

**Applications will not be solicited through this document; awards will be made based on applications received on previous due date**

**The purpose of this amendment III is to:**

- 1. Provide Prevention and Public Health Funds (PPHF) to this Funding Opportunity Announcement (FOA).**
  - 2. Incorporate the Provisions and Funding Restrictions regarding the use of funds in PPHF awards**
  - 3. PPHF funds will be awarded to grantees through a separate Notice of Award (NOA), resulting in two NOAs for this FOA. Grantees funded by PPHF will:**
    - Maintain awards in a subaccount as described in the Notice of Award**
    - Report on the use of PPHF funds provided through this award**
- Revise Title; revise PPHF CFDA;  
include PPHF reporting Requirements and Restrictions language  
Revisions are in red type**

**Centers for Disease Control and Prevention (CDC)  
Procurement and Grants Office**

**Catalog of Federal Domestic Assistance (CFDA) Number: 93.283; 93.919 and 93.752  
Funding Opportunity Announcement (FOA) Number: CDC-RFA-DP12-120503PPHF14**

**PPHF 2014: Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations – financed in part by 2014 Prevention and Public Health Funds  
National Center for Chronic Disease Prevention and Health Promotion**

**Eligibility:**

This award will be a continuation of funds intended only for grantees previously awarded under **CDC-RFA-DP12-1205 - Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations.**

Anticipated FY14 PPHF funding will be \$97,834,313

Anticipated total FY14 funding including PPHF funds will be \$217,621,891

**Application Submission:**

**Not applicable; Awards will be made based on applications received on previous due date.**

**General Application Packet Tips:**

- Properly label each item of the application packet
- Each section should use 1.5 spacing with one-inch margins
- Number all narrative pages only

- Do not exceed 30 pages each for Components 2, 3 and/or 4 (NBCCEDP, NCCCP and NPCR); 4 pages for Component 1 (Management, Leadership and Coordination - MLC) and 6 pages for Component 5 (Innovation Demonstration Projects - Innov). These page limits excludes appendices such as NBCCEDP Clinical Costs Worksheet, CVs for new staff, letters of support from partners, etc.
- Use a 12 point font
- Where the instructions on the forms conflict with these instructions, follow these instructions
  1. CDC requires the use of PDF format for ALL attachments.
  2. Use of file formats other than PDF may result in the file being unreadable by CDC staff.
  3. Directions for creating PDF files can be found on [www.Grants.gov](http://www.Grants.gov).

**Checklist of required contents of application packet:**

1. Application for Federal Domestic Assistance-Short Organizational Form
2. SF-424A Budget Information-Non-Construction Programs
3. Separate Budget Justification for **each funded Program Component** (MLC, NBCCEDP, NCCCP, NPCR and Innov)
4. Indirect Cost Rate Agreement
5. Separate Project Narrative for **each funded Program Component** (MLC, NBCCEDP, NCCCP, NPCR and Innov)

**Instructions for accessing and completing required contents of the application package:**

- a) Go to: [www.Grants.gov](http://www.Grants.gov)
- b) Select: “Apply for Grants”
- c) Select: “Step 1: Download a Grant Application”
- d) Insert the Funding Announcement Number only, formatted as:  
**CDC-RFA-DP12-120503PPHF14**
- e) Download application package and complete all sections.

**1. Application for Federal Domestic Assistance-Short Organizational Form:**

- A. Complete all sections.
  - i. In addition to inserting the legal name of your organization in Block #5a, insert the CDC Award Number provided in the CDC Notice of Award. Failure to provide your award number could cause delay in processing your application.
  - ii. Please insert your organization’s Business Official information in Block #8.

**SPECIAL NOTE:** Items 2, 3, and 4 should be attached to the application through the “Mandatory Documents” section of the “Grant Application” page. Select “Other Attachments Form” and attach as a PDF file.

For item 2, SF-424A Budget Information, SF-424A Budget Information, grantees should fill out column (a) – “Grant Program Function or Activity”, under Section A – Budget Summary, for each proposed program components. Utilize #1 for Program Management and Coordination “MLC” and “CCC”, #2 for “BC”, #3 for “NPCR”, and #4 for “Innov” (see Attachment I for Naming Codes). Grants.gov will then auto fill the headers under Section B – Budget Categories. For “MLC”, “BC”, “CCC” and “NPCR” and “Innov”, the Objective Class Categories totals, under Section B, should match what is being requested in your budget narrative. Column (5) – “Total”, should be a cumulative total of all requested funds for DP12-1205.

