

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

Office of Rural Health Policy
Rural Health Research Dissemination

Rural Health Research Dissemination – Cooperative Agreement

Announcement Type: New and Competing Continuation
Announcement Number: HRSA-13-165

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FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2013

Application Due Date: January 14, 2013

*Ensure your Grants.gov registration and passwords are current immediately!
Deadline extensions are not granted for lack of registration.
Registration may take up to one month to complete.*

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Authority: *Section 711(b) of the Social Security Act (42 U.S.C. 912(b), as amended.*

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I. Funding Opportunity Description

1. Purpose

This announcement solicits applications for the *Rural Health Research Dissemination Cooperative Agreement*, formerly known as the *Rural Research to Diverse Audiences Cooperative Agreement*. The purpose of the Rural Health Research Dissemination Program is to disseminate and market policy-oriented information for use by diverse audiences such as rural stakeholders at national, state, and community levels and policy decision-makers to inform and raise awareness of issues regarding policy implications, access, quality and status of health care delivery, services, and management on behalf of rural communities. Key policy issues cover a variety of policy-oriented topics such as, but not limited to, access to health care for the under- and uninsured, health care quality and outcomes, home health, rural health clinics, racial and ethnic disparities, and many others. The information includes the body of research, as funded by ORHP, for all Rural Health Research Centers (RHRCs) and is designed to help decision-makers and policy analysts concerned with a variety of rural health issues at national, state, and community levels better understand the problems rural communities face in assuring access to health care and promoting good health for their members. While RHRCs disseminate their own analyses, rural audiences need and benefit from summary information on the entire body of work as funded by the Office of Rural Health Policy (ORHP) for all RHRCs.

This is a four year activity. At the end of each year, the progress report submitted to the ORHP Research Coordinator should include an evaluation for applicable metrics to determine the impact of the annual project activities. Throughout the entire project period, the Rural Health Research website and the Listserv must be developed and kept up-to-date by adding newly funded ORHP research projects and including changes in status of previous year's projects (e.g., from newly funded research to a published journal article or report).

2. Background

This program is authorized by Section 711(b) of the Social Security Act (42 U.S.C. 912(b), as amended). ORHP is statutorily required in Title VII (Section 711) of the Social Security Act to advise the Secretary on the effects of current policies and regulatory changes in the programs established under titles XVIII (Medicare) and XIX (Medicaid) on the financial viability of small rural hospitals, the ability of rural areas to attract and retain physicians and other health professionals and access to (and the quality of) health care in rural areas. The Social Security Act also requires ORHP to coordinate activities within HHS that relate to rural health care and provide relevant information to the Secretary and others in the Department. ORHP accomplishes this mission through a broad range of policy/research and program activities. The research component focuses on informing ORHP's policy role. The Office addresses the specific difficulties of providing health care in rural communities through its grant programs.

ORHP administers the RHRC Program to produce policy-relevant research on issues of nation-wide significance about rural health services. The research is designed to assist decision-makers at the federal, state, and local levels to better understand problems faced, in this program's context, by rural communities and provides information that will improve and assure access to health care and population health. The RHRC Program is the only Federal program that is dedicated entirely to producing policy-relevant health services research about rural places and populations. There are currently seven RHRCs. They undertake at least 28 new research efforts

per year (initiated each September) and disseminate at least 28 policy briefs, detailed reports, and/or journal articles per year (throughout the year). Each RHRC disseminates its own analysis in print and by website. The role of the Rural Health Research Dissemination Program awardee is to then disseminate and increase awareness of the RHRCs' ORHP funded publications and products to diverse public audiences concerned with a variety of key rural health issues.

II. Award Information

1. Type of Award

Funding will be provided in the form of a cooperative agreement. A cooperative agreement, as opposed to a grant, is an award instrument of financial assistance where substantial involvement is anticipated between HRSA and the recipient during performance of the contemplated project.

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

- Providing input on dissemination strategies and selection of publications/products for dissemination. HRSA will also provide input on the specific audiences, in terms of policy makers and rural stakeholders, to whom the awardee will distribute research products.
- Assuring the timely cooperation of the RHRCs in responding to information requests by the awardee.
- Providing input into the decisions on content, presentation approach, and selection of products/publications.
- Reviewing and providing comments on draft products and publications, such as research alerts, prior to dissemination to diverse audiences.
- Providing input and knowledge on the current and future policy issues that will be informed by past and future RHRC studies.
- Providing input on the evaluation metrics.
- Assisting awardee in selecting one of two appropriate professional meetings at which to exhibit each year.

The cooperative agreement recipient's responsibilities shall include:

- Awardee updates the Rural Health Research website and Listserv by obtaining information from the RHRCs about new, on-going, and recently completed research.
- Awardee assesses the market to understand how to best target audiences who will benefit from products published by the RHRCs.
- Awardee will execute and monitor dissemination strategies to increase RHRC publication and Rural Health Research website awareness.
- In order to disseminate RHRCs' publications/products to diverse audiences, awardee summarizes proposals prior to publication as well as determines dissemination strategies for the RHRCs' publications/products.
- Awardee forms working relationships with appropriate policy makers on issues that RHRCs are addressing via their studies.
- Awardee provides input to RHRCs prior to product publication regarding how to effectively adapt a research study so it can be aptly communicated with a targeted audience.

2. Summary of Funding

This program will provide funding during Federal fiscal years 2013 - 2016. Approximately \$120,000 is expected to be available annually to fund one (1) awardee. Applicants may apply for a ceiling amount of up to \$120,000 per year. The project period is four (4) years. Funding beyond the first year is dependent on the availability of appropriated funds for the Rural Health Research Dissemination program in subsequent fiscal years, awardee satisfactory performance, and a decision that continued funding is in the best interest of the Federal Government.

III. Eligibility Information

1. Eligible Applicants

Eligible applicants include public and non-profit entities. Faith-based and community-based organizations, Tribes, and tribal organizations are eligible to apply.

Applicants must have significant experience in analyzing rural health issues as defined by the following: **principal investigator** for the project must be familiar with healthcare issues and challenges faced in rural communities and major policy issues affecting this population. Principal investigator must have a masters or professional degree applicable to the tasks required in this FOA. Other experience/skills that a principal investigator should have include the following: an ability to communicate (verbally and in writing) with researchers and ORHP Research Coordinator (HRSA project officer); skills to create, analyze and execute appropriate marketing strategies for this program's particular target audience; ability to edit research summary statements appropriate for the Listserv; experience with managing a website that specifically serves as a warehouse for research products; and skills to manage, improve, and implement change as it relates to the Rural Health Research website and other forms of media already specified in this announcement.

Eligible applicants must have prior relevant experience that was national in scope and must have an established long term relationship with a variety of Rural Health Research Centers and national Rural Health Researchers.

Applications that fail to show the aforementioned experience will not be considered.

The applicant might demonstrate experience with producing and publishing reports relevant to rural health, but this is not a requirement. This specific publication experience can be provided in Attachment 1: author(s), title of article, full name of journal (no abbreviations), volume number of journal, date of publication, and page numbers of article. See section IV.2.xii (entitled "Attachments") for details about preparing the attachment.

2. Cost Sharing/Matching

Cost Sharing/Matching is not required for this program.

3. Other

Applications that exceed the ceiling amount will be considered non-responsive and will not be considered for funding under this announcement.

Any application that fails to satisfy the deadline requirements referenced in *Section IV.3* will be considered non-responsive and will not be considered for funding under this announcement.

NOTE: Multiple applications from an organization are not allowable.

IV. Application and Submission Information

1. Address to Request Application Package

Application Materials and Required Electronic Submission Information

HRSA *requires* applicants for this funding opportunity announcement to apply electronically through Grants.gov. The registration and application process protects applicants against fraud and ensures that only authorized representatives from an organization can submit an application. Applicants are responsible for maintaining these registrations, which should be completed well in advance of submitting an application. All applicants *must* submit in this manner unless they obtain a written exemption from this requirement in advance by the Director of HRSA's Division of Grants Policy. Applicants must request an exemption in writing from DGPWaivers@hrsa.gov, and provide details as to why they are technologically unable to submit electronically through the Grants.gov portal. If requesting a waiver, include the following in the e-mail request: the HRSA announcement number for which the organization is seeking relief, the organization's DUNS number, the name, address, and telephone number of the organization and the name and telephone number of the Project Director as well as the Grants.gov Tracking Number (GRANTXXXX) assigned to the submission along with a copy of the "Rejected with Errors" notification as received from Grants.gov. **HRSA and its Digital Services Operation (DSO) will only accept paper applications from applicants that received prior written approval.** However, the application must still be submitted by the deadline. Suggestion: submit application to Grants.gov at least two days before the deadline to allow for any unforeseen circumstances.

