



The Trusted Exchange Framework and Common Agreement (TEFCA) Recognized Coordinating Entity (RCE) Cooperative Agreement

Notice of Funding Opportunity (NOFO) Information Session

Tuesday, April 30, 2019 2:00 p.m. – 3:00 p.m., ET



Introduction of Speakers

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Agenda

- Reminders and Housekeeping
- Background and Overview of the Trusted Exchange Framework and Common Agreement (TEFCA) Recognized Coordinating Entity (RCE) Cooperative Agreement
- Application Merit Review Process
- Application Evaluation



Housekeeping

- This Webinar is being recorded and will be made publically available at <u>https://www.healthit.gov/topic/onc-funding-opportunities/trusted-</u> <u>exchange-framework-and-common-agreement-recognized</u>
- All phone lines will be muted during the presentation
- If you have questions throughout the webinar, please enter them into the Q&A function
- All questions will be answered in the form of an FAQ and be made publicly available each week on <u>https://www.healthit.gov/topic/onc-funding-opportunities/trusted-exchange-framework-and-common-agreement-recognized</u>

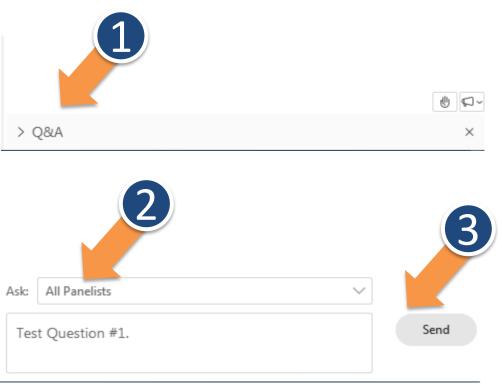


How to Ask a Question

If you have any questions during the presentation, please follow the instructions below.

Use the Q&A function to ask a question:

- 1.) Along the bottom right side of the webinar window, find and click the Q&A button. The Q&A panel will then expand on your screen.
- 2.) Ensure the "All Panelists" option is enabled.
- 3.) Type your question and then press send.





If you have additional questions after today's webinar session, please direct them to the following email address:

TEFCA.NOFO@hhs.gov



Background

- 4/19/2019: ONC released Trusted Exchange Framework and Common Agreement (TEFCA) Recognized Coordinating Entity (RCE) Cooperative Agreement Notice of Funding Opportunity (NOFO)
 - » ONC also released TEFCA Draft 2
- One award up to four (4) years, \$900K for the first year
- Period of Performance:
 - » Up to four (4) years; contingent upon availability of funds and satisfactory completion of milestones
- Letters of Intent are due by 5/17/2019
- Applications are due by 6/17/2019
- Anticipated award and program start date 8/30/2019



Background (continued)

- In the 21st Century Cures Act (Cures Act), Congress identified the importance of interoperability by laying out a path for the establishment of interoperable exchange of electronic health data and charging the Office of the National Coordinator for Health Information Technology (ONC) with the implementation of key interoperability provisions under Title IV of the Cures Act including advancing a Trusted Exchange Framework and Common Agreement to improve data exchange between health information networks (HINs).
- The Cures Act's focus on trusted exchange:
 - » Is an important step toward advancing the establishment of an interoperable health system that empowers individuals to use their health data to the fullest extent;
 - » Enables providers and communities to deliver smarter, safer, and more efficient care;
 - » Promotes innovation at all levels.
- The RCE will have an important role in realizing the vision of the TEF and Common Agreement.



