

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

HIV/AIDS Bureau
Division of Community HIV/AIDS Programs

Dental Reimbursement Program

Announcement Type: New
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Catalog of Federal Domestic Assistance (CFDA) No. 93.924

FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2013

Application Due Date: April 12, 2013

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

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Authority: Title XXVI of the Public Health Service Act, Section 2692(b) (42 U.S.C. 300ff-111); as amended by P.L. 111-87, the Ryan White HIV/AIDS Treatment Extension Act of 2009

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I. Funding Opportunity Description

1. Purpose

This announcement solicits applications for the Part F Dental Reimbursement Program (DRP) to expand HIV services and education and training. These services target low-income, underserved people living with HIV/AIDS. The primary purpose of the DRP is to improve access to oral health care services for patients with HIV and to train dental and hygiene students and dental residents to deliver HIV/AIDS dental care. The DRP accomplishes this by defraying a portion of unreimbursed dental care costs for people living with HIV/AIDS incurred by accredited dental or dental hygiene education programs recognized by the Commission on Dental Accreditation.

2. Background

This program is authorized by Title XXVI of the Public Health Service Act, Section 2692(b) (42 U.S.C. 300ff-111), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Ryan White HIV/AIDS Program).

HAB Guiding Principles

HAB has identified four factors that have significant implications for HIV/AIDS care services and treatment, which should be considered as the application and program are developed and refined:

- Revise care systems to meet emerging needs,
- Ensure access to quality HIV/AIDS care,
- Coordinate Ryan White Program services with other health care delivery systems, and
- Evaluate the impact of Ryan White Program funds and make needed improvements.

HRSA evaluates its programs through use of the Government Performance and Results Act (GPRA), and the active use of performance data to monitor achievement toward meeting HRSA's strategic goals. HAB has identified specific measures under GPRA and overarching performance measures used to demonstrate progress in meeting the needs of uninsured and underinsured individuals. Program Assessment Rating Tool (PART) measures look at performance of Ryan White HIV/AIDS Program grantees across all programs.

GPRA measure relevant to Part F DRP: "Number of persons for whom a portion/percentage of their unreimbursed oral health costs was reimbursed."

Improving Quality

The proposed National Quality Strategy (NQS) will pursue three broad aims: 1) Better Care, 2) Health People/Healthy Communities, and 3) Affordable Care. In supporting actions to address the priorities, the intention of the National Strategy is "to create a new level of cooperation among all the stakeholders seeking to improve health and health care for all Americans."

The PHS Act requires recipients of funding under the Ryan White HIV/AIDS Part F program to establish clinical quality management programs to:

- Assess the extent to which HIV health services are consistent with the most recent HHS guidelines for the treatment of HIV disease and related opportunistic infections, and

- Develop strategies for ensuring that such services are consistent with the guidelines for improvement in the access to and quality of HIV services.

HAB has defined quality as follows:

“Quality is the degree to which a health or social service meets or exceeds established professional standards and user expectations. Evaluations of the quality of care must consider (1) the quality of inputs, (2) the quality of the service delivery process, and (3) the quality of outcomes, in order to continuously improve systems of care for individuals and populations.” Your Clinical Quality Management (CQM) program should ensure that systematic and continuous processes are in place for planning, implementing and evaluating improvement strategies.

Applicants may wish to expand their knowledge of CQM programs. The following sites can provide entry points:

HRSA/HAB Quality Tools: <http://hab.hrsa.gov/deliverhivaidscares/qualitycare.html>

HRSA/HAB Performance Measures:

<http://hab.hrsa.gov/deliverhivaidscares/habperformmeasures.html>

The National Quality Center: <http://www.nationalqualitycenter.org>

HIVQUAL-US Program: <http://hivqualus.org>

II. Award Information

1. Type of Award

Funding will be provided in the form of a formula grant.