IMPORTANT NOTICE: CCR moved to SAM **Effective July 30, 2012**

The Central Contractor Registration (CCR) transitioned to the System for Award Management (SAM) on July 30, 2012.

For any registrations in process during the transition period, data submitted to CCR will be migrated to SAM.

If a record was scheduled to expire between July 16, 2012 and October 15, 2012, CCR is extending the expiration date by 90 days. The registrant received an e-mail notification from CCR when the expiration date was extended. The registrant then will receive standard e-mail reminders to update their record based on the new expiration date. Those future e-mail notifications will come from SAM.

SAM will reduce the burden on those seeking to do business with the government. Vendors will be able to log into one system to manage their entity information in one record, with one expiration date, through one streamlined business process. Federal agencies will be able to look in one place for entity pre-award information. Everyone will have fewer passwords to remember and see the benefits of data reuse as information is entered into SAM once and reused throughout the system.

Active SAM registration is a pre-requisite to the successful submission of grant applications!

Items to consider are:

- When does the account expire?
- Does the organization need to complete the annual renewal of registration?
- Who is the eBiz POC? Is this person still with the organization?
- Does anything need to be updated?

To learn more about SAM, please visit <https://www.sam.gov>.

Note: SAM information must be updated at least every 12 months to remain active (for both grantees and sub-recipients). Grants.gov will reject submissions from applicants with expired registrations. Do not wait until the last minute to register in SAM. According to the SAM Quick Guide for Grantees

(https://www.sam.gov/sam/transcript/SAM_Quick_Guide_Grants_Registrations-v1.6.pdf), an entity's registration will become active after 3-5 days. Therefore, ***check for active registration well before the application deadline.***

Applicants that fail to allow ample time to complete registration with SAM or Grants.gov will not be eligible for a deadline extension or waiver of the electronic submission requirement.

All applicants are responsible for reading the instructions included in HRSA's *Electronic Submission User Guide*, available online at <http://www.hrsa.gov/grants/apply/userguide.pdf>. This Guide includes detailed application and submission instructions for both Grants.gov and HRSA's Electronic Handbooks. Pay particular attention to Sections 2 and 5 that provide detailed information on the competitive application and submission process.

Applicants are also responsible for reading the Grants.gov Applicant User Guide, available online at <http://www.grants.gov/assets/ApplicantUserGuide.pdf>. This Guide includes detailed information about using the Grants.gov system and contains helpful hints for successful submission.

Applicants must submit proposals according to the instructions in the Guide and in this funding opportunity announcement in conjunction with Application Form SF-424 Research and Related (SF-424 R&R). The forms contain additional general information and instructions for applications, proposal narratives, and budgets. The forms and instructions may be obtained by:

- 1) Downloading from <http://www.grants.gov>, or
- 2) Contacting the HRSA Digital Services Operation (DSO) at: HRSA_DSO@hrsa.gov

Each funding opportunity contains a unique set of forms and only the specific forms package posted with an opportunity will be accepted. Specific instructions for preparing portions of the application that must accompany the SF-424 R&R appear in the “Application Format Requirements” section below.

2. Content and Form of Application Submission

Application Format Requirements

The total size of all uploaded files may not exceed the equivalent of 80 pages when printed by HRSA. The total file size may not exceed 10 MB. The 80-page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support. Standard forms are NOT included in the page limit. **HRSA strongly urges applicants to print their application to ensure it does not exceed the 80-page limit. Do not reduce the size of the fonts or margins to save space. See the formatting instructions in Section 5 of the *Electronic Submission User Guide* referenced above.**

Applications must be complete, within the 80-page limit, within the 10 MB limit, and submitted prior to the deadline to be considered under this announcement.

Application Format

Applications for funding must consist of the following documents in the following order:

SF-424 R&R – Table of Contents

 **It is mandatory to follow the instructions provided in this section to ensure that the application can be printed efficiently and consistently for review.**

 **Failure to follow the instructions may make the application non-responsive. Non-responsive applications will not be considered under this funding opportunity announcement.**

 For electronic submissions, applicants only have to number the electronic attachment pages sequentially, resetting the numbering for each attachment, i.e., start at page 1 for each attachment. Do not attempt to number standard OMB approved form pages.

 For electronic submissions, no Table of Contents is required for the entire application. HRSA will construct an electronic table of contents in the order specified.

Application Section	Form Type	Instruction	HRSA/Program Guidelines
SF-424 R&R Cover Page	Form	Pages 1 & 2.	Not counted in the page limit.
Pre-application	Attachment	Can be uploaded on page 2 of SF-424 R&R - Box 20.	Not Applicable to HRSA; Do not use.
SF-424 R&R Senior/Key Person Profile	Form	Supports 8 structured profiles (PD + 7 additional)	Not counted in the page limit.
Senior Key Personnel Biographical Sketches	Attachment	Can be uploaded in SF-424 R&R Senior/Key Person Profile form. One per each senior/key person. The PD/PI biographical sketch should be the first biographical sketch. Up to 8 allowed.	Counted in the page limit.
Senior Key Personnel Current and Pending Support	Attachment	Can be uploaded in SF-424 R&R Senior/Key Person Profile form.	Not Applicable to HRSA; Do not use.
Additional Senior/Key Person Profiles	Attachment	Can be uploaded in SF-424 R&R Senior/Key Person Profile form. Single document with all additional profiles.	Counted in the page limit.
Additional Senior Key Personnel Biographical Sketches	Attachment	Can be uploaded in the Senior/Key Person Profile form. Single document with all additional sketches.	Counted in the page limit.
Additional Senior Key Personnel Current and Pending Support	Attachment	Can be uploaded in the Senior/Key Person Profile form.	Not Applicable to HRSA; Do not use.
Project/Performance Site Location(s)	Form	Supports primary and 29 additional sites in structured form.	Not counted in the page limit.
Additional Performance Site Location(s)	Form	Can be uploaded in SF-424 R&R Performance Site Location(s) form. Single document with all additional site location(s).	Counted in the page limit.

Application Section	Form Type	Instruction	HRSA/Program Guidelines
Other Project Information	Form	Allows additional information and attachments.	Not counted in the page limit.
Project Summary/Abstract	Attachment	Can be uploaded in SF-424 R&R Other Project Information form, Box 6.	Required attachment. Counted in the page limit. Refer to funding opportunity announcement for detailed instructions.
Project Narrative	Attachment	Can be uploaded in SF-424 R&R Other Project Information form, Box 7.	Required attachment. Counted in the page limit. Refer to funding opportunity announcement for detailed instructions. If necessary provide table of contents specific to this document only as the first page. Table of contents is not counted in the page limit.
Bibliography & References	Attachment	Can be uploaded in Other Project Information form, Box 9.	Optional. Counted in the page limit.
Facilities & Other Resources	Attachment	Can be uploaded in Other Project Information form, Box 10.	Optional. Counted in the page limit.
Equipment	Attachment	Can be uploaded in Other Project Information form, Box 11.	Optional. Counted in the page limit.
Other Attachments	Attachment	Can be uploaded in SF-424 R&R Other Project Information form, Box 12. Supports multiple.	Not Applicable to HRSA; Do not use.
SF-424 R&R Budget Period (1-5) - Section A – B	Form	Supports structured budget for up to 5 periods.	Not counted in the page limit.
Additional Senior Key Persons	Attachment	SF-424 R&R Budget Period (1-5) - Section A - B, End of Section A. One for each budget period.	Counted in the page limit.
SF-424 R&R Budget Period (1-5) - Section C – E	Form	Supports structured budget for up to 5 periods.	Not counted in the page limit.
Additional Equipment	Attachment	SF-424 R&R Budget Period (1-5) - Section C – E, End of Section C. One for each budget period.	Counted in the page limit.
SF-424 R&R Budget Period (1-5) - Section F – K	Form	Supports structured budget for up to 5 periods.	Not counted in the page limit.
SF-424 R&R Cumulative Budget	Form	Total cumulative budget.	Not counted in the page limit.
Budget Justification	Attachment	Can be uploaded in SF-424 R&R Budget Period (1-5) - Section F - K form, Box K. Only one consolidated budget justification for the project period.	Required attachment. Counted in the page limit. Refer to funding opportunity announcement for detailed instructions. Provide table of contents specific to this

Application Section	Form Type	Instruction	HRSA/Program Guidelines
			document only as the first page.
SF-424 R&R Subaward Budget	Form	Supports up to 10 budget attachments. This form only contains the attachment list.	Not counted in the page limit.
Subaward Budget Attachment 1-10	Extracted Form to be attached	Can be uploaded in SF-424 R&R Subaward Budget form, Box 1 through 10. Extracted form to be attached from the SF-424 R&R Subaward Budget form and use it for each consortium/ contractual/subaward budget as required by the program funding opportunity announcement. Supports up to 10.	Filename should be the name of the organization and unique. Not counted in the page limit.
SF-424B Assurances for Non-Construction Programs	Form	Assurances for the SF-424 R&R package.	Not counted in the page limit.
Disclosure of Lobbying Activities (SF-LLL)	Form	Supports structured data for lobbying activities.	Not counted in the page limit.
Attachments Form	Form	Supports up to 15 numbered attachments. This form only contains the attachment list.	Not counted in the page limit.
Attachment 1-15	Attachment	Can be uploaded in Other Attachments form 1-15.	Refer to the attachment table provided below for specific sequence. Counted in the page limit.

-  **To ensure that attachments are organized and printed in a consistent manner, follow the order provided below. Note that these instructions may vary across programs.**
-  Evidence of Non-Profit status and invention related documents, if applicable, must be provided in the other attachment form.
 -  Additional supporting documents, if applicable, can be provided using the available rows. Do not use the rows assigned to a specific purpose in the program funding opportunity announcement.
 -  Merge similar documents into a single document. Where several documents are expected in one attachment, ensure that a table of contents cover page is included specific to the attachment. Table of Contents page will not be counted in the page limit.
 -  Please use only the following characters when naming your attachments: A-Z, a-z, 0-9, underscore (_), hyphen (-), space, period, and limit the file name to 50 or fewer characters. Attachments that do not follow this rule may cause the entire application to be rejected or cause issues during processing.

Attachment Number	Attachment Description (Program Guidelines)
Attachment 1	Peer-reviewed journal articles authored or co-authored by principal investigator, if applicable. For further information, see III. ELIGIBILITY INFORMATION, item 1 Eligible Applicants.
Attachment 2	Letters of Agreement and/or Descriptions of Proposed/Existing Contract
Attachment 3	Staffing Plan and Job Descriptions of Key Personnel

Attachment Number	Attachment Description (Program Guidelines)
Attachment 4	Biographical Sketches of Key Personnel
Attachment 5	Tables, Charts, etc.
Attachment 6	Project organizational charts
Attachment 7	Accomplishment Summary (for continuing competition applicants only)
Attachment 8	Explanation of delinquency on Federal debt (if applicable)
Attachments 9-15	Other relevant documents

Application Format

i. Application Face Page

Complete Standard Form 424 Research and Related (SF-424 R&R) provided with the application package. Prepare according to instructions provided in the form itself. For information pertaining to the Catalog of Federal Domestic Assistance, the CFDA Number is 93.155.

DUNS Number

All applicant organizations (and subrecipients of HRSA award funds) are required to have a Data Universal Numbering System (DUNS) number in order to apply for a grant or cooperative agreement from the Federal Government. The DUNS number is a unique nine-character identification number provided by the commercial company, Dun and Bradstreet. There is no charge to obtain a DUNS number. Information about obtaining a DUNS number can be found at <http://fedgov.dnb.com/webform> or call 1-866-705-5711. Please include the DUNS number in item 5 on the application face page. Applications **will not** be reviewed without a DUNS number. Note: A missing or incorrect DUNS number is the number one reason for applications being “Rejected for Errors” by Grants.gov. HRSA will not extend the deadline for applications with a missing or incorrect DUNS number. Applicants should take care in entering the DUNS number in the application.

Additionally, the applicant organization (and any subrecipient of HRSA award funds) is required to register annually with the System for Award Management (SAM) in order to conduct electronic business with the Federal Government. SAM registration must be maintained with current, accurate information at all times during which an entity has an active award or an application or plan under consideration by HRSA. It is extremely important to verify that the applicant organization SAM registration is active and the Marketing Partner ID Number (MPIN) is current. Information about registering with the SAM can be found at <https://www.sam.gov>. Please see Section IV of this funding opportunity announcement for **SAM registration requirements.**

ii. Table of Contents

The application should be presented in the order of the Table of Contents provided earlier. Again, for electronic applications no table of contents is necessary as it will be generated by the system. (Note: the Table of Contents will not be counted in the page limit.)

iii. Budget

Please complete the Research & Related Budget form included with the application kit (Sections A – J and the Cumulative Budget) for each budget period. Upload the Budget Justification Narrative for the entire project period (all budget periods) in Section K of the Research & Related Budget Form. Following completion of Budget Period 1, click on the “NEXT PERIOD” button on the final page to allow for completion of Budget Period 2. Repeat this instruction to complete Budget Periods 3 and 4.

The Cumulative Budget is automatically generated and provides the total budget information for the three-year grant request. Errors found in the Cumulative Budget must be corrected within the incorrect field(s) in Budget Period 1, 2, or 3; corrections cannot be made to the Cumulative Budget itself.

Salary Limitation:

The Consolidated Appropriations Act, 2012 (P.L. 112-74) enacted December 23, 2011, limits the salary amount that may be awarded and charged to HRSA grants and cooperative agreements. Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II. The Executive Level II salary of the Federal Executive Pay scale is \$179,700. This amount reflects an individual’s base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to the applicant organization. This salary limitation also applies to subawards/subcontracts under a HRSA grant or cooperative agreement.

As an example of the application of this limitation: If an individual’s base salary is \$350,000 per year plus fringe benefits of 25% (\$87,500) and that individual is devoting 50% of their time to this award, their base salary should be adjusted to \$179,700 plus fringe of 25% (\$44,925) and a total of \$112,312.50 may be included in the project budget and charged to the award in salary/fringe benefits for that individual. See the breakdown below:

Individual’s <i>actual</i> base full time salary: \$350,000 50% of time will be devoted to project	
Direct salary	\$175,000
Fringe (25% of salary)	\$43,750
Total	\$218,750
Amount that may be claimed on the application budget due to the legislative salary limitation:	
Individual’s base full time salary <i>adjusted</i> to Executive Level II: \$179,700 50% of time will be devoted to the project	
Direct salary	\$89,850
Fringe (25% of salary)	\$22,462.50
Total amount	\$112,312.50

iv. Budget Justification

Provide a narrative that explains the amounts requested for each line in the budget. The budget justification should specifically describe how each item will support the achievement of proposed objectives. The budget period is for ONE year. However, the applicant **must** submit one-year budgets for each of the subsequent budget periods within the requested project period at the time of application. Line item information must be provided to explain the costs entered in the Research and Related budget form. Be very careful about showing how each item in the “other” category is justified. For subsequent budget years, the justification narrative should highlight the changes from year one or clearly indicate that there are no substantive budget changes during the project period. The budget justification **MUST** be concise. Do NOT use the justification to expand the project narrative.

Budget for Multi-Year Award

This announcement is inviting applications for project periods up to four (4) years. Awards, on a competitive basis, will be for a one-year budget period; although the project period may be up to four (4) years. Submission and HRSA approval of the Progress Report(s) and any other required submission or reports is the basis for the budget period renewal and release of subsequent year funds. Funding beyond the one-year budget period but within the four-year

project period is subject to availability of funds, satisfactory progress of the awardee, and a determination that continued funding would be in the best interest of the Federal Government.

Include the following in the Budget Justification narrative:

Personnel Costs: Personnel costs should be explained by listing each staff member who will be supported from funds, name (if possible), position title, percentage of full-time equivalency, and annual salary. Reminder: Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II or \$179,700. An individual's base salary, per se, is NOT constrained by the legislative provision for a limitation of salary. The rate limitation simply limits the amount that may be awarded and charged to HRSA grants and cooperative agreements. Please provide an individual's actual base salary if it exceeds the cap. See the sample below.