RCE Responsibilities

- 1. Develop a Common Agreement that includes the Minimum Required Terms and Conditions (MRTC) Draft 2 and Additional Required Terms and Conditions (ARTC), for ONC approval and publication on HealthIT.gov and in the Federal Register.
- 2. Virtually convene public listening sessions that will allow industry stakeholders to provide objective and transparent feedback to the RCE.
- **3**. Designate and monitor Qualified Health Information Networks (QHINs) that voluntarily agree to sign and adopt the Common Agreement.
- 4. Implement an ONC-approved process to adjudicate QHIN noncompliance with the Common Agreement, up to and including removal from ONC's public directory on HealthIT.gov.
- 5. Implement a process to update the Common Agreement, as needed, for ONC final approval and publication on HealthIT.gov and in the Federal Register.
- 6. Modify and update the QHIN Technical Framework Draft 1, for ONC approval, to detail proposed technical components for exchange between QHINs.
- 7. Propose strategies that an RCE could employ to sustain the Common Agreement at a national level after the expiration of the term of the Cooperative Agreement.



Eligibility Criteria

 This Notice of Funding Opportunity is an open competition to United Statesbased non-profit entities who can showcase the expertise and ability to execute the outlined requirements of this NOFO.



 Develop a Common Agreement, for ONC approval and publication on HealthIT.gov and the Federal Register that includes the MRTCs Draft 2 and the ARTCs as described above in Section 1A. The RCE may modify their existing data sharing agreement to include the MRTCs Draft 2. Completion of this milestone will require engagement of legal professionals. If the RCE does not have existing legal staff on board, they will need to bring such staff on board. ONC may assign ONC staff to provide technical assistance and subject matter expertise for development of the Common Agreement as needed.



Convene virtual public listening sessions at least on a semiannual basis that will allow the industry to provide objective and transparent feedback to the RCE around the development of updates to the Common Agreement, QHIN Technical Framework Version 1, and other activities, as needed. Listening sessions should be fairly balanced in terms of the points of view represented and should be made up of broad stakeholder representation. Stakeholders represented may include, but are not limited to, healthcare systems, payers, purchasers, care providers (e.g., long-term and post-acute care, behavioral health, community-based and safety net providers, and emergency medical services), health IT developers; QHINs, HINs, federal stakeholders, individuals, and/or other stakeholders that enable widespread health information exchange to occur.



 Designate and monitor QHINs that voluntarily agree to adopt and sign onto the Common Agreement. This includes reviewing and approving QHIN Applications and launching, at a minimum, semi-annual Cohorts for Provisional QHINs to be evaluated for compliance with the Common Agreement as a function of gaining QHIN Designation.



 Implement the ONC-approved Common Agreement developed in Milestone 1, including QHIN Designation and reviewing potential noncompliance by QHINs to the provisions of the Common Agreement.



 Implement an RCE-established process to update the Common Agreement, for ONC final approval and publication on HealthIT.gov and the Federal Register



 Modify the QHIN Technical Framework Draft 1 developed by ONC and update it during the period of performance, for ONC approval. The RCE will be expected to collaborate with ONC, as needed, in Year 1 to ensure alignment of the Common Agreement with the draft QHIN Technical Framework (Milestone 1). ONC may assign staff to provide technical assistance and subject matter expertise for updates to the QHIN Technical Framework, as needed.



 Propose strategies that an RCE could employ to sustain the Common Agreement at a national level at the expiration of the term of the Cooperative Agreement.



FUNDING, ELIGIBILITY, AND APPLICATION INFORMATION



Type of Award	Cooperative Agreement
Available Funding Per Award	\$900,000 for first year
Number of Awards	1 award
NOFO Released	4/19/2019
Information Session Date	4/30/2019
Letter of Intent Due	5/17/2019
Application Due Date	6/17/2019
Anticipated Award Date	8/30/2019
Performance Period	8/30/2019-8/29/2023
Anticipated Start Date	8/30/2019



Letter of Intent

- Applicants are encouraged to submit a nonbinding email notice of intent to apply for this funding opportunity.
- Submit by: 11:59 P.M. Eastern Standard Time on 5/17/2019
- Identify:
 - » Name of applicant organization
 - » City and State
 - » NOFO No. NAP-AX-19-001
 - » Title: Trusted Exchange Framework and Common Agreement (TEFCA)
 Recognized Coordinating Entity (RCE) Cooperative Agreement

