies of the Government provided in this clause must not be exclusive and are in addition to any other rights and remedies of the Government provided by law or under this cooperative agreement.

7. Agency Contact(s)

7.1 Agency Contacts

Program Contact:

Paul Klintworth
Public Health Analyst
Office of the National Coordinator
For Health Information Technology
Department of Health and Human Services
330 C Street, S.W.
Washington, D.C. 20201
CommunityHealthFOA@hhs.gov

Grant Management Contact:

Carmel Halloun
Grants Management Officer
Office of the National Coordinator
For Health Information Technology
Department of Health and Human Services
330 C Street, S.W.; Suite 2010
Washington, D.C. 20201
CommunityHealthFOA@hhs.gov

8.0 Other Information

8.1 Restrictions

This funding announcement is subject to restrictions on oral conversations during the period of time commencing with the submission of a formal application by an individual or entity and ending with the award of the competitive funds. Federal officials may not participate in oral communications initiated by any person or entity concerning a pending application for a Recovery Act competitive grant or other competitive form of federal financial assistance, whether or not the initiating party is a federally registered lobbyist. This restriction applies unless:

- the communication is purely logistical;
- the communication is made at a widely attended gathering;
- the communication is to or from a federal agency official and another federal Government employee;
- the communication is to or from a federal agency official and an elected chief executive of a state, local, or tribal government, or to or from a federal agency official and the Presiding Officer or Majority Leader in each chamber of a state legislature; or
- the communication is initiated by the federal agency official.

For additional information, see:

www.whitehouse.gov/sites/default/files/omb/assets/memoranda_fy2009/m09-24.pdf

8.2 HHS Grants Policy Statement

ONC awards are subject to the requirements of the HHS Grants Policy Statement (HHS GPS) that are applicable to the grant/cooperative agreement based on recipient type and purpose of award. This includes, as applicable, any requirements in Parts I and II of the HHS GPS that apply to the award, as well as any requirements of Part IV. The HHS GPS is available at <http://www.hhs.gov/asfr/ogapa/aboutog/hhsgps107.pdf>. The general terms and conditions in the HHS GPS will apply as indicated unless there are statutory, regulatory, or award-specific requirements to the contrary (as specified in the Notice of Award).

8.3 Records Retention

The Grantee generally must retain financial and programmatic records, supporting documents, statistical records, and all other records that are required by the terms of a grant, or may reasonably be considered pertinent to a grant, for a period of three years from the date the annual FFR is submitted. For awards where the FFR is submitted at the end of the competitive segment, the three-year retention period will be calculated from the date the FFR for the entire competitive segment is submitted. Those grantees must retain the records pertinent to the entire competitive segment for three years from the date the final FSR is submitted. See 2 CFR 200.333 for exceptions and qualifications to the three-year retention requirement (e.g., if any litigation, claim, financial management review, or audit is started before the expiration of the three-year period, the records must be retained until all litigation, claims, or audit findings involving the records have been resolved and final action taken). Those sections also specify the retention period for other types of grant-related records, including indirect cost proposals and property records. See 2 CFR 200.326 for record retention and access requirements for contracts under grants.

8.4 Cooperative Agreement Terms and Conditions of Award

The following special terms of award are in addition to, and not in lieu of, otherwise applicable OMB administrative guidelines, HHS grant administration regulations at 2 CFR Part 200, Subpart B through D, and other HHS and ONC grant administration policies.

The administrative and funding instrument used for this program will be the cooperative agreement, an “assistance” mechanism, in which substantial ONC programmatic involvement with the grantee is anticipated during the performance of the activities. Under the cooperative agreement, the ONC purpose is to support and stimulate the recipients’ activities by involvement in and otherwise working jointly with the award grantee in a partnership role; it is not to assume direction, prime responsibility, or a dominant role in the activities. Consistent with this concept, the dominant role and prime responsibility resides with the grantee for the project as a whole, although specific tasks and activities may be shared among the grantee and the ONC as defined below. To facilitate appropriate involvement, during the period of this cooperative agreement, ONC and the recipient will be in contact monthly and more frequently when appropriate. Requests to modify or amend the cooperative agreement may be made by ONC or the recipient at any time. Modifications and/or amendments to the cooperative agreement must be effective upon the mutual agreement of both parties, except where ONC is authorized under the Terms and Conditions of award, 2 CFR Part 200, Subpart B through D, or other applicable regulation or statute to make unilateral amendments.