2. Summary of Funding

This program will provide funding during federal fiscal year 2013. Approximately \$9,000,000 is expected to be available. Successful applicants will receive a partial reimbursement for the costs of uncompensated care delivered from July 1, 2011 through June 30, 2012. The approved level of funding will be dependent upon the availability of appropriated funds. Funds will be distributed among eligible applicants, taking into the account the number of patients with HIV disease served and the unreimbursed oral health care costs incurred by each institution as compared with the total number of patients served and costs incurred by all eligible applicants.

This funding opportunity announcement is subject to availability of appropriated funds. If associated funding is not available for the Part F Dental Reimbursement Program (DRP), this announcement will be withdrawn and grants will not be awarded.

III. Eligibility Information

1. Eligible Applicants

Applicants are limited to dental schools and other dental education programs, that were described in 777(b)(4)(B) Public Health Service Act as such section was in effect on the day before the

date of the enactment of the Health Professions Partnerships Education Act of 1998 (Public Law 105-392) [“postdoctoral dental education program means a program sponsored by a school of dentistry, a hospital, or a public or private institution that offers postdoctoral training in the specialties of dentistry, advanced education in general dentistry, or a dental general practice residency”]. In addition, dental hygiene programs that are accredited by the Commission on Dental Accreditation are also eligible.

2. Cost Sharing/Matching

Cost sharing or matching is not a requirement for this program.

3. Other

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.

Maintenance of Effort

These grant funds shall not be used to take the place of current funding for activities described in the application. Grantees must agree to maintain non-Federal funding for grant activities at a level that is not less than expenditures for such activities during the fiscal year prior to receiving this grant.

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 DGPPwaivers@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 email request: the HRSA announcement number for which the organization are 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 to be moved to SAM
Effective July 30 2012
(rev. 5/22/12)

CCR will transition to SAM at the end of July. CCR must stop accepting new data in order to successfully migrate the existing data into SAM. CCR's last business day is Tuesday, July 24, 2012. It will no longer accept new registrations or updates to current registrations after that time. The CCR Search capability will remain active through the transition to allow users to search for an entity's current registration status. SAM will be online for use Monday morning, July 30, 2012.

CCR will stop accepting data at 11:59 pm on Tuesday, July 24, 2012. **No new registrations can be submitted after that time. No updates to existing registrations can be submitted after that time.** Any registrations in process will be on hold until SAM goes live the morning of July 30, 2012. If users are in the middle of a registration, the data that has been submitted 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 will receive an e-mail notification from CCR when it extends the expiration date. The registrant will then receive standard e-mail reminders to update their record based on this 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 CCR registration is a pre-requisite to the
successful submission of grant applications!**

Grants.gov strongly suggests visiting CCR prior to this change and checking the account status. Some things 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 the switch from CCR to SAM, more information is available at <https://www.bpn.gov/ccr/NewsDetail.aspx?id=2012&type=N>. To learn more about SAM, please visit <https://www.sam.gov>.

Note: CCR or SAM information must be updated at least every 12 months to remain active (for both grantees and sub-recipients). As of August 9, 2011, Grants.gov began rejecting submissions from applicants with expired CCR registrations. This systematic enforcement will likely catch some applicants off guard. According to the CCR Website it can take 24 hours or

more for updates to take effect; or 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 grant deadline.***

An applicant can view their CCR Registration Status by visiting <http://www.bpn.gov/CCRSearch/Search.aspx> and searching by their organization's DUNS number. The [CCR Website](#) provides user guides, renewal screen shots, FAQs and other resources.

Applicants that fail to allow ample time to complete registration with CCR (prior to July 25, 2012) / SAM (starting July 30, 2012) 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. 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: HRSADSO@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 Application Form SF-424 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 40 pages when printed by HRSA. The total file size may not exceed 10 MB. The 40-page limit includes attachments. Standard forms are NOT included in the page limit. **HRSA strongly urges applicants to print their application to ensure it does not exceed the 40-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 40-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 Non-Construction Short Application Kit – Table of Contents

- 🔔 It is mandatory to follow the instructions provided in this section to ensure that your application can be printed efficiently and consistently for review.
- 🔔 Failure to follow the instructions may make your 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
Application for Federal Assistance (SF-424)	Form	Pages 1, 2 & 3 of the SF-424 face page.	Not counted in the page limit
Additional Congressional District	Attachment	Can be uploaded on page 3 of SF-424 - Box 16	As applicable to HRSA; not counted in the page limit.
SF-424B Assurances - Non-Construction Programs	Form	Supports assurances for non-construction programs.	Not counted in the page limit.
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)	Attachment	Can be uploaded in the SF-424 Performance Site Location(s) form. Single document with all additional site location(s)	Counted in the page limit.
Disclosure of Lobbying Activities (SF-LLL)	Form	Supports structured data for lobbying activities.	Not counted in the page limit.
Other 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 pages are expected in the attachment, ensure that you place a table of contents cover page specific to the attachment. The Table of Contents page will not be counted in the page limit.
- 🔔 Limit the file attachment name to under 50 characters. Do not use any special characters (e.g., %, /, #) or spacing in the file name or word separation. (The exception is the underscore (_) character.) Your attachment will be rejected by Grants.gov if you use special characters or attachment names greater than 50 characters.

Attachment Number	Attachment Description (Program Guidelines)
Attachment 1	Required- Dental Services Report. Save the report as a PDF document
Attachments 2-15	Other documents, as necessary

Application Format

i. Application Face Page

Complete Application Form SF-424 provided with the application package. Prepare according to instructions provided in the form itself. Important note: enter the name of the **Project Director** in 8. f. “Name and contact information of person to be contacted on matters involving this application.” If, for any reason, the Project Director will be out of the office, please ensure their email Out of Office Assistant is set so HRSA will be aware if any issues arise with the application and a timely response is required. For information pertaining to the Catalog of Federal Domestic Assistance, the CFDA Number is 93.924.

Item 1 Type of Submission

Check “Application.”

Item 2 Type of Application

All applicants should check “New.”

Item 8a Legal Name

Enter applicant’s institution name

Item 8b Employer/Taxpayer Identification Number (EIN/TIN)

Enter the number

Item 8c 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 [form SF-424 - item 8c] 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 Central Contractor Registration (CCR) (soon to be SAM) in order to conduct electronic business with the Federal Government. CCR (or 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 CCR (or SAM) registration is active and the Marketing Partner ID Number (MPIN) is current. Information about registering with the CCR can be found at <http://www.ccr.gov>. Please see Section IV of this funding opportunity announcement for **IMPORTANT NOTICE: CCR to be moved to SAM starting July 30, 2012.**

Item 10: Name of Federal Agency

Enter Health Resources and Services Administration

Item 11 Catalogue of Federal Domestic Assistance number/title

Enter 93.924 Ryan White HIV/AIDS Dental Reimbursement Program

Item 12 Funding Opportunity Number

Enter HRSA-13-171

Item 15 Descriptive Title of Applicant's Project

RW DRP

Item 17a Proposed Project Start Date

The start date should be July 1, 2013.

Items 17b Proposed Project End Date

February 28, 2014.

Item 18a (Federal) Estimated Funding

Applicants must enter the amount of the total unreimbursed costs of oral health care provided to persons living with HIV/AIDS from July 1, 2011 to June 30, 2012.

Item 18g (Total) Estimated Funding

Applicants must enter the same amount as in 18a.

Item 19 Review by State

The Dental Reimbursement Program is not subject to Intergovernmental Review. Check block "c."

Item 21 Signing this application

Enter "I agree"

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

Not required.

iv. Budget Justification

Not required.

v. Staffing Plan and Personnel Requirements

Not required.

vi. Assurances

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

vii. Certifications

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

viii. Project Abstract

Not required.

ix. Project Narrative

Not required.

x. Program Specific Form

Not required.

xi. Attachments

Please provide the following item to complete the content of the application. **Attachment 1 is required:**

Attachment 1: Dental Services Report as a PDF file. A copy must also be submitted electronically to RWdatasupport.wrma@csrincorporated.com. Refer to Appendix A for additional information.

