

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

HIV/AIDS Bureau
Division of Community HIV/AIDS Programs

Ryan White HIV/AIDS Program Part F Dental Reimbursement Program (DRP)

**Announcement Type: New
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FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2014

Application Due Date: February 26, 2014

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

EXECUTIVE SUMMARY

The Health Resources and Services Administration, HIV/AIDS Bureau is accepting applications for the fiscal year (FY) 2014, Ryan White HIV/AIDS Program Dental Reimbursement Program (DRP). The purpose of this formula grant program 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.

This competition is open to eligible accredited dental education institutions that have provided uncompensated or partially uncompensated oral health care to persons living with HIV/AIDS from July 1, 2012-June 30, 2013.

Funding Opportunity Title:	Ryan White HIV/AIDS Program Part F, Dental Reimbursement Program (DRP)
Funding Opportunity Number:	HRSA-14-098
Due Date for Applications:	February 26, 2014
Anticipated Total Annual Available Funding:	\$ 9,000,000
Estimated Number and Type of Awards:	50-60 grants
Estimated Award Amount:	Varies
Cost Sharing/Match Required	No
Length of Project Period:	Up to 6 months
Project Start Date:	July 1, 2014
Eligible Applicants:	This competition is open to eligible accredited dental education institutions defined in Section 2692(b)(1)(B) of the Public Health Service Act that have provided uncompensated or partially uncompensated oral health care to persons living with HIV/AIDS from July 1, 2012-June 30, 2013. [See Section III-1 of this funding opportunity announcement (FOA) for complete eligibility

All applicants are responsible for reading and complying with the instructions included in HRSA's *SF-424 Application Guide*, available online at <http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf>, except where instructed in this funding opportunity announcement to do otherwise. A short video for applicants explaining the new *Application Guides* is available at <http://www.hrsa.gov/grants/apply/applicationguide/>.

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I. Funding Opportunity Description

1. Purpose

This announcement solicits applications for the Ryan White HIV/AIDS Program Part F Dental Reimbursement Program (DRP) to provide HIV oral health services and education and training. These services target low-income, underserved people living with HIV/AIDS. The 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.

This competition is open to accredited dental education institutions eligible to receive Ryan White HIV/AIDS program Part F funding under section 2692(b)(1)(B) of the Public Health Service (PHS) Act that have provided uncompensated or partially uncompensated oral health care to persons living with HIV/AIDS from July 1, 2012-June 30, 2013.

The Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA), and HIV/AIDS Bureau (HAB) are committed to meeting the national goals and principles described below. As you complete the application, consider how the program supports and helps to implement these goals and principles.

HRSA Goals

HRSA, as the primary Federal agency for improving access to health care services for people who are uninsured, underserved, isolated or medically vulnerable, has four goals: Improve Access to Quality Care and Services, Strengthen the Health Workforce, Build Healthy Communities, and Improve Health Equity.

2. Background

This program is authorized by Section 2692(b) of the Public Health Service Act (42 U.S.C. 300ff-111), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (P.L. 111-87) (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 HIV/AIDS Program services with other health care delivery systems, and
- Evaluate the impact of Ryan White HIV/AIDS Program funds and make needed improvements.

Improving Quality

The National Quality Strategy (NQS) pursues three broad aims: 1) Better Care, 2) Healthy 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.”

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 should 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.”

Grantee Clinical Quality Management (CQM) programs should ensure that systematic and continuous processes are in place for measuring performance and planning, implementing, and evaluating improvement strategies. The three-fold purpose of CQM is to ensure:

- Funded services adhere to established HIV clinical practice standards and HHS HIV treatment guidelines.
- Strategies for measuring and making improvements to medical care include vital health-related supportive services in achieving appropriate access and adherence with HIV medical care.
- Available demographic, clinical, and health care utilization data are used when developing and adapting programs to address changing trends in the epidemic.

Performance measurement and quality improvement are the two central activities of a CQM program. The HAB HIV performance measures can be found at <http://hab.hrsa.gov/deliverhivaidscares/habperformmeasures.html>.

HAB also encourages grantees to conduct continuous quality improvement (CQI) for the administrative and fiscal components of their organization.

