



Ryan White HIV/AIDS Program Part C Capacity Development Program

Pre-Application Technical Assistance Webinar HRSA-24-062
March 5, 2024

Director: CAPT Mahyar Mofidi, DMD, Ph.D.
Division of Community HIV/AIDS Programs (DCHAP)
HIV/AIDS Bureau (HAB)

Vision: Healthy Communities, Healthy People



Zoom Platform

Virtual Etiquette

- Pair your phone with your computer—to reduce bandwidth.
- If you want to ask a questions during the webinar, please submit them to the Ask DCHAP inbox – AskPartCCapacity@hrsa.gov.



Agenda

- HIV/AIDS Bureau (HAB) Vision and Mission/DCHAP Mission and Core Values
- Purpose of Funding Opportunity
- Award Information
- Eligibility Information
- Application and Submission Information
- Application Review Information
- Award Administration Information
- Application Submission Tips
- Question and Answer



Acronyms

- **Application Guide** – SF-424 Application Guide
- **CQM** – Clinical Quality Management
- **DCHAP**-Division of Community HIV/AIDS Programs
- **GMS** – Grants Management Specialist
- **HAB** – HIV/AIDS Bureau
- **IPV** – Intimate Partner Violence
- **MOE** – Maintenance of Effort
- **NHAS**- National HIV/AIDS Strategy
- **NOFO** – Notice of Funding Opportunity
- **PCN** – Policy Clarification Notice
- **RWHAP** – Ryan White HIV/AIDS Program
- **SAM** – System for Award Management
- **UEI**-Unique Entity Identifier



HRSA's HIV/AIDS Bureau (HAB) Vision and Mission

Vision

Optimal HIV care and treatment for all to end the HIV epidemic in the U.S.

Mission

Provide leadership and resources to advance HIV care and treatment to improve health outcomes and reduce health disparities for people with HIV and affected communities.



DCHAP Mission and Core Values

Mission

Provide Leadership and resources to assure access to and retention in high quality, comprehensive HIV care and treatment services for vulnerable people with HIV/AIDS, their families, and providers within our nation's communities.

Core Values

Communication · Integrity · Professionalism · Accountability · Consistency ·
Respect



Purpose of Funding Opportunity

The purpose of this program is to strengthen organizational capacity to respond to the changing health care landscape and increase access to high quality HIV primary health care services for low income and underserved people with HIV.

Applicants may submit proposals for **only one activity** under one of the following two categories:

- (1) HIV Care Innovation**
- (2) Infrastructure Development**



*Please refer to pages **1** and **2** of the NOFO*



Award Information

- Funding will be provided through a grant.
- Approximately \$9,000,000 is available to fund up to 60 applicants.
- Only **one** activity per recipient under **one** category: HIV Care Innovation or Infrastructure Development will be funded.
- Up to \$150,000 for the one-year period of performance **September 1, 2024, to August 31, 2024** (1 year). Requests exceeding this amount will be deemed nonresponsive and will not be considered.
- HRSA will not fund the same activity in FY 2024 that was funded in FY 2022 or FY 2023.



*Please refer to pages **i-ii** and **5** of the NOFO*



Eligibility

- (1) Public and nonprofit private entities, faith-based and community-based organizations, and Tribes & tribal organizations are eligible to apply. **Foreign entities are not eligible for this award.**
- (2) Cost sharing and matching is not required.
- (3) HRSA may not consider any application that exceeds the ceiling amount of \$150,000 or fails to satisfy the deadline requirement.
- (4) Maintenance of Effort (MOE) information is required only for the HIV Care Innovation category.

NOTE: You may submit multiple applications under the same [Unique Entity Identifier](#) (UEI), if each proposes distinct projects.



Please refer to pages 6 and 7 of the NOFO



Application and Submission Information

Two Submission items of the NOFO:

- (1) Address to Request Application Package:
We **require** you to apply online through [Grants.gov](https://www.Grants.gov). Use the SF-424 workspace application package associated with this NOFO.
- (2) Content and Form of Application Submission:
Submit your information as the Application Guide and this program-specific NOFO state. There's an Application Completeness Checklist in the Application Guide to help you.