In accepting an ONC award, the recipient assumes legal, financial, administrative, and programmatic responsibility for administering the award in accordance with the terms and conditions of the award, as well as applicable laws, rules, regulations, and Executive Orders governing HHS assistance awards, all of which are to be incorporated into the award by reference. Failing to comply with these requirements may result in suspension or termination of the award and/or ONC’s recovery of award funds.

Cooperative Agreement Roles and Responsibilities

Office of the National Coordinator for Health Information Technology (ONC) will have substantial involvement in program awards, as outlined below:

- Technical Assistance – This includes federal guidance on the evolution of interoperability and exchange in accordance with meaningful use criteria to be established by the Secretary through the rulemaking process.
- ONC also will assist in meeting the strategic goals of initiative and overall program on a national level through ongoing support made available through other ONC/HHS funded programs.
- Collaboration – To facilitate compliance with the terms of the cooperative agreement and to more effectively support the grantee, ONC will actively coordinate with critical stakeholders, such as:
 - Medicaid and Medicare Administrators
 - State Designated Entities
 - State Government HIT Leads
 - Relevant Federal Agencies
- Project Officers – ONC will assign specific Project Officers to each cooperative agreement award to support and monitor the grantee throughout the period of performance.
- Release of Funds Approval – ONC Project Officers will be responsible for requesting authorization for the release of funds for their assigned projects.
- Monitoring – ONC Project Officers, in conjunction with the Grants Division, will monitor, on a regular basis, progress of each recipient. This monitoring may be by phone, document review, on-site visit, other meeting and by other appropriate means, such as reviewing program progress reports and Federal Financial Reports (FFR 425). This monitoring will be to determine compliance with programmatic and financial requirements.

Grantee

The grantee and assigned points of contact retain the primary responsibility and dominant role for planning, directing and executing the proposed project as outlined in the terms and conditions of the cooperative agreement and with substantial ONC involvement. Responsibilities include:

- Requirements – the grantee must comply with all current and future requirements of the project, guidance on the implementation of meaningful use, certification criteria and standards (including privacy and security) specified and approved by the Secretary of HHS
- Grantee is required to collaborate with the critical stakeholders listed in this Funding Opportunity Announcement and the ONC team, including the assigned Project Officer.
- Reporting – Grantee is required to comply with all reporting requirements outlined in this Funding Opportunity Announcement and the terms and conditions of the cooperative agreement to ensure the timely release of funds.

8.5 Standard Terms and Conditions- ONC Grants

This award is issued under the authority of the Public Health Service Act, Sec. 3011, as added by the American Recovery and Reinvestment Act, 2009 (P.L. 111-5). By receiving funds under this award, the recipient assures that it will carry out the project/program as authorized and will comply with the terms and conditions and other requirements of this award.

This award is subject to the HHS-Approved Standard Terms and Conditions for the American Recovery and Reinvestment Act of 2009. The full set of terms and conditions will be provided upon award, as part of the Notice of Grant Award.

The terms and conditions of this Notice of Award and other requirements have the following order of precedence if there is any conflict in what they require: (1) American Recovery and Reinvestment Act, 2009 (P.L. 111-5); (2) other applicable Federal statutes and their implementing regulations; (3) terms and conditions of award.

The recipient and any sub-recipient must comply with the most recent version of the HHS Grants Policy Statement, Administrative Requirements, Cost Principles, and Audit Requirements. The following is a non-exclusive list of regulations commonly applicable to HHS/ONC grants:

2 CFR Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Subparts B-F.

The recipient agrees that all allocations and use of funds under this award will be in accordance with the Funding Opportunity Announcement specific to this program.