Send to: TEFCA.NOFO@hhs.gov



Application Process

- Applicants must:
 - » Submit all material electronically through <u>Grants.gov</u>; this process is outlined in the NOFO.
 - » For assistance with submitting applications on Grants.gov, please contact the Grants.gov Helpdesk at <u>support@Grants.gov</u> or call at (800) 518-4726.
 - » Have a Dun & Bradstreet (D&B) Universal Numbering System (DUNS) number.
 - » Register in the System for Award Management (SAM) at <u>www.sam.gov</u>; allow a minimum of 5 days to complete the registration. If you are already registered in SAM and have not renewed your registration in the last 12 months, you must renew your registration.
 - » Ensure the application meets application requirements and page limits.



Application Components

Component	Limit
Program Abstract	< 500 words
Program Narrative	25 pages
Form SF-424, Application for Federal Assistance	No limit
Form SF-424 A, Budget Information for Non-Construction Programs	No limit
Form SF-424 B, Assurances for Non-Construction Programs	No limit
Form SF-LLL, Disclosure of Lobbying Activities	No limit
Budget Narrative	No limit
Proof of Non-Profit Status	No limit
Indirect Cost Agreement(s)	No limit
Letters of Support	No limit
Key Staff and Key Partner Resumes/CVs	No limit



Program Abstract

Applicants must include an abstract of the application of no more than two pages single spaced and 500 words. This abstract is often distributed to provide information to the public and Congress and represents a high-level summary of the program. Applicants should prepare a clear, accurate, and concise abstract that can be understood without reference to other parts of the application. The abstract should give a description of the proposed program, including: the program theme addressed, the program's goal(s), objectives, overall approach (including target population and significant partnerships), anticipated outcomes, products, and duration. The Program Abstract must have a font size of no less than 11 point Times New Roman font.



Program Abstract (continued)

- Applicants must place the following information at the top of the Program Abstract (this information is not included in the 500 word maximum):
 - » Program title
 - » Applicant name
 - » Address
 - » Contact name
 - » Contact phone numbers (voice, fax)
 - » E-mail address
 - » Web site address, if applicable



Program Narrative

- The Program Narrative functions as the primary basis in determining if the application meets the minimum requirements for funding. The Program Narrative must provide a clear and concise description of the strategy that will be used to achieve intended milestones and outcomes. This includes description of who will have responsibility for key tasks such as:
 - » program leadership
 - » monitoring the program's ongoing progress
 - » milestone achievement
 - » engaging with public stakeholders and ONC



Program Narrative (Continued)

- The Program Narrative must be double-spaced, printable on 8 ½" x 11"
 pages with 1" margins on all sides, and use a font size no less than 11 point
 Times New Roman. Smaller font sizes may be used to fill in the Standard
 Forms and Sample Formats, as well as for exhibits and figures, however text
 in exhibits and figures must be no less than 8 point font. Program Narratives
 should be no more than 25 pages.
- ONC will not review Program Narrative pages beyond the allowed 25 pages. The Program Abstract will not be counted as part of the narrative but will be provided to reviewers. Key Staff Resumes/Curriculum Vitae (CV) are required and should be referenced in the Program Narrative, with resume/CV copies placed in Appendix B. Neither Appendix A nor Appendix B will be counted toward the Program Narrative's 25-page limit.



Program Narrative (Continued)

- The program narrative must conform to the following outline and include the information required under each section:
 - » Problem Statement (1 page)
 - » Organizational Capacity and Technical Capabilities (4 pages)
 - » Program Management Acumen (1 page)
 - » Proposed Approach and Work Plan (8 pages)
 - » Collaborator Involvement and Partnerships (5 pages)
 - » Budget Overview and Sustainability (6 pages)



Problem Statement

- In this section, applicants must demonstrate an understanding of the U.S. healthcare system, the 21st Century Cures Act (Cures Act), and the provisions in Section 4003 of the Cures Act related to the Trusted Exchange Framework and Common Agreement. This section must provide a clear assessment of the interoperability challenges that exist across the healthcare system and the current health information exchange spectrum. Applicants must also show a clear understanding of how the Cures Act and the Common Agreement are expected to address those challenges.
- This section must describe the need for a Common Agreement that is scalable across the entire nation. This section should describe how the Common Agreement will achieve the goal of establishing interoperability for all HINs. This section must describe how the Common Agreement can improve healthcare, including lowering costs, improving quality, and improving the health of the population.