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>
- **The National Quality Center:** <http://www.nationalqualitycenter.org>
- **Common Indicators for HHS-funded HIV Programs and Services:** <http://www.aids.gov/pdf/hhs-common-hiv-indicators.pdf>

Support Affordable Care Act Implementation

As part of the Affordable Care Act (ACA), the health care law enacted in 2010, several significant changes have been made in the health insurance market that expand options for health care coverage, including those options for people living with HIV/AIDS. The ACA creates new state-based marketplaces, also known as exchanges, to offer millions of Americans access to affordable health insurance coverage. Under the ACA individuals with incomes between 100 to 400 percent Federal Poverty Level (FPL) may be eligible to receive advance payments of premium tax credits and/or cost-sharing reductions to help pay for the cost of enrolling in qualified health insurance plans and for coverage of essential health benefits. In states that choose to participate in the ACA Medicaid eligibility expands to non-disabled adults with incomes of up to 133 percent of FPL providing new coverage options for many individuals who were previously ineligible for Medicaid. In addition, the law requires health plans to cover certain recommended preventative services without cost sharing making health care affordable and accessible for Americans. These

health care coverage options may be reviewed at <http://hab.hrsa.gov/affordablecareact/keyprovisions.pdf>.

Outreach efforts are needed to ensure that families and communities understand these new health care coverage options and to provide eligible individuals assistance to secure and retain coverage during the transition and beyond. The HIV/AIDS Bureau recognizes that outreach to and enrollment of Ryan White HIV/AIDS Program (RWHAP) clients into the expanded health insurance coverage is critical. As appropriate and allowable by statute, RWHAP grantees are strongly encouraged to support ACA-related outreach and enrollment activities to ensure that clients fully benefit from the new health care coverage opportunities. For more information on allowable outreach and enrollment activities, please see <http://www.hab.hrsa.gov/affordablecareact/outreachenrollment.html>.

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 2014. Approximately \$9,000,000 is anticipated to be available to fund 50-60 grantees. The actual amount available will not be determined until enactment of the final FY 2014 Federal budget. This program announcement is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds can be awarded in a timely manner]. Successful applicants will receive a partial reimbursement for the costs of uncompensated care delivered from July 1, 2012 through June 30, 2013. 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. The project period is six (6) months.

III. Eligibility Information

1. Eligible Applicants

Applicants are limited to dental schools and other dental education programs, that were described in Section 777(b)(4)(B) of the 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, see: <http://www.ada.org/117.aspx>.

2. Cost Sharing/Matching

Cost Sharing/Matching is not required 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.

NOTE: Multiple applications from an organization are not allowable.

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.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA *requires* applicants for this funding opportunity announcement to apply electronically through Grants.gov. Applicants must download the SF-424 application package associated with this funding opportunity following the directions provided at Grants.gov.

2. Content and Form of Application Submission

Section 4 of HRSA's [SF-424 Application Guide](#) provides instructions.

Note, budget, budget justification, staffing plan and personnel requirements, abstract, project narrative, and program specific forms are not required for DRP.

You must submit other information outlined in the Application Guide such as Application Face Page, Table of Contents, Assurances and Certifications. All applicants are responsible for reading and complying with the instructions included in HRSA's [SF-424 Application Guide](#) except where instructed in the funding opportunity announcement to do otherwise.

As part of the application, the Dental Services Report must be submitted in Adobe PDF format through Grants.gov. As a supplement to the application, applicants must also electronically complete and submit the Dental Services Report as a Microsoft Access dataset to Ryan White Data Support at RWdatasupport.wrma@csrincorporated.com by **February 26, 2014**.

Application Page Limit

The total size of all uploaded files may not exceed the equivalent of 40 pages when printed by HRSA. The 40-page limit includes attachments required in the application package and this FOA. Standard OMB-approved forms are NOT included in the page limit. **We strongly urge you to print your application to ensure it does not exceed the specified page limit.**

Applications must be complete, within the specified page limit, and submitted prior to the deadline to be considered under the announcement.

Program-specific Instructions

In addition to application requirements and instructions in Section 4 of HRSA's [SF-424 Application Guide](#) (where applicable), please be aware of the following:

HAB Program Requirements and Expectations for Ryan White HIV/AIDS Program (RWHAP) Part F DRP

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 the expectation that these reimbursement funds will provide expanded access to oral health care for persons living with HIV/AIDS.