Sample:

Name	Position Title	% of FTE	Annual Salary	Amount Requested
J. Smith	Chief Executive Officer	50	\$179,700*	\$89,850
R. Doe	Nurse Practitioner	100	\$75,950	\$75,950
D. Jones	Data/AP Specialist	25	\$33,000	\$8,250

*Actual annual salary = \$350,000

Fringe Benefits: List the components that comprise the fringe benefit rate, for example health insurance, taxes, unemployment insurance, life insurance, retirement plans, and tuition reimbursement. The fringe benefits should be directly proportional to that portion of personnel costs that are allocated for the project. (If an individual's base salary exceeds the legislative salary cap, please adjust fringe accordingly.)

Travel: List travel costs according to local and long distance travel. For local travel, the mileage rate, number of miles, reason for travel and staff member/consumers completing the travel should be outlined. The budget should also reflect the travel expenses associated with participating in meetings and other proposed trainings or workshops.

Equipment: List equipment costs and provide justification for the need of the equipment to carry out the program's goals. Extensive justification and a detailed status of current equipment must be provided when requesting funds for the purchase of computers and furniture items that meet the definition of equipment (a unit cost of \$5,000 or more and a useful life of one or more years).

Supplies: List the items that the project will use. In this category, separate office supplies from medical and educational purchases. Office supplies could include paper, pencils, and the like; medical supplies are syringes, blood tubes, plastic gloves, etc., and educational supplies may be pamphlets and educational videotapes. Remember, they must be listed separately.

Contractual: Applicants are responsible for ensuring that their organization or institution has in place an established and adequate procurement system with fully developed written procedures for awarding and monitoring all contracts. Applicants must provide a clear explanation as to the purpose of each contract, how the costs were estimated, and

the specific contract deliverables. Reminder: recipients must notify potential subrecipients that entities receiving subawards must be registered in SAM and provide the recipient with their DUNS number.

Other: Put all costs that do not fit into any other category into this category and provide an explanation of each cost in this category. In some cases, rent, utilities and insurance fall under this category if they are not included in an approved indirect cost rate.

Applicants may include the cost of access accommodations as part of their project's budget, including sign interpreters, plain language and health literate print materials in alternate formats (including Braille, large print, etc.); and cultural/linguistic competence modifications such as use of cultural brokers, translation or interpretation services at meetings, clinical encounters, and conferences, etc.

Indirect Costs: Indirect costs are those costs incurred for common or joint objectives which cannot be readily identified but are necessary to the operations of the organization, e.g., the cost of operating and maintaining facilities, depreciation, and administrative salaries. For institutions subject to OMB Circular A-21, the term "facilities and administration" is used to denote indirect costs. If an organization applying for an assistance award does not have an indirect cost rate, the applicant may wish to obtain one through HHS's Division of Cost Allocation (DCA). Visit DCA's website at: <http://rates.psc.gov/> to learn more about rate agreements, the process for applying for them, and the regional offices which negotiate them. The indirect cost rate agreement will not count toward the page limit.

v. *Staffing Plan and Personnel Requirements*

Applicants must present a staffing plan and provide a justification for the plan that includes education and experience qualifications and rationale for the amount of time being requested for each staff position. Position descriptions that include the roles, responsibilities, and qualifications of proposed project staff must be included in Attachment 3. When applicable, biographical sketches should include training, language fluency and experience working with the cultural and linguistically diverse populations that are served by their programs.

vi. *Assurances*

Complete Application Form SF-424B Assurances – Non-Construction Programs provided with the application package.

If research involving human subjects is anticipated, applicants must meet the requirements of the HHS regulations to protect human subjects from research risks as specified in the Code of Federal Regulations, Title 45 – Public Welfare, Part 46 – Protection of Human Subjects (45 CFR 46), available online at www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html.

vii. *Certifications*

Use the Certifications and Disclosure of Lobbying Activities Application Form provided with the application package.

Any organization or individual that is indebted to the United States, and has a judgment lien filed against it for a debt to the United States, is ineligible to receive a Federal grant. By signing the SF-424 R&R, the applicant is certifying that they are not delinquent on Federal

debt in accordance with OMB Circular A-129. (Examples of relevant debt include delinquent payroll or other taxes, audit disallowances, guaranteed and direct student loans, benefits that were overpaid, etc.). If an applicant is delinquent on Federal debt, they should attach an explanation that includes proof that satisfactory arrangements have been made with the Agency to which the debt is owed. This explanation should be uploaded as **Attachment 8**.

viii. Project Abstract

Provide a summary of the application. Because the abstract is often distributed to provide information to the public and Congress, please prepare this so that it is clear, accurate, concise, and without reference to other parts of the application. It must include a brief description of the proposed project including the needs to be addressed, the proposed services, and the population group(s) to be served.

Please place the following at the top of the abstract:

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

The project abstract must be single-spaced and limited to one page in length.

ix. Project Narrative

This section provides a comprehensive framework and description of all aspects of the proposed project. It should be succinct, self-explanatory and well organized so that reviewers can understand the proposed project.

Use the following section headers for the Narrative:

▪ ***INTRODUCTION***

This section should briefly describe the purpose of the proposed project. The applicant should provide a brief overview of how the proposed project aligns with the purpose of this cooperative agreement to disseminate and increase awareness of the RHRCs publications and products for use by rural stakeholders at national, state, and community levels as well as policy decision-makers to inform and raise awareness of issues regarding policy implications, access, quality and status of health care delivery, services, and management on behalf of rural communities. The applicant should also demonstrate an understanding of the relevance of this cooperative agreement to the mission of the RHRCs and the goals of ORHP.

▪ ***NEEDS ASSESSMENT***

The applicant has the important task to increase awareness on issues affecting 62 million residents of rural communities. The applicant should demonstrate a comprehensive understanding of the needs of rural populations as they pertain to health care and health care services. It should demonstrate how its strategies and activities will fill information gaps that can inform rural health policy. The applicant should describe the unique dynamics affecting rural populations compared to urban populations from a health care

service, payment and provider point of view, and why they are considered an underserved population. Topic areas in the research that the applicant will disseminate may include but are not limited to public insurance coverage (Medicare, Medicaid, Children's Health Insurance), health workforce, health insurance coverage including the insured, access to health care for the uninsured and under-insured, health finance, care quality and patient safety, access and outcomes, home health, rural health clinics, and racial and ethnic disparities. The intent of the research disseminated to the public is to increase understanding and awareness of emerging policy, health care, and health services issues impacting rural communities. The applicant should also demonstrate an understanding of the need to use a variety of strategies, media and tools to increase awareness of RHRC publications.

▪ ***METHODOLOGY***

The applicant should propose methods that will be used to address needs and meet each of the program requirements and expectations in this funding opportunity announcement. As appropriate, include development of effective tools and strategies for ongoing staff training, outreach, collaborations, clear communication, and information sharing/dissemination with efforts to involve policy makers and rural stakeholders.

The applicant should describe the following means to develop a sound and optimal dissemination strategy: 1) Investigate how to best penetrate the market of rural stakeholders and policy makers, 2) Describe the target audience and specify why this will achieve the purposes of the program, 3) Describe tools that will be used to test and utilize the various dissemination and awareness increasing strategies to grasp the attention of the target audience (if a survey instrument is utilized, OMB clearance may be required), and 4) Describe the methodology for placing value on the program/activities through existing customer feedback.

The applicant should describe the methodology for achieving the following components of this cooperative agreement program:

- Developing, maintaining, updating, and extending the reach of a Rural Health Research website and an automated electronic mailing list (Listserv). The website is to serve as an electronic portal that houses the new and archived publications and research efforts of the RHRCs. Search capabilities must be, at a minimum, by key word, topic, researcher, date of funding, and RHRC. The Listserv is a means to notify users when an RHRC publication is publicly released. Notifications via the Listserv must include a short description or summary of the publication and links to the detailed report on the RHRC's website. This component includes developing and implementing processes involving RHRCs to keep the website and Listserv current.
- Leveraging existing resources such as the Rural Assistance Center (RAC) as well as social media such as Twitter, Facebook, etc., and evolving media to improve dissemination tactics and increase awareness of the RHRC publications.
- Creating press releases when major studies from the RHRCs are released to the public. Media domains may be print, online, television, etc. Press types may include those specifically targeting niche audiences in rural or policy outlets/publications as they relate to topic areas relevant to the RHRC study.
- Staying abreast/informed on congressional activity and legislation relevant to the study topics representative of the RHRC publications. The applicant may propose to use

innovative tactics to alert policy makers when significant and relevant RHRC studies are released. The applicant should develop a policy maker database (includes contact information) as a means to more effectively target and communicate with appropriate people. This communication is expected to enable RHRC products to be properly showcased, facilitate RHRC expert researchers' connections to policy makers, and increase the visibility of the Rural Health Research website with the public.