Organizational Capacity and Technical Capabilities

- Applicants must demonstrate they have the organizational and technical capabilities needed to support implementation of the program. It must demonstrate the applicant's ability to bring together all resources, including leveraging others existing infrastructure and capabilities required to perform the proposed work.
 - » A description of an existing agreement (or single collective set of existing policies) which the applicant currently determines, oversees, or administers that define business, operational, technical, or other conditions or requirements for enabling or facilitating access, exchange, or use of Electronic Health Information (EHI) between or among two or more unaffiliated individuals or entities. This agreement (or set of policies) must currently operate across two or more state jurisdictions. The applicant must be able to demonstrate governance over the data sharing that occurs across these jurisdictions through the agreement.



Organizational Capacity and Technical Capabilities (Continued)

- Applicants must identify the appropriateness, effectiveness, size, and scope of this agreement (or set of policies), to include, but not be limited to, broad nature of the geographic area covered by members, broad scope of participating entities, and the number of patient lives covered, all as a function of the United States as a whole.
- Demonstration of proficiency in building consensus amongst broad groups of stakeholders, particularly with regard to developing an existing participation agreement (or single collective set of policies). Examples of stakeholders may include payers, health care service providers, providers of other services that impact health, individuals, health information networks, health IT developers, state and local governments, federal agencies, and public health agencies. Letters of support included in the Appendix can provide substantiating evidence of meeting this requirement.
- » A description of any prior governance, compliance and adjudicatory experience, including established processes for handling noncompliance in a rapid and judicious manner.



Organizational Capacity and Technical Capabilities (Continued)

- » Strong evidence of the organizational and personnel capabilities needed for successful program implementation, including, but not limited to:
 - Qualified staff to govern the program, including a program manager and, if needed, partners/subcontractors
 - Legal expertise and experience, particularly around data sharing/use agreements
 - Financial management capabilities
 - Technical expertise and experience, including relevant standards knowledge



Program Management Acumen

- This section must demonstrate the applicant's program management acumen. This section must describe:
 - » A clear delineation of the roles and responsibilities of program staff, partners, and collaborating organizations. This includes description of who will have responsibility for key tasks such as: program leadership; monitoring the program's ongoing progress; milestone achievement; and engaging with public stakeholders and ONC.
 - » A work breakdown structure and how each member of the program team will contribute to achieving milestones, completing deliverables, and achieving program outcomes.
 - » The approach for applying appropriate program management controls, including strategies for monitoring and tracking progress on the program's tasks and objectives, ensuring scope control, and communications methods/strategies.
 - » Strategies for monitoring contractors.
 - » Strategies for insulating the program from potential conflicts of interest.



Proposed Approach and Work Plan

 Applicants should provide a clear description of their approach to operationalizing the Common Agreement and addressing the challenges described in the "Problem Statement." This section must demonstrate the program's feasibility.



Proposed Approach and Work Plan (Continued)

- This section must include a program work plan that reflects and is consistent with the budget and sustainability plan, covering all 4 years of the program period. Applicants must describe:
 - » The approach the applicant is proposing to take in conducting the program, including identifying the major challenges that will be addressed.
 - » The approach to complement, expand, and leverage existing national and statewide initiatives and other federally funded health IT programs, ensuring that efforts are not duplicative.
 - » An approach for how the applicant will incorporate the MRTCs into a Common Agreement.
 - Applicants must demonstrate an understanding of the second draft of the TEF ("TEF Draft 2"), and the MRTCs Draft 2.
 - » How the organization will work with ONC to finalize the QHIN Technical Framework Draft 1 and update it during the Cooperative Agreement.
 - » How the applicant will implement the Common Agreement with QHINs.



