



U.S. Department of Health and Human Services

Office of Minority Health

Notice of Funding Opportunity: Center for Indigenous Innovation and Health Equity

Opportunity Number: MP-CPI-23-002

Application Due Date:
08/01/2023 at 6:00 PM Eastern

OVERVIEW

FEDERAL AGENCY NAME

The Office of the Assistant Secretary for Health, Office of Minority Health

FUNDING OPPORTUNITY TITLE

Center for Indigenous Innovation and Health Equity

ACTION

Notice

ANNOUNCEMENT TYPE

Initial CA (Cooperative Agreement)

FUNDING OPPORTUNITY NUMBER

MP-CPI-23-002

ASSISTANCE LISTING NUMBER AND PROGRAM:

93.137 , Community Programs to Improve Minority Health

DATES

Application Deadline: 08/01/2023 by 6:00 PM Eastern.

Technical Assistance Webinar: 06/15/2023 at 4:30 PM Eastern.

EXECUTIVE SUMMARY

The Office of Minority Health announces the availability of funds for Fiscal Year (FY) 2023 under the authority of 42 U.S.C. § 300u-6 (Section 1707 of the Public Health Service Act).

This notice solicits applications for projects under the Center for Indigenous Innovation and Health Equity (CIIHE) initiative. CIIHE will support efforts, including research, education, service, and policy development, to advance sustainable solutions that address Indigenous health disparities and advance health equity in the two focus populations: American Indian and Alaska Natives and Native Hawaiian and Pacific Islanders.

The Office of the Assistant Secretary for Health (OASH) encourages all applicants to review all program requirements, eligibility information, application format and submission information, evaluation criteria, and other information in this funding announcement to ensure that their applications comply with all requirements and instructions.

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A. Program Description

The Office of Minority Health announces the availability of funds for Fiscal Year (FY) 2023 under the authority of 42 U.S.C. § 300u-6 (Section 1707 of the Public Health Service Act).

OMH is dedicated to improving the health of racial and ethnic minority populations through the development of health policies and programs that will help eliminate health disparities. Through our demonstration projects, we support the identification of effective approaches for improving health outcomes with the goal of promoting dissemination and sustainability of these approaches. In 2021, Merriam-Webster defined Indigenous peoples as culturally distinct ethnic groups whose members are directly descended from the earliest known inhabitants of a particular geographic region and, to some extent, maintain the language and culture of those original peoples. For the purposes of this initiative, Indigenous populations refer to American Indian and Alaskan Natives (AI/AN), and Native Hawaiian and Pacific Islanders (NHPI).

The Center for Indigenous Innovation and Health Equity (CIIHE) initiative will support efforts, including research, education, service, and policy development, to advance sustainable solutions that address Indigenous health disparities and advance health equity in two focus populations: AI/AN and NHPI. We intend to make one award per focus population. Recipients will implement an innovative and culturally appropriate framework to prevent and improve chronic diseases, such as obesity, hypertension, and diabetes for their respective AI/AN or NHPI population.

1. Background

Compared to the general population, Indigenous American populations have endured a legacy of unfavorable health outcomes (Centers for Disease Control and Prevention N. C., 2020). Disparities within these groups include higher prevalence rates of a wide range of diseases, disability status, and adversely impacted social determinants of health (SDOH) (i.e., income, health literacy, food insecurity, education, health care access, environmental exposure) (National Academies of Sciences, 2017) (Centers for Disease Control and Prevention, 2013) (Centers for Disease Control and Prevention N. C., 2020) (Indian Health Service, 2019). The disproportionate disease burden in these groups may be attributed to systemic issues that have led to a loss of culture and language access, poor SDOH including access to health promoting resources and services (Centers for Disease Control and Prevention, 2020) (Cook W.K., 2010) (Substance Abuse and Mental Health S. A., 2008).

The health disparities and inequities across the Indigenous populations are vast and interconnected. Recent data have found higher prevalence of food insecurity among AI/AN (25%) and NHPI populations (21%) compared to the general U.S. population (11%), which places these two groups at higher risk for chronic diet-related diseases such as obesity, diabetes, hypertension, cancer, asthma, etc. (U.S. Department of Agriculture, 2022). The mortality rates for several health issues among AI/AN populations are higher than for all other Americans (e.g., heart disease 1.3 times higher, diabetes 3.2 higher and suicide 1.7 times higher). The differences

result in a lower-than-average life expectancy by 5.5 years compared to other Americans (Indian Health Service, 2019) (Substance Abuse and Mental Health S. A., 2021). Native Hawaiians in Hawaii have the highest prevalence of diagnosed diabetes, and their diabetes-related mortality was 3 times higher than non-Hispanic whites (Kaholokula, 2018). Studies have suggested that health disparities experienced by both AI/AN and NHPI populations are attributed to lower social status; lack of language access (health literacy), loss of their traditional ways of life; and historical relations with governments (Kaholokula, 2018).

Consistent collection of disaggregated data to inform health intervention needs among the AI/AN and NHPI is often unavailable. As such, there is a need for expanding the data collection infrastructure and capacity to accurately measure and improve health outcomes in these two populations (The White House Briefing Room, 2022). Education and training on the importance of disaggregating data with data collection and analysis is critical to understanding AI/AN and NHPI subpopulation differences for timely intervention. In addition, efforts to collect data and document the influence of the SDOH in Indigenous populations would enhance the availability of information to inform culturally relevant approaches for addressing health disparities and inequities in AI/AN and NHPI populations.

The root causes and burden of disproportionate chronic disease and SDOH outcomes within AI/AN and NHPI populations are complex. There is a need to expand the availability of culturally relevant frameworks focused on addressing the unique challenges faced by Indigenous populations and to increase success with improving health outcomes in Indigenous populations (Chino, 2006). Research, education, service, and policy development that centers Indigenous cultural values, knowledge, and collaborations with Indigenous communities and researchers are needed. Studies have shown culturally adapted, and culturally grounded health approaches and interventions are effective in improving health outcomes, as well as, sustaining interventions in AI/AN and NHPI communities (Substance Abuse and Mental Health S. A., 2008) (Kaholokula, 2018) (Stephen Harfield, 2015).

To advance Indigenous health innovation and health equity, it is essential to support partnerships and collaborations among Indigenous populations who share similar concepts of culture and health. Leveraging partnerships and collaborations with institutions such as health systems and community-based organizations to integrate culturally appropriate knowledge, practice, Indigenous frameworks, and methodologies lead to improvements in prevention and chronic disease outcomes in AI/AN and NHPI populations. (U.S. Department of Health and Human Services, 2022) (Barnabe, 2021).

2. Expectations for Funded Projects

The CIIHE awards will function as a single coordinated initiative. Each award will focus on improving chronic disease outcomes such as obesity, hypertension, and diabetes in one of the two focus populations. A funded project may only address one focus population. OMH will facilitate the coordination and collaboration of project activities between the cooperative agreement recipients to support seamless program implementation.

a. Identify and Implement a Culturally Responsive Framework

Recipients should operationalize a culturally responsive framework for research, education, service, and policy development to support prevention and the improvement of chronic disease outcomes. We expect recipients to use culturally responsive principles and methods to frame the development, implementation, and evaluation of culturally appropriate approaches to prevent and improve chronic disease outcomes. The culturally responsive framework should include the following components: Language Access, Communication, and Education, Training, and Technical Assistance.

We expect recipients to reach diverse subpopulations within their focus population and improve focused chronic disease outcomes. Within the first three months of the project, recipients should develop a language access plan that is consistent with the guidance provided in the National Culturally and Linguistically Approaches Services (NCLAS). In subsequent years, recipients should update and submit the plan as part of the non-completing continuation application.

We expect recipients to continue increasing reach and bi-directional communication with community leaders in their focus population. Enhanced communication should improve focused chronic disease outcomes and prevention. Within the first three months of the project, recipients should develop a communication plan to help guide the promotion of project activities conducted by the CIIHE for AI/AN, NHPI, and other audiences who may benefit. Thereafter, recipients should update and submit the plan each year as part of the non-competing continuation application. Each recipient should develop and maintain an interactive website and quarterly e-newsletter publication that will provide information to the CIIHE advisory board members, Indigenous leaders, community partners and partnering organizations throughout the period of performance.

We expect recipients to provide culturally grounded and linguistically appropriate education, training, and technical assistance to partners and stakeholders interested in preventing and improving chronic disease disparities among their focus population. Within the first six months of the project, recipients should develop a plan that supports capacity-building among partners and stakeholders to address identified gaps and needs in the populations of focus relative to the prevention and improvement of chronic disease outcomes.

b. Establish CIIHE Advisory Board

Recipients should jointly convene and manage a CIIHE advisory board that will advise on CIIHE objectives, activities, and priorities that support prevention and improvement of chronic disease outcomes. Recipients will establish the organizational structure, operational framework for and governance structure of the CIIHE Advisory Board. The Project Director/Principal Investigator (PD/PI) should actively participate on the advisory board. OMH will serve as an *ex officio* member on the advisory board. The advisory board should: have equitable representation of AI/AN and NHPI community leaders, community organizations, and community members; and, be inclusive of community-based practitioners serving AI/AN and NHPI populations with lived experiences to identify emerging issues and inform CIIHE priorities.

c. Strengthen Partnerships

Recipients should establish new and strengthen existing partnerships with academic institutions, Indigenous leaders, and community partners to support CIIHE activities. We strongly encourage recipients to partner with Minority Serving Institutions or other similar academic institutions with a focus on Indigenous health, policy, and innovation among AI/AN or NHPI populations. Find the full definition and list of Minority Serving Institutions here https://www.minorityhealth.hhs.gov/assets/PDF/2020_Minority_Serving_Institutions.pdf.

d. Process and Outcomes Evaluation

We expect recipients to implement a rigorous process and outcomes evaluation designed to show the extent to which the project results in:

- Increased community capacity and expanded knowledge of evidence-informed practices, solutions, and lessons learned that are culturally appropriate and address health disparities in AI/AN or NHPI populations.
- Increased utilization of effective strategies, services, and tools to reduce AI/AN or NHPI health disparities.
- Improved AI/AN or NHPI health outcomes and reduction of health disparities.

Recipients should establish processes and procedures to collect disaggregated data by types of activities, race and ethnicity, and language when possible.

e. Disseminate Findings and Results

We expect recipients to identify and disseminate culturally appropriate evidenced-informed practices, promising approaches, and lessons learned from the project to Indigenous communities, policymakers, community organizations and other parties who might be interested in project results. Recipients should use innovative dissemination tools such as storytelling and/or other culturally appropriate methods. We expect that nationwide dissemination of products and knowledge will occur. We may publish (including on a website), all appropriate findings and products (Section F.8). Dissemination materials should be freely, immediately, and equitably accessible to the public.

f. Disparity Impact Statement

Recipients are expected to develop a disparity impact statement (DIS) during the period of performance using local data to identify populations at highest risk for health disparities relative to this initiative. Additional information and links to resources are available in Section I.2.

g. Sustainability Plan

Recipients will be expected to develop a plan during the fourth year for sustaining the evidenced-based and evidence-informed practices established through their projects beyond this funding

opportunity.