- Evaluating project activities with the use of evaluative tools and strategies.
- Hosting and coordinating webinars to showcase relevant and current research studies presented by RHRC researchers for rural stakeholders and policy decision makers.
- Collaborating with ORHP and the RHRCs or providing guidance, upon RHRC request, on increasing audience accessibility to RHRC research.

▪ *WORK PLAN*

Describe the activities or steps that will be used to achieve each of the activities proposed during the entire project period in the Methodology section. Provide a schedule of proposed major milestones for each year of the project and identify responsible staff. As appropriate, identify meaningful support and collaboration with key stakeholders in planning, designing and implementing all activities, including development of the application.

Describe the approach to develop and update the Rural Health Research website and Listserv, and how ORHP will be consulted through this process. Describe the approach and schedule to add descriptions of the RHRCs' new research portfolios when they are funded by ORHP every September. Describe the updating process when a new publication/product is available on an RHRC's website. Describe the approach for obtaining continued cooperation of the RHRCs in providing information in a timely manner. Address the following activities: Development of a short summary, obtaining review and approval for the summary and its release from the RHRC and ORHP, and linking to the publication on the relevant RHRC's website.

Describe the approach to expand the reach of the Listserv to target audiences. Describe the approach to update contact information on all registered users on a yearly basis. Describe the approach for immediately updating when major changes occur in national government components, non-government organizations, and other relevant ORHP partners such as State Offices of Rural Health.

Describe the process for identifying which communication medium is most appropriate to target specific audiences.

Describe how applicant will create and maintain a database that includes contacts such as policy makers.

Describe a mechanism for identifying which research is appropriate for selecting as the subject of press releases.

Describe the approach in how specific research products will be highlighted via webinars and how those webinars will be executed and advertised to target audiences.

Describe the process for developing and updating a general-interest flyer about the Rural Health Research website, Listserv, and the RHRCs. The flyer must be available in both electronic and paper copies. The flyer must contain information about the RHRCs (ranking staff, contact information, phone, e-mail address, mailing address, topics of concentration) and examples of the policy impact of their research. Provide a schedule for updating the examples every 9-12 months. Describe the process for collaborating with ORHP in updating the flyer.

Discuss specific approaches for exhibiting at two annual conferences (one which applicant may select and another which ORHP may select) to inform target audiences about the capabilities of the Rural Health Research website, Listserv, and publications of the RHRCs. Describe how the RHRCs will be involved in identifying publications to include in the exhibits. Describe two annual conferences/national meetings that will be targeted for exhibits and the rationale for selecting those conferences.

▪ *RESOLUTION OF CHALLENGES*

Discuss challenges that are likely to be encountered in designing and implementing the activities described in the Work Plan, and approaches that will be used to resolve such challenges.

▪ *EVALUATION AND TECHNICAL SUPPORT CAPACITY*

Describe current experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature.

Describe the data collection strategy to collect, analyze and track data to measure process and impact/outcomes and explain how the data will be used to inform program development and service delivery. Describe the measures that will be used for tracking and the frequency (quarterly/annually) and means for collecting the data. Describe how goals, baselines, and/or benchmarks will be determined.

Describe the ability to evaluate the project activities in relation to meeting the goals of assessing information needs of diverse audiences. The use of evaluative tools and strategies (such as a logic model or dashboard) should be proposed to quantify trends in user “hits” to the website, specific RHRC studies, and RHRCs via the search engine on the website. Metrics for evaluating the project activities should focus on improving the dissemination of the RHRC studies and improving the functionality, usability, and aesthetics of the website. Metrics should include short and long-term goals with baselines on a quarterly basis. Where necessary according to resources accessible to applicant, the evaluation of the project activities may be qualitative via user/RHRC/targeted audience surveys. Majority of metrics should be quantitative. Describe the rationale for selecting quantitative or qualitative measures.

▪ *ORGANIZATIONAL INFORMATION*

Describe the organizational capabilities of the applicant as it pertains to rural populations, and quality and availability of facilities to fulfill the requirements of the proposed project. Describe the organizational structure, staff roles and responsibilities, and chain of command to attain the project objectives. Include an organizational chart in Attachment 6. Provide the same information for consortia members, if applicable. Describe previous experience of the organization and its staff in developing websites and press releases,

understanding relevant legislative activities, conducting assessments of information needs of target audiences, conducting webinars, disseminating rural research to diverse audiences, collaborating with researchers to improve language accessibility of research, and conducting evaluations.

The applicant should also provide evidence of meeting the following eligibility criteria: Applicants must have significant experience in analyzing rural health issues as defined by the following: **principal investigator** for the project must be familiar with healthcare issues and challenges faced in rural communities and major policy issues affecting this population. Principal investigator must have a masters or professional degree applicable to the tasks required in this FOA. Other experience/skills that a principal investigator should have include the following: an ability to communicate (verbally and in writing) with researchers and ORHP Research Coordinator (HRSA project officer); skills to create, analyze and execute appropriate marketing strategies for this program's particular target audience; ability to edit research summary statements appropriate for the Listserv; experience with managing a website that specifically serves as a warehouse for research products; and skills to manage, improve, and implement change as it relates to the Rural Health Research website and other forms of media already specified in this announcement.

Eligible applicants must have prior relevant experience that was national in scope and must have an established long term relationship with a variety of Rural Health Research Centers and national Rural Health Researchers.

x. Attachments

Please provide the following items to complete the content of the application. Please note that these are supplementary in nature, and are not intended to be a continuation of the project narrative. Unless otherwise noted, attachments count toward the application page limit. **Each attachment must be clearly labeled.**

Attachment 1: Peer-reviewed journal articles authored or co-authored by principal investigator, if applicable

List peer-reviewed journal articles authored or co-authored by **principal investigator** about **rural health** published (or in press) **in peer-reviewed scientific journal(s)** (such as Journal of Rural Health, American Journal of Public Health, Journal of Aging and Health). The dates of the published articles must be the year 2000 or later. Provide the following information about these published rural health articles: author(s), title of article, full name of journal (no abbreviations), volume number of journal, date of publication, and page numbers of article

Attachment 2: Letters of Agreement and/or Description(s) of Proposed/Existing Contracts

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

Attachment 3: Staffing Plan and Job Descriptions for Key Personnel

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

Attachment 4: Biographical Sketches of Key Personnel

Include biographical sketches for persons occupying the key positions described in Attachment 3, not to exceed two pages in length. In the event that a biographical sketch is included for an identified individual who is not yet hired, please include a letter of commitment from that person with the biographical sketch.

Attachment 5: Tables, Charts, etc.

Give further details about the proposal (e.g., Gantt or PERT charts, flow charts, etc.).

Attachment 6: Project Organizational Chart

Provide a one-page figure that depicts the organizational structure of the project, including subcontractors and other significant collaborators.

Attachment 7: Accomplishment Summary (For Competing Continuations Only)

A well planned accomplishment summary can be of great value by providing a record of accomplishments. It is an important source of material for HRSA in preparing annual reports, planning programs, and communicating program specific accomplishments. The accomplishments of competing continuation applicants are carefully considered during the review process; therefore, applicants are advised to include previously stated goals and objectives in their application and emphasize the progress made in attaining these goals and objectives. Because the Accomplishment Summary is considered when applications are reviewed and scored, **competing continuation applicants who do not include an Accomplishment Summary may not receive as high a score as applicants who do.** The Accomplishment Summary will be evaluated as part of Review Criterion 4: IMPACT.

The accomplishment summary should be a brief presentation of the accomplishments, in relation to the objectives of the program during the current project period. The report should include:

- (1) The period covered (dates).
- (2) Specific Objectives - Briefly summarize the specific objectives of the project as actually funded. Because of peer review recommendations and/or budgetary modifications made by the awarding unit, these objectives may differ in scope from those stated in the competing application.
- (3) Results- Describe the program activities conducted for each objective. Include both positive and negative results or technical problems that may be important.

Attachment 8: Explanation of delinquency on federal debt (if applicable)

Attachments 9-15: Other Relevant Documents

Include here any other documents that are relevant to the application, including letters of support. Letters of support must be dated and specifically indicate a commitment to the project/program (in-kind services, dollars, staff, space, equipment, etc.) List all other support letters on one page.