Please note: The total number of pages that count toward the page limit shall be no more than 30 pages when we print them. We will not review any pages that exceed the page limit.



Please refer to pages 7 and 8 of the NOFO and 8.5 [SF-424 application guide](#)



Application Package

Applicants must include the following:

- SF-424 Application for Federal Assistance
- Project Abstract
- Project/Performance Site Location Form
- Project Narrative (uploaded to the Project Narrative Attachment Form)
- SF-424A Budget
- Budget Narrative (uploaded to the Budget Narrative Attachment Form)
- Attachments ([Section IV. 2. v.](#) of NOFO)
- Grants.gov Lobbying Form
- Assurances and Certifications
- Key Contacts



Please refer to page 7 of the NOFO and [SF-424 application guide](#)



Project Abstract

Start with the information below and provide a summary of the application in the Project Abstract field / box using 4,000 characters or less.

- Address
- Project Director Name
- Contact Phone numbers (Voice, Fax)
- Email Address
- Website address, if applicable
- List the grant program funds being requested for this application

Use the Standard OMB-approved Project Abstract Summary Form 2.0 included in workspace application package. Do not upload the abstract as an attachment or it will count towards the page limitation.



See page **12** of the NOFO and the [SF424 Application Guide](#)



Project Narrative

Narrative Sections:

- Introduction
- Organizational Information
- Need
- Approach
- Work Plan
- Resolution of Challenges
- Evaluation and Technical Support Capacity
- Budget Narrative



Please refer to pages 12 to 16 of the NOFO



HIV Care Innovation

Choose Only One Activity:

- Streamlining RWHAP Eligibility
- Intimate partner violence screening and counseling
- Coordination or integration of HIV primary care with oral health and/or behavioral health care
- Inclusive Care for underrepresented communities with disproportionately high rates of HIV



Please refer to pages 8 to 10 of the NOFO



HIV Care Innovation: Streamlining RWHAP Eligibility

Streamlined RWHAP eligibility attempts to minimize client burden by utilizing available data sources before requesting additional information from the client.

For this activity,

- Describe the method(s) you will use to conduct a local/regional systems assessment of RWHAP recipient organizations.
- Discuss how you will promote sharing and collaboration across all RWHAP Parts and others who engage in the peer-to-peer information exchange.



Please refer to page 8 and 14 of the NOFO



HIV Care Innovation: Intimate partner violence screening and counseling

- Implement IPV screening and counseling in the clinical setting and establish referral networks to community-based social service organizations taking into consideration the impact of COVID-19 in your communities.
- The activity must address one or more of the stages of the HIV care continuum.
- For resources addressing this topic, access the IPV Toolkit located on the HRSA Office of Women's Health website, the link is located on page 9 of the NOFO. www.hrsa.gov/office-womens-health



Please refer to page 9 of the NOFO



HIV Care Innovation: Coordination or Integration of HIV Primary Care with Oral Health and/or Behavioral Health

- Develop strategies, policies, and procedures to improve care coordination and integration of HIV primary care with oral health care and/or behavioral health services
- Develop policies and procedures to facilitate onsite provision of oral health care and/or behavioral health services
- Train staff to understand workflow and processes
- Develop policies and procedures for coordinating and tracking referrals for oral health care and/or behavioral health



Please refer to page 9 of the NOFO



HIV Care Innovation: Inclusive care for underrepresented communities

The activity must address at least one of the following two educational and training components critical to inclusive care for gender-diverse groups:

- (1) ***Didactic Training and Education Activities*** in this category should include training and education for clinical and administrative personnel on various topics that can impact and affect the quality of care and outcomes for gender diverse populations. Educational activities could focus on social determinants of health impacting medical and pharmacological management of underrepresented communities with disproportionately high rates of HIV.
- (2) ***Model of Care Infrastructure and Clinical Application*** Activities in this category should facilitate an inclusive infrastructure at your clinic or facility. This may include developing or modifying existing medical intake, registration, or assessment forms within EHR systems to be more inclusive. Other activities could include services that support person-centered care for underrepresented communities with disproportionately high rates of HIV, including transgender patients.