For items 3 & 4, name each document by the grantee code, Program Component code (see Attachment I for Naming Codes) and identify the document such as “Budget and Justification” or “Indirect Cost Agreement” (Example: “ALBC – Budget Justification”).

## **2. SF 424A Budget Information and Justification:**

- A. Download the form from [www.grants.gov](http://www.grants.gov).
- B. Complete all applicable sections.
- C. Estimated Un-obligated
  1. Provide an estimate of anticipated un-obligated funds at the end of the current budget period for **each funded Program Component** (MLC, NBCCEDP, NCCCP, NPCR and Innov).
  2. If use of estimated un-obligated funds is requested in addition to funding for the next year, complete all columns in Section A of 424A and submit an interim Federal Financial Report (FFR), Standard Form-425, available on the CDC internet at <http://www.cdc.gov/od/pgo/forminfo.htm>.
- D. The estimated un-obligated balance should be realistic in order to be consistent with the annual FFR to be submitted following the end of the budget period.
- E. Based on the current rate of obligation, if it appears there will be un-obligated funds at the end of the current budget period, provide detailed actions that will be taken to obligate this amount.
- F. If it appears there will be insufficient funds, (1) provide detailed justification of the shortfall; and (2) list the actions taken to bring the obligations in line with the authorized funding level.
- G. The proposed budget should be based on the federal funding level stated in the letter from CDC.
- H. In a separate narrative, provide a detailed, line-item budget justification of the funding amount requested for **each funded Program Component** (MLC, NBCCEDP, NCCCP, NPCR and Innov) to support the activities to be carried out with those funds. Name each document by the grantee code, Program Component code (see Attachment I for Naming Codes) and identify the document as “Budget and Justification” (Example: “ALBC – Budget Justification”). Attach in the “Mandatory Documents” box under “Budget Narrative Attachment Form”. Documents need to be in the PDF format.
- I. The budget justification must be prepared in the general form, format, and to the level

of detail as described in the CDC Budget Guidance. The sample budget guidance is provided on CDC's internet at: <http://www.cdc.gov/od/pgo/funding/grantmain.htm>.

- J. For any new proposed subcontracts provide the information specified in the Budget Guidance.
- K. When non-federal matching is required, provide a line-item list of non-Federal contributions including source, amount, and/or value of third party contributions proposed to meet a matching requirement.

**3. Indirect Cost Rate Agreement: (This is not applicable to NBCCEDP grantees. This is not applicable to grantees subject to OMB Guidance A-21 – Educational Institutions. The rates stay the same as the first year award.)**

- A. If indirect costs are requested, include a copy of the current negotiated Federal indirect cost rate agreement or a cost allocation plan approval letter for those Grantees under such a plan.
- B. Clearly describe the method used to calculate indirect costs. Make sure the method is consistent with the Indirect Cost Rate Agreement.
- C. To be entitled to use indirect cost rates, a rate agreement must be in effect at the start of the budget period.
- D. If an Indirect Cost Rate Agreement is not in effect, indirect costs may be charged as direct if (1) this practice is consistent with the grantee's/applicant's approved accounting practices; and (2) if the costs are adequately supported and justified. Please see the Budget Guidelines (<http://www.cdc.gov/od/pgo/funding/grantmain.htm>) for additional information.
- E. If applicable, attach in the "Mandatory Documents" box under "Other Attachments Form". Name each document by the grantee code, Program Component code (see Attachment I for Naming Codes) and identify the document "Indirect Cost Agreement" (Example: "LSUCCC – Indirect Cost Rate"). Documents need to be in the PDF format.

**4. Project Narrative:**

**Current Budget Period Progress:**

For each funded Program Component (MLC, NBCCEDP, NCCCP, NPCR and Innov), provide a brief report addressing the following elements of each objective or activity included in the DP12-1205 workplan for the current budget period.