Collaborator Involvement and Partnerships

- Applicants must describe their existing and anticipated partnerships, including, but not limited to: relationships with payers, healthcare service providers, providers of other services that impact health, individuals, HINs, health IT developers, state and local governments, federal agencies, public health agencies, and others. This section must describe the role and composition of any collaborators or partners that applicants intend to involve in implementing the approach and work plan, as well as how their contributions will support program success. This section must clearly describe a strong, sound, and feasible approach.
- Applicants shall demonstrate their understanding of existing activities carried out by public and private organizations related to exchange between health information exchanges. Applicants must describe how they have leveraged the business models of others for successful health information exchange, and how, if awarded, they will build on this work.



Collaborator Involvement and Partnerships (Continued)

- Demonstration of support from program collaborators and partners must include letters of support. If an entity (e.g., collaborator, partner, sub recipient or contractor) will be responsible for parts of the applicant's approach, a letter of support from those entities indicating their commitment is required. Copies of letters should be placed within Appendix A and will not count as part of the page limit stipulated in this section.
- If applicable, applicants must disclose in this section any operating entities that would otherwise qualify as a QHIN. Applicants must provide confirmation that if they have an affiliation with an operating entity that would otherwise qualify as a prospective QHIN, that entity shall not serve as a QHIN so long as the applicant is the RCE, should the applicant be awarded as the RCE.



Budget Overview and Sustainability

 Applicants are required to provide a description of their budget and overall financial plans. The duration of this award is for 48 months. While initial funding will be awarded for the first year of the program, the recipient must submit a budget to reflect the costs anticipated for the entire program period. Applicants must also propose strategies that an RCE could employ to sustain the Common Agreement at a national level after the expiration of the term of the Cooperative Agreement. This section complements the required Budget Forms and Budget Narrative, which are described below.



Budget Overview and Sustainability (Continued)

- This section is to include a description of the costs that would be incurred in support of the program activities. This must include appropriate justifications of these costs. This section must include the allowable costs that will be incurred in support of the Cooperative Agreement. Cooperative Agreement costs may not be incurred until the beginning date of the award, as indicated on the official NGA. This section 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.
 - » The extent to which the proposed levels of effort and costs of personnel are adequate to advance the program in accordance with given timelines.
 - » Adequate justification to support costs included in budget.
 - A description of how the program income will supplement award funding.
 - » The intent is to ensure applicants can properly support implementation of the Common Agreement during the term of the Cooperative Agreement.
 - Applicants must also include descriptions of the overall financial health of the applicant and key partners.



APPLICATION RESPONSIVENESS AND MERIT REVIEW



Application Review Process

- Submit all application materials electronically through Grants.gov
- Grants.gov issues an email receipt upon successful submission
- ONC issues receipt upon successfully obtaining files from Grants.gov
- Applications are reviewed for responsiveness and categorized as pass/fail
- All applications that pass the review for responsiveness are forwarded for merit review
- Once merit review is complete, ONC may make award
- ONC is not obligated to make an award if none of the applications meet the intent of program requirements or if funding levels or availability changes



Application Responsiveness Criteria

- Applicants **not** meeting the following completeness criteria will be administratively eliminated and not sent for merit review:
 - » The applicant meets the eligibility criteria
 - » The application is received by the deadline required by 11:59 p.m. Eastern Time on 6/17/2019 through <u>http://www.grants.gov</u>
 - The application contains all required components (e.g., Program Narrative, SF-424)
 - » The application meets all formatting and length requirements
 - » Appendices and attachments are not used as a mechanism to exceed page limits of the Project Narrative



Merit Review Criteria

- Responsive applications are forwarded for merit review
- Merit review will be conducted by a review panel of at least three experts in their field from academic institutions, private and non-profit organizations, and local and federal government agencies
- Applications can receive a maximum of 100 points, using the following scale:

Merit Review Criteria	Points
Understanding of Program Purpose and Scope	5
Organizational Capacity & Technical Capabilities & Program Management Acumen	20
Proposed Approach and Work Plan	35
Collaborator Involvement and Partnerships	20
Budget & Financials	20



Merit Review Criteria: Understanding of Program Purpose and Scope – 5 points

- Applicants will be scored based on the strength of its responsiveness to the requirements described in Section 4.B.II.a ("Problem Statement").
- Applicants must demonstrate an understanding of the U.S. healthcare system, the 21st Century Cures Act (Cures Act), and the provisions in Section 4003 of the Cures Act related to the Trusted Exchange Framework and Common Agreement. This section must provide a clear assessment of the interoperability challenges that exist across the healthcare system and the current health information exchange spectrum. Applicants must also show a clear understanding of how the Cures Act and the Common Agreement are expected to address those challenges.
- This section must describe the need for a Trusted Exchange Framework and Common Agreement that is scalable across the entire nation. This section should describe how the Common Agreement will achieve the goal of interoperability for all HINs. Applicants may also use this section to describe how the Common Agreement can improve healthcare, including lowering costs, improving quality, and improving the health of the population.



- Applicants will be scored based on the strength of its responsiveness to the requirements described in Sections 4.B.II.b ("Organizational Capacity and Technical Capabilities") and 4.B.II.c ("Program Management Acumen").
- Applicants must demonstrate the organizational and technical capabilities needed to support implementation of the program. It must demonstrate the applicant's ability to bring together all resources, including leveraging others existing infrastructure and capabilities required to perform the proposed work. This section must include:
 - » The applicant must have a mission statement or similar principal organizational goal indicating their commitment to the advancement of health care interoperability.



- » A description of an existing agreement (or single collective set of existing policies) which the applicant currently determines, oversees, or administers that define business, operational, technical, or other conditions or requirements for enabling or facilitating access, exchange, or use of EHI between or among two or more unaffiliated individuals or entities. This agreement (or set of policies) must currently operate across two (2) or more state jurisdictions. The applicant must be able to demonstrate governance over the data sharing that occurs across these jurisdictions through the agreement.
- » Applicants must speak to the appropriateness, effectiveness, size, and scope of this agreement (or set of policies), to include, but not be limited to, broad nature of the geographic area covered by members, broad scope of participating entities, and the number of patient lives covered, all as a function of the United States as a whole.



- Demonstration of the applicant's proficiency in building consensus amongst broad groups of stakeholders, particularly with regard to developing an existing participation agreement (or single collective set of policies).
 Examples of stakeholders may include payers, health care service providers, providers of other services that impact health, individuals, HINs, health IT developers, state and local governments, federal agencies, and public health agencies.
- A description of any prior governance, compliance and adjudicatory experience, including established processes for handling noncompliance in a rapid and judicious manner.
- » Strong evidence of the organizational and personnel capabilities needed for successful program implementation, for instance, qualified staff to govern the program, including a program manager and, if needed, partners/subcontractors.



» Pertinent capabilities of the applicant not included in other portions of the program narrative, such as any current or previous applicable experience of the program team including technical expertise with data sharing and legal experience with data sharing agreements.



- Applicants must also demonstrate their program management acumen. This section must describe:
 - » A clear delineation of the roles and responsibilities of program staff, partners, and collaborating organizations.
 - » A work breakdown structure and how each member of the program team will contribute to achieving milestones, completing deliverables, and achieving program outcomes.
 - » The approach for applying appropriate program management controls, including strategies for monitoring and tracking progress on the program's tasks and objectives, ensuring scope control, and communications methods/strategies.
 - » Strategies for monitoring contractors.
 - » Strategies for insulating the program from potential conflicts of interest.