Please refer to pages 9 and 10 of the NOFO



Infrastructure Development

Choose Only One Activity:

- Emergency Preparedness
- Telehealth
- Dental Equipment for Expanding Dental Service Capacity



Please refer to pages 11 and 12 of the NOFO



Infrastructure Development: Emergency Preparedness

- Address an organizations vulnerability, create an emergency preparedness plan, conduct staff training and evaluation through drills and exercises, and collaborate with the local emergency management planners.
- Develop an implementation plan/toolkit and/or policies and procedures for effective preparation and responses to natural disasters (e.g., hurricanes, floods, tornadoes) and public health emergencies (e.g., disease outbreaks) that will maintain continuity of operations and result in minimal interruption to care and treatment for people with HIV.
- For resources addressing this topic, access the [HHS Office of the Assistant Secretary for Preparedness and Response \(ASPR\) website](#); ASPR's 2022-2026 Health Care Preparedness and Response Capabilities Report, and the [ECRI Institute website](#)



Please refer to page **11** of the NOFO



Infrastructure Development: Telehealth

- Develop and acquire computer hardware and software, audio and video equipment, computer network equipment, interactive equipment, data terminal equipment, and other equipment.
- Describe technology requirements and each type of equipment employed along with its relevance to the project.
- Discuss the telehealth reimbursement environment.
- For resources addressing this topic, access HRSA's National Consortium of Telehealth Resource Centers or HRSA Telehealth Programs at www.telehealthresourcecenter.org or www.hrsa.gov/rural-health/telehealth



Please refer to pages **11** and **12** of the NOFO



Infrastructure Development: Office Dental Equipment for Expanding Dental Service Capacity

Purchase dental equipment for the purpose of providing oral health care services for people with HIV. The equipment purchases must be used for the purposes of creating, enhancing or expanding a dental operator in an office-based or mobile-based clinic.

Some examples of dental equipment include:

- dental chairs
- sterilization units
- x-ray machines
- operating equipment such as tools, lighting, cabinetry

Please note: The purchase of a mobile operator is **not** allowed by this activity



Please refer to page 12 of the NOFO



Project Narrative - Introduction

- **Clearly indicate the proposed activity.** You are encouraged to boldface or underline the category and the activity you are proposing to help HRSA staff quickly identify your proposed project.
- Clearly indicate the category under which the proposed activity falls:
 - (1) HIV Care Innovation**
 - (2) Infrastructure Development**
- Briefly describe the purpose of the proposed activity.
- Discuss why your local community and/or organization needs capacity development funds.
- Clearly describe how the proposed activity builds upon and furthers the objectives of the previously funded activity in maximizing impact.



Please refer to page 13 of the NOFO



Project Narrative - Organizational Information

- Describe the organizational skills, capabilities, and resources, including staff that will contribute to carrying out the proposed activity
- Highlight key staff with relevant expertise and experience with similar work
- Describe your experience with fiscal management of grants and contracts
- Include information on your organization's experience managing multiple federal grants



Please refer to pages 13 of the NOFO



Project Narrative - Need

HIV Care Innovation Activities

- Clearly describe and document the affected population(s) and their unmet health care needs.
- Describe the service needs based on your evaluation of the gaps in the HIV care continuum for your affected population(s) with HIV.
- Provide data on the five stages of the HIV care continuum for your affected population(s) with HIV using the most recent three calendar years of available data.
- Clearly define the numerator and the denominator for each stage.



Please refer to page 14 of the NOFO



Project Narrative - Need

HIV Care Innovation Activities

Regarding the **Streamlining Eligibility** activities,

- Discuss the administrative, policy, technological, service-related, and systemic challenges that affect the adoption and/or optimal application of promoting efficiencies to streamline RWHAP client eligibility determination.
- Describe method(s) you will use to conduct a local/regional systems assessment of RWHAP recipient organizations, care delivery systems, income based federal programs, and/or state or local health care marketplaces to identify administrative systems, electronic data sources, and tools utilized to determine client eligibility, confirm eligibility, and obtain client consent.
- Discuss how you will promote sharing and collaboration across all RWHAP parts and others who engage in the peer-to-peer information exchange.