The recipient understands and agrees to comply with 31 U.S.C. 1352, “Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions,” and will not use any Federal funds, either directly or indirectly, in support of the enactment, repeal, modification or adoption of any law, regulation or policy, at any level of government.

This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to <http://www.hrsa.gov/grants/trafficking.htm>. If you are unable to access this link, please contact Division of Grants at oncgrants@hhs.gov.

Green Procurement: To mitigate the environmental impacts of acquisition of IT and other products/equipment, grantees are encouraged to: (1) participate in “Green procurement” based on the HHS Affirmative Procurement Plan (http://www.hhs.gov/asfr/ogapa/acquisition/10-2010_hhs_affirmative_procurement_plan.doc) and similar guidance from the

Environmental Protection Agency (EPA) and the President’s Council on Environmental Quality (CEQ); (2) use electronic products that are Energy Star® compliant and Electronic Product Environmental Assessment Tool (EPEAT) Silver registered or higher when available; (3) activate Energy Star® features on all equipment when available; (4) use environmentally sound end-of-life management practices, including reuse, donation, sale and recycling of all electronic products.

Requirements for the System for Award Management (SAM) and Data Universal Numbering System (DUNS) numbers: Unless your entity is exempt from the SAM requirement under 2 CFR 25.110, it is incumbent upon you, as the recipient, to maintain the accuracy/currency of your information in the SAM until the end of the project. Additionally this term requires your entity to review and update the information at least annually after the initial registration, and more frequently if required by changes in your information or another award term.

If your entity is authorized to make sub-awards under this award, you: 1) must notify potential direct sub-recipients that no entity may receive a sub-award from you unless the entity has provided its DUNS number to you and, 2) may not make a sub-award to an entity unless the entity has provided its DUNS number to you.

Semi-Annual expenditures must be submitted for each fiscal year during the period of performance (October 1 through September 30) using the SF-425, Federal Financial Report (FFR). Reports are due to HHS no later than April 30 of each year the award is active for funds expended between October and March, and no later than October 31 for funds expended between April and September. The semi-annual FFR will be submitted using the Online Data Collection (OLDC) system. ONC will not accept reports sent directly to the ONC Grants mailbox.

The FFR Cash Transaction Report is submitted via the Payment Management System (PMS) every calendar quarter for the life of the grant. The report must be submitted within 30 days after the end of the quarter (January 31, April 30, July 31, and October 31). Grantees are required to complete the FFR Cash Transaction Report via the Payment Management System each calendar quarter.

ONC Program Progress Reports (PPR) are due semi-annually and must include the reporting elements referenced in 2 CFR 200.328 as applicable. ONC will provide guidance for format and further instructions on reporting before the reports are due.

The recipient indicates acceptance of the terms and conditions of the award and agrees to perform in accordance with the requirements of the award by requesting funds from the designated grant payment system.

Funding of future non-competing continuation awards is conditioned on the availability of funds, satisfactory progress by the recipient, and an awarding office determination that continued funding of the award is in the best interests of the Government.

8.6 Other Terms and Conditions

These special terms and conditions of the award are in addition to and not in lieu of otherwise applicable OMB administrative guidelines, HHS grant administration regulations in 2 CFR Part 200, Subparts B through D, and other HHS and ONC policy statements.

Cooperative agreements are for a period of two years. By accepting an award, recipients are required to abide by 2 CFR Part 200, Subparts B through D, and other HHS and ONC policy statements.

Drawdown of funding for this cooperative agreement serves as official acceptance of this cooperative agreement. If you do not plan to accept the award, please send a letter of declination to the ONC Project Officer within 30 days of receipt of the Notice of Grant Award.