- A. Status (met, ongoing, or unmet)
- B. Major findings, significance of those findings (a description of how the findings impact or contribute to the public health goal(s) of the Program Component(s) of DP12-1205.
- C. Barriers encountered, and how the barriers were addressed
- D. If applicable, include the reasons that goals were not met and a discussion of assistance needed to resolve the situation.
- E. Provide a brief description of how your program coordinates with other cancer and

related risk-factor chronic disease programs such as: the National Comprehensive Cancer Control Program, National Breast and Cervical Cancer Early Detection Program, National Program of Cancer Registries, Colorectal Cancer Control Program, tobacco control program cardiovascular disease program, nutrition/physical activity program, obesity program, etc., in your public health agency.

**New Budget Period Proposed Objectives and Activities:**

- A. List proposed objectives for the upcoming budget period. These objectives must support the intent of the original Funding Opportunity Announcement (FOA).
- B. Each objective and activity must contain a performance or outcome measure that assesses the effectiveness of the project.
- C. For each objective:
  1. List activities that will be implemented;
  2. Provide a timeline for accomplishment;
  3. Identify and justify any redirection of activities; and
  4. Explain the methods you will use to implement the new, redirected activities.
- D. In addition to this information, include comments pertaining to budgetary issues that might hamper the success or completion of the project as originally proposed and approved. Please utilize the work plan format in the original work plan, if applicable.

Attach in the “Mandatory Documents” box under “Project Narrative Attachment Form”. Additional Project Narratives may be attached in the “Mandatory Documents” box under “Other Attachments Form”. Name each document by the grantee code, Program Component code (see Attachment I for Naming Codes) and identify the document as “Project Narrative” (Example: “WVNPCR – Project Narrative”). Documents need to be in the PDF format.

**5. Additional Program Requirements  
2014 (YR03) SAS License Requests**

- In Oct 2013, grantees were required to request SAS license(s) for calendar year 2014.
- The cost per license was \$1206 and allows the Right to Use (RTU) the software on a single-user workstation.
- SAS software licenses are leased on an annual basis (January 1 through December 31) and must be requested by grantees every year. SAS software licenses expire on December 31st of each year.
- SAS licenses(s) will be received by grantees just before or in January 2014.
- Grantees should reflect the cost of the SAS software license(s) in their DP12-1205- 2014 (YR03) line-item budget and justification request as Direct Assistance (DA).
- DP12-1205- 2014 (YR03) budget request must include the same number of licenses received and also from the same component.
- The cost of the licenses requested will be reflected in the YR03 Notice of Award as DA and will be deducted from Federal Assistance (FA) amount.

## Component 2: Policy and Environmental Approaches and Community-Clinical Linkages in the National Comprehensive Cancer Control

### Travel Updates

<i>Meeting/Conference/Training</i>	<i># of Staff</i>	<i># of Days</i>	<i>Location</i>
NCCCP Business Meeting of Program Directors  (Program Director and/or Coordinator)	2	2	Atlanta, GA
(2) Meetings of NCCCP staff  (Regional training opportunities and/or reverse site visits)	2	2-3	TBD

## Component 3: Health Systems Change and Quality Clinical Preventive Services in the National Breast and Cervical Cancer Early Detection Program

### Travel Updates

<i>Meeting/Conference/Training</i>	<i># of Staff</i>	<i># of Days</i>	<i>Location</i>
NBCCEDP Business Meeting of Program Directors  (Program Director and/or Coordinator)	2	3	Atlanta, GA
NBCCEDP Data Manager's Meeting (Data Manager and/or one key staff member)	Will Not Occur	Will Not Occur	Atlanta, GA
Program implementation progress ("reverse site visit"), Consultation/Technical Assistance or to participate on national work groups/committees	2	3-5	TBD

## Component 4: Surveillance Activities in the National Program of Cancer Registries

### Travel Updates

<i>Meeting/Conference/Training</i>	<i># of Staff</i>	<i># of Days</i>	<i>Location</i>
North American Association of Central Cancer Registry (NAACCR) meeting	2	4	Ottawa, Ontario
National Cancer Registrars Association (NCRA) meeting  NOTE: The NPCR Education and Training Conference will be held during the NCRA Annual Meeting. It is highly recommended that each state Education/Training Coordinator (ETC) attend this meeting.	2	4	Nashville, TN
NPCR Program Directors' Meeting	2	3	Atlanta, GA

(Program Director and other key person)			
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Attachment 1 **Naming Convention Codes for DP12-1205**