Please refer to page 14 of the NOFO



Project Narrative - Need

Infrastructure Development

- Clearly describe the gaps in organizational capacity that exist due to current limitations in system infrastructure.
- Include alterations you have made to the current service delivery system and how lessons learned will be applied to this activity.
- Provide information specific to the selected activity and describe how these gaps or limitations are affecting the optimal provision of quality HIV primary care services and/or affecting your organization's ability to optimize your response to the changing health care landscape



Please refer to page 14 of the NOFO



Project Narrative - Need

Infrastructure Development-Emergency Preparedness

- Discuss your organization's current capacity for responding to emergencies including public health emergencies, disaster preparedness, and continuity of operations.
- Include any recent capacity needs assessed in carrying out or continuing operations during a recent natural disaster or a public health emergency such as the COVID-19 pandemic.
- If you received funding under the FY2020 Coronavirus Aid, Relief and Economic Security (CARES) Act, discuss any impact of those awards on your organization's ability to maintain operations during emergency or disaster recovery.
- Discuss any lessons learned or assessments of your organization's ability to operate under such conditions and how these funds will be utilized to improve current capacity.



Please refer to pages 14 and 15 of the NOFO



Project Narrative - Approach

When describing the methods used to address the needs in the needs assessment section of the NOFO, be sure to also include the following:

- **Involvement of People with HIV**: Describe how you will engage people with HIV and/or organizations that represent them in the implementation of this activity.
- **Collaboration and Coordination**: Outline the partners and/or collaborating entities needed for this proposed activity, if applicable. Include letters of agreement and/or memoranda of understanding from each partner and/or collaborating entity as **Attachment 9**.
- **Sustainability**: Describe how you will maintain the efforts set forth in this activity after the period of federal funding ends.



Please refer to page 15 of the NOFO



Project Narrative - Work Plan

- Describe the activity's goal, specify the objectives, and identify the key action steps for **September 1, 2024 - August 31, 2025**.
- Use a timeline that includes each step of the proposed activity, target date for completion, and identifies staff responsible for the activities.
- Identify the measures you will use to evaluate success (Outcomes) addressing at least one or more of the stages of the HIV care continuum.
- Identify meaningful support and collaboration with key partners in planning, designing, and implementing all activities.
- Provide the above information in a table format and submit in the application as **Attachment 7**.



Please refer to pages **15** and **16** of the NOFO



Project Narrative - Resolution of Challenges

- Discuss challenges you are likely to encounter in the planning and implementation of your project.
- Include the impact of COVID-19 on organizational operations and proposed activities.
- Describe the specific activities or strategies you will use to mitigate or resolve anticipated challenges.



Please refer to page 16 of the NOFO



Project Narrative – Evaluation & Technical Support Capacity

Data Collection and Management:

- Describe systems and processes that will support organization’s monitoring
- Describe how the organization will collect, manage, and analyze data

Project Evaluation:

- Describe the evaluation plan that will monitor ongoing processes and progress
- Discuss the plan for the program performance evaluation
- Describe plan to share evaluation results internally with program staff and externally with key stakeholders

If applicable, provide a brief description of the clinical quality management program (CQM) and how supplemental CQM activities are linked to the overarching RWHAP CQM work, and other resources devoted to CQM.



Please refer to page 16 of the NOFO



Budget Requirements

Budget information consists of three parts:

- (1) SF-424A Budget Information for Non-Construction Programs (included in the application package)
- (2) Program-specific line-item budget (**Attachment 5**)
- (3) Budget justification narrative



Please refer to pages **17** to **18** of the NOFO and the [SF-424 Application Guide](#)



Budget Requirements: SF-424A

View Burden Statement		BUDGET INFORMATION - Non-Construction Programs				OMB Number: 4040-0006 Expiration Date: 01/31/2019	
SECTION A - BUDGET SUMMARY							
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget			
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)	
1.		\$	\$	\$	\$	\$	
2.							
3.							
4.							