Attachments 2-15: Other documents, as necessary

3. Submission Dates and Times

Application Due Date

The due date for applications under this funding opportunity announcement is **April 12, 2013, at 11:59 P.M. ET**. Applications completed online are considered formally submitted when the application has been successfully transmitted electronically by your organization's Authorized Organization Representative (AOR) through Grants.gov and has been 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 Dental Reimbursement Program is not a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR 100.

5. Funding Restrictions

Awards will be contingent upon Congressional appropriation.

Funds received from DRP must be allocated to the accredited dental education program that provides oral health services to persons living with HIV/AIDS. It is expected that these reimbursement funds will increase access to oral health care for persons living with HIV/AIDS.

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 Central Contractor Registration (CCR) (or System for Award Management (SAM) starting late July 2012. See Section IV of this document for more SAM details.)
- Identify the organization’s E-Business Point of Contact (E-Biz POC)
- Confirm the organization’s CCR (or SAM – starting late July 2012) “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/checkAppIStatus.faces>. Be sure the application is validated by Grants.gov prior to the application deadline.

V. Application Review Information

The DRP supports all eligible applicants who can document unreimbursed costs of oral health care provided to persons living with HIV/AIDS. The Division of Community HIV/AIDS Programs will review each application for eligibility including accreditation status, completeness, accuracy and compliance with the requirements outlined in the funding opportunity announcement. Applications will also be reviewed within HRSA by grants management officials (business and financial review) for content and response to the application requirements. Based on the submitted Dental Services Report documenting these costs for the period July 1, 2011 through June 30, 2012, partial reimbursement will be provided.

Available funds will be awarded utilizing a formula based on dividing the unreimbursed costs for each applicant by the total unreimbursed cost across all applications, then multiplying by the amount available for DRP.

It is anticipated that awards will be announced in July 2013

VI. Award Administration Information

1. Award Notices

The Notice of Award sets forth the amount of funds granted, the terms and conditions of the award, and 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 via e-mail to the applicant's Authorized Organization Representative, and reflects the only authorizing document. It will be sent in July 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, as applicable, 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/>. The general terms and conditions in the HHS GPS will apply as indicated unless there are statutory, regulatory, or award-specific requirements to the contrary (as specified in the Notice of Award).

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.

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>. If you are unable to access this link, please contact the Grants Management Specialist identified in this funding opportunity to obtain a copy of the Term.

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

Health 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? \(AHRQ\)](#)**Health IT**

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. Status Reports: Submit the annual **Dental Services Report**. Refer to **Appendix A** for information on the Report.

- c. **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 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 (available online at www.hrsa.gov/grants/ffata.html). Competing Continuation ("Type 2") awardees may be subject to this requirement and will be so notified in the Notice of Award.

VII. Agency Contacts

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

Potie Pettway, Grants Management Specialist
HRSA Division of Grants Management Operations (OFAM)
Parklawn Building, Room 12A-07
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 443-1014
Fax: (301) 443-9810
Email : Ppettway@hrsa.gov

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

CDR Mahyar Mofidi, DMD, PhD, United States Public Health Service
Chief, Southern Branch, Division of Community HIV/AIDS Programs
Chief Dental Officer, HIV/AIDS Bureau
Health Resources and Services Administration
Parklawn Building, Room 9-64
5600 Fishers Lane
Rockville, Maryland 20857
Telephone: (301) 443-2075
Fax: (301) 443-1839
Email: MMofidi@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

Technical Assistance:

If applicants require any technical assistance obtaining, completing or submitting the Dental Services Report, please contact the Ryan White HIV/AIDS Program Data Support help desk.

WRMA/CSR Ryan White Project

Toll-Free Help Line: 1-888-640-9356
Monday-Friday, 9:00a.m. to 5:30 p.m. ET
Email: RWDataSupport.wrma@csrincorporated.com

Please provide your institution's name to the Technical Assistance Specialist. When submitting a request through email, be sure to include, in the message text, your institution's name and your position within the organization.