	<b>Grantee</b>	<b>Naming Code</b>
3854	Alabama Department of Public Health	AL
3856	Alaska Department of Health	AK
3857	Alaska Native Tribal Health Consortium	ANTHC
3947	American Samoa Department of Health	AS
3858	Arizona Department of Health Services	AZ
3860	Arkansas Department of Health	AR
3861	Arctic Slope Native Association	ASN
3862	California Department of Health	CA
3904	Cherokee Nation Health Service Group	CN
3867	Cheyenne River Sioux Tribe	CRS
3868	Colorado Department of Public Health	CO
3948	Commonwealth of Northern Mariana Islands	CNMI
3869	Connecticut Department of Public Health	CT
3870	Delaware Department of Health	DE
3871	District of Columbia	DC
3874	Federated States of Micronesia DoE	FSM
3872	Florida Department of Health	FL
3873	Fond Du Lac Reservation	FDL
3875	Georgia Department of Human Resources	GA
3876	Great Plains Tribal Chairmen's Health Board	GP
3877	Guam Department of Public Health	GU
3878	Hawaii Department of Health	HI
3906	University of Hawaii	UHI
3880	Hopi Tribe	HT
3881	Idaho Department of Health and Welfare	ID
3883	Illinois Department of Public Health	IL
3884	Indiana State Department of Health	IN
3885	Iowa Department of Public Health	IA
3889	Kansas Department of Health	KS
3895	Kaw Nation of Oklahoma	KN
3913	Kentucky Cabinet for Health	KY
3906	University of Kentucky	UKY
3915	Louisiana State University	LSU
3916	Maine Department of Health	ME
3917	Marshall Islands Ministry of Health	RMI

	<b>Grantee</b>	<b>Naming Code</b>
3919	Maryland Department of Health	MD
3920	Massachusetts Department of Health	MA
3921	Michigan Department of Community Health	MI
3922	Minnesota Department of Health	MN
3923	Mississippi Department of Health	MS
3908	University of Mississippi	UMS
3924	Missouri Department of Health	MO
3925	Montana Department of Health	MT
3926	Native American Rehabilitation Assoc.	NARA
3927	Navajo Nation	NN
3928	Nebraska Department of Health	NE
3929	Nevada Department of Health	NV
3930	New Hampshire Department of Health	NH
3931	New Jersey Department of Health	NJ
3932	New Mexico Department of Health	NM
3879	New York State Department of Health	NY
3933	North Carolina Department of Health	NC
3934	North Dakota Department of Health	ND
3909	University of North Dakota	UND
3935	Northwest Portland Area Indian Health Board	NPAIHB
3936	Ohio Department of Health	OH
3938	Oklahoma State Department of Health	OK
3940	Oregon Department of Health	OR
3937	Pennsylvania Department of Health	PA
3939	Republic of Palau Ministry of Health	PAL
3941	Rhode Island Department of Health	RI
3942	South Carolina Department of Health	SC
3943	South Dakota Department of Health	SD
3944	South Puget Intertribal Planning Agency	SPIPA
3945	Southcentral Foundation	SCF
3946	Southeast Alaska Regional Health Cons.	SEARHC
3901	Tennessee Department of Health	TN
3902	Texas Department of Health	TX
3905	Tohono O'Dham Nation	TODN
3863	University of Puerto Rico	UPR
3910	Utah Department of Health	UT
3911	Vermont Department of Health	VT

	<b>Grantee</b>	<b>Naming Code</b>
3899	Washington State Department of Health	WA
3898	West Virginia Department of Health	WV
3897	Wisconsin Department of Health	WI
3896	Wyoming Department of Health	WY
3853	Yukon-Kuskokwim Health Corporation	YKH

<b>Program Components of DP12-1205</b>	<b>Naming Code</b>
Program Management, Leadership and Coordination	MLC
National Comprehensive Cancer Control Program	CCC
National Breast and Cervical Cancer Early Detection Program	BC
National Program of Cancer Registries	NPCR
Innovation Demonstration Projects	Innov

## Reporting

**Prevention Fund Reporting Requirements:** This award requires the grantee to complete projects or activities which are funded under the Prevention and Public Health Fund (PPHF) (Section 4002 of Public Law 111-148) and to report on use of PPHF funds provided through this award. Information from these reports will be made available to the public.