8.7 Administrative and National Policy Requirements

The award is subject to OMB Uniform Guidance as codified in 2 CFR Part 200, Subparts B through D, and the Standard Terms and Conditions implemented through the HHS Grants Policy Statement located at <http://www.hhs.gov/grants/grants/policies-regulations/hhsgps107.pdf>

8.8 Post-Award Reporting Requirements

All reporting requirements will be provided to the applicant of a successful application, adherence to which is a required condition of any award. In general, the successful applicant under this guidance must comply with the following reporting and review activities:

8.9 Audit Requirements

The recipient must comply with audit requirements of Office of Management and Budget (OMB) Uniform Guidance as codified in 2 CFR Part 200, Subpart F. Information on the scope, frequency, and other aspects of the audits can be found at <http://www.ecfr.gov/cgi-bin/text-idx?SID=ed90f54836feb6a994f657188eb05e33&node=2:1.1.2.2.1&rgn=div5>

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to mhhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

8.10 Financial Status and Cash Transaction Reports

Annual expenditure must be submitted for the reporting period October 1 through September 30 using the SF-425, Federal Financial Report (FFR). The FFR is due annually and must be submitted within 90 days after the end of the applicable 12-month reporting period (October 1 through September 30). Reports are due to HHS no later than December 30 of each year the award is active. The annual FFR will be submitted using the Online Data Collection (OLDC) system.

The FFR Cash Transaction Report is submitted via the Payment Management System (PMS) every calendar quarter for the life of the grant. The report must be submitted within 30 days after the end of the quarter (January 30, April 30, July 30, and October 30) Grantees are still required to complete the FFR Cash Transaction Report via the Payment Management System each calendar quarter.

8.11 Performance Reports

The awardee's performance will be evaluated quarterly by ONC to ensure that the project is meeting program objectives.

ONC will work closely with the grantee through planning and implementation progresses in a collaborative way.

The grantee shall submit semi-annual progress reports related to its projects and overall project performance to include how the specific activities tie back to each funding streams. A specific Performance Report format will be finalized by ONC following the award date.

9. Appendix A - Budget Detail

9.1 Instructions for completing the SF 424, Budget (SF 424A), Budget Narrative/Justification, and Other Required Forms

This section provides step-by-step instructions for completing the four (4) standard federal forms required as part of your grant application, including special instructions for completing Standard Budget Forms 424 and 424A. Standard Forms 424 and 424A are used for a wide variety of federal grant programs, and federal agencies have the discretion to require some or all of the information on these forms. Accordingly, please use the instructions below in lieu of the standard instructions attached to SF 424 and 424A to complete these forms.

9.1.1 Standard Form 424

1. Type of Submission: (Required): Select one type of submission in accordance with agency instructions.

- Pre-application • Application • Changed/Corrected Application – If requested, check if this submission is to change or correct a previously submitted application.

2. Type of Application: (Required) Select one type of application in accordance with agency instructions.

- New • Continuation • Revision

3. Date Received: Leave this field blank.

4. Applicant Identifier: Leave this field blank.

5a. Federal Entity Identifier: Leave this field blank.

5b. Federal Award Identifier: For new applications leave blank. For a continuation or revision

to an existing award, enter the previously assigned federal award (grant) number.

6. Date Received by State: Leave this field blank.

7. State Application Identifier: Leave this field blank.

8. Applicant Information: Enter the following in accordance with agency instructions:

a. Legal Name: (Required): Enter the name that the organization has registered with the System for Award Management (SAM). Information on registering with SAM may be obtained by visiting <http://www.sam.gov>.

b. Employer/Taxpayer Number (EIN/TIN): (Required): Enter the Employer or Taxpayer Identification Number (EIN or TIN) as assigned by the Internal Revenue Service.

c. Organizational DUNS: (Required) Enter the organization's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained by visiting the Grants.gov website.

d. Address: (Required) Enter the complete address including the county.

e. Organizational Unit: Enter the name of the primary organizational unit (and department or division, if applicable) that will undertake the project.

f. Name and contact information of person to be contacted on matters involving this application: Enter the name (First and last name required), organizational affiliation (if affiliated with an organization other than the applicant organization), telephone number (Required), fax number, and email address (Required) of the person to contact on matters related to this application.