3. Federal Agency Substantial Involvement

Recipients will receive funding under a cooperative agreement. A cooperative agreement is a form of assistance that allows for substantial involvement by federal agency. Additional details of the substantial involvement for awards made under this NOFO are described in Section B.3.

B. FEDERAL AWARD INFORMATION

1. Legal Authority

42 U.S.C. § 300u-6 (Section 1707 of the Public Health Service Act)

2. Award Information

We intend to make funds available for competing CA (Cooperative Agreement) awards.

We will fund awards in annual increments and generally for a period of performance up to 5 year(s), although we may approve shorter periods of performance. Budget periods may also vary from the estimate indicated below due to timing of award issuance or other administrative factors.

Recipients will be required to submit a non-competing continuation application for each budget period after the first. Funding for all approved budget periods beyond the first is generally level with the initial award amount and is contingent upon the availability of funds, satisfactory progress of the project, adequate stewardship of Federal funds, and the best interests of the Government.

Award Information

Estimated Federal Funds Available	\$4,000,000
Anticipated Number of Awards	2
Award Ceiling (Federal Funds including indirect costs)	\$2,250,000 per budget period
Award Floor (Federal Funds including indirect costs)	\$1,750,000 per budget period
Anticipated Start Date	09/30/2023
Estimated Period of Performance	Not to exceed 5 year(s)
Anticipated Initial Budget Period Length	12 months

Type of Award	Cooperative Agreement
Type of Application Accepted	Electronic via Grants.gov ONLY unless an exemption is granted.

3. Federal Agency Substantial Involvement

Awards made under this NOFO will be cooperative agreements. A cooperative agreement is a form of assistance that allows for substantial involvement by the program office. Substantial involvement is in addition to the usual monitoring and technical assistance provided under a grant (e.g., assistance from the assigned Federal project officer, monthly conference calls, occasional site visits, ongoing review of plans and progress, participation in relevant meetings, provision of training and technical assistance). Substantial programmatic involvement for cooperative agreements under this NOFO may include:

- Serving as an ex officio member on the advisory board.
- Establishing the organizational structure and operational framework for the CIIHE. Coordinating the implementation of the CIIHE.
- Providing the grants management officer recommendations for prior approval for change of time that Key Personnel are dedicated to the project and for replacement of Key Personnel. Key Personnel may include the Project Director/Principal Investigator.
- Assisting the recipients to establish, review, and update priorities for activities conducted under the auspices of this cooperative agreement.
- Approving the final priorities for activities conducted under the auspices of this cooperative agreement.
- Assisting in establishing the governance structure of the advisory board.
- Consulting relative to the advisory board membership.
- Identification of other organizations with whom the recipients may be asked to develop cooperative and collaborative relationships and partnerships.
- Collaborating on the development of measures, methods, and materials to be tested or used.
- Collaborating to disseminate project findings and lessons learned during the period of performance.

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 an award under this announcement.

Private non-profit institutions of higher education are eligible to apply.

Faith-based organizations and American Indian/Alaska Native/Native American (AI/AN/NA) and Native Hawaiian and Pacific Islander organizations that are public or non-profit private entities are eligible to apply.

Public or non-profit community-based organizations (CBOs) are eligible to apply.

Examples of eligible Organizations include:

- State governments

- County governments

- City or township governments

- Special district governments

- Independent school districts

- Public and State controlled institutions of higher education

- Native American tribal governments (Federally recognized)

- Public housing authorities/Indian housing authorities

- Native American tribal organizations (other than Federally recognized tribal governments)

- Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education

- Nonprofits without 501(c)(3) status with the IRS, other than institutions of higher education

- Private institutions of higher education

2. Cost Sharing or Matching

You are not required to provide cost sharing or matching in your proposed budget. If you voluntarily include cost sharing in your application, you must include in your budget narrative a non-federal sources justification as described in Section D.3.b.1.t or your application will be disqualified (Section C.4.k). Voluntary cost sharing is not expected for research applications. During the merit review of an application, cost sharing will only be considered in the overall review of the adequacy of the total proposed budget (Federal and non-Federal share) to support the project proposed.

Applications including cost sharing or matching, whether required or voluntary, that result in an award will include the cost sharing or matching commitment on the notice of award at the level proposed in the application. See Section D.3.b.1.s. Any change in the responsibility to provide cost sharing or matching at that level will require prior approval of the grants management officer.

Cost-Sharing or Matching may include any in-kind contributions necessary to the execution of the proposed project (45 C.F.R. § 75.306).

3. Other - Application Responsiveness Criteria

We will review your application to determine whether it meets the responsiveness criteria below. If your application does not meet the responsiveness criteria, we will disqualify it from the competition; we will not review it beyond the initial screening. The responsiveness criteria are as follows

- The Project Abstract Summary and first paragraph of the project narrative clearly identify which population (i.e., AI/AN or NHPI) that is the focus of the project.

4. Application Disqualification Criteria

If you successfully submit an application, the OASH Grants and Acquisitions Management (GAM) Division will determine whether your application is eligible according to section C.1 Eligible Applicants. If we determine your application fails to meet the criteria described below, we will disqualify it, that is, **we will not review it and will give it no further consideration.**

- a. You must submit your application electronically via <https://grants.gov/> (unless an exemption was granted by the grants management officer 2 business days prior to the deadline) by the date and time indicated in Section D.5 of this announcement.
- b. If you successfully submit multiple applications from the same organization for the same project, we will only review the last application received by the deadline.
- c. You must complete the required forms in the application package: SF-424, SF-424A, SF-LLL, and Project Abstract Summary (Section D.2.a).
- d. Your application must be submitted in the English language and must be in terms of U.S. dollars (45 C.F.R. § 75.111(a)).
- e. Your Project Narrative section of the application must be double-spaced, on the equivalent of 8 ½ " x 11" page size, with 1" margins on all sides (top, bottom, left and right) and font size not less than 12 points (Section D.2.a).
- f. Your Project Narrative must not exceed 50 pages. The following items do not count toward the Project Narrative page limit: all required forms, including SF-424, SF-424A, SF-LLL, Project Abstract Summary, and Budget Narrative (including budget tables)(Section D.2.a).
- g. Your total application (i.e., the Project Narrative plus Appendices) must not exceed 75 pages. The following items do not count toward the Project Narrative page limit: all required forms, including SF-424, SF-424A, SF-LLL, Project Abstract Summary, and Budget Narrative (including budget tables)(Section D.2.a).

- h. Your Federal funds request including indirect costs must not be above the maximum indicated in Award Ceiling (Section B.2).
- i. Your Federal funds request including indirect costs must not be below the Minimum indicated in Award Floor, if any (Section B.2).
- j. Your application must meet the Other - Application Responsiveness Criteria outlined above (Section C.3).
- k. If your application includes cost sharing (voluntary or required, Section C.2), you must include in your budget narrative a non-federal sources justification.

D. APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package

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

OASH Grants and Acquisitions Management Division

Phone: 240-453-8822

Email: OASH_Grants@hhs.gov

2. Content and Form of Application Submission

a. Application Format

Your application must be prepared using the forms and information provided in the online application package. This includes but is not limited to:

- SF-424 Application for Federal Assistance
- SF-424A Budget Information for Non-Construction Programs
- SF-LLL Disclosure of Lobbying Activities
- Project Abstract Summary

We encourage individuals to use their full name (first, middle, last) on the Standard Forms and other documents such as résumés/curricula vitae/biographical sketches to distinguish them for verification in the System for Award Management exclusion records. Delays may result in award processing if full names are not provided.

Only one Project Director/Principal Investigator (PD/PI) will be named on any resulting award. You should clearly identify the individual in that role in your application. This individual should be the person who will be responsible for the programmatic aspects of the project if an award is made. A placeholder PD/PI is strongly discouraged because this may not present a clear picture for the review. Furthermore, once an award is issued a request for a change in PD/PI requires prior approval of the grants management officer (45 C.F.R. § 75.308(c)(1)(ii-iii)).

The Project Narrative, and total application including appendices, must adhere to the page limit indicated in Application Disqualification Criteria listed in Section C.4. The page limit does not include the Budget Narrative (including budget tables), required forms, assurances, and certifications as described in the Application Disqualification Criteria.

You must double-space the Project Narrative pages.

Your application must be submitted in the English language and must be in the terms of U.S. dollars (45 C.F.R. § 75.111(a))

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 easy to read.

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 (Section C.4(f)-(g)) when printed on 8.5" X 11" paper as determined by OASH/GAM, the application will not be reviewed further. We recommend you print out your application before submitting electronically to ensure that it is within the page limits and is easy to read.

b. Appendices Format

Your appendices should include any specific documents outlined in Section D.3.c, under the heading "Appendices" in the Application Content section of this announcement. Your documents should be easy to read. You should use the same formatting specified for the Project Narrative. However, documents such as résumés/curricula vitae, organizational charts, tables, or letters of commitment may use formatting common to those documents, but the pages must be easy to read. All of your appendices must be uploaded as a single, consolidated file in the Attachments section of your Grants.gov application.

c. Project Abstract Summary Format

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. Furthermore, if your project is funded, HHS will publish the abstract from your form on TAGGS.hhs.gov and USASpending.gov. The abstract may also appear on the program office website or other government website. Therefore, do not include sensitive or proprietary information in your abstract.

d. Budget Narrative Format

The Budget Narrative 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.

3. Application Content

Successful applications will contain the following information:

a. Project Narrative Content

The Project Narrative is the most important part of the application, because it will be used as the primary basis to determine whether your project meets the minimum requirements for an award under this announcement. The Project Narrative should provide a clear and concise description of your project. We recommend that your project narrative include the following components: 1) Problem Statement; 2) Goals, Objectives, and Outcomes; 3) Project Approach; 4) Work Plan; 5) Organizational Capacity; 6) Evaluation and Performance Measurement; 7) Dissemination Plan; and 8) Sustainability Approach.

You must identify only one of the two focus populations—AI/AN populations or NHPI populations—at the top of the first page of your Project Narrative. You may submit more than one application (e.g., one focused on AI/AN, and another on NHPI populations), but each application may only have one focus population.

1. Problem Statement

Describe the scope of the problem that will be addressed by the proposed project, including the disproportionate impact on the AI/AN or NHPI population of focus attributed to loss of traditional practices, language, and culture. To support your description, use quantitative data to describe the subpopulation(s) of focus at highest risk for experiencing disparities. You should refer to the data table you provide in your appendices (Section F.3.c). Describe the specific needs of the focus population that will be addressed, including the gaps in indigenous research, service, education and policy that link to AI/AN or NHPI health disparities.

2. Goals, Objectives, and Outcomes

Describe your project's proposed goal(s), objectives, and outcomes. The goals should be achievable by the end of the period of performance. Your objectives should be SMARTIE (specific, measurable, attainable, relevant, time-bound, inclusive, equitable) and include baseline data and quantifiable timeframes for achievement. Objectives should focus on overall goals of the project rather than project activities. You should clearly identify the culturally relevant chronic disease, organizational, and system outcome(s) measures that will result from your project, and provide specific, quantified estimate of expected outcome(s).

We will not fund any project that does not include measurable outcomes. A “measurable outcome” is an observable end-result that describes how a particular intervention benefits program participants. It demonstrates the “impact” of the intervention. For example, a change in a participant's financial, health, and/or functional status; mental well-being; knowledge; skill; attitude; awareness; or behavior.

3. Project Approach

Describe how the project will address chronic disease health disparities experienced by your population of focus. You should also describe strategies and activities to be undertaken and how they will assist in achieving the overall CIIHE goals and objectives. Specifically, you should describe your approach for the following components.

- Utilizing a culturally responsive framework to support and build system capacity for research, education, service, and/or policy development.
- Integrating culturally appropriate activities to address gaps and opportunities to improve chronic disease health disparities in AI/AN or NHPI populations as part of capacity-building efforts.
- Identifying steps to be taken for developing the Language Access, Communication, Education, Training, and Technical Assistance components of the culturally responsive framework using the CLAS standards
- Establishing and managing a CIIHE Advisory Board.
- Establishing and strengthening partnerships to assist with capacity-building efforts to advance your project goals and objectives.
- Identifying potential barriers to implementing your project and describing plans to overcome those barriers.

4. Work Plan

In reference to the work plan in your appendices (Section D.3.c), describe the rationale behind your work plan and how the specific goals and objectives of the project lead to the anticipated outcomes. Plans should also detail the specific population and/or culturally focused activities that will help you accomplish the project objectives. The roles and responsibilities should be clear for project staff and subrecipients, including how they will specifically contribute to achieving the project's objectives and outcomes.

5. Organizational Capability

Describe your organization's capability and capacity to successfully implement the proposed project. Describe how your organization (or the particular division of your organization) is organized, the nature and scope of its work, and the capabilities it possesses. Refer to the organizational chart in your appendices (See Section D.3.c) showing the relationship of the project to the current organization. Include capabilities of the organization not included elsewhere in the project narrative, such as any relevant experience or the record of the project team in preparing cogent and useful reports, publications, and other products. Describe the team's experience in translating evidence-informed interventions for widespread scale-up; disseminating best practices and lessons learned for addressing AI/AN or NHPI health disparities.

Specify who would have day-to-day responsibility for key tasks such as: project leadership; monitoring the project's ongoing progress; preparation of reports; and communications with other partners and OMH. Describe the oversight responsibilities for monitoring, tracking, and

reporting progress on the project's tasks and objectives. Clearly identify the individual who will serve as the Project Director /Principal Investigator/Project Director (PD/PI). Throughout the project the PD/PI should have involvement in, and substantial knowledge about, all aspects of the project.

Identify all key personnel whose contributions are essential to the implementation of the project. Key personnel include the PD/PI and Evaluator for the project. Key Personnel also includes those who will oversee the technical, professional, managerial, and/or assume responsibility for assuring the validity and quality of your project. Describe the qualifications, expertise, competing time commitments, and related ongoing projects of all key personnel as supported by the curricula vitae / resumes / biographical sketches submitted in your appendices (Section D.3.c). Provide descriptions of all vacant key personnel positions and your anticipated timeframe for filling those positions.

Describe the collaborative partnerships that will support project activities. Memoranda of Agreement (MOAs) or Letters of Commitment (LOCs) (Section D.3.c) should support these descriptions. Describe the role(s) and makeup of partners intended to be involved in completing specific tasks and the anticipated level of effort and responsibility of each in programmatic activities.

Describe your previous working relationships with Indigenous leaders and communities, access to Indigenous networks, and your partners' connections to the focus population. Describe your capability and capacity to convene a diverse network of Indigenous leaders, community partners and organizations. Describe your organization's experience or approach to building trust with the focus population.

Describe your organization's skills, experience, capability, or capacity for forming, managing, engaging, and partnering with organizations in the implementation of health-related projects. Also include information about any contractors and/or consultants that will have a role(s) in implementing the project and achieving project goals. Describe partnerships with Minority Serving Institutions (MSIs) or other similar organizations. Find the full definition and list of MSIs here:

<https://www2.ed.gov/about/offices/list/ocr/edliteminorityinst.html>. (see also https://www.minorityhealth.hhs.gov/assets/PDF/2020_Minority_Serving_Institutions.pdf.)

6. Evaluation and Performance Measurement

Describe the methods you will use to evaluate whether the project achieves its measurable outcome(s) and assess the impact of project activities. Refer to the logic model in your appendices (Section D.3.c). The logic model should demonstrate linkages between objectives, inputs, activities, outputs, outcomes, and impacts. Describe your approach for collecting baseline data and establishing targets. Explain your interim and post-intervention assessment process, time-frames and outcome measures. Also describe how you will measure and report on the outcomes of the project, including how you will use process and outcome evaluation techniques to analyze the goals and objectives of the proposed program.

Identify the individuals/organizations responsible for evaluation activities and their qualifications. Provide a compelling rationale for how the evaluator will maintain independence.

Describe both the quantitative and qualitative tools and techniques that you will employ to measure the outcome(s) and how you will identify and document the “lessons learned.” Provide your plan for statistical analysis, including plans for overcoming any potential obstacles or managing any bias. Describe your approach for collecting disaggregated data, when possible, by types of activities, race/ethnicity, and language. Describe how baseline data will be collected and established, including any data related to chronic diseases and health disparities.

Describe how you will report and use performance measurement and evaluation findings to demonstrate the outcomes of the project and continuous quality improvement. Describe how evaluation and performance measurement will lead to an evidence base for addressing the limited availability of strong and culturally appropriate data for addressing AI/AN or NHPI disparities.

Discuss how your evaluation design will clearly establish whether the evidence-informed intervention(s) result in a statistically significant (e.g., power analysis, Bayesian analysis, or another method) impact on key health outcomes.

7. Dissemination Plan

Describe how you will document and disseminate your results and findings in a timely manner, as well as easily understandable formats to the populations served, the public, and other parties who might be interested in using the results of the project. When published, any journal articles or other products should be freely, immediately, and equitably accessible to the public.

Describe your approach to developing and implementing an interactive website for community engagement and information dissemination.

Describe other, innovative approaches to informing parties who might be interested in using the results of your project to inform practice, service delivery, program development, and/or policymaking, especially to those parties who would be interested in replicating the project.

b. Budget Narrative Content

You must complete the required budget forms and submit a budget narrative with detailed justification as part of your application. You must enter the project budget on the Budget Information Non-construction Programs standard form (SF-424A) according to the directions provided with this standard form. The budget narrative consists of a detailed line-item budget that includes calculations for all costs and activities by "object class categories" identified on the SF-424A and justification of the costs.

Project budget calculations must include estimation methods, quantities, unit costs, and other similar quantitative detail sufficient to verify the calculations. If matching or cost sharing is

required, you must include a detailed listing of any funding sources identified in box 18 of the SF-424 (Application for Federal Assistance). You must state the method you are selecting for your indirect cost rate. See Indirect Costs (Section D.3.b.1.o) for further information. If you are providing in-kind contributions of any type or value, including costs otherwise covered by your indirect cost rate, you must identify those costs, and you should, as appropriate, include the value of the in-kind contribution as proposed cost-sharing (voluntary or required) (45 C.F.R. § 75.306).

Please be sure to carefully review Section D.7 Funding Restrictions for specific information regarding allowable, unallowable, and restricted costs.

You must provide an object class category budget using Section B, box 6 of the SF-424A for the first year of the proposed project. For awards with an anticipated period of performance of one year or less, this will be the budget request for the entire project. Provide a budget justification, which includes explanatory text and line-item detail, for the entire first year of the proposed project. The budget narrative should describe how the categorical costs are derived. Discuss the necessity, reasonableness, and allocation of the proposed costs.

For subsequent budget years in an anticipated multi-year project, provide a summary narrative and line-item budget for each year beyond the first. For categories or items that differ significantly from the first budget year, provide a detailed justification explaining these changes.

Do not include costs beyond the first budget period in the object class budget in box 6 of the SF-424A or box 18 of the SF-424; the amounts entered in these sections should only reflect the first budget period.

Your budget narrative should justify the overall cost of the project as well as the proposed cost per activity, service delivered, and/or product. For example, the budget narrative should define the amount of work you have planned and expect to perform, what it will cost, and an explanation of how the result is cost-effective. If you are proposing to provide services to clients, you should describe how many clients you expect to serve, the unit cost of serving each client, and how this is cost-effective.

Use the following guidelines for preparing the detailed object class budget required by box 6 of the SF-424A. The object class budget organizes your proposed costs into a set of defined categories outlined below. Both federal and non-federal resources (if applicable) must be detailed and justified in the budget narrative. "Federal resources" refers only to the HHS/OASH funds for which you are applying under this NOFO. "Non-federal resources" are all other non-HHS/OASH federal and non-federal resources. We recommend you present budget amounts and computations in a columnar format: first column, object class categories; second column, federal funds requested; third column, non-federal resources; and last column, total budget.

Object Class	Federal Funds Requested	Non-federal Resources	Total Budget
Personnel	\$100,000	\$25,000	\$125,000

Subrecipient/contract and consultant detailed costs should all be included in those specific line items, not in the overall project object class line items. For example, subrecipient travel should

be included in the Contractual line item not in Travel. **Subrecipient/contract and consultant activities must be described in sufficient detail to describe accurately the project activities that each will conduct.**

1. Object Class Descriptions and Required Justifications

a. Personnel Description

Costs of staff salaries and wages, excluding benefits.

b. Personnel Justification

Clearly identify the PD/PI, if known at the time of application. Provide a separate table for personnel costs detailing for each proposed staff person: the title; full name (if known at time of application), time commitment to the project as a percentage or full-time equivalent; annual salary and/or annual wage rate; federally funded award salary; non-federal award salary, if applicable; and total salary. No salary rate may exceed the statutory limitation in effect at the time you submit your application (see D.7.2) Funding Restrictions, *Salary Rate Limitation* for details). Do not include the costs of consultants, personnel costs of delegate agencies, or of specific project(s) and/or businesses to be financed by the applicant. **Contractors and consultants should not be placed under this category.**

Position Title and Full Name	Percent Time	Annual Salary	Federally-funded Salary	Non-federal Salary	Total Project Salary
Project Director, John K. Doe	50%	\$100,000	\$50,000	\$0	\$50,000
Data Assistant, Susan R. Smith	10%	\$30,000		\$3,000	\$3,000

c. Fringe Benefits Description

Costs of employee fringe benefits unless treated as part of an approved indirect cost rate.

d. Fringe Benefits Justification

Provide a breakdown of the amounts and percentages that comprise fringe benefit costs such as health insurance, Federal Insurance Contributions Act (FICA) taxes, retirement insurance, and taxes.

e. Travel Description

Costs of travel by staff of the applicant organization only. **Do not** include travel costs for subrecipients or contractors under this object class.

f. Travel Justification

For each trip proposed for applicant organization staff only, show the date of the proposed travel, total number of traveler(s); travel destination; duration of trip; per diem; mileage allowances, if privately owned vehicles will be used; and other transportation costs and subsistence allowances. **Do not** include travel costs for subrecipients or contractors under this object class.

g. Equipment Description

Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000. (Acquisition cost means the cost of the asset including the cost to ready the asset for its intended use.

Acquisition cost for equipment, for example, means the net invoice price of the equipment, including the cost of any modifications, attachments, accessories, or auxiliary apparatus necessary to make it usable for the purpose for which it is acquired. Acquisition costs for software includes those development costs capitalized in accordance with generally accepted accounting principles (GAAP). Ancillary charges, such as taxes, duty, protective in transit insurance, freight, and installation may be included in or excluded from the acquisition cost in accordance with the non-Federal entity's regular accounting practices.) See 45 C.F.R. § 75.2 for additional information.

h. Equipment Justification

For each type of equipment requested you must provide a description of the equipment; the cost per unit; the number of units; the total cost; and a plan for use of the equipment in the project; as well as a plan for the use, and/or disposal of, the equipment after the project ends. An applicant organization that uses its own definition for equipment should provide a copy of its policy, or section of its policy, that includes the equipment definition; include this with your Budget Narrative file. Reference the policy in this justification and include the policy copy in your Budget Narrative file (not your appendices).

i. Supplies Description

Costs of all tangible personal property other than those included under the Equipment category. This includes office and other consumable supplies with a per-unit cost of less than \$5,000.

j. Supplies Justification

Specify general categories of supplies and their costs. Show computations and provide other information that supports the amount requested.

k. Contractual Description

Costs of all contracts or subawards for services and goods except for those that belong under other categories such as equipment, supplies, construction, etc. Include third-party evaluation contracts, if applicable, and contracts or subawards with subrecipient organizations (with budget detail), including delegate agencies and specific project(s) and/or businesses to be financed by the applicant. **This line item is not for individual consultants.**

l. Contractual Justification

Demonstrate that all procurement transactions will be conducted in a manner to provide, to the maximum extent practical, open, and free competition. Recipients and subrecipients are required to use 45 C.F.R. § 75.329 procedures and must justify any anticipated procurement action that is expected to be awarded without competition and exceeds the simplified acquisition threshold fixed by 41 U.S.C. § 134 and currently set at \$250,000. Recipients may be required to make pre-award review and procurement documents, such as requests for proposals or invitations for bids, independent cost estimates, etc., available to HHS/OASH.

Whenever you intend to transfer a substantive part of the project effort to another entity (including non-employee individuals), you must provide a detailed budget and budget narrative for each subrecipient/contractor, by title/name, along with the same supporting information referred to in these instructions. If you plan to select the subrecipients/contractors post-award and a detailed budget is not available at the time of application, you must provide information on the nature of the work to be transferred, the estimated costs, and the process for selecting the subrecipient/contractor.

m. Other Description

Enter the total of all other costs. Such costs, where applicable and appropriate, may include but are not limited to: consultants; insurance; professional services (including audit charges); space and equipment rent; printing and publication; training, such as tuition and stipends; participant support costs including incentives, staff development costs; and any other costs not addressed elsewhere in the budget.

n. Other Justification

Provide computations, a narrative description, and a justification for each cost under this category.

o. Indirect Costs Description

Total amount of indirect costs. This category has one of two methods that you may select. You may only select one and must clearly identify that selection in your submitted budget.

- Your organization currently has an indirect cost rate approved by the Department of Health and Human Services (HHS) or another cognizant federal agency. You should enclose a copy of the current approved rate agreement in your Budget Narrative file. If you request a rate that is less

than allowed, your authorized representative must submit a signed acknowledgement that the organization is accepting a lower rate than allowed.

- Per 45 C.F.R. § 75.414 (f) Indirect (F&A) costs, “any non-Federal entity [i.e., applicant] that has never received a negotiated indirect cost rate, ... may elect to charge a de minimis rate of 10% of modified total direct costs (MTDC) which may be used indefinitely. As described in § 75.403, costs must be consistently charged as either indirect or direct costs, but may not be double charged or inconsistently charged as both. If chosen, this methodology once elected must be used consistently for all Federal awards until such time as a non-Federal entity chooses to negotiate for a rate, which the non-Federal entity may apply to do at any time.”

The de minimis rate method only applies if you have never received an approved negotiated indirect cost rate from HHS or another cognizant federal agency. If you are waiting for approval of an indirect cost rate, you may request the 10% de minimis rate. If you choose this method, costs included in the indirect cost pool must not be charged as direct costs to the award.

Indirect costs on Federal awards for training are limited to a fixed rate of eight percent of MTDC exclusive of tuition and related fees, direct expenditures for equipment, and subawards in excess of \$25,000 (45 C.F.R. § 75.414 (c)(1)(i)).

p. Indirect Costs Justification

Provide the calculation for your indirect costs total, i.e., show each line item included in the base, the total of these lines, and the application of the indirect rate. If you have multiple approved rates, indicate which rate as described in your approved agreement is being applied and why that rate is being used. For example, if you have both on-campus and off-campus rates, identify which is being used and why.

q. Program Income Description

Program income means gross income earned by your organization that is directly generated by this project if funded except as provided in 45 C.F.R. § 75.307(f). Program income includes but is not limited to income from fees for services performed or the use or rental of real or personal property acquired under the award. Interest earned on advances of Federal funds is not program income. Except as otherwise provided in Federal statutes, regulations, or the terms and conditions of the Federal award, program income does not include rebates, credits, discounts, and interest earned on any of them. See also 45 C.F.R. § 75.307 and 35 U.S.C. §§ 200-212 (applies to inventions made under Federal awards).

r. Program Income Justification

Describe and estimate the sources and amounts of program income that this project may generate, if funded. All program income generated as a result of awarded funds must be used within the scope of the approved project-related activities. Any program income earned by the recipient must be used under the addition/additive method unless otherwise specified in Section C.2. These funds should not be added

to your budget, unless you are using the funds as cost sharing or matching, if applicable. This amount should be reflected in box 7 of the SF-424A.

s. Non-Federal Resources Description

Amounts of non-federal resources that will be used to support the project as identified in box 18 of the SF-424. For all federal awards, any shared costs or matching funds and all contributions, including cash and third-party in-kind contributions, must be accepted as part of the recipient's cost sharing or matching when such contributions meet all of the criteria listed in 45 C.F.R. § 75.306.

For awards that require matching by statute, you will be held accountable for projected commitments of non-federal resources in your application budgets and budget justifications by budget period or by period of performance for fully-funded awards, even if the justification by budget period, or by period of performance for fully-funded awards, exceeds the amount required. Your failure to provide the required matching amount may result in the disallowance of federal funds. If you are funded, you will be required to report these funds on your Federal Financial Reports.

For awards that do not require matching or cost sharing by statute or regulation, where "cost sharing" refers to costs of a project in addition to Federal funds requested that you voluntarily propose in your budget, if your application is successful, we will include this non-federal cost sharing in the approved project budget and you will be held accountable for the non-federal cost-sharing funds as shown in the Notice of Award (NOA). Failure to meet a cost sharing or matching obligation that is part of the approved project budget on the NOA may result in the disallowance of federal funds.

If you are funded, you will be required to report cost sharing or matching funds on your quarterly Federal Financial Reports. You will not receive any preference, priority, or special consideration in the funding process for voluntarily including non-Federal cost sharing in your proposed budget.

t. Non-Federal Resources Justification

You must provide detailed budget information for every funding source identified in box 18. "Estimated Funding (\$)" on the SF-424. Provide this documentation as part of your Budget Narrative file, not your Appendices.

You must fully identify and document in your application the specific costs or contributions you propose in order to meet a matching requirement. You must provide documentation in your application on the sources of funding or contribution(s). In-kind contributions must be accompanied by a justification of how the stated valuation was determined. Matching or cost sharing must be documented by budget period (or by period of performance for fully-funded awards).

Unrecovered indirect costs may be included as part of your cost sharing or matching only with prior approval of the grants management officer. Your budget narrative must clearly state that it is your intent to include unrecovered indirect costs as part of your cost sharing or matching. You should include a copy of your negotiated cost rate to support the justification. Unrecovered indirect cost means the difference

between the amount charged to the Federal award and the amount which could have been charged to the Federal award under your approved negotiated indirect cost rate. (See 45 C.F.R. § 75.306(c)).

If your application does not include the required supporting documentation for required or voluntary cost-sharing or matching, it will be disqualified from competitive review (Section C.4(k)).

2. Plan for Recipient Oversight of Federal Award Funds

You must include a plan for oversight of federal award funds which describes:

- how your organization will provide oversight of federal funds and how award activities and partner(s) will adhere to applicable federal award and programmatic regulations. Include identification of risks specific to your project as proposed and how your oversight plan addresses these risks.
- the organizational systems that demonstrate effective control over and accountability for federal funds and program income, compare outlays with budget amounts, and provide accounting records supported by source documentation.
- for any program incentives proposed, the specific internal controls that will be used to ensure only qualified participants will receive them and how they will be tracked.
- organizational controls that will ensure timely and accurate submission of Federal Financial Reports to the OASH Grants and Acquisitions Management Division via the Payment Management System as well as timely and appropriate withdrawal of cash from the Payment Management System.

If your internal controls are available online, it is recommended that you provide the link as part of your plan in the budget narrative. We have also included supplementary information in Section I.1, which contains questions applicants may find useful in considering their Recipient Plans for Oversight of Federal Funds.

c. Appendices

All items described in this section will count toward the total page limit of your application. You must submit them as **a single electronic file** uploaded to the Attachments section of your Grants.gov application.

1. Work Plan

Your work plan should reflect, and be consistent with, the project narrative and budget narrative, and must cover all years of the period of performance. However, each year's activities should be fully attainable in one budget year. You may propose multi-year activities, 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. Your 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, your work plan should identify the time-frames involved (including start- and end-dates), and the lead person responsible for completing the task.

An optional Objective Work Plan (OWP) form is provided under Related Documents for the NOFO on grants.gov (the 3 instruction pages will not count toward your page limit) or you may create your own work plan. Regardless of the option you choose, the work plan you submit must address all the content requested.

2. Logic Model

You should submit with its application a detailed logic model that describes the inputs, objectives, activities, outputs, and short- and long-term outcomes of the intervention being tested through the proposed project. All program objectives, activities, and anticipated outcomes shall be reflected in the logic model and demonstrate that the proposed project reflects a coherent approach.

3. Memoranda of Agreement (MOAs) and/or Letters of Commitment (LOCs)

If available at the time of submission, signed MOAs or signed LOCs should be submitted for each partner (or one signed MOA with all partners).

MOAs should include specific roles, responsibilities, resources, and contributions of partner(s) to the project. Signed LOCs should detail the specific role and resources that will be provided, or activities that will be undertaken, in support of the applicant. The organization's expertise, experience, and access to the targeted population(s) should also be described in the LOC. LOCs should be followed by signed MOAs. Fully-executed MOAs may be required within the first 30 days of the start of any project funded under this NOFO.

MOAs and LOCs are not the same as letters of support. Letters of support are letters that are general in nature that speak to the writer's belief in the capability of an applicant to accomplish a goal/task. Letters of support also may indicate an intent or interest to work together in the future, but they lack specificity. You should NOT provide letters of support, and letters of support will not be considered during the review.

4. Organizational Chart

Include an organizational chart that reflects the management structure for the project and demonstrates where the project resides within the greater organization.

5. Curriculum Vitae/Résumés/Biosketches for Key Project Personnel

Submit with your application curriculum vitae / résumés / biographical sketches of the PD/PI, Evaluator, and all other Key Personnel. Key Personnel includes those individuals who will oversee the technical, professional, managerial, and/or assume responsibility for assuring the validity and quality of your project. Do not include curriculum vitae, résumés, or biosketches for individuals who provide routine administrative support to the project as part of their broader support of the organization. You should use full names (first, middle, last) on these documents to distinguish them for verification in the System for Award Management exclusion records. You should use the formatting common to those documents. (See <https://grants.nih.gov/grants/forms/biosketch.htm> for templates and sample biographical sketches.)

6. References Cited

You should include your references cited in your project narrative. You may use any standard format that you choose as long as it will clearly lead the reader to your source of the information or data.

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

Your organization must register online in the System for Award Management (SAM). Grants.gov will reject submissions from applicants with nonexistent or expired SAM Registrations. You will find instructions on the Grants.Gov web site as part of the organization registration process at <https://www.grants.gov/web/grants/applicants/organization-registration.html>.

To register your organization, you will need a unique entity identifier (UEI). On April 4, 2022, the federal government completed its transition to the twelve-digit UEI(SAM) number as the required UEI for registration in SAM.gov.

You may begin the registration process, including receiving your UEI(SAM) at <https://sam.gov/content/entity-registration>. An Entity Registration Checklist is available at https://www.fsd.gov/gsafsd_sp/sys_attachment.do?sys_id=d6d6b5f31b120dd0cc45ea04bc4bcb81. You may register in SAM as either an entity applying for Federal Assistance Awards Only (e.g., grants and cooperative agreements) or All Awards (including procurement awards).

The Entity Registration Checklist contains a list of representations and certifications that must be certified by the organization as part of the SAM registration process annually. This list is reproduced in Section I.4. In accordance with the federal government's efforts to reduce reporting burden for recipients, we have transitioned to the common certification and representation requirements within SAM and no longer require SF-424B. By submitting your application to this NOFO, your authorized representative also certifies to these representations and certifications by signing Box 21 of SF-424A

Whether you are registering a new entity or renewing your registration, you must submit a notarized letter formally appointing an Entity Administrator to SAM.gov. For detailed

instructions on the content of the letter and process for domestic entities see:

https://www.fsd.gov/gsafsd_sp?id=kb_article_view&sysparm_article=KB0016652&sys_kb_id=f228607a1b2e8d54937fa64ce54bcbdb&spa=1.

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. This timeframe may be longer if SAM flags the information you provide for manual validation. You will receive an email alerting you when your registration is active.

You must renew your SAM registration each year. Organizations registered to apply for Federal awards through <http://www.grants.gov> will need to renew their registration in SAM. If you are successful and receive an 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.

You should make sure your SAM registration information is accurate, especially your organization's legal name and physical address including your ZIP+4. Should you successfully compete and receive an award, your organization's legal name and physical address must be included on a Notice of Award as it appears in SAM registration.

For instructions on updating information in your SAM registration see

https://www.fsd.gov/sys_attachment.do?sys_id=d08b64ab1b4434109ac5ddb6bc4bcbbc.

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 ensure your organization's registration is active in SAM well before the application deadline and will be active through the competitive review period.

HHS/OASH cannot make an award until you have complied with these requirements. In accordance with 2 C.F.R. § 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 UEI number at the time you, the recipient, make a sub-award to them.

5. Submission Dates and Times

You must submit your application for this funding opportunity by **the date and time indicated below**. 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 <https://grants.gov>. Grants.gov can take up to 48 hours to notify you of a successful or rejected submission. You are

better off having a less-than-perfect application successfully submitted and under consideration than no application.

If your submission fails due to a system problem 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**. A “system problem” does not include known issues for which Grants.gov has posted instructions regarding how to successfully submit an application such as compatible Adobe versions or file naming conventions. **As the applicant, it is your responsibility to review all instructions available on Grants.gov regarding successfully submitting an application.**

a. Application Deadline

August 01, 2023

Your application is due by 6:00 PM Eastern Time

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, Grants and Acquisitions Management (GAM) Division, Office of the Assistant Secretary for Health (OASH), Department of Health and Human Services (HHS). To obtain an exemption, you must request one via email from GAM, and provide details as to why you are technologically unable to submit electronically through Grants.gov. 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 UEI number; your organization's name, address and telephone number; the name and telephone number of your Authorizing Official; the Grants.gov Tracking Number (e.g., GRANT####) assigned to your submission; and a copy of the "Rejected with Errors" notification from Grants.gov. Send the request with supporting documentation to OASH_Grants@hhs.gov.

Failure to have an active System for Account Management (SAM) registration prior to the application due date will not be grounds for receiving an exemption to the electronic submission requirement. Failure to follow Grants.gov instructions to ensure software compatibility will not be grounds for receiving an exemption to the electronic submission requirement.

GAM will only accept applications via alternate methods (hardcopy paper via U.S. mail or other provider or PDF via email) from applicants obtaining prior written approval. If you receive an exemption, you must still submit your application by the deadline. Only applications submitted through the Grants.gov portal or alternate format (hardcopy paper via U.S. mail or other service or PDF via email) with an approved written exemption will be accepted. See Section D.8 (“Other Submission Requirements”) for information on application submission mechanisms.

This announcement is subject to Executive Order 12372. 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 F.6 Intergovernmental Review. See Section D.6.

To ensure adequate time to submit your application successfully, OASH recommends that you register as early as possible in Grants.gov because the registration process can take up to one month. You must register an authorizing official for your organization. OASH does not determine your organization's authorizing official; your organization makes that designation. For information on registering for Grants.gov, refer to <https://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.

b. Technical Assistance

We will provide a technical assistance webinar for potential applicants on June 15, 2023, at 4:30 PM Eastern. Login details will be posted at www.minorityhealth.hhs.gov.

We recommend you review the entire announcement promptly so you can have any questions answered well in advance of the application due date. We also recommend you subscribe to this announcement in Grants.gov so you receive any amendments, question and answer documents, or other updates.

6. Intergovernmental Review

Applications under this announcement are subject to the requirements of Executive Order 12372, "Intergovernmental Review of Federal Programs," as implemented by 45 C.F.R. 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 <https://www.whitehouse.gov/wp-content/uploads/2020/04/SPOC-4-13-20.pdf>.

The SPOC should forward any comments to the Department of Health and Human Services 1101 Wootton Parkway, Plaza Level, 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 Grants and Acquisitions Management Division at 240-453-8822.

7. Funding Restrictions

Direct and Indirect Costs proposed and, if successful, charged to the HHS/OASH award must meet the cost requirements of 45 C.F.R. part 75 "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards," Subpart E—Cost Principles. These requirements apply to you, the applicant, and any subrecipients. You should thoroughly review these regulations before developing your proposed budget.

Indirect costs may be included per 45 C.F.R. § 75.414. See Section D.3.b Budget Narrative for more information. 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. CAS regional contact information is available at

<https://rates.psc.gov/fms/dca/map1.html>.

a. Pre-Award Costs

Pre-award costs are NOT allowed.

Pre-award costs (per 45 C.F.R. § 75.458) are those incurred prior to the effective date of the Federal award directly pursuant to the negotiation and in anticipation of the Federal award where such costs are necessary for efficient and timely performance of the scope of work.

b. Salary Rate Limitation

Each year's appropriations act limits the salary rate that we may award and you may charge to HHS/OASH grants and cooperative agreements. You should not budget award funds to pay the salary of an individual at a rate in excess of Federal Executive Pay Scale Executive Level II. As of January 2023, the Executive Level II salary is \$212,100. This amount reflects an individual's base salary exclusive of fringe benefits and any income that an individual working on the award project may be permitted to earn outside of the duties to the applicant organization. This salary rate limitation also applies to subawards/subcontracts under an HHS/OASH award. An example of the application of this limitation for an individual devoting 50% of their time to this award is broken down below:

Individual's <i>actual</i> base full-time salary: \$350,000 50% of time devoted to project, i.e., 0.5 FTE	
Direct salary (\$350,000 x 0.5)	\$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 rate limitation: Individual's base full-time salary <i>adjusted</i> to Executive Level II: \$212,100 with 50% of time devoted to the project	
Direct salary (\$212,100 x 0.5)	\$106,050
Fringe (25% of salary)	\$26,512.50
Total amount allowed	\$132,562.50

Appropriate salary rate limits will apply as required by law.

8. Other Submission Requirements

a. 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 unless you receive an exemption as described in the DATES section of this announcement.

You may access the Grants.gov website portal at <https://grants.gov>.

Applications, excluding required standard forms, must be submitted as three (3) files (see acceptable file types below). One file must contain the entire Project Narrative, another the entire Budget Narrative including supporting documentation described in the Budget Narrative content section; and the third file must contain all documents in the Appendices. Any additional files submitted as part of the Grants.gov application will not be accepted for processing and will be excluded from the application during the review process.

Any files uploaded or attached to the Grants.gov application must be Adobe PDF, Microsoft Word, or image formats (JPG, GIF, TIFF, or BMP only) and must contain a valid file format extension in the filename. **We will not accept Microsoft Excel files.**

In addition, the use of compressed file formats such as ZIP, RAR, or Adobe Portfolio will not be accepted. We will not contact you for resubmission of uncompressed versions of files.

Compressed files in the application will not be forwarded to the independent merit review panel for consideration.

We strongly recommend that electronic applications be uploaded as Adobe PDF. If you convert to PDF prior to submission, you may prevent any unintentional formatting that might occur with submission of an editable document. Although Grants.gov allows you to attach any file format as part of your application, we restrict this practice and only accept the file formats identified above for compatibility with our other systems. Any file submitted as part of the Grants.gov application that is not in a file format listed above will not be accepted for processing and will be excluded from the application during the review process.

Any file submitted as part of the Grants.gov application that contains password protection will not be accepted for processing and will be excluded from the application during the review process. We will not contact you for passwords or resubmission of unprotected files.

Unprotected information in the application will be forwarded for consideration but password protected portions will not. You should avoid submitting personally identifiable information such as personal contact information on résumés.

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 these instructions, we will exclude them from your application during the review process.

b. Important grants.gov Information

You may access the electronic application for this program on <https://grants.gov>. You must search the downloadable application page by the Opportunity Number or Assistance Listing (formerly 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 are responsible for reviewing all Grants.gov submission requirements on the Grants.gov site.**

You should contact Grants.gov with any questions or concerns regarding the electronic application process conducted through Grants.gov. See Section G.3 for contact information.

See Section D.4 for requirements related to UEI numbers and SAM registration.

c. Program-Specific Requirements

There are no program specific requirements.

E. APPLICATION REVIEW INFORMATION

1. Criteria

Federal staff and an independent review panel will assess all eligible applications according to the following criteria. Disqualified applications will not be reviewed against these criteria.

a. Statement of Need (5 points)

The extent to which the application:

- Comprehensively describes the need for the project, including gaps, barriers, or opportunities related to addressing health disparities in the Indigenous population of focus.
- Clearly supports the need using recent and/or disaggregated data of sufficient relevance and validity in terms of race, ethnicity, language, sex, gender identity, sexual orientation, age, socioeconomic status, and other related factors to describe the chronic disease disparities of the population of focus.

b. Goals, Objectives, and Outcomes (5 points)

The application:

- Demonstrates a strong and clear alignment of goals, objectives, and measurable outcomes for the project to address health disparities in the Indigenous population of focus described in the statement of need.
- Describes objectives in specific, measurable, accurate, relevant, and time-bound, inclusive, equitable (SMARTIE) terms, focused on the overall goals of project rather than project activities.
- Proposes objectives that include baseline data and quantifiable time-frames for achievement and clearly identifies culturally relevant chronic disease, organizational, and system outcome measures.

c. Proposed Approach (20 points)

The application:

- Clearly describes how the project will address health disparities among the population of focus within the cultural framework to improve chronic disease outcomes in the focus population.
- Describes a feasible approach, with rationale, for:
- Use of appropriate datasets to provide baseline, disaggregated data for the population(s) of focus and related health disparities.
- Establishing new and strengthening existing partnerships relevant to addressing the need.
- Implementing strategies to address the identified health disparities such as enhancing language access, communication with, and training and technical assistance for the population of focus (i.e. AI/AN or NHPI).
- Integration of the National CLAS Standards in project activities.
- Designing and providing education and training to support community capacity-building.
- Establishing and managing the CIIHE advisory board.
- Identifies anticipated barriers to achieving the overall goals and objectives of the CIIHE and strategies to overcome those barriers.

d. Work Plan (10 points)

The application:

- Includes a work plan rationally linking the project's goals, objectives, and outcomes, with the major tasks, action steps, or products that will address the need described for the focus population. .
- Describes a rationale, feasible approach to monitoring and tracking progress.
- Includes realistic start- and end-dates to meet project goals and objectives.
- Identifies the key personnel and partners responsible for the completion of each task.

e. Organizational Capability and Capacity (35 points)

The application:

- Demonstrates the organization's capability to successfully implement the proposed project, including implementation readiness and ability to demonstrate impact over the course of the project.
- Demonstrates the organization's knowledge, skills, experience, capability, and capacity to work with Indigenous communities successfully, and to implement the proposed project effectively within the period of performance.
- Demonstrates capacity and capability in providing education and training to support community capacity building in research, service, education, and policy development in order to prevent or improve health disparities.
- Demonstrates the capability to form strong working relationships with Indigenous leaders and communities, access to Indigenous networks, and connection to the Indigenous communities.
- Describes areas of expertise for key personnel, including the Project Director/Principal Investigator and Evaluator, including identification of the individual/organization responsible for evaluation activities with a description of that individual/organization's qualifications.

f. Evaluation & Performance Management (20 points)

The application:

- Demonstrates culturally appropriate sensitivity and competence necessary to effectively monitor project performance and evaluate project outcomes.
- Describes a feasible and rigorous evaluation approach for effectively demonstrating any impact of the project on the Indigenous population of focus, health disparities, and any other intended outcome proposed.
- Describes a feasible and adequate approach for overcoming any potential obstacles to baseline and ongoing data collection.
- Clearly describes how evaluation and performance measurement will contribute to the development of an evidence base for addressing the limited availability of culturally appropriate data on AI/AN or NHPI health disparities.

g. Dissemination Plan (5 points)

The extent to which the applicant:

- Described achievable methods for documenting and disseminating the project's results and findings in a timely manner to others who might be interested in using the results of the project to inform practice, service delivery, program development, and/or policymaking including the communities served by the award.
- Developing and implementing an interactive website for community engagement and information dissemination.

- Specifically identified other, innovative approaches for informing parties potentially interested in using the results of the project to inform development of similar projects or replication locally and nationally.

2. Review and Selection Process

An independent review panel will evaluate applications that are not disqualified and meet the responsiveness criteria (Section C.3). These 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 rate the applications, focusing their comments and ratings on the identified criteria. In addition to the independent review panel, Federal staff will review each application for programmatic, budgetary, and grants management compliance.

The Deputy Assistant Secretary for Minority Health will provide recommendations for funding to the Grants Management Officer to conduct risk analysis. No award decision is final until a Notice of Award is issued by the Grants Management Officer.

3. Review of Risk Posed by Applicant

GAM will evaluate, in accordance with 45 C.F.R. § 75.205, each application recommended for funding by the program official indicated in Review and Selection Process for risks before issuing an award. This evaluation may incorporate results of the evaluation of eligibility or the quality of an application. If we determine that a Federal award will be made, special conditions that correspond to the degree of risk assessed will be applied to the Federal award. Such conditions may include additional programmatic or financial reporting or releasing funds on a reimbursable rather than cash advance basis. We will use a risk-based approach and may consider any items such as the following:

- Your financial stability;
- Quality of management systems and ability to meet the management standards prescribed in 45 C.F.R. part 75;
- History of performance. Your record in managing Federal awards, if you are 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;
- Reports and findings from audits performed; and
- Your 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 \$250,000), 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.

If we do not make an award to you because we determine your organization does not meet either or both of the minimum qualification standards as described in 45 C.F.R. § 75.205(a)(2), we must report that determination to FAPIIS, if certain conditions apply. At a minimum, the information in the system if you are a prior Federal award recipient must “demonstrate a satisfactory record of executing programs or activities under Federal grants, cooperative agreements, or procurement awards; and integrity and business ethics.” 45 C.F.R. § 75.205(a)(2); see also 45 C.F.R. §75.212 for additional information.

4. Final Award Decisions, Anticipated Announcement, and Federal Award Dates

Upon completion of risk analysis and concurrence of the Grants Management Officer, OASH will issue Notices of Award. No award decision is final until a Notice of Award is issued. All award decisions, including the level of funding if an award is made, are final and you may not appeal.

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. Note this is an estimated start date and award announcements may be made at a later date and with a later period of performance start date.

F. FEDERAL AWARD ADMINISTRATION INFORMATION

1. Federal Award Notices

We do not release information about individual applications during the review process. If you would like to track your application, please see instructions at <https://www.grants.gov/web/grants/applicants/track-my-application.html>.

The official document notifying you that an application has been approved for funding is the Notice of Award (NOA), approved by a Grants Management Officer within GAM. If you are successful, you will receive this document via a system notification from our grants management system (Grant Solutions) and/or via e-mail. This document notifies the successful recipient of the amount awarded, the purposes of the award, the anticipated length of the period of performance, terms and conditions of the award, and the amount of funding to be contributed by the recipient to project costs, if applicable.

If you receive an NOA, we strongly encourage you to read the entire document to ensure your organization's information is correct and that you understand all terms and conditions. You should pay specific attention to the terms and conditions, as some may require a time-limited response. The NOA will also identify the Grants Management Specialist and Program Project Officer assigned to the award for assistance and monitoring.

If you are unsuccessful or deemed ineligible according to the disqualification criteria, you will be notified by OASH by email and/or letter. If your application was reviewed by the independent review panel, you may receive summary comments pertaining to the application resulting from the review process. We do not customarily release application scores.

You may receive a letter indicating that your application was "approved but unfunded." This does not mean you will receive an award or funding. Applications designated "approved but unfunded" are typically kept active for up to one year. During that time, the program office may consider an application with this status for award under this NOFO should funds become available. The status "approved but unfunded" does not guarantee that we will fund your project. We will not transfer an "approved but unfunded" application for consideration under a new NOFO. You would need to resubmit your application, with any updated material, for consideration under that new NOFO.

2. Administrative and National Policy Requirements

If you are successful and receive a Notice of Award, in accepting the award, you agree that the award and any activities thereunder are subject to all provisions of 45 C.F.R. part 75, currently in effect or implemented during the period of the award, other Department regulations and policies in effect at the time of the award, and applicable statutory provisions.

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 <https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>. Please note HHS plans to revise the HHS GPS to reflect changes to the regulations; 45 C.F.R. parts 74 and 92 which have been superseded by 45 C.F.R. part 75.

You may only use award funds to support activities outlined in the approved project plan. If your application is funded, your organization 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 C.F.R. § 75.308 for aspects of your funded project that will require prior approval from the Grants Management Officer for any changes. Modifications to your approved project that will require prior approval include, but are not limited to: a change in the scope or the objective(s) of the project or program (even if there is no associated budget revision, such as reduction in services, closing of service or program site(s)); significant 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.

The termination provisions in 2 CFR §§ 200.340(a)(1)-(4) are the termination provisions that are applicable to awards issued under this NOFO. No additional termination provisions apply unless otherwise noted under Section F.3 Program Specific Terms and Conditions.

3. Program Specific Terms and Conditions

a. Paperwork Reduction Act Clearance Packages

Any collection of information you conduct as defined in 5 C.F.R. § 1320.3(c) may require OMB clearance under the Paperwork Reduction Act if it is a requirement of your an award to collect that information. You will would be responsible for preparing the clearance package necessary to obtain Paperwork Reduction Act clearance and submitting it to the project officer. The project officer will assist in the submission of the package to OMB and notify you when the approval has been received or request additional information.

b. Disparity Impact Statement (DIS)

Successful recipients are required to develop a disparity impact statement (DIS) using local data and input to identify populations at highest risk for health, social, economic, or other disparities such as low health literacy. Recipients may choose to use the Centers for Disease Control (CDC)/Agency for Toxic Substances and Disease Registry (ATSDR) Social Vulnerability Index (SVI) (<https://www.atsdr.cdc.gov/placeandhealth/svi/index.html>), or other local data tools, in developing disparity impact statements.

The DIS will identify social, policy, historical, and other context associated with root causes and drivers of disparities. It will also provide the framework and plan for ongoing action and accountability, such as program improvement, incorporation of the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care, monitoring and assessment of the impact of the project on the program's equity goals.

Project activities must comply with the non-discrimination requirements described in Section F.6.

Below are available HHS resources:

- OMH Disparity Impact Strategy (<https://www.minorityhealth.hhs.gov/omh/content.aspx?ID=22540>)
- CMS.gov: Quality Improvement & Interventions: Disparity Impact Statement (<https://www.cms.gov/About-CMS/Agency-Information/OMH/resource-center/hcps-and-researchers/quality-improvements-and-interventions>)
- SAMHSA.gov: Disparity Impact Statement (<https://www.samhsa.gov/grants/grants-management/disparity-impact-statement>)

Additional information and links to resources are available in Section I.

4. Closeout of Award

Upon expiration of your period of performance, you must submit within 120 days all necessary documentation to closeout your award. If we do not receive acceptable final performance, financial, and/or property reports in a timely fashion within the closeout period, and we determine that closeout cannot be completed with your cooperation or that of the PD/PI, we must complete a unilateral closeout with the information available to us. (See F.16 Reporting below for closeout reporting requirements.)

If you do not submit all reports within one year of the period of performance end date, we must report your material failure to comply with the terms and conditions of the award with the OMB-designated integrity and performance system (currently FAPIIS). As a result, we may also determine that enforcement actions are necessary, including on another existing or future award, such as withholding support or a high-risk designation.

5. Lobbying Prohibitions

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.

6. Non-Discrimination Requirements

Should you successfully compete for an award, as a recipient of federal financial assistance (FFA) from HHS you will be required to complete an HHS Assurance of Compliance form (HHS 690) in which you agree, as a condition of receiving the grant, to administer your programs in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, age, sex and disability, and agreeing to comply with federal conscience laws, where applicable. This includes ensuring that entities take meaningful steps to provide meaningful access to persons with limited English proficiency; and ensuring effective communication with persons with disabilities. Where applicable, Title XI and Section 1557 prohibit discrimination on the basis of sexual orientation, and gender identity. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See <https://www.hhs.gov/civil-rights/forproviders/provider-obligations/index.html> and <https://www.hhs.gov/civil-rights/forindividuals/nondiscrimination/index.html>.

- For guidance on meeting the legal obligation to take reasonable steps to ensure meaningful access to your programs or activities by limited English proficient individuals. See <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> and <https://www.lep.gov>.
- For information on the specific legal obligations for serving qualified individuals with disabilities, including reasonable modifications and making services accessible to them, see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>.
- HHS-funded health and education programs must be administered in an environment free of sexual harassment, see <https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html>.
- For guidance on administering your program in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see <https://www.hhs.gov/conscience/conscience-protections/index.html> and <https://www.hhs.gov/conscience/religious-freedom/index.html>.

Contact the HHS Office for Civil Rights for more information about obligations and prohibitions under federal civil rights laws at <https://www.hhs.gov/ocr/about-us/contact-us/index.html> or call 1-800-368-1019 or TDD 1-800-537-7697.

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), <https://www.gpo.gov/fdsys/pkg/FR-2013-09-24/pdf/2013-23164.pdf>, provides a practical framework for applicants to provide quality health care and services to culturally and linguistically diverse communities, including persons with limited English proficiency. For further guidance on providing culturally and linguistically appropriate services, you should review the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care at <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>.

7. Smoke- and Tobacco-free Workplace

The HHS/OASH strongly encourages all award 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.

8. Acknowledgement of Funding

Each year's annual appropriation requires that when issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all organizations receiving Federal funds, including but not limited to State and local governments and recipients of Federal research grants, shall clearly state— (1) the percentage of the total costs of the program or project which will be financed with Federal money; (2) the dollar amount of Federal funds for the project or program; and (3) percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.

You must also acknowledge Federal support in any publication you develop using funds awarded under this program, with language such as:

This [project/publication/program/website, etc.] was supported by [Award Number] issued by the Office of the Assistant Secretary for Health of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$XX with 100 percent funded by [PROGRAM OFFICE].

Recipients must also include a disclaimer stating the following

The contents are solely the responsibility of the author(s) and do not necessarily represent the official views of, nor an endorsement by, [PROGRAM OFFICE], OASH, HHS, or the U.S. Government. For more information, please visit [PROGRAM OFFICE website, if available].

9. HHS Rights to Materials and Data

All publications you develop or purchase with funds awarded under this announcement must be consistent with the requirements of the program. You own the copyright for materials that you develop under this award, and pursuant to 45 C.F.R. § 75.322(b), 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 C.F.R. § 75.322(d), the Federal government has the right to obtain, reproduce, publish, or otherwise use data produced under this award and has the right to authorize others to receive, reproduce, publish, or otherwise use such data for Federal purposes.

10. Trafficking in Persons

Awards issued under this NOFO are subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. § 7104) (See

<https://www.govinfo.gov/content/pkg/USCODE-2010-title22/html/USCODE-2010-title22-chap78-sec7104.htm>).

11. 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 <https://www.hhs.gov/grants/contracts/contract-policies-regulations/efficient-spending/>.

12. Whistleblower Protection

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

13. Health Information Technology (IT) Interoperability

Health information technology is defined in Section 3000 of the Public Health Service Act (42 U.S.C. § 300jj). HHS has substantially adopted and codified that definition at 45 C.F.R. § 170.102. The regulation defines health information technology as hardware, software, integrated technologies or related licenses, IP, upgrades, or packaged solutions sold as services that are designed for or support the use by health care entities or patients for the electronic creation, maintenance, access, or exchange of health information.

If you receive an award under this NOFO that involves:

- a. implementing, acquiring, or upgrading health IT for activities, you are required to utilize health IT that meets standards and implementation specifications adopted in 45 CFR Part 170, Subpart B, if such standards and implementation specifications can support the activity.
- b. implementing, acquiring, or upgrading health IT for activities by eligible clinicians in ambulatory settings, or hospitals, eligible under Section 4101, 4102, and 4201 of the [HITECH Act](#) , you are required to utilize health IT certified under the Office of the HHS Office of the National Coordinator for Health Information technology (ONC) Health IT Certification Program, if certified technology can support the activity. See <https://www.healthit.gov/topic/certification-ehrs/certification-health-it>.

If standards and implementation specifications adopted in 45 CFR Part 170, Subpart B cannot support the activity, recipients and subrecipients are encouraged to utilize health IT that meets non-proprietary standards and implementation specifications developed by consensus-based standards development organizations. This may include standards identified in the ONC Interoperability Standards Advisory, available at <https://www.healthit.gov/isa/>.

14. Prohibition on certain telecommunications and video surveillance services or equipment.

As described in 2 C.F.R. 200.216, recipients and subrecipients are prohibited from obligating or spending grant funds (to include direct and indirect expenditures as well as cost share and program) to:

- a. Procure or obtain;
- b. Extend or renew a contract to procure or obtain; or
- c. Enter into a contract (or extend or renew a contract) to procure or obtain equipment, services, or systems that use covered telecommunications equipment or services as a substantial or essential component of any system, or as critical technology as part of any system. As described in Pub. L. 115-232, section 889, covered telecommunications equipment is telecommunications equipment produced by Huawei Technologies Company or ZTE Corporation (or any subsidiary or affiliate of such entities).
 - i. For the purpose of public safety, security of government facilities, physical security surveillance of critical infrastructure, and other national security purposes, video surveillance and telecommunications equipment produced by Hytera Communications Corporation, Hangzhou Hikvision Digital Technology Company, or Dahua Technology Company (or any subsidiary or affiliate of such entities).
 - ii. Telecommunications or video surveillance services provided by such entities or using such equipment.
 - iii. Telecommunications or video surveillance equipment or services produced or provided by an entity that the Secretary of Defense, in consultation with the Director of the National Intelligence or the Director of the Federal Bureau of Investigation, reasonably believes to be an entity owned or controlled by, or otherwise, connected to the government of a covered foreign country.

15. Human Subjects Protection

Federal regulations (45 C.F.R 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 C.F.R. part 46. Additional information is available at <https://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html>.

Recipients that plan to engage in research involving human subjects are encouraged to provide information regarding participation in research in their recruitment efforts and provide a link to <https://www.hhs.gov/about-research-participation>.

OASH may require, as part of any award, the submission of all IRB approvals within 5 days of

the IRB granting the approval and before any work requiring IRB approval begins.

16. Research Integrity

An applicant for or recipient of PHS support for biomedical or behavioral research, research training or activities related to that research or research training must comply with 42 C.F.R. part 93, including have written policies and procedures for addressing allegations of research misconduct that meet the requirements of part 93, file an Assurance of Compliance with the Office of Research Integrity (ORI), and take all reasonable and practical steps to foster research integrity consistent with 42 C.F.R. § 93.300. The assurance must state that the recipient (1) has written policies and procedures in compliance with this part for inquiring into and investigating allegations of research misconduct; and (2) complies with its own policies and procedures and the requirements of part 93. More information is available at <https://ori.hhs.gov/assurance-program>.

17. Reporting

a. Performance Project Reports (PPR)

You must submit periodic performance project reports on a quarterly basis. Your performance reports must address content required by 45 C.F.R. § 75.342(b)(2). The awarding program office may provide additional guidance on the content of the progress report. You must submit your performance reports by the due date indicated in the terms and conditions of your award via upload to our grants management system (GrantSolutions.gov).

You will also be required to submit a final performance report covering the entire period of performance 120 after the end of the period of performance. The awarding program office may provide additional guidance on the content of the progress report. You must submit the final report by upload to our grants management system (GrantSolutions.gov).

b. Performance Measures

Performance is assessed relative to meeting the goals, objectives, and outcomes in the approved, funded project as described in the approved work plan and other supporting documents.

At the end of each reporting period, you should be able to describe the performance in terms of:

- Accomplishments and progress toward program purpose/strategies/interventions and disparity impact statement implementation.
- The status of the project's staffing situation.
- The role and activities of each partnering organization.
- Accomplishments, current or anticipated problems, changes and progress on the evaluation plan.

c. Financial Reports

You will be required to submit quarterly Federal Financial Reports (FFR) (SF-425). Your specific reporting schedule will be issued as a condition of award. You will also be required to submit a final FFR covering the entire period of performance 120 days after the end of the period of performance. You must submit FFRs via HHS Payment Management System (PMS) (<https://pms.psc.gov>).

Once submitted and accepted, your financial reports will be available in GrantSolutions, which is our grant management system.

d. Audits

If your organization expends \$750,000 or greater in federal funds, it must undergo an independent audit in accordance with 45 C.F.R. 75, subpart F.

e. Non-competing Continuation Applications and Awards

Each year of the approved period of performance, 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. OASH will award continuation funding based on availability of funds, satisfactory progress of the project, grants management compliance, including timely reporting, and continued best interests of the government. Progress is assessed relative to meeting the goals, objectives, and outcomes in the approved, funded project as described in the approved work plan and other supporting documents.

For the optional competitive additional year of funding for transition to sustainability, application guidance and review criteria will be provided during the third year of the project.

Failure to provide final progress or financial reports on other awards from HHS may affect continuation funding.

f. FFATA and FSRs Reporting

The Federal Financial Accountability and Transparency Act (FFATA) requires data entry at the FFATA Subaward Reporting System (<https://www.FSRs.gov>) for all sub-awards and sub-contracts issued for \$30,000 or more as well as addressing executive compensation for both recipient and sub-award organizations.

g. 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 A.2 of Appendix XII to 45 C.F.R. part 75—Award Term and Condition for Recipient Integrity and Performance Matters. This is a statutory requirement (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 45 C.F.R. part 75.

h. Other Required Notifications

Before you enter into a covered transaction at the primary tier, in accordance with 2 C.F.R. § 180.335, you as the [participant](#) must notify OASH, if you know that you or any of the principals for that covered transaction:

- Are presently excluded or disqualified;
- Have been convicted within the preceding three years of any of the offenses listed in 2 C.F.R. § [180.800\(a\)](#) or had a [civil judgment](#) rendered against you for one of those offenses within that time period;
- 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 C.F.R. § [180.800\(a\)](#); or
- 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 C.F.R. § 180.350, you must give immediate written [notice](#) to OASH if you learn either that—

- You failed to disclose information earlier, as required by 2 C.F.R. § [180.335](#); or
- Due to changed circumstances, you or any of the principals for the transaction now meet any of the criteria in 2 C.F.R. § [180.335](#).

G. CONTACTS

1. Administrative and Budgetary Requirements

For information related to administrative and budgetary requirements, contact the HHS/OASH grants management specialist listed below.

Duane Barlow
OASH Grants and Acquisitions Management
1101 Wootton Parkway, Plaza Level
Rockville, MD 20852
Phone: 240-453-8822
Email: duane.barlow@hhs.gov

2. Program Requirements

For information on program requirements, please contact the program office representative listed below.

Paul Rodriguez
1101 Wootton Parkway, Plaza Level
Rockville, MD 20852
Phone: 240-453-2882
Email: paul.rodriguez@hhs.gov

3. Electronic Submission Requirements

For information or assistance on submitting your application electronically via Grants.gov, please contact Grants.gov directly. Assistance is available 24 hours a day, 7 days per week.

GRANTS.GOV Applicant Support

Website: <https://www.grants.gov>

Phone: 1-800-518-4726

Email: support@grants.gov

H. OTHER INFORMATION

1. Awards under this Announcement

We are not obligated to make any Federal award as a result of this announcement. If awards are made, they may be issued for periods shorter than indicated. 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.

2. 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)
Disclosure of Lobbying Activities (SF-LLL)
Project Abstract Summary

Project Narrative – Submit all Project Narrative content as a single acceptable file, specified above.

Budget Narrative – Submit all Budget Narrative content as a single acceptable file, specified above.

Appendices – Submit all appendix content as a single acceptable file, specified above **in the Attachments section of your Grants.gov application.**

- Work Plan
- Logic Model
- Memoranda of Agreement (MOAs) and/or Letters of Commitment (LOCs)
- Organizational Chart
- Curriculum Vitae/Résumés/Biosketches for Key Project Personnel
- References Cited

I. SUPPLEMENTARY MATERIALS

1. Acronyms

CIIHE	Center for Indigenous Innovation and Health Equity
DIS	Disparity Impact Statement
FAPIS	Federal Awardee Performance and Integrity Information System
FFATA	Federal Financial Accountability and Transparency Act
FFR	Federal Financial Report (SF-425)
FSRS	FFATA Subaward Reporting System
GAM	Grants and Acquisitions Management Division
GMO	Grants Management Officer
GMS	Grants Management Specialist
GPS	Grants Policy Statement
HHS	Department of Health and Human Services
NOA	Notice of Award
NOFO	Notice of Funding Opportunity
OASH	Office of the Assistant Secretary for Health
OMB	Office of Management and Budget
OMH	Office of Minority Health
PD/PI	Project Director/Principal Investigator
PHS	Public Health Service
PPR	Performance Project Report
SPOC	State Single Point of Contact

2. Considerations in Recipient Plans for Oversight of Federal Funds

(See also Section D.3.b.2)

To the maximum extent possible, a recipient organization should segregate responsibilities for receipt and custody of cash and other assets; maintaining accounting records on the assets; and authorizing transactions. In the case of payroll activities, the organization, where possible, should segregate the timekeeping, payroll preparation, payroll approval, and payment functions.

Questions for consideration in developing your plan may include:

- Do the written internal controls provide for the segregation of responsibilities to provide an adequate system of checks and balances?
- Are specific officials designated to approve payrolls and other major transactions?
- Does the time and accounting system track effort by cost objective?
- Are time distribution records maintained for all employees when his/her effort cannot be specifically identified to a particular program cost objective?
- Do the procedures for cash receipts and disbursements include:
 - Receipts are promptly logged in, restrictively endorsed, and deposited in an insured bank account?
 - Bank statements are promptly reconciled to the accounting records, and are reconciled by someone other than the individuals handling cash, disbursements and maintaining accounting records?
 - All disbursements (except petty cash or EFT disbursements) are made by pre-numbered checks?
 - Supporting documents (e.g., purchase orders, Invoices, etc.) accompany checks submitted for signature and are marked "paid" or otherwise prominently noted after payments are made?

3. Financial Assistance General Certifications and Representations

When your organization completes its registration (new or renewal) in SAM.gov, your organization has attested to the accuracy of the below. Note that HHS awards are currently subject to 45 C.F.R. part 75. Where applicable the parallel citation to 45 C.F.R. part 75 is supplied in brackets following the 2 C.F.R. part 200 citation.

- a. Has the legal authority to apply for federal assistance and the institutional, managerial and financial capability to ensure proper planning, management, and completion of any financial assistance project covered by this Certifications and Representations document (See 2 C.F.R. § 200.113 Mandatory disclosures [45 C.F.R. § 75.113], 2 C.F.R. § 200.214 Suspension and debarment [45 C.F.R. § 75.213], OMB Guidance A- 129, "Policies for Federal Credit Programs and Non-Tax Receivables");
- b. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives (See 2 C.F.R. § 200.302 Financial Management [45 C.F.R. § 75.302] and 2 C.F.R. § 200.303 Internal controls [45 C.F.R. § 75.303]);
- c. Will disclose in writing any potential conflict of interest to the federal awarding agency or pass through entity in accordance with applicable federal awarding agency policy (See 2 C.F.R. § 200.112 Conflict of interest [45 C.F.R. § 75.112]);
- d. Will comply with all limitations imposed by annual appropriation acts;
- e. Will comply with the U.S. Constitution, all federal laws, and relevant Executive guidance in promoting the freedom of speech and religious liberty in the administration of federally-funded programs (See 2 C.F.R. § 200.300 Statutory and national policy requirements [45 C.F.R. § 75.300] and 2 C.F.R. § 200.303 Internal controls [45 C.F.R. § 75.303]);
- f. Will comply with all applicable requirements of all other federal laws, executive orders, regulations, and public policies governing financial assistance awards and any federal financial assistance project covered by this certification document, including but not limited to:
 1. Trafficking Victims Protection Act (TVPA) of 2000, as amended, 22 U.S.C. § 7104(g);
 2. Drug Free Workplace, 41 U.S.C. § 8103;
 3. Protection from Reprisal of Disclosure of Certain Information, 41 U.S.C. § 4712;

4. National Environmental Policy Act of 1969, as amended, 42 U.S.C. § 4321 et seq;
5. Universal Identifier and System for Award Management, 2 C.F.R. part 2;
6. Reporting Subaward and Executive Compensation Information, 2 C.F.R. part 170;
7. OMB Guidelines to Agencies on Governmentwide Debarment and Suspension
(Non-procurement), 2 C.F.R. part 180;
8. Civil Actions for False Claims Act, 31 U.S.C. § 3730;
9. False Claims Act, 31 U.S.C. §3729, 18 U.S.C. §§ 287 and 1001;
10. Program Fraud and Civil Remedies Act, 31 U.S.C. § 3801 et seq;
11. Lobbying Disclosure Act of 1995, 2 U.S.C. § 1601 et seq;
12. Title VI of the Civil Rights Act of 1964, 42 U.S.C. § 2000d et seq;
13. Title VIII of the Civil Rights Act of 1968, 42 U.S.C. § 3601 et seq;
14. Title IX of the Education Amendments of 1972, as amended; 20 U.S.C. § 1681 et seq
15. Section 504 of the Rehabilitation Act of 1973, as amended; 29 U.S.C. § 794; and
16. Age Discrimination Act of 1975, as amended, 42 U. S.C. § 6101 et seq.

4. Disparity Impact Statements

Disparity impact statements are a part of a comprehensive data-driven approach for identifying and addressing health disparities to promote health equity for racial and ethnic minority populations. A DIS refers to the demographic, cultural, and linguistic data that identify the population(s) in which health disparities exist and the quality improvement plan designed to address the noted disparities.

The DIS will provide the measurement framework for ongoing monitoring and determining the impact of the project activities on outcomes and overarching goal of advancing health equity.

Agencies within the U.S. Department of Health and Human Services offer resources to support developing a Disparity Impact Statement, including the following:

- Building an Organizational Response to Health Disparities: Disparities Impact Statement (<https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/Disparities-Impact-Statement-508-rev102018.pdf>)
- HDPulse — An Ecosystem of Minority Health and Health Disparities Resources (<https://www.nimhd.nih.gov/resources/hd-pulse.html>)

5. References

Barnabe, C. (2021). Towards attainment of Indigenous health through empowerment: resetting health systems, services and provider approaches. *BMJ Global Health*, 1-5.

Centers for Disease Control and Prevention. (2013, November 26). Retrieved from CDC Health Disparities & Inequalities Report (CHDIR):
<https://www.cdc.gov/minorityhealth/CHDIRReport.html>

Centers for Disease Control and Prevention. (2020). National Statistics Report. Hyattsville, MD.

Centers for Disease Control and Prevention, N. C. (2020). Underlying Causes of Death 1999 - 2019. Hyattsville, MD.

Chino, M. A. (2006, Aril). Building True Capacity: Indigenous Models for Indigenous Communities. *American Journal of Public Health*, pp. 596 - 599.

Cook W.K., C. C. (2010). Native Hawaiian and Pacific Islander Health Disparities: The Asian & Pacific Islander American Health Forum. Retrieved from https://www.apiahf.org/wp-content/uploads/2011/02/NHPI_Report08a_2010-1.pdf

Indian Health Service. (2019, October). Retrieved from Disparities Fact Sheet:
<https://www.ihs.gov/newsrooms/factsheets/disparities/>

Kaholokula, J. C. (2018). Culturally responsive approaches to health promotion for Native Hawaiians and Pacific Islanders. *Annals of human biology*, 249-263.

National Academies of Sciences, E. a. (2017). *Communities in Action: Pathways to Health Equity*. Washington, DC: National Academies of Sciences, Engineering, and Medicine.

Stephen Harfield, C. D. (2015). Characteristics of Indigenous primary health care models of service delivery: a scoping review protocol. *JB I Database of Systematic Reviews & Implementation Reports*, 43-51.

Substance Abuse and Mental Health, S. A. (2008). Native American Center for Excellence: Environmental Scan Summary Report. Retrieved from Substance Abuse and Mental Health Services Administration. Native American Center for Excellence: Environmental Scan Summary Report.:
<https://web.archive.org/web/20170210152200/https://www.samhsa.gov/sites/default/files/progra>

[ms_campaigns/tribal_training/nace-environmental-scan-summary.pdf](#)

Substance Abuse and Mental Health, S. A. (2021, May 25). AANHPIs lowest level of treatment for mental health and Asians PIs with suicide was leading cause of death:. Retrieved from <https://www.samhsa.gov/blog/one-size-does-not-fit-all-appreciating-diversity-asian-americans-native-hawaiians-pacific>

The White House Briefing Room. (2022, January 20). Retrieved from Fact Sheet: Biden-Harris Administration Advances Equity and Opportunity for Asian American, Native Hawaiian, and Pacific Islander Communities Across the Country.: <https://www.whitehouse.gov/briefing-room/statements-releases/2022/01/20/fact-sheet-biden-harris-administration-advances-equity-and-opportunity-for-asian-american-native-hawaiian-and-pacific-islander-communities-across-the-country/>

U.S. Department of Agriculture. (2022, September 7). Retrieved from Food Security Status of U.S. Households in 2021.: [https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/key-statistics-graphics#:~:text=10.5%20percent%20\(13.8%20million\)%20of,from%2010.5%20percent%20in%202019](https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/key-statistics-graphics#:~:text=10.5%20percent%20(13.8%20million)%20of,from%2010.5%20percent%20in%202019)

U.S. Department of Health and Human Services. (2022, March 28). Retrieved from Strategic Plan FY 2022 - 2026: <https://www.hhs.gov/about/strategic-plan/2022-2026/index.html>