Grantees awarded a grant, cooperative agreement, or contract from such funds with a value of \$25,000 or more shall produce reports on a semi-annual basis with a reporting cycle of January 1 - June 30 and July 1 - December 31; and email such reports to the CDC website (template and point of contact to be provided after award) no later than 20 calendar days after the end of each reporting period (i.e. July 20 and January 20, respectively). Grantee reports must reference the NoA number and title of the grant, and include a summary of the activities undertaken and identify any sub-awards (including the purpose of the award and the identity of each sub-recipient).

**Responsibilities for Informing Sub-recipients:** Grantees agree to separately identify each sub-recipient, document the execution date sub-award, date(s) of the disbursement of funds, the Federal award number, any special CFDA number assigned for PPHF fund purposes, and the amount of PPHF funds. When a grantee awards PPHF funds for an existing program, the information furnished to sub-recipients shall distinguish the sub-awards of incremental PPHF

funds from regular sub-awards under the existing program.

### Funding Restrictions

Restrictions, which must be taken into account while writing the budget, are as follows:

- Sec. 503(a) No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used, other than for normal and recognized executive-legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation of the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government itself.

(b) No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislative body, other than normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government. (c) The prohibitions in subsections (a) and (b) shall include any activity to advocate or promote any proposed, pending, or future Federal, State, or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.

- Sec. 218. None of the funds made available in this title may be used, in whole or in part, to advocate or promote gun control.

- Sec 253. Notwithstanding any other provision of this Act, no funds appropriated in this Act shall be used to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug.

- Sec 738. None of the funds made available by this Act may be used to enter into a contract, memorandum of understanding, or cooperative agreement with, make a grant to, or provide a loan or loan guarantee to any corporation that was convicted (or had an officer or agent of such corporation acting on behalf of the corporation convicted) of a felony criminal violation under any Federal or State law within the preceding 24 months, where the awarding agency is aware of the conviction, unless the agency has considered suspension or debarment of the corporation, or such officer or agent, and made a determination that this further action is not necessary to protect the interests of the Government.

- Sec 739. None of the funds made available by this act may be used to enter into a contract, memorandum of understanding, or cooperative agreement with, make a grant to, or provide a loan or loan guarantee to, any corporation that any unpaid Federal tax liability that has been assessed, for which all judicial and administrative remedies have been exhausted or have

lapsed, and that is not being paid in a timely manner pursuant to an agreement with the authority responsible for collecting the tax liability, where the awarding agency is aware of the unpaid tax liability, unless the agency has considered suspension or debarment of the corporation and made a determination that this further action is not necessary to protect the interests of the Government.

- Sec 433. None of the funds made available by this Act may be used to enter into a contract, memorandum of understanding, or cooperative agreement with, made a grant to, or provide a loan or loan guarantee to, any corporation that was convicted (or had an officer or agent of such corporation acting on behalf of the corporation convicted) of a felony criminal violation under any Federal law within the preceding 24 months, where the awarding agency is aware of the conviction, unless the agency has considered suspension or debarment of the corporation, or such officer or agent and made a determination that this further action is not necessary to protect the interests of the Government.

- Sec 434. None of the funds made available by this act may be used to enter into a contract, memorandum of understanding, or cooperative agreement with, make a grant to, or provide a loan or loan guarantee to, any corporation with respect to which any unpaid Federal tax liability that has been assessed, for which all judicial and administrative remedies have been exhausted or have lapsed, and that is not being paid in a timely manner pursuant to an agreement with the authority responsibly for collecting the tax liability, unless the agency has considered suspension or debarment of the corporation and made a determination that this further action is not necessary to protect the interests of the Government.

- Recipients may not use funds for research.

- Recipients may not use funds for clinical care.

- Recipients may only expend funds for reasonable program purposes, including personnel, travel, supplies, and services, such as contractual agreements for screening services.

- Awardees may not generally use HHS/CDC/ATSDR funding for the purchase of furniture or equipment. Any such proposed spending must be identified in the budget.

- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project objectives and not merely serve as a conduit for an award to another party or provider who is ineligible.

- Reimbursement of pre-award costs is not allowed.

- Funds will not be used to supplant existing state funding for breast and cervical screening services.