Merit Review Criteria: Proposed Approach and Work Plan – 35 points

- Applicants will be scored based on the strength of its responsiveness to the requirements described in Section 4.B.II.d ("Proposed Approach and Work Plan").
- This section should provide a clear description of the applicant's approach to operationalizing the Common Agreement and addressing the challenges described in the "Problem Statement." This section must demonstrate the program's feasibility.
- This section must include a program work plan that reflects and is consistent with the budget and sustainability plan, covering all 4 years of the program period. The work plan must identify important milestones and each major task or action step required to reach those milestones.



- Applicants must describe:
 - » A description of the approach the applicant is proposing to take in conducting the program, including identifying the major challenges that will be addressed.
 - » Approach to complement, expand, and leverage existing national and statewide initiatives and other federally funded health IT programs, ensuring that efforts are not duplicative.
 - » An approach for how the applicant will incorporate the MRTCs Draft 2 and the ARTCs into the Common Agreement.
 - Applicant must demonstrate an understanding of the TEF Draft 2 and the MRTCs Draft 2.
 - How the organization will work with ONC to finalize the QHIN Technical Framework Draft 1 and update it during the Cooperative Agreement.
 - » How the organization will onboard QHINs to the Common Agreement, as described in Milestone 3.



- Applicants must describe:
 - » A clear strategy and approach on how the applicant will serve as a fair and effective governance and adjudicatory body to QHINs, monitoring their compliance with the Common Agreement and taking necessary actions to address non-conformity or noncompliance by QHINs.
 - » Description of the applicant's experience with and understanding of laws and regulations related to privacy and security of data services provided.
 - The applicant's plan for day-to-day management and governance of QHINs.
 How the proposed approach will be scalable and replicable to support the entire nation.
 - Creation of a standard operating procedure (SOP) for placing a QHIN on a corrective action plan as needed and for the RCE to report revocation of QHIN Designation to ONC.



- Applicants must describe:
 - » How the proposed approach will build a competitive market allowing all to compete on information services, but not on ownership of the data itself. This section should describe the entities that would leverage the Common Agreement to better support providers.
 - » How it plans to update the Common Agreement as needed during the term of the Cooperative Agreement to account for new technologies, policies, and use cases.
 - » How the applicant plans to develop new use cases for innovative, competitive, and invaluable services.
 - » This section must align with the following section on how applicants plan to work collaboratively with partners and stakeholders, including building and implementing new use cases that will use the first version of the Common Agreement as their foundation.



Merit Review Criteria: Collaborator Involvement and Partnerships – 20 points

- Applicants will be scored based on the strength of its responsiveness to the requirements described in Section 4.B.II.e ("Collaborator Involvement and Partnerships").
- Applicants must describe their existing and anticipated partnerships, including, but not limited to: partnerships with payers, healthcare service providers, providers of other services that impact health, individuals, HINs, health IT developers, state and local governments, federal agencies, public health agencies, and others.
- Applicants must describe the role and composition of any collaborators or partners they intend to involve in implementing the approach and work plan, as well as how their contributions will support program success.



Merit Review Criteria: Collaborator Involvement and Partnerships – 20 points (Continued)

- Applicants shall demonstrate an understanding of existing activities carried out by public and private organizations related to exchange between health information exchanges. Applicants must describe how they have leveraged the business models of others for successful health information exchange, and how, if awarded, they will build on this work.
- Demonstration of support from program collaborators and partners must include letters of support. If an entity (e.g., collaborator, partner, subrecipient or contractor) will be responsible for parts of the applicant's approach, a letter of support from those entities indicating their commitment is required.
- If applicable, applicants must disclose in this section any operating entities that would otherwise qualify as a QHIN. Applicants must provide confirmation that if they have an affiliation with an operating entity that would otherwise qualify as a prospective QHIN, that entity shall not serve as a QHIN so long as the applicant is the RCE, should the applicant be awarded as the RCE.