DO NOT ENTER BUDGET CONTENT IN THESE ROWS



SF-424A Section B – Budget Categories

SECTION B - BUDGET CATEGORIES					
6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) Year 1	(2) Year 2	(3) Year 3	(4) Year 4	
a. Personnel	\$	\$	\$	\$	\$
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					\$
j. Indirect Charges					\$
k. TOTALS (sum of 6i and 6j)	\$	\$	\$	\$	\$
7. Program Income	\$	\$	\$	\$	\$

DO NOT
ENTER
BUDGET
CONTENT



Salary Limitation

Please note that effective **January** 2024, the salary rate limitation applicable to RWHAP domestic grants and cooperative agreements increased to **\$221,900.00**.

- As required by the Consolidated Appropriations Act, 2023 (P.L. 117-103), Division H, § 202, 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 SF-424 Application Guide for additional information.
- As a reminder, RWHAP funds and program income generated by RWHAP awards may not be used to pay salaries in excess of the rate limitation.



Refer to page 18 of the NOFO & section 4.1-iv pages 18 & 19 of the [SF-424 Application Guide](#)



Salary Rate Limitation Example

- Individual's full-time salary: \$255,000.

50% of time will be devoted to the project	
Direct salary	\$255,000
Fringe (25% of salary)	\$31,875
Total amount	\$159,375

- Amount that may be claimed on the federal RWHAP award due to the legislative salary limitation: Individual's base full-time salary *adjusted* to Executive Level II: **\$221,900**.

50% of time will be devoted to the project	
Direct salary	\$110,950
Fringe (25% of salary)	\$27,737
Total amount	\$138,687



Please refer to section 4.1-iv pages 18 and 19 of the [SF-424 Application Guide](#)



Funding Restrictions

- Funding restrictions included in [PCN 16-02](#)
- Charges that are billable to third party payors
- Directly provide health care services that duplicate existing services
- Clinical research
- Nursing home care
- Cash payments to intended recipients of RWHAP services
- Purchase or improvement to land
- Purchase, construction, or major alterations or renovations on any building or other facility
- PrEP medications and related medical services
- Purchase of sterile needles or syringes for the purposes of hypodermic injection of any illegal drug
- Development of materials designed to promote or encourage intravenous drug use or sexual activity
- Research
- International travel
- Long-term activities



Please refer to pages 22 to 23 of the NOFO



Application Attachments

- (1) Proof of Non-Profit Status (required)
- (2) Funding Preference (required)
- (3) Federally Negotiated Indirect Cost Rate Agreement (if applicable)
- (4) Biographical Sketches of Key Personnel (required)
- (5) Program-specific Line-Item Budget (required)
- (6) Staffing Plan & Job Descriptions for Key Personnel (Section 4.1. of HRSA's SF-424 Application Guide) (required)
- (7) Work Plan (required)
- (8) Maintenance of Effort (MOE) (required)
- (9) Letters of Agreement, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts (project-specific) (if applicable)
- (10-15) Other Relevant Documents (if applicable)



Please refer to pages 18 through 21 of the NOFO



Attachment 2: Funding Preference (Required)

- **Submission of Attachment 2 is now required.**
- Provide information, including supporting documentation, data, and other details according to the instructions for funding preferences for either:
 - (1) *Rural Areas*; or
 - (2) *Underserved Populations*.
- HRSA will only grant **one** funding preference to any qualified applicant that meets the criteria for either preference.
- HRSA will review the information and determine whether your application qualifies for a funding preference, although receipt of a funding preference is not a guarantee of funding.
- If your organization does not provide HIV primary care services to underserved populations, or to a rural area(s), you must indicate **“Not Applicable”** on Attachment 2.