9. Type of Applicant: (Required) Select the applicant organization "type" from the following drop down list:

A. State Government B. County Government C. City or Township Government D. Special District Government E. Regional Organization F. U.S. Territory or Possession G. Independent School District H. Public/State Controlled Institution of Higher Education I. Indian/Native American Tribal Government (Federally Recognized) J. Indian/Native American Tribal Government (Other than Federally Recognized) K. Indian/Native American Tribally Designated Organization L. Public/Indian Housing Authority M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education) N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education) O. Private Institution of Higher Education P. Individual Q. For-Profit Organization (Other than Small Business) R. Small Business S. Hispanic-serving Institution T. Historically Black Colleges and Universities (HBCUs) U. Tribally Controlled Colleges and Universities (TCCUs) V. Alaska Native and Native Hawaiian Serving Institutions W. Non-domestic (non-US) Entity X. Other (specify)

10. Name Of Federal Agency: (Required) Enter U.S. Department of Health and Human Services

11. Catalog Of Federal Domestic Assistance Number/Title: The CFDA number can be found on page one of the Program Announcement.

12. Funding Opportunity Number/Title: (Required) The Funding Opportunity Number and title of the opportunity can be found on page one of the Program Announcement.

13. Competition Identification Number/Title: Leave this field blank.

14. Areas Affected By Project: List the largest political entity affected (cities, counties, state).

15. Descriptive Title of Applicant's Project: (Required) Enter a brief descriptive title of the project.

16. Congressional Districts Of: (Required) 16a. Enter the applicant's Congressional District, and 16b. Enter all district(s) affected by the program or project. Enter in the format: 2 characters State Abbreviation – 3 characters District Number, e.g., CA-005 for California 5th district, CA-0 for California 12th district, NC-103 for North Carolina's 103rd district. • If all congressional districts in a state are affected, enter "all" for the district number, e.g., MD-all for all congressional districts in Maryland. • If nationwide, i.e. all districts within all states are affected, enter US-all.

17. Proposed Project Start and End Dates: (Required) Enter the proposed start date and final end date of the project. Therefore, if you are applying for a multi-year grant, such as a 3 year grant project, the final project end date will be 3 years after the proposed start date.

18. Estimated Funding: (Required) Enter the amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses.

NOTE: **Indirect charges** may only be requested if: (1) the applicant has a current indirect cost rate agreement approved by the Department of Health and Human Services or another federal agency; or (2) the applicant is a state or local government agency. State governments should enter the amount of indirect costs determined in accordance with DHHS requirements. **If indirect costs are to be included in the application, a copy of the approved indirect cost agreement must be included with the application. Further, if any sub-contractors or sub-grantees are requesting indirect costs, copies of their indirect cost agreements must also be included with the application.**

19. Is Application Subject to Review by State Under Executive Order 12372 Process? Check
c. Program is not covered by E.O. 12372.

20. Is the Applicant Delinquent on any Federal Debt? (Required) This question applies to the applicant organization, not the person who signs as the authorized representative. If yes, include an explanation on the continuation sheet.

21. Authorized Representative: (Required) To be signed and dated by the authorized representative of the applicant organization. Enter the name (First and last name required) title (Required), telephone number (Required), fax number, and email address (Required) of the person authorized to sign for the applicant. A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain federal agencies may require that this authorization be submitted as part of the application.)

9.1.2 Standard Form 424A

NOTE: Standard Form 424A is designed to accommodate applications for multiple grant programs; thus, for purposes of this program, many of the budget item columns and rows are not applicable. You should only consider and respond to the budget items for which guidance is provided below. Unless otherwise indicated, the SF 424A should reflect a two year budget.

Section A Budget Summary

Line 5: Leave columns (c) and (d) blank. Enter TOTAL federal costs in column (e) and total nonfederal costs, in column (f). Enter the sum of columns (e) and (f) in column (g).

Section B Budget Categories

Column 3: Enter the breakdown of how you plan to use the federal funds being requested by object class category (see instructions for each object class category below).