Applicants must ensure that Medicaid billable services are billed to Medicaid. Ryan White HIV/AIDS Program funds should be used when payment cannot be expected to be made, i.e., after billing Medicaid, Children's Health Insurance Program (CHIP), other public/private health insurance resources, and after billing clients for allowable costs using a sliding fee scale. Because the Ryan White HIV/AIDS Program is the payer of last resort and funds for the DRP are limited, applicants are encouraged to report unreimbursed costs for oral health services not paid for by Medicaid.

Applicants must develop consistent and equitable policies and procedures related to verification of patients' financial status, implementation of a sliding fee scale, and ensuring a cap on patient charges for HIV-related services.

DRP programs must provide a system to discount patient payment for charges by developing and utilizing a sliding discounted fee schedule that is published and made readily available. While the fee schedule may be based on the patient's income or household size and income, the organization must track the patient's income and charges imposed. Each program is responsible for creating its own sliding fee scale in accordance with the most recent Federal Poverty Level guidelines. Federal Poverty Guidelines are updated each year in early spring, and are available on the web at <http://aspe.hhs.gov/poverty/index.shtml#latest>.

Program Income: Programs are required to maximize the service reimbursement available from private insurance, Medicaid, Medicare, and other third-party sources. Programs are required to track and report all sources of service reimbursement as program income on the annual Dental Services Report. All program income earned must be used to further the objectives of the HIV program. The Ryan White HIV/AIDS Program is the payer of last resort, except for programs administered by or providing the services of the Indian Health Service. Please note that direct or indirect grant funds such as Ryan White HIV/AIDS Part A, Part B, Part C, and Part D programs are not program income and cannot duplicate services funded under Part F DRP. Services provided under Part F DRP cannot also be billed to Parts A, B, C, or D.

i. Attachments

Attachment 1: Dental Services Report

Submit Dental Services Report as a PDF file documenting unreimbursed costs for the

period July 1, 2012 through June 30, 2013. A copy must also be submitted electronically to RWdatasupport.wrma@csrincorporated.com.

IAs 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 **February 26, 2014**. **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 “2014 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) 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.
- 4) 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 at:

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.

Attachments 2 – 15: Other Relevant Documents, as necessary

3. Submission Dates and Times

Application Due Date

The due date for applications under this funding opportunity announcement is ***February 26, 2014 at 11:59 P.M. Eastern Time.***

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.

See Section 4.1 ii of HRSA's [SF-424 Application Guide](#) for additional information.

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.

The General Provisions in Division F, Title V of the Consolidated Appropriations Act, 2012 (P.L. 112-74) and continued through the Consolidated and Further Continuing Appropriations Act, 2013 (P. L. 113-6), and the Continuing Appropriations Act, 2014 (P.L. 113-46), apply to this program. Please see Section 4.1 of HRSA's [SF-424 Application Guide](#) for additional information.

V. Application Review Information

1. Review and Selection Process

Please see section 5.3 of the HRSA's [SF-424 Application Guide](#).

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, 2012 through June 30, 2013, 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.

2. Anticipated Announcement and Award Dates

It is anticipated that awards will be announced in July, 2014.

VI. Award Administration Information

1. Award Notices

The Notice of Award will be sent prior to the start date of July 1, 2014. See section 5.4 of HRSA's [SF-424 Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

See section 2 of HRSA's [SF-424 Application Guide](#) for information.

3. Reporting

The successful applicant under this funding opportunity announcement must comply with Section 6 of HRSA's [SF-424 Application Guide](#). **Note, federal financial form (FFR), final report, and progress reports are not required for DRP.**

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)
HRSA-14-098

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: <https://grants-portal.psc.gov/Welcome.aspx?pt=Grants>

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

All applicants are encouraged to participate in a technical assistance (TA) webinar for this funding opportunity. The technical assistance webinar will be held on **January 22, 2014 from 3-5 PM Eastern Time**. The Call-in Number is 888-566-6143 and the pass code is 1385474. The purpose of the webinar is to assist potential applicants in preparing applications that address

the requirements of this funding announcement. Participation in a pre-application TA webinar is optional. All times and dates of the Webinar will be listed at the Target Center web site. For more information on the webinar and to register please go to: <http://careacttarget.org/events> .

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 2014 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.

IX. Tips for Writing a Strong Application

See section 4.7 of HRSA's [*SF-424 Application Guide*](#).