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://dhhs.gov/asfr/ogapa/grantinformation/apptips.html>.

Appendix A: Information on Completing the Dental Services Report

As a supplement to the application, applicants must electronically complete and submit the Dental Services Report as a Microsoft Access dataset to Ryan White Data Support at RWdatasupport.wrma@csrincorporated.com by **April 12, 2013**. **The report must also be submitted in Adobe PDF format with the application through Grants.gov, as Attachment 1. It needs to be submitted in such a format since Grants.gov will not accept Microsoft Access file as an attachment.** Failure to submit the Dental Services Report with the electronic application submission through Grants.gov will result in an incomplete application.

Information about the Dental Services Report, how it can be downloaded, and instructions for completing the Report will be found at <http://hab.hrsa.gov/manageyourgrant/reportingrequirements.html#Dental> under “2013 Dental Services Report” in the Grantee Reports section. Following is some information on completing the Report.

- 1) Only actual counts of HIV positive patients who received oral health care services from your institution or program will be accepted as the basis of your application for DRP funding.
- 2) Item 1: Data Universal Numbering System Number (DUNS) - All applicant organizations are required to have a DUNS number 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 by calling 1-866-705-5711.
- 3) Item 8a: Please report the TOTAL number of HIV positive patients cared for by your program and whose services were exclusively or partially paid for by Ryan White program. The number you report on your application should reflect the larger population of HIV positive patients in care, including the patients who received services in your institution’s main teaching clinic, and those patients who received services supported by DRP funds. We recognize and understand that many of your students, residents, faculty, and dental staff provide services for HIV positive patients in extramural settings that may be beyond your data collection control. As a result, demographic, service, and reimbursement data from these settings may not be readily available to you. To the greatest extent possible, please report in Item 8a the number of all HIV positive patients served by your students, residents, faculty, and dental staff whose services were paid for exclusively or partially by Ryan White program, regardless of location.
- 4) Items 18 and 19: Only direct reimbursements from third party payers (public and private) as payment for services provided should be reported in Items 18 and 19. Funding from the Ryan White HIV/AIDS Program or other grant programs is considered program income or revenue, and should not be reported as reimbursements in these items.

- 5) Items 23b, 24-28: Please include your narrative responses to Items 23b and 24-28 as a part of the PDF to be submitted through Grants.gov, not to exceed one page in length for each item; if submitting electronically in the Dental Services Database Utility, you may enter (or copy and paste) your responses directly into the database utility. Your responses will better inform us about your institution or program; your collaborations in the larger community; your training of students, residents, and providers; and other accomplishments. Your responses will also help us target technical assistance activities, document the value of funds expended, and demonstrate the importance of continued Ryan White HIV/AIDS Program Funding for oral health care.

Technical Assistance:

If applicants require any technical assistance obtaining, completing or submitting the Dental Services Report, please contact the Ryan White HIV/AIDS Program Data Support help desk.

WRMA/CSR Ryan White Project

Toll-Free Help Line: 1-888-640-9356

Monday – Friday, 9:00 a.m. to 5:30 p.m. EDT

E-mail: RWdatasupport.wrma@csrincorporated.com

Please provide your institution's name to the Technical Assistance Specialist. When submitting a request through e-mail, be sure to include in the message text your institution's name and your position within the organization.

Data Verification:

A representative from WRMA/CSR Ryan White HIV/AIDS Program Data Support may contact you to verify some of the data you submit in your 2013 DRP application. We appreciate your continuing cooperation and assistance to report complete and accurate program data. Your data are invaluable in documenting the beneficial use of DRP grant funds.

Other Reminder:

Communicating with grant recipients through the use of fax and e-mail instead of postal mail has become routine. Thus, the contact information you provide in the first section of the application helps us to keep you informed about time-sensitive matters relevant to your DRP supported-program.