3. Submission Dates and Times

Application Due Date

The due date for applications under this funding opportunity announcement is *January 14, 2013 at 11:59 P.M. ET*. Applications completed online are considered formally submitted when the application has been successfully transmitted electronically to the correct funding opportunity number by the organization's Authorized Organization Representative (AOR) through Grants.gov and validated by Grants.gov on or before the deadline date and time.

Receipt acknowledgement: Upon receipt of an application, Grants.gov will send a series of email messages to document the progress of an application through the system.

1. The first will confirm receipt in the system;
2. The second will indicate whether the application has been successfully validated or has been rejected due to errors;
3. The third will be sent when the application has been successfully downloaded at HRSA; and
4. The fourth will notify the applicant of the Agency Tracking Number assigned to the application.

The Chief Grants Management Officer (CGMO) or designee may authorize an extension of published deadlines when justified by circumstances such as natural disasters (e.g., floods or hurricanes) or other disruptions of services, such as a prolonged blackout. The CGMO or designee will determine the affected geographical area(s).

Late applications:

Applications which do not meet the criteria above are considered late applications and will not be considered in the current competition.

4. Intergovernmental Review

The Rural Health Research Dissemination Cooperative Agreement is a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR 100. Executive Order 12372 allows States the option of setting up a system for reviewing applications from within their States for assistance under certain Federal programs. Application packages made available under this funding opportunity will contain a listing of States which have chosen to set up such a review system, and will provide a State Single Point of Contact (SPOC) for the review. Information on States affected by this program and State Points of Contact may also be obtained from the Grants Management Specialist listed in the Agency Contact(s) section, as well as from the following Web site: http://www.whitehouse.gov/omb/grants_spoc.

All applicants other than federally recognized Native American Tribal Groups should contact their SPOC as early as possible to alert them to the prospective applications and receive any necessary instructions on the State's process used under this Executive Order.

Letters from the SPOC in response to Executive Order 12372 are due sixty days after the application due date.

5. Funding Restrictions

Applicants responding to this announcement may request funding for a project period of up to

four (4) years, at no more than \$120,000 per year. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

Funds under this announcement may not be used for the following purposes: foreign travel, patient services, construction, and/or renovation.

Salary Limitation: The Consolidated Appropriations Act, 2012 (P.L. 112-74) enacted December 23, 2011, limits the salary amount that may be awarded and charged to HRSA grants and cooperative agreements. Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II. The Executive Level II salary of the Federal Executive Pay scale is \$179,700. This amount reflects an individual's base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to the applicant organization. This salary limitation also applies to subawards/subcontracts under a HRSA grant or cooperative agreement.

Per Division F, Title V, Section 503 of the Consolidated Appropriations Act, 2012 (P.L. 112-74) enacted December 23, 2011 (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 to 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, except in presentation to 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 legislature or legislative body, other than for 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.

Per Division F, Title V, Section 523 of the Consolidated Appropriations Act, 2012 (P.L. 112-74) enacted December 23, 2011, 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.

6. Other Submission Requirements

As stated in Section IV.1, except in very rare cases HRSA will no longer accept applications in paper form. Applicants submitting for this funding opportunity are **required** to submit **electronically** through Grants.gov. To submit an application electronically, please use the APPLY FOR GRANTS section at <http://www.grants.gov>. When using Grants.gov applicants will be able to download a copy of the application package, complete it off-line, and then upload and submit the application via the Grants.gov site.

It is essential that organizations **immediately register** in Grants.gov and become familiar with the Grants.gov site application process. Applicants that do not complete the registration process will be unable to submit an application. The registration process can take up to one month.

To be able to successfully register in Grants.gov, it is necessary to complete all of the following required actions:

- Obtain an organizational Data Universal Numbering System (DUNS) number
- Register the organization with the System for Award Management (SAM)
- Identify the organization's E-Business Point of Contact (E-Biz POC)
- Confirm the organization's SAM "Marketing Partner ID Number (M-PIN)" password
- Register and approve an Authorized Organization Representative (AOR)
- Obtain a username and password from the Grants.gov Credential Provider

Instructions on how to register, tutorials and FAQs are available on the Grants.gov web site at <http://www.grants.gov>. Assistance is also available 24 hours a day, 7 days a week (excluding Federal holidays) from the Grants.gov help desk at support@grants.gov or by phone at 1-800-518-4726. Applicants should ensure that all passwords and registration are current well in advance of the deadline.

It is incumbent on applicants to ensure that the AOR is available to submit the application to HRSA by the published due date. HRSA will not accept submission or re-submission of incomplete, rejected, or otherwise delayed applications after the deadline. Therefore, an organization is urged to submit an application in advance of the deadline. If an application is rejected by Grants.gov due to errors, it must be corrected and resubmitted to Grants.gov before the deadline date and time. Deadline extensions will not be provided to applicants who do not correct errors and resubmit before the posted deadline.

If, for any reason, an application is submitted more than once prior to the application due date, HRSA will only accept the applicant's last validated electronic submission prior to the Grants.gov application due date as the final and only acceptable application.

Tracking an application: It is incumbent on the applicant to track their application by using the Grants.gov tracking number (GRANTXXXXXXXX) provided in the confirmation email from Grants.gov. More information about tracking an application can be found at <https://apply07.grants.gov/apply/checkApplStatus.faces>. Be sure the application is validated by Grants.gov prior to the application deadline.

V. Application Review Information

1. Review Criteria

Procedures for assessing the technical merit of applications have been instituted to provide for an objective review of applications and to assist the applicant in understanding the standards against which each application will be judged. Critical indicators have been developed for each review criterion to assist the applicant in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation. Review criteria are outlined below with specific detail and scoring points.

Review Criteria are used to review and rank applications. The *Rural Health Research Dissemination* program has 6 review criteria:

Criterion 1: NEED (15 points) Corresponds to the Introduction and Needs Assessment sections in the Program Narrative

The extent to which:

- The applicant clearly demonstrates the problem as it pertains to the challenges faced by rural populations and health care, and associated contributing factors.
- The applicant understands the relevance of this program to the mission of the RHRCs and the goals of ORHP.
- The applicant demonstrates an understanding of the importance of disseminating rural health research from a health care service, payment and provider point of view, and also demonstrates an understanding of the unique health care issues that affect rural populations and why they are considered an underserved population.
- The applicant demonstrates the ability to address and fill information gaps in rural health policy by the strategies and activities proposed. Topics in which the applicant should demonstrate an understanding and awareness include, but are not limited to: public insurance coverage (Medicare, Medicaid, Children's Health Insurance), health workforce, health insurance coverage including the insured, access to health care for the uninsured and under-insured, health finance, care quality and patient safety, access and outcomes, home health, rural health clinics, and racial and ethnic disparities; as well as other emerging policy, health care, and health services issues impacting rural communities.
- The proposed strategies for selecting, disseminating and increasing awareness of the RHRC products will allow the RHRC products to effectively and efficiently reach the targeted public audience, including rural stakeholders and policymakers.

Criterion 2: RESPONSE (25 points) Corresponds to the Methodology, Work Plan, and Resolution of Challenges sections in the Program Narrative.

The extent to which:

- The activities described in the application are capable of addressing the problem and attaining the project objectives. Each of the project components should be addressed in this section: 1) Developing and updating the Rural Health Research website and Listserv, 2) Leveraging existing resources, 3) Creating press releases, 4) Staying abreast of relevant legislation and other national health policy activities, 5) Evaluating project activities, 6) Hosting and coordinating webinars, and 7) Collaborating with RHRCs and ORHP to assist in increasing audience accessibility of RHRC research.
- The proposed approach and schedule for developing a Rural Health Research website and Listserv includes plans and key milestones for addressing user needs and staying current/up-to-date.