Column 4: Enter the breakdown of how you plan to use the non-federal share by object class category.

Column 5: Enter the total funds required for the project (sum of Columns 3 and 4) by object class category.

Separate Budget Narrative/Justification Requirement

You must submit a separate Budget Narrative/Justification as part of your application. When more than 33% of a project's total budget falls under contractual, detailed Budget Narratives/Justifications must be provided for each sub-contractor or sub-grantee.

Applicants requesting funding for multi-year grant programs are REQUIRED to provide a combined multi-year Budget Narrative/Justification, as well as a detailed Budget Narrative/Justification for each year of potential grant funding. A separate Budget Narrative/Justification is also REQUIRED for each potential year of grant funding requested.

For your use in developing and presenting your Budget Narrative/Justification, a sample format with examples and a blank sample template have been included in these Attachments. In your Budget Narrative/Justification, you should include a breakdown of the budgetary costs for all of the object class categories noted in Section B, across three columns: federal; non-federal cash; and non-federal in-kind. Cost breakdowns, or justifications, are required for any cost of \$1,000 or more. The Budget Narratives/Justifications should fully explain and justify the costs in each of the major budget items for each of the object class categories, as described below. Non-federal cash as well as, sub-contractor or sub-grantee (third party) in-kind contributions must be clearly identified and explained in the Budget Narrative/Justification. The full Budget Narrative/Justification should be included in the application immediately following the SF 424 forms.

Line 6a: Personnel: Enter total costs of salaries and wages of applicant/grantee staff. Do not include the costs of consultants; consultant costs should be included under 6hOther. In the Budget Narrative/Justification: Identify the project director, if known. Specify the key staff, their titles, brief summary of project related duties, and the percent of their time commitments to the project in the Budget Narrative/Justification.

Line 6b: Fringe Benefits: Enter the total costs of fringe benefits unless treated as part of an approved indirect cost rate. In the Justification: Provide a breakdown of amounts and percentages that comprise fringe benefit costs, such as health insurance, FICA, retirement insurance, etc.

Line 6c: Travel: Enter total costs of outoftown travel (travel requiring per diem) for staff of the project. Do not enter costs for consultant's travel - this should be included in line 6h. In the Justification: Include the total number of trips, destinations, purpose, and length of stay, subsistence allowances and transportation costs (including mileage rates).

Line 6d: Equipment: Enter the total costs of all equipment to be acquired by the project. For all grantees, "equipment" is nonexpendable tangible personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. If the item does not meet the \$5,000 threshold, include it in your budget under Supplies, line 6e. In the Justification: Equipment to be purchased with federal funds must be justified as necessary for the conduct of the project. The equipment must be used for project-related functions; the equipment, or a reasonable facsimile, must not be otherwise available to the applicant or its subgrantees. The

justification also must contain plans for the use or disposal of the equipment after the project ends.

Line 6e: Supplies: Enter the total costs of all tangible expendable personal property (supplies) other than those included on line 6d. In the Justification: Provide general description of types of items included.

Line 6f: Contractual: Enter the total costs of all contracts, including (1) procurement contracts (except those, which belong on other lines such as equipment, supplies, etc.). Also include any contracts with organizations for the provision of technical assistance. Do not include payments to individuals or consultants on this line. In the Budget Narrative/Justification: Attach a list of contractors indicating the name of the organization, the purpose of the contract, and the estimated dollar amount. If the name of the contractor, scope of work, and estimated costs are not available or have not been negotiated, indicate when this information will be available. **Whenever the applicant/grantee intends to delegate more than 33% of a project's total budget to the contractual line item, the applicant/grantee must provide a completed copy of Section B of the SF 424A Budget Categories for each sub-contractor or sub-grantee, and separate Budget Narrative/Justification for each sub-contractor or sub-grantee for each year of potential grant funding.**

Line 6g: Construction: Leave blank since construction is not an allowable cost under this program.

