**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**AGENCY: Office of the Assistant Secretary for Health, Office of Population Affairs**

**FUNDING OPPORTUNITY TITLE: Announcement of Anticipated Availability of Funds for Family Planning Services Grants**

**ACTION: Notice**

**ANNOUNCEMENT TYPE: INITIAL COMPETITIVE GRANT**

**FUNDING OPPORTUNITY NUMBER: PA-FPH-16-00X (See Table I below for specific number for each competitive service area.)**

**CFDA NUMBER: 93.217**

**CFDA PROGRAM: Family Planning Services**

**DATES: See Table I**

| Service Area – FY 2016 | | Estimated Funds Available | Application Due date | Project Start Date |
|---|---|---|---|---|
| **Region I** | | | | |
| New Hampshire (entire state) | PA-FPH-16-002 | $1,486,000 | 1/11/2016 | 4/1/2016 |
| Rhode Island (entire state) | PA-FPH-16-003 | $1,093,000 | 1/11/2016 | 4/1/2016 |
| Vermont (entire state) | PA-FPH-16-004 | $781,000 | 1/11/2016 | 4/1/2016 |
| **Region II** | | | | |
| New Jersey (entire state) | PA-FPH-16-005 | $8,684,000 | 1/11/2016 | 4/1/2016 |
| New York (entire state) | PA-FPH-16-013 | $13,806,000 | 4/1/2016 | 7/1/2016 |
| **Region III** | | | | |
| Maryland (entire state) | PA-FPH-16-006 | $4,007,000 | 1/11/2016 | 4/1/2016 |
| Virginia (entire state) | PA-FPH-16-007 | $4,407,000 | 1/11/2016 | 4/1/2016 |
| Pennsylvania (entire state) | PA-FPH-16-014 | $13,607,000 | 4/1/2016 | 7/1/2016 |
| **Region IV** | | | | |
| Alabama (entire state) | PA-FPH-16-015 | $5,350,000 | 4/1/2016 | 7/1/2016 |
| Mississippi (entire state) | PA-FPH-16-016 | $4,580,000 | 4/1/2016 | 7/1/2016 |

| | | | | |
|---|---|---|---|---|
| **Region V** | | | | |
| Minnesota (entire state) | PA-FPH-16-017 | $3,201,000 | 4/1/2016 | 7/1/2016 |
| Ohio (Athens, Crawford, Delaware, Franklin, Hocking, Lucas, Madison, Mahoning, Marion, Medina, Pickaway, Portage, Richland, Stark, Summit, Trumbull, Union and Wayne Counties) | PA-FPH-16-008 | $2,876,000 | 1/11/2016 | 4/1/2016 |
| **Region VI** | | | | |
| None | | | | |
| **Region VII** | | | | |
| Iowa (entire state) | PA-FPH-16-018 | $4,054,000 | 4/1/2016 | 7/1/2016 |
| **Region VIII** | | | | |
| Colorado (entire state) | PA-FPH-16-019 | $3,633,000 | 4/1/2016 | 7/1/2016 |
| Montana (entire state) | PA-FPH-16-020 | $2,037,000 | 4/1/2016 | 7/1/2016 |
| South Dakota (entire state) | PA-FPH-16-021 | $1,053,000 | 4/1/2016 | 7/1/2016 |
| **Region IX** | | | | |
| California (entire state) | PA-FPH-16-009 | $20,175,000 | 1/11/2016 | 4/1/2016 |
| Arizona (entire state) | PA-FPH-16-010 | $5,089,000 | 1/11/2016 | 4/1/2016 |
| Nevada (entire state) | PA-FPH-16-011 | $3,239,000 | 1/11/2016 | 4/1/2016 |
| Republic of Palau (entire jurisdiction) | PA-FPH-16-022 | $142,000 | 4/1/2016 | 7/1/2016 |
| **Region X** | | | | |
| Alaska (Fairbanks, Juneau, Soldotna and Sitka) | PA-FPH-16-012 | $329,000 | 4/1/2016 | 7/1/2016 |

Your application is due by 5 p.m. Eastern Time on the applicable date listed in Table I. To receive consideration, your application must be received electronically via Grants.gov by the HHS Office of the Assistant Secretary for Health (HHS/OASH), Office of Grants Management (OGM) no later than this due date and time. If your application does not meet the specified deadline it will be returned to you unread. You must submit electronically via Grants.gov unless you obtain a written exemption from this requirement 2 business days in advance of the deadline from the Director, HHS/OASH Office of Grants Management. To obtain an exemption, you must request one via email from the HHS/OASH Office of Grants Management, and provide details as to why you are technologically unable to submit electronically through Grants.gov portal. Your request should be submitted at least 4 business days prior to the application

deadline to ensure your request can be considered prior to 2 business days in advance of the deadline. If you request an exemption, include the following in your e-mail request: the HHS/OASH announcement number; your organization's DUNS number; your organization's name, address and telephone number; the name and telephone number of your Authorizing Official; the Grants.gov Tracking Number (GRANTXXXX) assigned to your submission; and a copy of the "Rejected with Errors" notification from Grants.gov. Send the request with supporting documentation to ogm.oash@hhs.gov. Note: failure to have an active System for Account Management (SAM) registration will not be grounds for receiving an exemption to the electronic submission requirement.

**The HHS/OASH Office of Grants Management will only accept applications via alternate methods (hardcopy paper via US mail or other provider or PDF via email) from applicants obtaining prior written approval.** The application must still be submitted by the deadline. Only applications submitted through the Grants.gov portal or alternate format (hardcopy paper via US mail or other service or PDF via email) with an approved written exemption will be accepted. *See* Section D.7. ("Other Submission Requirements") for information on application submission mechanisms.

*Executive Order 12372 comment due date:* The State Single Point of Contact (SPOC) has 60 days from the application due date to submit any comments. For more information on the SPOC see section D.4 Intergovernmental Review.

**To ensure adequate time to successfully submit your application, HHS/OASH recommends that you register as early as possible in Grants.gov** since the registration process can take up to one month. For information on registering for Grants.gov, refer to

http://www.grants.gov or contact the Grants.gov Contact Center 24 hours a day, 7 days a week (excluding Federal holidays) at 1-800-518-4726 or support@grants.gov.

**Your organization is strongly encouraged to register multiple authorized organization representatives in Grants.gov to ensure someone is available to submit your application.**

**Technical Assistance:** A technical assistance webinar for potential applicants will be held within **60 days** of this announcement. Please visit www.hhs.gov/opa for more information.

**EXECUTIVE SUMMARY:** The Office of Population Affairs announces the anticipated availability of funds for Fiscal Year (FY) 2016 grant awards under the authority of Title X of the Public Health Service Act. The Office of Population Affairs intends to make available approximately $104 million for competing grants in 21 service areas and/or populations. The actual amount available will not be determined until enactment of the FY 2016 federal budget. This notice solicits applications for projects to provide Title X family planning services throughout the services areas identified in Table I. While there is not a fixed cost-sharing percentage or amount, projects must include financial support from sources other than Title X. The proposed project budget should reflect financial support in addition to Title X funds on both the Standard Form (SF) 424A, Budget Information for Non-Construction Programs, and in the budget narrative.

This notice solicits applications from public and private nonprofit entities to establish and operate voluntary family planning projects to serve the areas and/or populations listed in Table I. Family planning services include clinical family planning and related preventive health services; information, education, and counseling related to family planning; and referral services as indicated.

All activities funded under this announcement must be consistent with the Title X statute, regulations, and legislative mandates, and are expected to be in compliance with the Program Guidelines and Program Policy Notices. Copies of the Title X statute, regulations, legislative mandates, Program Guidelines, and Program Policy Notices may be downloaded from the Office of Population Affairs web site at http://www.hhs.gov/opa.

## A. PROGRAM DESCRIPTION:

This announcement seeks applications from public and private nonprofit entities to establish and operate voluntary family planning services projects, which shall provide family planning services to all persons desiring such services, with priority for services to persons from low-income families. The Title X statute specifies that local and regional public or private nonprofit entities may apply directly to the Secretary for a Title X family planning services grant under this announcement. Funding of applications that propose to rely on other entities to provide services will take into consideration the extent to which the applicant indicates it can provide the required services and best serve individuals in need throughout the anticipated service area. For applicants that will not provide all services directly, the applicant must document the process it will use for providing an opportunity to receive subawards to qualified entities eligible to receive federal funds in providing services throughout the service area to meet the needs of project beneficiaries.

Family planning services include clinical family planning and related preventive health services; information, education, and counseling related to family planning; and, referral services as indicated. Applicants should use the Title X legislation, applicable regulations, legislative mandates, current Program Guidelines (issued in 2014), OPA Program Policy Notices, program

priorities, and other key issues included in this announcement and in the application package to guide them in developing their applications.

Program Statute, Regulations, Legislative Mandates, Program Guidelines, Program Priorities, and Key Issues

*Title X Statute and Regulations*: Requirements regarding the provision of family planning services under Title X can be found in the statute (Title X of the Public Health Service Act, 42 U.S.C. 300 et seq.) and in the implementing regulations which govern project grants for family planning services (42 CFR part 59, subpart A). In addition, sterilization of clients as part of the Title X program must be consistent with 42 CFR part 50, subpart B ("Sterilization of Persons in Federally Assisted Family Planning Projects"). Title X of the Public Health Service Act authorizes the Secretary of Health and Human Services (HHS) to award grants for projects to provide family planning services to any person desiring such services, with priority given to individuals from low-income families. Section 1001 of the Act, as amended, authorizes grants "to assist in the establishment and operation of voluntary family planning projects which shall offer a broad range of acceptable and effective family planning methods and services (including natural family planning methods, infertility services, and services for adolescents)." Title X regulations further specify, "These projects shall consist of the educational, comprehensive medical, and social services necessary to aid individuals to determine freely the number and spacing of their children" (42 CFR §59.1). In addition, section 1001 of the statute requires that, to the extent practicable, Title X service providers shall encourage family participation in family planning services projects. Finally, section 1001 (b) assures the right of local and regional entities to apply directly to the Secretary for Title X grant funds. Section 1008 of the Act, as

amended, stipulates, "None of the funds appropriated under this title shall be used in programs where abortion is a method of family planning."

*Legislative Mandates:* The following legislative mandates have been part of the Title X appropriations language for the last several years. This funding opportunity announcement assumes these provisions will be carried forward in FY 2016. Title X family planning services projects should include administrative, clinical, counseling, and referral services as well as training of staff necessary to ensure adherence to these requirements.

- "None of the funds appropriated in this Act may be made available to any entity under Title X of the Public Health Service Act unless the applicant for the award certifies to the Secretary of Health and Human Services that it encourages family participation in the decision of minors to seek family planning services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities;" and
- "Notwithstanding any other provision of law, no provider of services under Title X of the Public Health Service Act shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest."

*Program Guidelines:* Additional operational guidance for projects funded under Title X can be found in the Title X Program Guidelines, which consist of two documents; the April 25, 2014, MMWR *"Providing Quality Family Planning Services: Recommendations of CDC and the U.S. Office of Population Affairs"* (QFP) and *"Program Requirements for Title X Funded Family Planning Projects."*

Copies of the Title X statute, regulations, legislative mandates, Program Guidelines, and Program Policy Notices may be downloaded from the Office of Population Affairs web site at http://www.hhs.gov/opa. All activities funded under this announcement must be consistent with the Title X statute, regulations, and legislative mandates, and are expected to be in compliance with the Program Guidelines and Program Policy Notices. For example, projects must meet the regulatory requirements set out at 42 CFR §59.5 regarding charges to clients. The funding criteria set out at 42 CFR §59.7 apply to all applicants under this announcement.

Program Priorities: Each year the OPA establishes program priorities that represent overarching goals for the Title X program. Program priorities derive from Healthy People 2020 Objectives and from the Department of Health and Human Services (HHS) priorities. Project plans should be developed that address the 2016 Title X program priorities, and should provide evidence of the project's capacity to address program priorities as they evolve in future years. The 2016 program priorities are as follows:

1. Assuring the delivery of quality family planning and related preventive health services, with priority for services to individuals from low-income families. This includes ensuring that grantees have the capacity to support implementation (e.g., through staff training and related systems changes) of the Title X program guidelines throughout their Title X services projects, and that project staff have received training on Title X program requirements;
2. Assessing clients' reproductive life plan as part of determining the need for family planning services, and providing preconception services as stipulated in QFP;
3. Providing access to a broad range of acceptable and effective family planning methods and related preventive health services in accordance with the Title X program

requirements and the 2014 QFP. These services include, but are not limited to, contraceptive services, pregnancy testing and counseling, services to help clients achieve pregnancy, basic infertility services, STD services, preconception health services, and breast and cervical cancer screening. The broad range of services does not include abortion as a method of family planning;

4. Ensuring that all clients receive contraceptive and other services in a voluntary, client-centered and non-coercive manner in accordance with QFP and Title X requirements. .
5. Addressing the comprehensive family planning and related preventive health needs of individuals, families, and communities through outreach to hard-to-reach and/or vulnerable populations, and partnering with other community-based health and social service providers that provide needed services; and
6. Demonstrating that the project's infrastructure and management practices ensure sustainability of family planning and reproductive health services delivery throughout the proposed service area including:
    - Incorporation of certified Electronic Health Record (EHR) systems that have the ability to capture family planning data within structured fields;
    - Evidence of contracts with insurance plans and systems for third party billing as well as the ability to facilitate the enrollment of clients into private insurance and Medicaid, optimally onsite; and to report on numbers of clients assisted and enrolled; and
    - Evidence of the ability to provide comprehensive primary care services onsite or demonstration of formal robust linkages with comprehensive primary care providers.