- Applicants will be scored based on the strength of their responsiveness to the requirements described in Section 4.B.II.g ("Budget Overview and Sustainability"), Section 4.B.III ("Budget Forms"), Section 4.B.IV ("Budget Narrative"), and Section 4.B.VI ("Indirect Cost Agreement[s]").
- Applicants are required to provide a description of their budget and overall financial plans. The duration of this award is for 48 months (4 years) and this section must reflect the costs and revenues for the entire program period. Applicants must also describe their sustainability plans for post-period of performance, and any anticipated changes to cost or revenue streams.
- The budget narrative is to include a description of the costs that would be incurred in support of the program activities. This must include appropriate justifications of these costs. The narrative must include the allowable costs that will be incurred in support of the Cooperative Agreement. Cooperative Agreement costs may not be incurred until the beginning date of the award, as indicated on the official NGA.



- The intent is to ensure applicants can properly support implementation of the Common Agreement during the award period.
- Applicants must also include descriptions of their overall financial health, as well as that of their key partners.
- All applicants are required to fill out the following budget forms to include the costs associated with the proposed program activities. These forms will be submitted through grants.gov as part of the application package and will include the following:
 - » Application for Federal Assistance SF424
 - » Budget Information for Non-Construction Programs SF424A
 - » Assurances for Non-Construction Programs SF424B
 - » Disclosure of Lobbying Activities SF-LLL
 - » Please note that these forms do not replace program-specific guidance provided in this funding opportunity. Additional instruction regarding budget forms can be found in Appendix A.



- Please note that both the SF-424, Application for Federal Assistance and SF-424A, Budget Information for Non-Construction Programs 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.
- Please also be sure to note that all direct and indirect costs must be allowable, allocable, reasonable and necessary.
- There is also Form SF424B, Assurances for Non-Construction Programs
 - » This form contains laws and other assurances applicants must comply with under the discretionary funds programs administered by ONC.
- Finally, there is Form SF-LLL, Disclosure of Lobbying Activities
 - » This form contains the name and address of lobbying registrants. Please note that a duly authorized representative of the applicant organization must sign the disclosure form. Failure to complete and sign the form may result in civil penalties ranging from \$10,000 to \$100,000.



- The budget narrative describes how the proposed budget, as articulated in the SF424A, aligns with the applicant's program narrative. That is to ensure that costs are realistic (not artificially too low) and reasonable (not inflated) in view of programmatic requirements.
- When more than 33% of a program's total budget (including program income) falls under a contractual expense, a detailed budget narrative/justification must be provided for each contractor or subrecipient. Applicants requesting funding for multi-year 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.



- The full Budget Narrative/Justification should be included in the application immediately following the SF 424 forms. The Budget Narrative must be double-spaced, formatted to 8 ½" x 11" (letter-size) pages, 1" or larger margins on all sides, and a font size of not less than 11 point Times New Roman.
- 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.



Questions

- All questions must be submitted in writing either via the Q&A function during this Webinar or emailed to <u>TEFCA.NOFO@hhs.gov</u>
- All questions will be answered in the form of an FAQ and be made publically available each Friday at <u>https://www.healthit.gov/topic/onc-funding-</u> <u>opportunities/trusted-exchange-framework-and-</u> <u>common-agreement-recognized</u>



Q&As

- Thank you for attending!
- We will remain online for 5 minutes please submit any remaining questions via the Q&A function on this webinar page.
- To see the NOFO on <u>Grants.gov</u> or to apply, go to <u>https://www.grants.gov/web/grants/search-</u> <u>grants.html?keywords=nap-ax-19-001</u>
- For assistance with submitting applications in <u>Grants.gov</u>, please contact the <u>Grants.gov</u> Helpdesk at <u>support@Grants.gov</u> or call at (800) 518-4726.



Please submit your questions

5 Minutes Remaining



Please submit your questions

3 Minutes Remaining



Please submit your questions

1 Minute Remaining



The moderator will now end this session.

Thank you for attending.







The Office of the National Coordinator for Health Information Technology

The Trusted Exchange Framework and Common Agreement Recognized Coordinating Entity (RCE) Cooperative Agreement

Notice of Funding Opportunity (NOFO) Information Session

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