Please refer to page 19 and pages 27-28 of the NOFO



Attachment 2: Funding Preference – Rural Areas

Qualification 1: Rural Areas

- The criterion for this funding preference is based on the provision of HIV primary care services in a rural area.
- For more information about what defines a rural area, visit FORHP’s website at <https://www.hrsa.gov/rural-health/about-us/definition/index.html>
- To determine if your organization serves a rural area(s) please enter your location information in HRSA’s Rural Health Grants Eligibility Analyzer at <https://data.hrsa.gov/tools/rural-health>
- If your organization’s service area (either in part or in whole) is defined as rural by HRSA’s Rural Health Grants Eligibility Analyzer, provide a screenshot result in a .pdf format and include the supporting documentation as **Attachment 2**



Please refer to page 27 of the NOFO



Attachment 2: Funding Preference/Underserved Populations

Qualification 2: Underserved Populations

- The criterion for this funding preference is the provision of HIV primary care services to underserved populations.
- Underserved populations include communities and subpopulations that do not have access to adequate HIV primary care services as defined by [HAB PCN 16-02](#).
- Include data and information on HIV primary care gaps, including inadequate or unavailable HIV primary care services. Also, include data and information on specific subpopulations served by your organization that are disproportionately affected by inadequate or unavailable HIV primary care services.



Please refer to page 28 of the NOFO



Sample-Staffing Plan Table

Name	Education/ Credentials	Title	FTE	Funding Source	Experience
Dr. Jones	MD	Medical Director OB/GYN	0.4	0.2 Part D 0.2 Other	4 years HIV experience, 10 years OB/GYN experience
Nurse Thomas	RN	Program Coordinator/Clinic Nurse Manager	1.0	0.2 Part C 0.8 Part D	5 years RN with less than 1 year HIV experience
Ms. Kona	Associate Degree	Admin Assistant	1.0	0.4 Part C 0.6 Part D	4 years working with HIV clinic scheduling appointments, referrals, data entry
Mr. Lewis	MSW	Medical Case Manager/CQM Coordinator	1.0	0.5 Part B 0.5 Part D	3 years providing HIV medical case management, fluent in Spanish



Please refer to page 19 of the NOFO and Section 4.1. of [HRSA's SF-424 Application Guide](#)



Attachment 8: Maintenance of Effort (MOE)

MOE applies to HIV Care Innovation Activities ONLY

NON-FEDERAL EXPENDITURES	
<p>FY Prior to Application (Actual)</p> <p>Actual prior FY non-federal funds, including in-kind, expended for activities proposed in this application.</p> <p>Amount: \$ _____</p>	<p>Current FY of Application (Estimated)</p> <p>Estimated current FY non-federal funds, including in-kind, designated for activities proposed in this application.</p> <p>Amount: \$ _____</p>



Please refer to page 20 of the NOFO



New Appendix: Page Limit Worksheet

- This appendix worksheet is for you, the applicant
- Do not submit this worksheet as part of your application
- The purpose of the appendix is to help you verify the number of pages that count toward the page limit, so your application does not exceed 30 pages
- Some attachments do not count toward the page limit
- Attachments 1 through 4 do not count toward the page limit
- All other attachments are counted
- *Applications that exceed the 30-page limit (e.g. pages 31 and up) will be redacted and cannot be viewed by HRSA staff nor the objective reviewers that review and score your application*



Please refer to [Appendix: Page Limit Worksheet](#) on pages 34 to 35 of the NOFO



Application Review Information

Review Criteria are used to review and rank applications. For this funding opportunity, there are 6 review criteria:

Criteria	Points
Criterion 1: Need	20
Criterion 2: Response	25
Criterion 3: Evaluative Measures	10
Criterion 4: Impact	15
Criterion 5: Resources/Capabilities	10
Criterion 6: Support Requested	20
Total Points	100



Please refer to pages 24 to 27 of the NOFO



Application Review Crosswalk

The table below provides a crosswalk between the narrative language and where each section falls within the review criteria:

Project Narrative Section	Review Criteria
Introduction	(1) Need
Organizational Information	(5) Resources/Capabilities
Need	(1) