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

Federal Office of Rural Health Policy Office for the Advancement of Telehealth

#### Licensure Portability Grant Program

Announcement Type: Initial: New, Competing Continuation Funding Opportunity Number: HRSA-16-014

Catalog of Federal Domestic Assistance (CFDA) No. 93.211

#### FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2016

## **Application Due Date: January 19, 2016**

Ensure SAM.gov and Grants.gov registrations and passwords are current immediately! Deadline extensions are not granted for lack of registration. Registration in all systems, including SAM.gov and Grants.gov, may take up to one month to complete.

#### Release Date: November 17, 2015

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Authority: Section 330L of Public Health Service Act as amended, (42 U.S.C. 254c-18); Consolidated and Further Continuing Appropriations Act, 2015 Division G, § 203, (P.L. 113-235).

## **EXECUTIVE SUMMARY**

The Health Resources and Services Administration (HRSA), Federal Office of Rural Health Policy (FORHP) is accepting applications for fiscal year (FY) 2016 Licensure Portability Grant Program (LPGP). The purpose of this program is to provide support for State professional licensing boards to carry out programs under which licensing boards of various States cooperate to develop and implement State policies that will reduce statutory and regulatory barriers to the provision of health care services through telemedicine technology. The program is designed to leverage the experience of State licensing boards that have a strong record in implementing cross-border activities to overcome licensure barriers to the provision of telemedicine/telehealth services across many States and to share that information broadly. Licensing boards for clinical, non-clinical, and counseling services are eligible for funding under this announcement.

Funding Opportunity Title:	Licensure Portability Grant Program
Funding Opportunity Number:	HRSA-16-014
Due Date for Applications:	January 19, 2016
Anticipated Total Annual Available Funding:	\$500,000
Estimated Number and Type of Award(s):	Up to 2 grants
Estimated Award Amount:	Up to \$250,000 per year
Cost Sharing/Match Required:	No
Project Period:	July 1, 2016 through June 30, 2019
	(three (3) years)
Eligible Applicants:	Eligible applicants are limited by statute to
	State professional licensing boards.
	[See <u>Section III-1</u> of this funding opportunity
	announcement (FOA) for complete eligibility
	information.]

### **Application Guide**

All applicants are responsible for reading and complying with the instructions included in HRSA's *SF-424 Application Guide*, available online at

<u>http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf</u>, except where instructed in this FOA to do otherwise. A short video for applicants explaining the *Application Guide* is available at <u>http://www.hrsa.gov/grants/apply/applicationguide/</u>.

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## I. Program Funding Opportunity Description

#### 1. Purpose

This announcement solicits applications for the Licensure Portability Grant Program (LPGP). The primary purpose of the LPGP is to provide support for State professional licensing boards to carry out programs under which licensing boards of various States cooperate to develop and implement State laws and related policies that will reduce statutory and regulatory barriers to telemedicine. The program is designed to leverage the experience of State licensing boards that have a strong record of implementing cross-border activities to overcome licensure barriers to the provision of telemedicine services across many States. The program is designed to encourage recipients to gather information on best practices and identify and carry out strategies for sharing information on successful approaches on cross-State licensures related to telemedicine with other States, stakeholders, and the public. It is anticipated that recipients under this program will provide information on emerging policy changes by licensure bodies that have relevance to telehealth. As well, recipients will be expected to develop multi-State efforts along a continuum of activities from uniform applications to multi-Sate licensure compacts which have shown to be effective from past efforts under this program authority. While this program's statute refers to telemedicine, for the purposes of this announcement, the terms telemedicine and telehealth are used interchangeably.

Health care delivery patterns do not always conform uniformly with State boundaries, particularly in the delivery of telemedicine services (where care may be provided at a distance from the patient). Accordingly, there are often situations in which a provider in one State is delivering services to a patient in another State. Clinical practice is regulated through State licensure bodies and providers are required to be licensed in the State in which the patient is located. The challenge for stakeholders is how to balance ensuring the safety of patients within the existing licensure system in a manner that also takes into account the growing use of telehealth technology to improve access to care for needed services in an efficient manner. Licensure portability is seen as one of the key elements among the wide range of strategies needed to improve access to quality health care services through the deployment of telehealth and other electronic practice services (e-care or e-health services) in this country.

Licensure portability goes beyond improving the efficiency and effectiveness of electronic practice services. Overcoming unnecessary licensure barriers to cross-State practice is seen as part of a general strategy to expedite the mobility of health professionals in order to address workforce needs and improve access to health care services, particularly in light of increasing shortages of health care professionals in rural and other areas and increased demand for health care services. It is also seen as a way of improving the efficiency of the licensing system in this country so that scarce resources may be better used in the disciplinary and enforcement activities of State boards, rather than in potentially duplicative licensing processes. This may also reduce the burden on health care providers who provide clinical services via telemedicine technology.

There is strong evidence to support the fact that certain medical and psychological specialties have been able to utilize cross-State licensure strategies to improve the quality of health care. Previous LPGP award recipients have used this funding to develop uniform on-line applications

to be used by multiple States, allowing for a more efficient and less burdensome application process for physicians and psychologists seeking to be licensed in multiple States to provide services via telemedicine technology. At a more strategic level, past LPGP award recipients have developed multi-State licensure compacts, greatly streamlining the process to license providers in multiple States.

This announcement solicits applications from a broad range clinical, non- clinical, counseling, and other licensing boards, including nursing and social work, who may utilize telehealth in the provision of services through initiatives such as uniform on-line applications and compacts,.

#### 2. Background

This program is authorized by Section 330L of the Public Health Service Act as amended, (42 U.S.C. 254c-18); Consolidated and Further Continuing Appropriations Act, 2015 (P.L. 113-235).

Recognizing that the issues of licensure and the delivery of telehealth services were evolving and becoming more complex, the U.S. Congress passed the Health Care Safety Net Amendments of 2002, P.L. 107-251. Section 102 of that law authorized the award of grants to State professional licensing boards to promote cooperation and encourage development and implementation of State policies that will reduce statutory and regulatory barriers to telehealth. With funds appropriated by Congress in FY 2006, HRSA implemented Section 102 by creating the LPGP. Projects are administered by HRSA's Office for the Advancement of Telehealth (OAT) within the Federal Office of Rural Health Policy.

Previously, HRSA-funded LPGP projects have worked to reduce the redundancies that complicate and delay the process of obtaining medical licensure in multiple jurisdictions. As telehealth use expands, there will be a growing need to disseminate information about promising licensure practices to inform telehealth providers, and other stakeholders in the general public.

## **II.** Award Information

### 1. Type of Application and Award

Type(s) of applications sought: New and Competing Continuation. Prior LPGP awardees must indicate how funding will be utilized to build upon, but not duplicate or simply continue, past portability efforts.

Funding will be provided in the form of a grant.

#### 2. Summary of Funding

This program will provide funding during Federal fiscal years 2016 - 2019. Approximately \$500,000 is expected to be available annually to fund two (2) recipients. Applicants may apply for a ceiling amount of up to \$250,000 per year. The actual amount available will not be

determined until the FY 2016 Federal budget is appropriated. This program announcement is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds can be awarded in a timely manner. The project period is three (3) years. Funding beyond the first year is dependent on the availability of appropriated funds for the LPGP in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government.

Effective December 26, 2014, all administrative and audit requirements and the cost principles that govern Federal funds associated with this award will be subject to the Uniform Guidance  $\frac{2}{\text{CFR 200}}$  as codified by Health and Human Services (HHS) at  $\frac{45 \text{ CFR 75}}{45 \text{ CFR 75}}$ , which supersede the previous administrative and audit requirements and cost principles that govern Federal funds.

## **III.** Eligibility Information

#### 1. Eligible Applicants

Eligible applicants are limited by statute to State professional licensing boards.

Foreign entities are not eligible for HRSA awards, unless the authorizing legislation specifically authorizes awards to foreign entities or the award is for research. This exception does not extend to research training awards or construction of research facilities.

#### 2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

#### 3. Other

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

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

NOTE: Multiple applications from an organization are not allowable.

If for any reason (including submitting to the wrong funding opportunity number or making corrections/updates), an application is submitted more than once prior to the application due date, HRSA will only accept the applicant's **last** validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application.

## **IV. Application and Submission Information**

#### 1. Address to Request Application Package

HRSA *requires* applicants for this FOA to apply electronically through Grants.gov. Applicants must download the SF-424 application package associated with this FOA following the directions provided at <u>Grants.gov</u>.

#### 2. Content and Form of Application Submission

Section 4 of HRSA's <u>SF-424 Application Guide</u> provides instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract. You must submit the information outlined in the Application Guide in addition to the program specific information below. All applicants are responsible for reading and complying with the instructions included in HRSA's <u>SF-424 Application Guide</u> except where instructed in the FOA to do otherwise.

See Section 8.5 of the Application Guide for the Application Completeness Checklist.

#### **Application Page Limit**

The total size of all uploaded files may not exceed the equivalent of 80 pages when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support required in the *Application Guide* and this FOA. Standard OMB-approved forms that are included in the application package are NOT included in the page limit. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) will not be counted in the page limit. We strongly urge applicants to take appropriate measures to ensure the application does not exceed the specified page limit.

Applications must be complete, within the specified page limit, and validated by Grants.gov under the correct funding opportunity number prior to the deadline to be considered under the announcement.

#### **Program-Specific Instructions**

In addition to application requirements and instructions in Section 4 of HRSA's <u>SF-424</u> <u>Application Guide</u> (including the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract), please include the following:

#### i. Project Abstract

See Section 4.1.ix of HRSA's SF-424 Application Guide.

#### *ii.* Project Narrative

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

Use the following section headers for the Narrative:

- INTRODUCTION -- Corresponds to Section V's Review Criterion(a) #1 Need
  This section should briefly describe the purpose of the proposed project. Provide a general
  overview of your organization. Clearly and succinctly describe the specific administrative,
  legislative, or regulatory barriers the proposed project will be addressing, the specific State
  licensing boards that will be involved, and a summary of the project being proposed. For
  new applicants, this includes describing whether they will be pursuing a uniform
  application process or a multi-State compact. For prior applicants, this includes describing
  the use of new and innovative strategies that build upon but do not duplicate past
  portability efforts.
- NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion(a) #1 Need This section should describe the current licensure environment and how the use of telehealth is impacted. Using quantitative and qualitative data, the applicant should describe the need to reduce barriers to cross-State licensure. Clearly identify the organizations that will be involved, efforts in the past to address these barriers, both in the region and nationally, and reasons for the success or failure of those previous efforts. If the applicant has previously received funding under the LPGP, please describe the outcomes of the previous Federal investment and how the efforts in this application build upon previously funded efforts and do not simply continue or duplicate previously funded activities.
- METHODOLOGY -- Corresponds to Section V's Review Criterion(a) #2 Response and #4 Impact

Describe the approach to be taken in the project to address the "needs" described above. Clearly identify the roles and responsibilities of each organization involved. Address exactly how licensure information across States will be shared with the board's constituents and the general public, and how the proposed program will address relevant State and Federal regulations regarding privacy and confidentiality of sensitive information.

State licensing boards should describe a strong record in facilitating cross-State cooperation and implementing laws and regulations that reduce licensure barriers slowing the expansion of telemedicine services across States.

Applicants should describe their plans to develop information gathering and dissemination strategies on cross-State licensure options and approaches that protect patient safety without creating undue licensure burden on telehealth providers. Applicants should discuss how they will also monitor the actions of National licensure bodies as it relates to telehealth and analyze the potential impact on telehealth care service delivery.

Applicants must propose a plan for project sustainability after the period of Federal funding ends. Recipients are expected to sustain key elements of their grant projects, e.g., strategies or services and interventions, which have been effective in improving practices and those that have led to improved outcomes for the target population. For example, those applicants employing a uniform application for cross-State licensure, this may

include a strategy for how to engage both State licensing boards and affected clinicians to adopt and use this mechanism and how those efforts will continue after Federal funding. For those States pursuing a multi-State compact, an example may include a strategy for how to engage both State licensing boards and affected clinicians to adopt and use this mechanism and how those efforts will continue after Federal funding.

Applicants should describe their ability to create a public-facing web-page that highlights the LPGP program and describes the activities that are funded by FORHP. It is expected that the web-page will provide information to the applicant's constituents as well as the general public and be active within three months of receipt of the award.

Applicants should describe how they plan to share their knowledge and information learned through the grant award with the Federal Office of Rural Health Policy, Office for the Advancement of Telehealth partners and programs, including but not limited to, Telehealth Resource Centers and Telehealth Network Grant Program award recipients.

 WORK PLAN -- Corresponds to Section V's Review Criterion(a) #2 Response and #4 Impact

Describe the activities or steps that will be used to achieve each of the activities proposed in the methodology section. Use a timeline that includes each activity and identifies responsible staff or the skill sets required for the individuals who will fulfill the proposed tasks. Describe in detail the technical approach employed in the project and how the various components will be organized and work together. Present an implementation schedule that identifies major project tasks and milestones.

The work plan must also describe the capacity to track and report data on key activities including but not limited to number of participants using the uniform application, or multi-State compact, or other activities, as well as the number of States adopting those models.

The work plan should incorporate a financial model for supporting long-term implementation of the program once Federal support for the project has ended. If the applicant received prior funding, the organization should detail if or how the program builds on prior activities.

 RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criterion(a) #2 Response

Discuss challenges that may be encountered in designing and implementing the activities described in the Work Plan, and outline the approaches that will be used to resolve such challenges. Clearly outline any technical, financial, organizational or other infrastructure challenges to various States cooperating in overcoming licensure barriers to cross-State practice that will be addressed in the project.

 EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criterion(a) #3 Evaluative measures and #5 Resources/ Capabilities In an effort to maximize allocation of grant funds towards project activities, the applicant is not required to conduct a formal evaluation but rather a self-assessment at the end of their project period. The application should describe how the self-assessment will provide information to identify the project's strengths and areas for improvement. Specifically, the self-assessment should include, but is not limited to, the following elements:

- Outcomes focus: Ensure that the goals and objectives of the project are accomplished
- Data collection: Illustrates accuracy and consistency of data collected. Ensure that data collection methods are feasible for the project and data are collected in a timely manner.
- Sustainability: Identify factors and strategies that will lead to viability and sustainability after Federal funding ends. Explain how sustainability data will be used to help inform quality improvement strategies and future efforts.
- ORGANIZATIONAL INFORMATION -- Corresponds to Section V's Review Criterion(a) #5 Resources/Capabilities

Provide information on the applicant organization's current mission and structure, scope of current activities, and project organizational chart (Attachment 5).Describe how these contribute to the ability of the organization to carry out the project and address the cross-State licensure challenges. Describe the applicant's prior experience at the State and/or National level in addressing licensure issues, and the impact of any policies developed during this experience. Clearly describe current and previous activities of the applicant and its partners in engaging in collaborative efforts to overcome licensure barriers. Multi-State partners should provide information about how the various components will function in the project, with the roles and responsibilities of all components specifically addressed in the application.

### NARRATIVE GUIDANCE

In order to ensure that the Review Criteria are fully addressed, this table provides a crosswalk between the narrative language and where each section falls within the review criteria.

Narrative Section	Review Criteria
Introduction	(1) Need
Needs Assessment	(1) Need
Methodology	(2) Response and (4) Impact
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support	(3) Evaluative Measures and (5)
Capacity	Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested – the budget section
	should include sufficient justification to allow
	reviewers to determine the reasonableness of the
	support requested.

#### iii. Budget

See Section 4.1.iv of HRSA's <u>SF-424 Application Guide</u>. Please note: the directions offered in the SF-424 Application Guide differ from those offered by Grants.gov. Please follow the instructions included the Application Guide and, *if applicable*, the additional budget instructions provided below.

**Reminder:** The Total Project or Program Costs are the total allowable costs (inclusive of direct **and** indirect costs) incurred by the recipient to carry out a HRSA-supported project or activity. Total project or program costs include costs charged to the award and costs borne by the recipient to satisfy a matching or cost-sharing requirement, as applicable.

In addition, the Licensure Portability Grant Program requires the following:

Grant funds may be used for salaries, equipment, software development, operating, or other costs associated with developing legislative, administrative, and technical projects to address licensure barriers that hinder the practice of telemedicine across State lines. For example, a large multi-State project might involve significant expansion of existing State agreements for cross-State recognition of professional licenses to other States.

The Consolidated and Further Continuing Appropriations Act, 2015, Division G, § 203, (P.L. 113-235) states, "None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II. Please see Section 4.1.iv Budget – Salary Limitation of HRSA's <u>SF-424 Application</u> <u>Guide</u> for additional information. Note that these or other salary limitations will apply in FY 2016, as required by law.

#### *iv.* Budget Justification Narrative

See Section 4.1.v. of HRSA's SF-424 Application Guide

#### v. Attachments

Please provide the following items in the order specified below to complete the content of the application. **Unless otherwise noted, attachments count toward the application page limit.** Indirect cost rate agreements and proof of non-profit status (if applicable) will not count toward the page limit. **Each attachment must be clearly labeled**.

Attachment 1: Work Plan

Attach the Work Plan for the project that includes all information detailed in Section IV. ii. Project Narrative.

# Attachment 2: Staffing Plan and Job Descriptions for Key Personnel (see Section 4.1. of HRSA's <u>SF-424 Application Guide</u>)

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

Attachment 3: Biographical Sketches of Key Personnel

Include biographical sketches for persons occupying the key positions described in Attachment 2, not to exceed two pages in length. In the event that a biographical sketch is included for an identified individual who is not yet hired, please include a letter of commitment from that person with the biographical sketch.

# Attachment 4: Letters of Agreement and/or Description(s) of Proposed/Existing Contracts (project specific)

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

# Attachment 5: Memoranda of Agreement (MOA) or Memoranda of Understanding (MOU) of Proposed/Existing Contracts

The documents should describe the roles of subcontractors/subrecipients and their deliverables with dates that include the length of the agreement.

#### Attachment 6: Project Organizational Chart

Provide a one-page figure that depicts the organizational structure of the project, including subcontractors/subrecipients and other significant collaborators. If the program is part of a larger institution, please depict where the project fits within the larger institution.

#### Attachment 7: List of Project Partners and Letters of Commitment

Please list the participating State licensing boards and other project partners. Include a key point of contact for each participant and include their contact information. Attach a letter from each of the participants that includes the service(s) provided, number of clients served, geographic areas served. The attached letters should also highlight their commitment to the project and the specific roles each will play in the development and operation of the proposed project.

## Attachment 8: Summary Progress Report - ACCOMPLISHMENT SUMMARY (FOR COMPETING CONTINUATIONS ONLY)

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

The accomplishment summary should be a brief presentation of the accomplishments and outcomes, in relation to the goals and objectives of the program under previous LPGP funding. The report should include:

- (1) The period covered (dates).
- (2) <u>Specific Objectives</u> Briefly summarize the specific objectives of the project as actually funded.
- (3) <u>Results</u> Describe the program activities and outcomes conducted for each objective. Include both positive and negative results or technical problems that may be important.
- Attachments 9-15 Other Relevant Documents

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

#### 3. Dun and Bradstreet Universal Numbering System Number and System for Award Management

Applicant organizations must obtain a valid DUNS number and provide that number in their application. Each applicant must also register with the System for Award Management (SAM) and continue to maintain active SAM registration with current information at all times during which it has an active Federal award or an application or plan under consideration by an agency (unless the applicant is an individual or Federal agency that is exempted from those requirements under 2 CFR 25.110(b) or (c), or has an exception approved by the agency under 2 CFR 25.110(d)).

HRSA may not make an award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time HRSA is ready to make an award, HRSA may determine that the applicant is not qualified to receive an award and use that determination as the basis for making an award to another applicant.

If an applicant/recipient organization has already completed Grants.gov registration for HRSA or another Federal agency, confirm that the registration is still active and that the Authorized Organization Representative (AOR) has been approved.

The Grants.gov registration process requires information in three separate systems:

- Dun and Bradstreet (<u>http://fedgov.dnb.com/webform/pages/CCRSearch.jsp</u>)
- System for Award Management (SAM) (<u>https://www.sam.gov</u>)
- Grants.gov (<u>http://www.grants.gov/</u>)

For further details, see Section 3.1 of HRSA's SF-424 Application Guide.

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

#### 4. Submission Dates and Times

#### **Application Due Date**

The due date for applications under this FOA is January 19, 2016 at 11:59 P.M. Eastern Time.

See Section 8.2.5 – Summary of e-mails from Grants.gov of HRSA's <u>*SF-424 Application Guide*</u> for additional information.

#### 5. Intergovernmental Review

The Licensure Portability Grant Program is a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR 100. See Executive Order 12372 in the <u>HHS Grants</u> Policy Statement.

See Section 4.1 ii of HRSA's SF-424 Application Guide for additional information.

#### 6. Funding Restrictions

Applicants responding to this announcement may request funding for a project period of up to three (3) years, at no more than \$250,000 per year. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

The General Provisions in Division G of the Consolidated and Further Continuing Appropriations Act, 2015 (P.L. 113-235) apply to this program. Please see Section 4.1 of HRSA's <u>SF-424 Application Guide</u> for additional information. Note that these or other restrictions will apply in FY 2016, as required by law.

All program income generated as a result of awarded funds must be used for approved project-related activities.

## V. Application Review Information

#### 1. Review Criteria

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

These criteria are the basis upon which the reviewers will evaluate the application. The entire proposal will be considered during objective review.

Review Criteria are used to review and rank applications. The LPGP has six (6) review criteria:

Criterion 1: NEED (10 points) – Corresponds to Section IV's Introduction and Needs Assessment

- The extent to which the applicant demonstrates the current need for cross-State licensure which is supported by quantitative and qualitative data.
- The extent to which the applicant displays a clear understanding of the barriers to cross-State practice, including the legislative or regulatory contributing factors to licensure portability across the particular States.
- The extent to which the applicant displays a strong understanding of efforts that have been previously carried out to address the barriers to cross-State practice and the relevance of other State or National efforts to the needs outlined.

Criterion 2: RESPONSE (30 points) – Corresponds to Section IV's Methodology, Work Plan and Resolution of Challenges

- The extent to which the applicant identifies appropriate, realistic, and achievable action steps necessary to ensure that the proposed project will have appropriate staff in place to carry out the proposed activities.
- The extent to which the proposed project displays a clear approach to overcome legislative, regulatory, or administrative barriers to cross-State practice. The extent to which the proposed project adequately addresses technical, political, and organizational challenges proposed and the challenges outlined in the "needs" section, and the clarity of the proposed goals and objectives and their relationship to the identified project.
- The extent to which the applicant has clearly justified why the proposed methodology is the best approach to be taken.
- The extent to which the applicant describes the proposed public-facing, web-page highlighting the LPGP program and providing information to the general public as well as the applicants constituents within three (3) months of award.

# Criterion 3: EVALUATIVE MEASURES (5 points) – Corresponds to Section IV's Evaluation and Technical Support Capacity

- The appropriateness of the program assessment and the effectiveness of the methods proposed to monitor and assess the project results.
- The extent to which the application describes the self-assessment plan that includes a focus on outcomes, data collection, and sustainability.

Criterion 4: IMPACT (25 points) – Corresponds to Section IV's Methodology and Work Plan

- The extent to which the applicant describes its plan to develop a uniform on-line application, compact, or other strategy to reduce barriers to cross-State licensure.
- The extent and effectiveness of plans for information gathering and dissemination of project results and/or the extent to which project results may be National in scope.
- The degree to which the proposed program will address relevant State and Federal regulations regarding privacy and confidentiality of sensitive information.
- The extent to which the program will share information with constituents outside of their board, including the general public and Federal Office of Rural Health Policy award recipients such as Telehealth Resource Centers and Telehealth Network Grant Program award recipients. The ability to demonstrate appropriate financial integrity and oversight beyond the LPGP program, and the extent to which the applicant describes how the program will be sustained beyond Federal funding.
- If the applicant received previous funding under the LPGP, the extent to which the applicant describes the outcomes of the previous Federal investment and how the efforts in this application build upon previously funded efforts and do not simply continue previously funded LPGP activities.

# Criterion 5: RESOURCES/CAPABILITIES (20 points) – Corresponds to Section IV's Evaluation and Technical Support Capacity, and Organizational Information,

- The extent to which project personnel are qualified by training and/or experience to implement and carry out the projects as evidenced by attachment (2) the staffing plan and job descriptions for key personnel and attachment (3) biographical sketches of key personnel
- As evidenced by attachment (2) the staffing plan and job descriptions for key personnel and attachment (3) biographical sketches of key personnel.
- The extent to which the organization's management team is appropriate and adequate for the scope of the proposed project, including operational and program oversight needs. The appropriateness of the clinical, technical, and administrative/organizational qualifications of the proposed personnel to meet the requirements of the project.

*Criterion 6: SUPPORT REQUESTED (10points) – Corresponds to Section IV's Budget and Budget Narrative* 

- The reasonableness of the proposed budget for each year of the project period in relation to the objectives, the complexity of the proposed activities, and the anticipated results.
- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work.
- The extent to which the budget is complete and detailed in supporting each line item and allocating resources; is realistic with regard to technical costs of hardware and software; and conforms to the use of grant dollars permitted by the grant program.

#### 2. Review and Selection Process

Please see Section 5.3 of HRSA's SF-424 Application Guide.

This program does not have any funding priorities, preferences or special considerations.

**Please Note:** The Health Resources and Services Administration may elect not to fund applicants with management or financial instability that directly relates to the organization's ability to implement statutory, regulatory or other requirements (<u>45 CFR § 75.205</u>). The decision not to make an award or to make an award at a particular funding level, is discretionary and is not subject to appeal to any OPDIV or HHS official or board.

### 3. Anticipated Announcement and Award Dates

It is anticipated that awards will be announced prior to the start date of July 1, 2016.

## VI. Award Administration Information

#### 1. Award Notices

The Notice of Award will be sent prior to the start date of July 1, 2016. See Section 5.4 of HRSA's <u>SF-424 Application Guide</u> for additional information.

#### 2. Administrative and National Policy Requirements

See Section 2 of HRSA's SF-424 Application Guide.

### 3. Reporting

The successful applicant under this FOA must comply with Section 6 of HRSA's <u>SF-424</u> <u>Application Guide</u> and the following reporting and review activities: 1) **Progress Report**(s). The recipient must submit a progress report to HRSA on an **annual** basis. Further information will be provided in the award notice. Award recipients are expected to respond to requests for data and information from their project officer.

2) **Final Report**. A final report is due within 90 days after the project period ends. The final report will collect information such as program-specific goals and progress on strategies; core performance measurement data; impact of the overall project; the degree to which the award recipient achieved the mission, goal and strategies outlined in the program; recipient objectives and accomplishments; barriers encountered; and responses to summary questions regarding the recipient's overall experiences over the entire project period. The final report must be submitted on-line by recipient in the Electronic Handbooks system at <a href="https://grants.hrsa.gov/webexternal/home.asp">https://grants.hrsa.gov/webexternal/home.asp</a>. Further information will be provided upon receipt of reward.

3) **OAT Grantee Directory.** Applicants accepting this award must provide information for OAT's Grantee Directory Profiles. Further instructions will be provided by OAT. The current Telehealth directory is available online at: http://www.hrsa.gov/telehealth.

## **VII. Agency Contacts**

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

Kimberly Dews Grants Management Specialist HRSA Division of Grants Management Operations, OFAM Parklawn Building, Room 11A-02 5600 Fishers Lane Rockville, MD 20857 Telephone: (301) 443-0655 Fax: (301) 594- 6096 E-mail: kdews@hrsa.gov

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

Anthony Oliver Project Officer, Office for the Advancement of Telehealth Attn: Licensure Portability Grant Program FORHP/HRSA Parklawn Building, Room 17W09-C 5600 Fishers Lane Rockville, MD 20857 Telephone: (301) 443-2919 Fax: (301) 443-2803 E-mail: aoliver@hrsa.gov

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

Grants.gov Contact Center Telephone: 1-800-518-4726 (International Callers, please dial 606-545-5035) E-mail: <u>support@grants.gov</u> iPortal: <u>https://grants-portal.psc.gov/Welcome.aspx?pt=Grants</u>

Successful applicants/recipients may need assistance when working online to submit information and reports electronically through HRSA's Electronic Handbooks (EHBs). For assistance with submitting information in HRSA's EHBs, contact the HRSA Contact Center, Monday-Friday, 8:00 a.m. to 8:00 p.m. ET:

HRSA Contact Center Telephone: (877) 464-4772 TTY: (877) 897-9910 Web: <u>http://www.hrsa.gov/about/contact/ehbhelp.aspx</u>

## **VIII.** Tips for Writing a Strong Application

See Section 4.7 of HRSA's SF-424 Application Guide