Key Issues: In addition to program priorities, the following key issues have implications for Title X services projects and should be considered in developing the project plan:

1. Incorporation of the 2014 Title X Program Guidelines throughout the proposed service area as demonstrated by written clinical protocols that are in accordance with Title X Requirements and QFP.
2. Efficiency and effectiveness in program management and operations;
3. Patient access to a broad range of contraceptive options, including long acting reversible contraceptives (LARC), other pharmaceuticals, and laboratory tests preferably on site;
4. Establishment and use of performance measures to regularly perform quality assurance and quality improvement activities, including the use of measures to monitor contraceptive use;
5. Establishment of formal linkages and documented partnerships with comprehensive primary care providers, HIV care and treatment providers, and mental health, drug and alcohol treatment providers;
6. Incorporation of the National HIV/AIDS Strategy (NHAS) and CDC's "Revised Recommendations for HIV Testing of Adults, Adolescents and Pregnant Women in Health Care Settings;" and
7. Efficient and streamlined electronic data collection (such as for the Family Planning Annual Report (FPAR)), reporting and analysis for internal use in monitoring staff or program performance, program efficiency, and staff productivity in order to improve the quality and delivery of family planning services.

**AUTHORITY: Section 1001 of the Public Health Service Act**

## B. FEDERAL AWARD INFORMATION

The Office of Population Affairs intends to make available approximately $106 million for competing grants. The final funding amount will not be determined until enactment of the FY 2016 federal budget.

We will fund grants in annual increments (budget periods) and generally for a project period of up to 3 years, although we may approve shorter project periods. Funding for all approved budget periods beyond the first year of the grant is generally level with the initial award amount and is contingent upon the availability of funds, satisfactory progress of the project, and adequate stewardship of Federal funds.

*Award Information*

Estimated Funds Available for Competition: $104 million

Anticipated Number of Awards: 21 - 35

Range of Awards: $142,000 - $20,175,000 per budget period

Anticipated Start Date: 04/01/2016 or 07/01/2016 (see Table I)

Period of Performance: Not to exceed 3 years

Budget Period Length: 12 months

Type of Award: Grant

Type of Application Accepted: Electronic via Grants.gov **ONLY unless an exemption is granted**

## C. ELIGIBILITY INFORMATION

*1. Eligible Applicants.* Any public or private nonprofit entity located in a State (which includes one of the 50 United States, District of Columbia, Commonwealth of Puerto Rico, U.S. Virgin

Islands, Commonwealth of the Northern Mariana Islands, American Samoa, Guam, Republic of Palau, Federated States of Micronesia, and the Republic of the Marshall Islands) is eligible to apply for a grant under this announcement. Even where states apply for a family planning services grant, local and regional entities may also apply directly to the Secretary for a family planning services grant under this announcement. Faith-based organizations and American Indian/Alaska Native/Native American (AI/AN/NA) organizations are eligible to apply for Title X family planning services grants.

2. *Cost Sharing or Matching* Program regulations at 42 CFR §59.7(c) stipulate that ``No grant may be made for an amount equal to 100 percent of the project's estimated costs." Also, 42 CFR §59.7(b) states that "No grant may be made for less than 90 percent of the project's costs, as so estimated, unless the grant is to be made for a project that was supported, under section 1001, for less than 90 percent of its costs in fiscal year 1975. In that case, the grant shall not be for less than the percentage of costs covered by the grant in fiscal year 1975."

While there is not a fixed cost-sharing percentage or amount, projects must include financial support from sources other than Title X. The proposed project budget should reflect financial support in addition to Title X funds on both the Standard Form (SF) 424A, Budget Information, and in the budget justification. The amount and source(s) of these funds must be clearly identified separately from the requested Title X support as indicated on the SF 424A, as well as on the SF 424, Application for Federal Assistance. The OASH Office of Grants Management will review applications to ensure that the requested amount of Title X funding is in compliance with this business requirement.

The cost sharing requirements outlined above are waived for any grant made to the U.S. Virgin Islands, Commonwealth of the Northern Mariana Islands, American Samoa, Guam, Republic of Palau, Federated States of Micronesia, and the Republic of the Marshall Islands.

*3. Other Eligibility Information*

**Application Responsiveness Criteria**

We will review your application to determine whether it meets the following responsiveness criteria. If your application does not meet the responsiveness criteria, we will eliminate it from the competition and it will not be reviewed.

The applicant appears to have demonstrated:

- evidence that comprehensive medical, informational, educational, social, and referral services related to family planning will be provided as stipulated in 42 CFR 59.5
- evidence of cost-sharing as described in Section III of this announcement

**Application Screening Criteria**

If your application is appropriately submitted, it will be screened to assure a level playing field for all applicants. If duplicate applications from the same organization for the same project are successfully submitted, only the last application received by the deadline will be reviewed. If your application fails to meet the screening criteria described below it will **not** be reviewed and will receive **no** further consideration.

1. Your application must be submitted electronically via www.grants.gov (unless an exemption was granted 2 business days prior to the deadline) by the due date in Table I.

2. Your Project Narrative section of the application must be double-spaced, on the equivalent of 8 ½ " x 11" inch page size, with 1" margins on all sides (top, bottom, left and right) and font size not less than 12 points.
3. Your Project Narrative must **not** exceed 65 pages. NOTE: The following items do not count toward the page limit: all required forms, including SF-424, SF-424A, SF-424B, SF-LLL, Project Abstract Summary, and Budget Narrative (including budget tables).
4. Your total application, including the Project Narrative plus Appendices, must **not** exceed 150 pages. NOTE: items noted in #3 above do not count toward total page limit.
5. Your proposed budget does **not** exceed the maximum indicated in Range of Awards.
6. Your application meets the **Application Responsiveness Criteria** outlined above.

## D. APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package

You may obtain an application package electronically by accessing Grants.gov at http://www.grants.gov/. You can find it by searching on the CFDA number shown on page 1 of this funding opportunity announcement. If you have problems accessing the application or difficulty downloading, contact:

Office of Grants Management

Phone: 240-453-8822

Email: ogm.oash@hhs.gov

2. Content and Form of Application Submission

i. Letter of Intent: Not Required

ii. Application Format

Your application must be prepared using the forms and information provided in the online grant application package.

**The Project Narrative, and total application including appendices, must adhere to the page limit indicated in Application Screening Criteria listed in Section C.**

**You must double-space the Project Narrative pages.**

You should use an easily readable typeface, such as Times New Roman or Arial. You *must* use 12-point font. You may single-space tables or use alternate fonts but you must ensure the tables are easily readable. The page limit does not include the Budget Narrative (including budget tables), required forms, assurances, and certifications as described in Application Screening Criteria. Please do not number pages or include a table of contents. Our grants management system will generate page numbers once your application is complete.

If your application exceeds the specified page limits for the Project Narrative or Project Narrative plus Appendices when printed on 8.5" X 11" paper by HHS/OASH/OGM, it will not be considered. We recommend you print out your application before submitting electronically to ensure that it is within the page limits and is easily readable.

Appendices

Your Appendices should include any specific documents outlined in Section D.2.iii., under the heading "Appendices" in the Application Content section of this funding opportunity announcement. You should not include brochures and bound materials. If you create Appendices specifically for this application, you should use the same formatting required for the Project Narrative, including double-line spacing. However, if you include appendix documents that were not created directly in response to this funding announcement, especially those

imported from other sources and documents (e.g., organizational structure), you may retain the original formatting, but the pages must be easily readable.

Project Abstract

You must complete the Project Abstract Summary form provided in the application package. The abstract will be used to provide reviewers with an overview of the application and will form the basis for the application summary in grants management and program summary documents. HHS/OASH may publish your abstract if your project is funded; therefore, it should not include sensitive or proprietary information.

Budget Narrative

The Budget Narrative text should use the formatting required of the Project Narrative for the explanatory text. Budget tables may be single-spaced but should be laid out in an easily-readable format and within the printable margins of the page.

iii. Application Content

Successful applications will contain the following information:

**Project Narrative**

The Project Narrative is the most important part of the application, since it will be used as the primary basis to determine whether or not your project meets the minimum requirements for a grant under this announcement. The Project Narrative should provide a clear and concise description of your project. HHS/OASH recommends that your project narrative include the following components:

Successful applicants will clearly describe the administrative, management, and clinical capability of the applicant organization. All services to be provided by the project should be included as part of the program plan. The budget request and Budget Narrative should directly reflect project activities.

Proposed projects must adhere to all requirements of the Title X statute; applicable regulations, including regulations regarding sterilization of persons in federally-assisted family planning projects; and legislative mandates. Applicants are also expected to utilize the Title X Program Guidelines in developing the project plan.

As indicated in the Title X regulations at 42 CFR §59.5(a)(7)-(9) and Program Guidelines, persons from a low-income family, with incomes that fall at or below 100% of the current Federal Poverty Guidelines (Federal Poverty Level, FPL), must not be charged except where third parties are authorized or legally obligated to pay. Where there is legal obligation or authorization for third party reimbursement, including public or private sources, all reasonable efforts must be made to obtain third party payment without the application of any discounts.

A schedule of discounts, based on ability to pay, is required for individuals with family incomes between 101-250% of the Federal Poverty Level. For persons from families whose income exceeds 250% of the Federal Poverty Level, charges must be made in accordance with a schedule of fees designed to recover the reasonable cost of providing services.

Successful proposals will fully describe how the project will address Title X requirements with an approach to service delivery that is sustainable and ensures access to family planning/reproductive health services as defined in QFP, with priority to services for individuals from low-income families. This includes addressing each of the following:

1. A clear description of the need for the services proposed;
2. A description of the geographic area and population to be served;
3. Evidence that the proposed project will address the family planning needs identified;
4. Evidence that the applicant organization has experience in providing clinical health services, is specially qualified to deliver family planning services, and has the capacity to undertake the comprehensive clinical family planning and related preventive health services required, including offering a broad range of acceptable and effective family planning methods and services as described in QFP;
5. Evidence of experience in the particular service area and with the particular community to be served;
6. Evidence of familiarity with, and ability to provide services that include the following:
    a. family planning and related preventive health issues as indicated in the Program Guidelines and program priorities;
    b. services that are consistent with current, recognized national standards of care, including QFP, related to family planning, reproductive health, and general preventive health measures;
    c. compliance with State laws requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest;
    d. counseling techniques that encourage family participation in healthcare and reproductive decision-making of adolescents, and incorporate resistance skills for adolescents to avoid exploitation and/or sexual coercion;

7. A proposed schedule of discounts, or for applicants with multiple sub-recipients, a policy that is applicable to sub-recipients which meets the criteria set out in the Title X regulations at 42 CFR §59.5(a)(7)-(9), and in the Program Guidelines;
8. Evidence that the proposed services are consistent with the Title X statute, program regulations (including regulations regarding sterilization of persons in federally assisted family planning services projects), legislative mandates, and Program Guidelines, and Program Policy Notices;
9. Evidence that Title X funds will not be used in programs where abortion is a method of family planning;
10. Evidence that Title X project activities are separate and distinct from non-Title X activities;
11. To the extent that the applicant will not provide all services directly, a description of the process used to select service sites and providers, including a description of eligible entities for funding as sub-recipients.
12. A plan for providing community information and education programs which promote understanding of the objectives of the project and inform the community about the availability of services. The plan should include a strategy for maintaining records of information and education activities provided as part of the project;
13. A plan for an information and education advisory committee that is consistent with the Title X statute and regulations at 42 CFR §59.6, and that ensures that all information and education materials used as part of the project are current, factual, and medically accurate, as well as suitable for the population or community to which they will be made available;

14. Evidence that the Title X program priorities and key issues are addressed in the project plan;

15. A staffing plan which is reasonable and adheres to the Title X regulatory requirement that family planning medical services be performed under the direction of a physician with special training or experience in family planning. Staff providing clinical services (e.g., physicians, State recognized advanced practice nurses, physician assistants) should be licensed and function within the applicable professional practice acts for the State in which they practice;

16. Goal statement(s) and related outcome objectives that are specific, measurable, achievable, realistic and time-framed (S.-M.-A-.R.-T);

17. Evidence that the applicant has a plan to facilitate access to the following:

    a. required clinical services, if not provided by the applicant;

    b. comprehensive primary care services; and

    c. other needed health and social services for clients served in the Title X funded family planning project.

    This includes evidence of formal agreements for referral services, and collaborative agreements with other service providers in the community, where appropriate;

18. Evidence of the capability to collect and report the required program data for the Title X annual data collection system, the Family Planning Annual Report (FPAR) as well as required data on sustainability indicators and outreach and enrollment;

19. Evidence of a system for ensuring quality family planning services, including:

    a. a process for ensuring compliance with program requirements;

b. defined performance measures and a process for systematically assessing the quality of services provided throughout the defined project; and

c. a methodology for ensuring that health care practitioners have the knowledge, skills, and attitudes necessary to provide effective, quality family planning and related preventive health services that are consistent with current, evidence-based national standards of care. This should include training of select health care practitioners by the Clinical Training Center for Family Planning (CTCFP), and utilizing clinical training opportunities available through National Training Centers.

20. Evidence that the applicant will operate in a manner that will sustain access to family planning and reproductive health services including:

    a. use of certified EHR systems that are interoperable;

    b. contracts with insurance carriers and ability to bill third party commercial insurance carriers and Medicaid in accordance with Title X requirements;

    c. ability to facilitate enrollment of clients into commercial insurance and Medicaid and to report on number of workers trained to provide assistance, number of individuals who were assisted, received eligibility determinations, and enrolled into health insurance programs; and

    d. ability to provide or have formal linkages to comprehensive primary care services.

**Budget Narrative**

You are required to submit a combined multi-year Budget Narrative, as well as a detailed Budget Narrative for each year of the potential grant. Unless specified, you should develop your

multi-year budgets based on level funding for each budget period. A level-funded budget is equal to the exact dollar figure of the year one budget. Your Budget Narrative should detail all costs. Please be sure to carefully review Section D.6 Funding Restrictions for specific information on allowable, unallowable, and restricted costs. Staff should be listed by position with salary and percentage of full-time equivalent to be devoted to this project, and the percentage of salary to be charged to the project. Any participant incentives proposed to be provided should be fully justified and include a description of internal controls in place to verify proper use. ***Please Note:*** Because your proposal must demonstrate a clear and strong relationship between the stated objectives, project activities, and the budget, the Budget Narrative should describe the ***cost estimated per proposed project, activity, service delivered, and/or product.*** The Budget Narrative should define the amount of work that is planned and expected to be performed and what it will cost with an explanation of how you expect this to be cost effective. The Budget Narrative does not count toward your total application page limit.

**Appendices**

**All items described in this section will count toward the <u>total</u> page limit of your application.**

**Work Plan.** A Project Work Plan should be provided that identifies the specific services to be provided, the site location(s) and hours of clinic operations, and projected number of clients to be served by site. The Project Work Plan should reflect, and be consistent with, the Project Narrative and Budget, and must cover all three (3) years of the project period. However, each year's activities should be fully attainable in one budget year. Multi-year activities may be proposed, as well as activities that build upon each other, but each phase of the project must be discreet and attainable within a single budget year. The Work Plan should include a statement of the project's overall goal, anticipated

outcome(s), key objectives, and the major tasks, action steps, or products that will be pursued or developed to achieve the goal and outcome(s). For each major task of each year, action step, or product, the work plan should identify the timeframes involved (including start- and end-dates), and the lead person responsible for completing the task.

**Biographical sketches for key staff**

**Organizational Chart**

3. Unique Entity Identifier and System for Award Management (SAM)

- You are required to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal grants or cooperative agreements through Grants.gov. It is a unique, nine-digit identification number, which provides unique identifiers of single business entities. The DUNS number is *free and easy* to obtain.
- You will find instructions on the Grants.Gov web site as part of the organization registration process at http://www.grants.gov/web/grants/applicants/organization-registration.html.
- Your organization must register online in the System for Account Management (SAM). **Grants.gov will reject submissions from applicants with nonexistent or expired SAM Registrations.**
- A quick start guide for grant registrants is available at https://www.sam.gov/sam/transcript/Quick_Guide_for_Grants_Registrations.pdf. You should allow a *minimum* of five days to complete an initial SAM registration. Allow up to 10 business days ***after you submit*** your registration for it to be active in SAM.

- If your organization is already registered in SAM, you must renew your SAM registration *each* year. Organizations registered to apply for Federal grants through http://www.grants.gov will need to *renew* their registration in SAM.
- It may take 24 hours or more for SAM updates to take effect in Grants.gov, so if you plan to apply for this funding opportunity or think you might apply, you should ***check for active registration in SAM well before the application deadline.***
- If you are successful and receive a grant award, you must maintain an active SAM registration with current information at all times during which your organization has an active award or an application or plan under consideration by an HHS agency.

HHS/OASH cannot make an award until you have complied with these requirements. In accordance with 2 CFR § 25.205, at the time an award is ready to be made, if you have not complied with these requirements, HHS/OASH:

- May determine that you are not qualified to receive an award; and
- May use that determination as a basis for making an award to another applicant.

Should you successfully compete and receive an award, all first-tier sub-award recipients must have a DUNS number at the time you, the recipient, make a sub-award.

4. Submission Dates and Times

You must submit your application for this funding opportunity by **5:00 p.m. Eastern Time on the date indicated in the DATES section on pages 1-2 (Table I) of this**

**announcement.** Your submission time will be determined by the date and time stamp provided by Grants.gov when you **complete** your submission.

**If you fail to submit your application by the due date and time, we will not review it, and it will receive no further consideration.** You are strongly encouraged to submit your application a minimum of 3-5 days prior to the application closing date. Do not wait until the last day in the event you encounter technical difficulties, either on your end or with http://www.grants.gov . Grants.gov can take up to 48 hours to notify you of a successful submission. You are better off having a less-than-perfect application successfully submitted than no application at all.

If your submission fails due to problems with Grants.gov, we may consider your application if you provide verification from Grants.gov indicating system problems existed at the time of your submission **and that time was before the submission deadline.**

5. Intergovernmental Review

Applications under this announcement are subject to the requirements of Executive Order 12372, ''Intergovernmental Review of Federal Programs,'' as implemented by 45 CFR part 100, ''Intergovernmental Review of Department of Health and Human Services Programs and Activities.'' As soon as possible, you should discuss the project with the State Single Point of Contact (SPOC) for the State in which your organization is located. The current listing of the SPOCs is available at http://www.whitehouse.gov/omb/grants_spoc. For those states not represented on the listing, further inquiries should be made by the applicant regarding submission to the relevant SPOC.

The SPOC should forward any comments to the Department of Health and Human Services 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. The SPOC has 60 days

from the due date listed in this announcement to submit any comments. For further information, contact the HHS/OASH Office of Grants Management at 240–453–8822.

6. Funding Restrictions

The allowability, allocability, reasonableness, and necessity of direct and indirect costs that may be charged to HHS/OASH grants must be in accordance with Department regulations and policy effective at the time of the award. Current requirements are outlined at 45 CFR part 75 "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards."

Indirect costs may be included per 45 CFR § 75.414. Applicants should indicate which method and/or rate is used for this application. To obtain a negotiated indirect cost rate with the Federal Government you may contact the U.S. Department of Health and Human Services Cost Allocation Services (CAS) regional office that is applicable to your State. A list of CAS regional offices is included in the grant application package for this announcement.

*Pre-Award Costs*:

Pre-award costs are not allowed.

*Salary Limitation:*

The Consolidated and Further Continuing Appropriations Act, 2015 (P.L. 113-235), and the Continuing Resolution for FY 2016 (H.R. 719), limit the salary amount that you may be awarded and charge to HHS/OASH grants and cooperative agreements. Award funds should not be budgeted to pay the salary of an individual at a rate in excess of Executive Level II. Currently, the Executive Level II salary of the Federal Executive Pay scale is $183,300. 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 an HHS/OASH 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 $183,300, their direct salary would be $91,650 (50% FTE), fringe benefits of 25% would be $22,912.50, and a total of $114,562.50 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 *actual* base full time salary: $350,000<br>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:**<br>Individual's base full time salary *adjusted* to Executive Level II: $183,300<br>50% of time will be devoted to the project | |
| Direct salary | **$91,650** |
| Fringe (25% of salary) | **$22,912.50** |
| Total amount | **$114,562.50** |

**Appropriate salary limits will apply as required by law.**

7. Other Submission Requirements

Electronic Submission

**HHS/OASH requires that all applications be submitted electronically via the Grants.gov portal unless an exemption has been granted.** If you submit an application via any other means of electronic communication, including facsimile or electronic mail, it *will not* be accepted for review.

You may access the Grants.gov website portal at http://www.grants.gov. All HHS/OASH funding opportunities and grant application packages are made available on Grants.gov.