- The approach for obtaining input from the RHRCs regarding new research portfolios and publications allows the applicant to update the Rural Health Research website and Listserv while maintaining RHRC cooperation.
- The applicant provides evidence of previous experience maintaining at least one (1) national program website and discusses the capability to maintain a national, research dissemination-focused website that serves as an electronic portal for RHRC publications and other relevant rural health research resources.
- The approach for researching the target audience and developing a dissemination strategy is reasonable, detailed and methodologically sound.
- The approach to market the Rural Health Research website and its products addresses the goals of expanding its reach.
- The applicant proposes sound methodologies for leveraging existing resources such as the Rural Assistance Center (RAC), as well as social media such as Facebook and Twitter and other evolving media strategies to improve the dissemination and increase awareness of RHRC publications.
- The approach and schedule for the general-interest flyer about the Rural Health Research website, Listserv, and the RHRCs addresses how it will be policy-relevant, kept updated, and includes ORHP input. It must also include all information as requested: it must be available in both electronic and paper copies and it must contain information about the RHRCs (ranking staff, contact information, phone, e-mail address, mailing address, topics of concentration) and examples of the policy impact of their research.
- The approach for exhibits addresses the recent release of RHRC publications and the information needs of diverse audiences about capabilities of the Rural Health Research website and Listserv.
- The applicant proposes an effective approach for creating and executing press releases and webinars to communicate and market the value of the Rural Health Research website and the research featured on the website.
- The dissemination strategies proposed take into account any potential copyright and/or prohibition of prior released research issues that may be encountered.
- The applicant identifies major concerns in implementing the activities and the approaches to resolving them aptly addresses these concerns.

Criterion 3: EVALUATIVE MEASURES (15 points) Corresponds to the Evaluation and Technical Support Capacity section in the Program Narrative.

The extent to which:

- The applicant proposes strong and effective methods and measures to monitor and evaluate the project results. The proposal should provide evidence that the evaluative measures will be able to assess: 1) to what extent the program objectives have been met, and 2) to what extent these can be attributed to the project.
- The applicant demonstrates the ability to use evaluative tools or strategies (such as a logic model or dashboard) to quantify trends in user “hits” to the website, specific RHRC studies, and RHRCs via the search engine on the website, as well as track any additional proposed metrics.
- There is an appropriate mix of short and long-term goals with baselines proposed for inclusion.
- There is an appropriate mix of quantitative and qualitative measures proposed including a rationale for the inclusion of each.

Criterion 4: IMPACT (20 points) Corresponds to the Work Plan section in the Program Narrative.

The extent to which:

- The proposed work plan will lead to the project's goals of increased awareness of the Rural Health Research website and RHRC publications to influence the spread of knowledge regarding rural health issues and the policy implications associated with them. The applicant should provide evidence of the ability to reach both a national audience as well as any relevant targeted audiences depending on the rural health research or related information being disseminated.
- The approach, measures and schedules of the evaluation addresses the impact of the RHRCs' products in meeting the information needs of rural stakeholders and policy makers.
- For competing continuations, past performance will also be considered.

Criterion 5: RESOURCES/CAPABILITIES (15 points) Corresponds to the Evaluation and Technical Support Capacity and Organizational Information sections in the Program Narrative.

The extent to which:

- The amounts of time for key staff members proposed to achieve project milestones and objectives and are reasonable in relation to the scope of the activities proposed.
- The organizational capabilities and structure, facility quality and availability, staff roles, chain of command, and schedule for milestones address the ability of the applicant to achieve the project objectives.
- Consortia organizations, if proposed, are essential to achieving the project objectives without making the project management structure overly complex.
- The experiences of the organization and its staff indicate the organization has the capability to develop, maintain and improve the Rural Health Research website, conduct assessments/research of information needs of target audiences, disseminate RHRC to target audiences, and conduct evaluations demonstrating that the dissemination strategies met identified needs.

Criterion 6: SUPPORT REQUESTED (10 points) Corresponds to the Budget and Budget Justification sections in the Program Narrative.

The extent to which:

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

2. Review and Selection Process

The Division of Independent Review is responsible for managing objective reviews within HRSA. Applications competing for Federal funds receive an objective and independent review performed by a committee of experts qualified by training and experience in particular fields or disciplines related to the program being reviewed. In selecting review committee members, other factors in addition to training and experience may be considered to improve the balance of the committee, e.g., geographic distribution. Each reviewer is screened to avoid conflicts of

interest and is responsible for providing an objective, unbiased evaluation based on the review criteria noted above. The committee provides expert advice on the merits of each application to program officials responsible for final selections for award.

Applications that pass the initial HRSA eligibility screening will be reviewed and rated by a panel based on the program elements and review criteria presented in Section V. 1. Review Criteria of this funding opportunity announcement. The review criteria are designed to enable the review panel to assess the quality of a proposed project and determine the likelihood of its success. The criteria are closely related to each other and are considered as a whole in judging the overall quality of an application.

3. Anticipated Announcement and Award Dates

It is anticipated that awards will be announced prior to the start date of July 1, 2013.

VI. Award Administration Information

1. Award Notices

Each applicant will receive written notification of the outcome of the objective review process, including a summary of the expert committee's assessment of the application's strengths and weaknesses, and whether the application was selected for funding. Applicants who are selected for funding may be required to respond in a satisfactory manner to Conditions placed on their application before funding can proceed. Letters of notification do not provide authorization to begin performance.

The NoA sets forth the amount of funds granted, the terms and conditions of the award, the effective date of the award, the budget period for which initial support will be given, the non-Federal share to be provided (if applicable), and the total project period for which support is contemplated. Signed by the Grants Management Officer, it is sent to the applicant's Authorized Organization Representative, and reflects the only authorizing document. It will be sent prior to the start date of July 1, 2013.

2. Administrative and National Policy Requirements

Successful applicants must comply with the administrative requirements outlined in 45 CFR Part 74 [Uniform Administrative Requirements for Awards and Subawards to Institutions of Higher Education, Hospitals, Other Nonprofit Organizations, and Commercial Organizations](#) or 45 CFR Part 92 [Uniform Administrative Requirements For Grants And Cooperative Agreements to State, Local, and Tribal Governments](#), as appropriate.

HRSA grant and cooperative agreement awards are subject to the requirements of the HHS Grants Policy Statement (HHS GPS) that are applicable based on recipient type and purpose of award. This includes any requirements in Parts I and II of the HHS GPS that apply to the award. The HHS GPS is available at <http://www.hrsa.gov/grants/hhsgrantspolicy.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 NoA).

Non-Discrimination Requirements

To serve persons most in need and to comply with Federal law, services must be widely accessible. Services must not discriminate on the basis of age, disability, sex, race, color, national origin or religion. The HHS Office for Civil Rights provides guidance to grant and cooperative agreement recipients on complying with civil rights laws that prohibit discrimination on these bases. Please see <http://www.hhs.gov/ocr/civilrights/understanding/index.html>. HHS also provides specific guidance for recipients on meeting their legal obligation under Title VI of the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, color or national origin in programs and activities that receive Federal financial assistance (P.L. 88-352, as amended and 45 CFR Part 80). In some instances a recipient's failure to provide language assistance services may have the effect of discriminating against persons on the basis of their national origin. Please see <http://www.hhs.gov/ocr/civilrights/resources/laws/revisedlep.html> to learn more about the Title VI requirement for grant and cooperative agreement recipients to take reasonable steps to provide meaningful access to their programs and activities by persons with limited English proficiency.

Financial Conflict of Interest

HHS requires awardees and investigators to comply with the requirements of 42 CFR part 50, Subpart F, "Responsibility of Applicants for Promoting Objectivity in Research for which PHS Funding is Sought." A Final Rule amending this PHS regulation (and the companion regulation at 45 CFR part 94, "Responsible Prospective Contractors," imposing similar requirements for research contracts) was published on August 25, 2011 in the Federal Register (<http://www.gpo.gov/fdsys/pkg/FR-2011-08-25/pdf/2011-21633.pdf>). An Institution applying for or receiving PHS funding from a grant or cooperative agreement that is covered by the rule must be in full compliance with all of the revised regulatory requirements no later than August 24, 2012, and immediately upon making its institutional Financial Conflict of Interest (FCOI) policy publicly accessible as described in the regulation.

Trafficking in Persons

Awards issued under this funding opportunity announcement are 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.html>.

Smoke-Free Workplace

The Public Health Service strongly encourages all award recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products. Further, Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of a facility) in which regular or routine education, library, day care, health care or early childhood development services are provided to children.

Cultural and Linguistic Competence

HRSA programs serve culturally and linguistically diverse communities and multiple cultures. Although race and ethnicity are often thought to be dominant elements of culture, HRSA-funded programs embrace a broader definition to incorporate diversity within specific cultural groups including but not limited to cultural uniqueness within Native American populations, Native Hawaiian, Pacific Islanders, and other ethnic groups, language, gender, socio-economic status, sexual orientation and gender identity, physical and mental capacity, age, religion, housing status, and regional differences. Organizational behaviors, practices, attitudes, and policies across all HRSA-supported entities respect and respond to the cultural diversity of communities,

clients and students served. HRSA is committed to ensuring access to quality health care for all. Quality care means access to services, information, materials delivered by competent providers in a manner that factors in the language needs, cultural richness, and diversity of populations served. Quality also means that, where appropriate, data collection instruments used should adhere to culturally competent and linguistically appropriate norms. For additional information and guidance, refer to the National Standards for Culturally and Linguistically Appropriate Services in Health Care (CLAS) published by HHS and available online at <http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlID=15>. Additional cultural competency and health literacy tools, resources and definitions are available online at <http://www.hrsa.gov/culturalcompetence> and <http://www.hrsa.gov/healthliteracy>.