Line 6h: Other: Enter the total of all other costs. Such costs, where applicable, may include, but are not limited to: insurance, medical and dental costs (i.e. for project volunteers this is different from personnel fringe benefits); non-contractual fees and travel paid directly to individual consultants; local transportation (all travel which does not require per diem is considered local travel); postage; space and equipment rentals/lease; printing and publication; computer use; training and staff development costs (i.e. registration fees). If a cost does not clearly fit under another category, and it qualifies as an allowable cost, then rest assured this is where it belongs. In the Justification: Provide a reasonable explanation for items in this category. For individual consultants, explain the nature of services provided and the relation to activities in the project. Describe the types of activities for staff development costs.

Line 6i: Total Direct Charges: Show the totals of Lines 6a through 6h.

Line 6j: Indirect Charges: Enter the total amount of indirect charges (costs), if any. If no indirect costs are requested, enter "none." Indirect charges may be requested if: (1) the applicant has a current indirect cost rate agreement approved by the Department of Health and Human Services or another federal agency; or (2) the applicant is a state or local government agency.

Budget Narrative/Justification: State governments should enter the amount of indirect costs determined in accordance with DHHS requirements. Any applicant that will charge indirect costs to the grant **must enclose a copy of the current indirect cost rate agreement.** If any sub-contractors or sub-grantees are requesting indirect costs, copies of their indirect cost agreements must also be included with the application.

If the applicant organization is in the process of initially developing or renegotiating a rate, it should immediately upon notification that an award will be made, develop a tentative indirect cost rate proposal based on its most recently completed fiscal year in accordance with the principles set forth in the cognizant agency's guidelines for establishing indirect cost rates, and submit it to the cognizant agency. Applicants awaiting approval of their indirect cost proposals may also request indirect costs. It should be noted that when an indirect cost rate is requested, those costs included in the indirect cost pool should not also be charged as direct costs to the grant. Also, if the applicant is requesting a rate which is less than what is allowed under the program, the authorized representative of the applicant organization must submit a signed acknowledgement that the applicant is accepting a lower rate than allowed.

Line 6k: Total: Enter the total amounts of Lines 6i and 6j.

Line 7: Program Income: As appropriate, include the estimated amount of income, if any, you expect to be generated from this project. Program Income must be used as additional program costs.

Section C NonFederal Resources – Not applicable

Section D Forecasted Cash Needs – Not applicable

Section E Budget Estimate of Federal Funds Needed for Balance of the Project

Line 20: Section E is relevant for multi-year grant applications, where the project period is 24 months or longer. This section does not apply to grant awards where the project period is less than 17 months.

Section F Other Budget Information

Line 22: Indirect Charges: Enter the type of indirect rate (provisional, predetermined, final or fixed) to be in effect during the funding period, the base to which the rate is applied, and the total indirect costs. Include a copy of your current Indirect Cost Rate Agreement.

Line 23: Remarks: Provide any other comments deemed necessary.

9.1.3 Standard Form 424B - Assurances

This form contains assurances required of applicants under the discretionary funds programs administered by the Assistant Secretary for Preparedness and Response. Please note that a duly authorized representative of the applicant organization must certify that the organization is in compliance with these assurances.

9.1.4 Certification Regarding Lobbying

This form contains certifications that are required of the applicant organization regarding lobbying. Please note that a duly authorized representative of the applicant organization must attest to the applicant's compliance with these certifications.

9.1.5 Other Application Components

Survey on Ensuring Equal Opportunity for Applicants

The Office of Management and Budget (OMB) has approved an HHS form to collect information on the number of faith-based groups applying for a HHS grant. Non-profit organizations, excluding private universities, are asked to include a completed survey with their grant application packet. Attached you will find the OMB approved HHS “Survey on Ensuring Equal Opportunity for Applicants” form (Attachment F). Your help in this data collection process is greatly appreciated.

Indirect Cost Agreement

Applicants that have included indirect costs in their budgets must include a copy of the current indirect cost rate agreement approved by the Department of Health and Human Services or another federal agency. This is optional for applicants that have not included indirect costs in their budgets.