Your application will not be considered valid until all application components are received via Grants.gov by the HHS/OASH Office of Grants Management according to the deadlines specified in the DATES section on page 1 of this announcement. If your application does not adhere to the due date and time requirements, it will be deemed ineligible and receive no further consideration.

If you choose to apply, you are encouraged to initiate electronic applications early in the application development process. Applying in advance of the deadline will allow you to address any problems with submissions prior to the application deadline. Any files uploaded or attached to the Grants.gov application must be of the following file formats – Microsoft Word, Excel or PowerPoint, Adobe PDF, or image formats (JPG, GIF, TIFF, or BMP only). Even though Grants.gov allows applicants to attach any file format as part of their application, HHS/OASH restricts this practice and only accepts the file formats identified above. If you submit any file part of the Grants.gov application that is not in a file format identified above, it will not be accepted for processing and will be excluded from your application during the review process. You must submit your application in a format that can easily be copied and read by

reviewers. We do not recommend that you submit scanned copies through Grants.gov unless you confirm the clarity of the documents. Pages cannot be reduced resulting in multiple pages on a single sheet to avoid exceeding the page limitation. If you submit documents that do not conform to the above, we will exclude them from your application during the review process.

**Important Grants.gov Information**

You may access the electronic application for this program on http://www.grants.gov. You must search the downloadable application page by the Funding Opportunity Number or CFDA number, both of which can be found on page 1 of this funding opportunity announcement.

To ensure successful submission of your application, you should carefully follow the step-by-step instructions provided at http://www.grants.gov/web/grants/applicants/apply-for-grants.html . These instructions are kept up-to-date and also provide links to Frequently Asked Questions and other troubleshooting information.

You should contact Grants.gov with any questions or concerns regarding the electronic application process conducted through Grants.gov. See Section D.3 for requirements related to DUNS numbers and SAM registrations.

Program-Specific Requirements

Applicants must include a written statement in the application certifying that, if funded, their Title X Family Planning Services Project will encourage family participation in the decision of minors to seek family planning services, and that they will provide counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.

Non-profit Status

For all non-profit organization applicants, documentation of nonprofit status must be submitted as part of the application. Any of the following constitutes acceptable proof of such status:

1. A reference to the Applicant organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations described in the IRS code;
2. A copy of a currently valid IRS tax exemption certificate;
3. A statement from a State taxing body, State attorney general, or other appropriate State official certifying that the applicant organization has a nonprofit status and that none of the net earnings accrue to any private shareholders or individuals; or
4. A certified copy of the organization's certificate of incorporation or similar document that clearly establishes nonprofit status.

## E. APPLICATION REVIEW INFORMATION

1. Criteria: Eligible applications will be assessed according to the following criteria:

Within the limits of funds available for these purposes, grants may be awarded for the establishment and operation of those projects which will best promote the purposes of section 1001 of Title X of the Public Health Service Act, taking into account:

a. The adequacy of the applicant's facilities and staff, including evidence of an infrastructure that is sustainable in ensuring continued access to services for the target population. For applicants that will not provide all services directly, the extent to which the applicant has documented the process it will use for providing an opportunity to receive subawards to qualified entities eligible to receive federal funds in

providing services throughout the service area to meet the needs of project beneficiaries. (**20 points**);

b. The degree to which the project plan adequately provides for the requirements set forth in the Title X regulations at 42 CFR part §59, subpart A (**20 points**);

c. The extent to which the applicant substantiates and/or justifies that family planning services are needed within the proposed service area (**20 points**);

d. The capacity of the applicant to make rapid and effective use of the Federal assistance. Applicants must demonstrate/explain how they propose to use the federal assistance to provide high quality family planning services to the patient populations proposed to be served in the application. (**15 points**);

e. The number of patients, and, in particular, the number of low-income patients to be served (**10 points**);

f. The relative availability of non-Federal resources within the community to be served and the degree to which those resources are committed to the project (**10 points**); and

g. The relative need of the applicant (**5 points**).

2. Review and Selection Process

Each HHS/OASH Program's office is responsible for facilitating the process of evaluating applications and setting funding levels according to the criteria set forth in Title X regulations at 42 CFR §59.7(a).

An independent review panel will evaluate applications that pass the screening and meet the responsiveness criteria if applicable. These panel reviewers are experts in their fields, and are drawn from academic institutions, non-profit organizations, state and local government, and

Federal government agencies. Based on the Application Review Criteria as outlined under Section E.1, the reviewers will comment on and score the applications, focusing their comments and scoring decisions on the identified criteria. In addition to the independent review panel, Federal staff will review each application for programmatic, budgetary, and grants management compliance.

Final award decisions will be made by the Regional Health Administrator (RHA) for the applicable Public Health Service Region, in consultation with the Deputy Assistant Secretary for Population Affairs (DASPA) and the Assistant Secretary for Health (ASH) or their designees. In making final award decisions, the RHA, DASPA, and ASH will take into consideration the following additional criteria:

a. The geographic distribution of services within the identified service area as described in the application, including consideration of whether the area is best served by a single or multiple grantees;

b. The extent to which funds requested for a project maximize access for the population in need within the entire service area as announced in Table 1;

c. The extent to which projects that rely on subrecipients to provide services can provide the required services and best serve individuals in need throughout the anticipated service area; and

d. The extent to which projects best promote the purposes of Section 1001 of the Public Health Service Act, within the limits of funds available for such projects.

**All award decisions, including level of funding if an award is made, are final and not appealable to any office or official in HHS/OASH.**

3. Review of Risk Posed by Applicant

The HHS/OASH will evaluate each application in the fundable range for risks posed by an applicant before issuing an award in accordance with 45 CFR § 75.205. This evaluation may incorporate results of the evaluation of the applicant's eligibility or the quality of its application. If we determine that a Federal award will be made, special conditions that correspond to the degree of risk assessed by the applicant will be applied to the Federal award. OASH will use a risk-based approach and may consider any items such as the following:

(1) Applicant's financial stability;

(2) Quality of management systems and ability to meet the management standards prescribed in 45 CFR part 75;

(3) History of performance. The applicant's record in managing Federal awards, if it is a prior recipient of Federal awards, including timeliness of compliance with applicable reporting requirements, conformance to the terms and conditions of previous Federal awards, and if applicable, the extent to which any previously awarded amounts will be expended prior to future awards;

(4) Reports and findings from audits performed; and

(5) The applicant's ability to effectively implement statutory, regulatory, or other requirements imposed on non-Federal entities.

Prior to making a Federal award with a total Federal share greater than the simplified acquisition threshold (currently $150,000), we are required to review and consider any information about you that is in the designated integrity and performance system accessible through the System for Award Management (SAM) (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)).You may, at your option, review information in

SAM and comment on any information about yourself that a Federal awarding agency previously entered and is currently available through SAM. We will consider any comments by you, in addition to the other information in the designated system, in making a judgment about your integrity, business ethics, and record of performance under Federal awards when completing the review of risk posed by applicants.

4. Anticipated Announcement and Federal Award Dates

HHS/OASH seeks to award funds as much in advance of the anticipated project start date shown in Section B "Federal Award Information," as practicable, with a goal of 10-15 days.

## F. FEDERAL AWARD ADMINISTRATION INFORMATION

1. Federal Award Notices

The HHS Office of the Assistant Secretary for Health does not release information about individual applications during the review process. If you would like to track your application, please see instructions at http://www.grants.gov/web/grants/applicants/track-my-application.html. The official document notifying you that a project application has been approved for funding is the Notice of Award (NOA), approved by a Grants Management Officer of the HHS/OASH Office of Grants Management. If you are successful, you will receive this document via system notification from our grants management system (Grant Solutions) and/or via e-mail. This document notifies the successful recipient of the amount of money awarded, the purposes of the grant, the anticipated length of the project period, terms and conditions of the grant award, and the amount of funding to be contributed by the grantee to project costs, if applicable. Grantees should pay specific attention to the terms and conditions of the award as

indicated on the NOA, as some may require a time-limited response. The NOA will also identify the Grants Management Specialist and Program Project Officer assigned to the grant.

If you are unsuccessful, you will be notified by the program office by email and/or letter and will receive summary comments pertaining to the application resulting from the review process. On occasion, some applicants may receive a letter indicating that an application was approved but unfunded. These applications are kept active for one year and may be considered for award without re-competing should funds become available during the hold period.

2. Administrative and National Policy Requirements

If you are successful and receive a Notice of Award, in accepting the grant award, you stipulate that the award and any activities thereunder are subject to all provisions of 45 CFR part 75, currently in effect or implemented during the period of the grant or other Department regulations and policies effective at the time of the award.

In addition, your organization must comply with all terms and conditions outlined in the Notice of Award, the U.S. Department of Health and Human Services (HHS) Grants Policy Statement (GPS), requirements imposed by program statutes and regulations and HHS grant administration regulations, as applicable, as well as any requirements or limitations in any applicable appropriations acts. The current HHS GPS is available at http://www.hhs.gov/asfr/ogapa/aboutog/hhsgps107.pdf. Please note HHS plans to revise the HHS GPS to reflect changes to the regulations; 45 CFR parts 74 and 92 have been superseded by 45 CFR part 75.

Grant funds may only be used to support activities outlined in the approved project plan. The successful applicant will be responsible for the overall management of activities within the scope of the approved project plan. Please consult the HHS GPS Section II and 45 CFR §75.308

for aspects of your grant award that will require prior approval for any changes from the Grants Management Officer. Modifications to your approved project that will require prior approval, include but are not limited to, a change in the scope or the objective of the project or program (even if there is no associated budget revision); budget revisions, including changes in the approved cost-sharing or matching; a change in a key person specified in your application; reduction in time devoted to the project by the approved project director or principal investigator, either as percentage of full-time equivalent of 25% or more or absence for 3 months or more; or the subawarding, transferring or contracting out of any work that was not described in the approved proposal.

Lobbying Prohibitions

Pursuant to the Consolidated and Further Continuing Appropriations Act, 2015 (P.L. 113-235), ), and the Continuing Resolution for FY 2016 (H.R. 719), you shall not use any funds from an award made under this announcement for other than normal and recognized executive legislative relationships. You shall not use funds 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.

You shall not use any funds from an award made under this announcement to pay the salary or expenses of any employee or subrecipient, or agent acting for you, 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.

The above prohibitions 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.

Non-Discrimination Requirements

Pursuant to Federal civil rights laws, if you receive an award under this announcement you must not discriminate on the basis of race, color, national origin, disability, age, and in some cases sex and religion. The HHS Office for Civil Rights provides guidance to grantees in complying with civil rights laws that prohibit discrimination. www.hhs.gov/ocr/civilrights/understanding/index.html.

HHS provides guidance to recipients of federal financial assistance on meeting the legal obligation to take reasonable steps to provide meaningful access to persons with limited English proficiency. See *Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient*

*Persons*, 68 Fed. Reg. 47311, 47313 (HHS Office for Civil Rights, 2003, www.gpo.gov/fdsys/pkg/FR-2003-08-08/pdf/03-20179.pdf) or www.hhs.gov/ocr/civilrights/resources/laws/revisedlep.html . You must ensure your contractors and subrecipients also comply with federal civil rights laws.

The *National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care* (National CLAS Standards), 78 Fed. Reg. 58539, 58543 (HHS Office of Minority Health, 2013, www.gpo.gov/fdsys/pkg/FR-2013-09-24/pdf/2013-23164.pdf), provides a practical framework for grant applicants to provide quality health care and services to culturally and linguistically diverse communities, including persons with limited English proficiency. Compliance with the National CLAS Standards meets the legal obligation to take reasonable steps to provide meaningful access to persons with limited English proficiency

Smoke- and Tobacco-free Workplace

The HHS/OASH strongly encourages all grant recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products. This is consistent with the HHS/OASH mission to protect and advance the physical and mental health of the American people.

Acknowledgement of Funding and HHS Rights to Materials and Data

Federal grant support must be acknowledged in any publication you develop using funds awarded under this program, with language such as:

This publication (journal article, etc.) was supported by Award No. _____ from the Office of the Assistant Secretary of Health (OASH). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of OASH.

All publications you develop or purchase with funds awarded under this announcement must be consistent with the requirements of the program. Pursuant to 45 CFR § 75.322(b), you own the copyright for materials that you develop under this grant, and HHS reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use those materials for Federal purposes, and to authorize others to do so. In addition, pursuant to 45 CFR § 75.322(d), the Federal government has the right to obtain, reproduce, publish, or otherwise use data produced under this grant and has the right to authorize others to receive, reproduce, publish, or otherwise use such data.

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.hhs.gov/opa/grants/trafficking_in_persons_award_condition.html. If you are unable to access this link, please contact the Grants Management Specialist identified in this funding opportunity announcement to obtain a copy of the term.

Efficient Spending

This award may also be subject to the HHS Policy on Promoting Efficient Spending: Use of Appropriated Funds for Conferences and Meetings, Food, Promotional Items, and Printing and Publications available at http://dhhs.gov/asfr/ogapa/acquisition/effspendpol_memo.html.

Pilot Whistleblower Protection

If you receive an award, you will be subject to a term and condition that applies the terms of 48 CFR § 3.908 to the award, and requires that grantees inform their employees in writing of employee whistleblower rights and protections under 41 U.S.C. 4712 in the predominant native language of the workforce.

Same-sex Spouses, Marriages, and Households

A standard term and condition of award will be included in the final Notice of Award (NOA) that states: "In any grant-related activity in which family, marital, or household considerations are, by statute or regulation, relevant for purposes of determining beneficiary eligibility or participation, grantees must treat same-sex spouses, marriages, and households on the same terms as opposite-sex spouses, marriages, and households, respectively. By "same-sex spouses," HHS means individuals of the same sex who have entered into marriages that are valid in the jurisdiction where performed, including any of the 50 states, the District of Columbia, or a U.S. territory or in a foreign country, regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. By "same-sex marriages," HHS means marriages between two individuals validly entered into in the jurisdiction where performed, including any of the 50 states, the District of Columbia, or a U.S. territory or in a foreign country, regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. By "marriage," HHS does not mean registered domestic partnerships, civil unions or similar formal relationships recognized under the law of the jurisdiction of celebration as something other than a marriage."

Human Subjects Protection

Federal regulations (45 CFR Part 46) require that applications and proposals involving human subjects must be evaluated with reference to the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained. If research involving human subjects is anticipated, you must meet the requirements of the HHS regulations to protect human subjects from research risks as specified in 45 CFR part 46 – Protection of Human Subjects. You may find it online at http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html.

3. Reporting

Performance Reports

You must submit performance reports on an annual basis. Your performance reports must address content required by 45 CFR § 75.342(b)(2). You must submit your performance reports by upload to our grants management system (GrantSolutions.gov), in the Grant Notes module.

You will also be required to submit a final progress report covering the entire project period 90 days after the end of the project period. You must submit the final report by upload to our grants management system (GrantSolutions.gov), in the Grant Notes module.

Ensuring an Accurate Family Planning Service Site Database

In order to maintain an accurate record of current Title X service sites, grantees are expected to provide timely notice (within 30 days) to the Office of Population Affairs (OPA)

through its website contractor, as well as to the appropriate HHS regional office, of any deletions, additions, or changes to the name, location, street address and email, and contact information for Title X grantees and service sites. All changes will be reviewed and approved by the relevant HHS regional office prior to being posted on the OPA website. Note, this does not replace the prior approval requirement under HHS grants policy for changes in project scope, including clinic closures.

Performance Measures

Family Planning Annual Report

Each year of the project period, the grantee is required to submit a Family Planning Annual Report (FPAR). The information collections (reporting requirements) and format for this report have been approved by the Office of Management and Budget (OMB) and assigned OMB No. 0990-0221 (Expires 9/30/2016).

The FPAR contains a brief organizational profile and 14 tables to report data on family planning users, service use, and revenue for the reporting year. The FPAR instrument and instructions can be found on the OPA Web site at http://hhs.gov/opa, and are included in the application kit for this announcement.

Data on Outreach and Enrollment and Sustainability Indicators

Successful applicants will be required to collect and report data annually using OMB approved forms for outreach and enrollment. The information collections (reporting requirements) and format for this report have been approved by the Office of Management and Budget (OMB) and assigned OMB No. "XXXX-XXXX" (Expires: XX/XX/20XX). In addition,

successful applicants will be required to collect and submit annual data on sustainability indicators for each service site. OPA will provide a final standardized data collection form following approval from OMB.

Financial Reports

You will be required to submit quarterly and annual Federal Financial Reports (FFR) (SF-425). Your specific reporting schedule will be issued as a condition of grant award. You will also be required to submit a final FFR covering the entire project period 90 days after the end of the project period. You must submit FFRs via our grants management system (GrantSolutions.gov) FFR module.

Quarterly cash reporting to the HHS Payment Management System on the FFR is also required. Please note, at this time, these FFR reports are separate submissions via the Payment Management System. At this time, data is not transferable between the two systems and you will report twice on certain data elements.

Audits

If your organization receives $750,000 or greater of Federal funds, it must undergo an independent audit in accordance with 45 CFR part 75, subpart F or regulations and policy effective at the time of the award.

Non-competing Continuation Applications and Awards

Each year of the approved project period, you will be required to submit a noncompeting application which includes a progress report for the current budget year, and work plan, budget and budget justification for the upcoming year. Specific guidance will be provided via Grant

Solutions well in advance of the application due date. HHS/OASH will award continuation funding based on availability of funds, satisfactory progress of the project, and grants management compliance, including timely reporting. Additionally, failure to provide final progress or financial reports on other grants with HHS may affect continuation funding.

FFATA and FSRS Reporting

The Federal Financial Accountability and Transparency Act (FFATA) requires data entry at the FFATA Subaward Reporting System (http://www.FSRS.gov) for all sub-awards and sub-contracts issued for $25,000 or more as well as addressing executive compensation for both grantee and sub-award organizations.

Reporting of Matters Relating to Recipient Integrity and Performance

If the total value of your currently active grants, cooperative agreements, and procurement contracts from all Federal awarding agencies exceeds $10,000,000 for any period of time during the period of performance of this Federal award, then you must maintain the currency of information reported to the System for Award Management (SAM) that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)) about civil, criminal, or administrative proceedings described in paragraph 2 of Appendix XII to 2 CFR part 200—Award Term and Condition for Recipient Integrity and Performance Matters. This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement

contracts, will be publicly available. For more information about this reporting requirement related to recipient integrity and performance matters, see Appendix XII to 2 CFR part 200.

Other Required Notifications

Before you enter into a covered transaction at the primary tier, in accordance with 2 CFR § 180.335, you as the participant must notify HHS/OASH, if you know that you or any of the principals for that covered transaction:

(a) Are presently excluded or disqualified;

(b) Have been convicted within the preceding three years of any of the offenses listed in 2 CFR § 180.800(a) or had a civil judgment rendered against you for one of those offenses within that time period;

(c) Are presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses listed in 2 CFR § 180.800(a); or

(d) Have had one or more public transactions (Federal, State, or local) terminated within the preceding three years for cause or default.

At any time after you enter into a covered transaction, in accordance with 2 CFR § 180.350, you must give immediate written notice to HHS/OASH if you learn either that—

(a) You failed to disclose information earlier, as required by 2 CFR § 180.335; or

(b) Due to changed circumstances, you or any of the principals for the transaction now meet any of the criteria in 2 CFR § 180.335.

## G. HHS AGENCY CONTACTS

Administrative and Budgetary Requirements and Program Requirements:

For information related to administrative and budgetary requirements, contact the HHS/OASH Office of Grants Management grants specialist listed below:

Robin Fuller
240-453-8830
robin.fuller@hhs.gov

For information on program requirements, contact the program office:

David M. Johnson
240-453-2841
david.johnson@hhs.gov

## H. OTHER INFORMATION

Awards under this Announcement

**We are not obligated to make any Federal award as a result of this announcement. Only the grants officer can bind the Federal government to the expenditure of funds.** If you receive communications to negotiate an award or request additional or clarifying information, this does not mean you will receive an award; it only means that your application is still under consideration.

Application Elements

The below is a summary listing of all the application elements required for this funding opportunity.

Application for Federal Assistance (SF-424)

Budget Information for Non-construction Programs (SF-424A)

Assurances for Non-construction Programs (SF-424B)

Disclosure of Lobbying Activities (SF-LLL)

Project Abstract Summary

Project Narrative

Budget Narrative

Appendices [Project Work Plan, Biographical Sketches for key staff, organizational chart]

Other Submission Requirements: Written statement of certifications

Susan B. Moskosky 10/26/2015

Susan B. Moskosky, MS, WNP-BC
Acting Director, OPA