Healthy People 2020

Healthy People 2020 is a national initiative led by HHS that sets priorities for all HRSA programs. The initiative has four overarching goals: (1) attain high-quality, longer lives free of preventable disease, disability, injury, and premature death; (2) achieve health equity, eliminate disparities, and improve the health of all groups; (3) create social and physical environments that promote good health for all; and (4) promote quality of life, healthy development, and healthy behaviors across all life stages. The program consists of over 40 topic areas, containing measurable objectives. HRSA has actively participated in the work groups of all the topic areas and is committed to the achievement of the Healthy People 2020 goals. More information about Healthy People 2020 may be found online at <http://www.healthypeople.gov/>.

National HIV/AIDS Strategy (NHAS)

The National HIV/AIDS Strategy (NHAS) has three primary goals: (1) reducing the number of people who become infected with HIV; (2) increasing access to care and optimizing health outcomes for people living with HIV; and (3) reducing HIV-related health disparities. The NHAS states that more must be done to ensure that new prevention methods are identified and that prevention resources are more strategically deployed. Further, the NHAS recognizes the importance of early entrance into care for people living with HIV to protect their health and reduce their potential of transmitting the virus to others. HIV disproportionately affects people who have less access to prevention, care and treatment services and, as a result, often have poorer health outcomes. Therefore, the NHAS advocates adopting community-level approaches to identify people who are HIV-positive but do not know their serostatus and reduce stigma and discrimination against people living with HIV.

To the extent possible, program activities should strive to support the three primary goals of the NHAS. As encouraged by the NHAS, programs should seek opportunities to increase collaboration, efficiency, and innovation in the development of program activities to ensure success of the NHAS. Programs providing direct services should comply with federally-approved guidelines for HIV Prevention and Treatment (see <http://www.aidsinfo.nih.gov/Guidelines/Default.aspx> as a reliable source for current guidelines). More information can also be found at <http://www.whitehouse.gov/administration/eop/onap/nhas>.

Health IT

Health information technology (Health IT) provides the basis for improving the overall quality, safety and efficiency of the health delivery system. HRSA endorses the widespread and consistent use of health IT, which is the most promising tool for making health care services more accessible, efficient and cost effective for all Americans.

Related Health IT Resources:

- [Health Information Technology \(HHS\)](#)
- [What is Health Care Quality and Who Decides? \(AHRQ\)](#)

3. Reporting

The successful applicant under this funding opportunity announcement must comply with the following reporting and review activities:

a. Audit Requirements

Comply with audit requirements of Office of Management and Budget (OMB) Circular A-133. Information on the scope, frequency, and other aspects of the audits can be found on the Internet at http://www.whitehouse.gov/omb/circulars_default.

b. Payment Management Requirements

Submit a quarterly electronic Federal Financial Report (FFR) Cash Transaction Report via the Payment Management System. The report identifies cash expenditures against the authorized funds for the grant or cooperative agreement. The FFR Cash Transaction Reports must be filed within 30 days of the end of each calendar quarter. Failure to submit the report may result in the inability to access award funds. Go to <http://www.dpm.psc.gov> for additional information.

c. Status Reports

1) **Federal Financial Report.** The Federal Financial Report (SF-425) is required according to the following schedule: <http://www.hrsa.gov/grants/manage/technicalassistance/federalfinancialreport/ffrschedule.pdf>. The report is an accounting of expenditures under the project that year. Financial reports must be submitted electronically through EHB. More specific information will be included in the NoA.

2) Progress Reports.

Annual Report: The awardee must submit a progress report to HRSA on an annual basis. Submission and HRSA approval of awardee Progress Report(s) triggers the budget period renewal and release of subsequent year funds. This report has two parts. The first part demonstrates awardee progress on program-specific goals. The second part collects core performance measurement data including performance measurement data to measure the progress and impact of the project. Further information will be provided in the NoA. Quarterly Reports: The awardee must also submit quarterly reports to the Project Officer that provides quarterly metrics and allows for identification and understanding of ongoing trends and needs.

3) **Final Report.** A final report is due within 90 days after the project period ends. The final report collects program-specific goals and progress on strategies; core performance measurement data; impact of the overall project; the degree to which the awardee achieved the mission, goal and strategies outlined in the program; awardee objectives and accomplishments; barriers encountered; and responses to summary questions regarding the awardee's overall experiences over the entire project period. The final report must be

submitted on-line by awardees in the Electronic Handbooks system at <https://grants.hrsa.gov/webexternal/home.asp>.

4) **Tangible Personal Property Report.** If applicable, the awardee must submit the Tangible Personal Property Report (SF-428) and any related forms. The report must be submitted within 90 days after the project period ends. Awardees are required to report all federally-owned property and acquired equipment with an acquisition cost of \$5,000 or more per unit. Tangible personal property means property of any kind, except real property, that has physical existence. It includes equipment and supplies. Property may be provided by HRSA or acquired by the recipient with award funds. Federally-owned property consists of items that were furnished by the Federal Government. Tangible personal property reports must be submitted electronically through EHB. More specific information will be included in the NoA.

d. Transparency Act Reporting Requirements

New awards (“Type 1”) issued under this funding opportunity announcement are subject to the reporting requirements of the Federal Funding Accountability and Transparency Act (FFATA) of 2006 (Pub. L. 109–282), as amended by section 6202 of Public Law 110–252, and implemented by 2 CFR Part 170. Grant and cooperative agreement recipients must report information for each first-tier subaward of \$25,000 or more in Federal funds and executive total compensation for the recipient’s and subrecipient’s five most highly compensated executives as outlined in Appendix A to 2 CFR Part 170 (FFATA details are available online at <http://www.hrsa.gov/grants/ffata.html>).

Competing continuation awardees, etc. may be subject to this requirement and will be so notified in the NoA.

VII. Agency Contacts

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

Benoit M. Mirindi, Senior Public Health Analyst
Attn.: Rural Health Research Dissemination Program
HRSA Division of Grants Management Operations, OFAM
Parklawn Building, Room 11-02
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 443-6606
Fax: (301) 443-6343
Email: bmirindi@hrsa.gov

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

Megan Meacham, Public Health Analyst
HRSA Office of Rural Health Policy
Parklawn Building, Room 5A-05
5600 Fishers Lane

Rockville, MD 20857
Telephone: (301) 443-8349
Fax: (301) 443-2803
Email: MMeacham@hrsa.gov

Applicants may need assistance when working online to submit their application forms electronically. Applicants should always obtain a case number when calling for support. For assistance with submitting the application in Grants.gov, contact Grants.gov 24 hours a day, seven days a week, excluding Federal holidays at:

Grants.gov Contact Center
Telephone: 1-800-518-4726
E-mail: support@grants.gov
iPortal: <http://grants.gov/iportal>

Successful applicants/awardees may need assistance when working online to submit information and reports electronically through HRSA's Electronic Handbooks (EHBs). For assistance with submitting information in HRSA's EHBs, contact the HRSA Call Center, Monday-Friday, 9:00 a.m. to 5:30 p.m. ET:

HRSA Contact Center
Telephone: (877) 464-4772
TTY: (877) 897-9910
E-mail: CallCenter@HRSA.GOV

VIII. Other Information

Helpful Web Sites:

Websites for HRSA's Office of Rural Health Policy and ORHP Funded Rural Research
<http://www.hrsa.gov/ruralhealth>
<http://www.ruralhealthresearch.org>

IX. Tips for Writing a Strong Application

HRSA has designed a technical assistance webpage to assist applicants in preparing applications. Resources include help with system registration, finding and applying for funding opportunities, writing strong applications, understanding the review process, and many other topics which applicants will find relevant. The website can be accessed online at:
<http://www.hrsa.gov/grants/apply/index.html>.

In addition, a concise resource offering tips for writing proposals for HHS grants and cooperative agreements can be accessed online at:
<http://www.hhs.gov/asrt/og/grantinformation/apptips.html>.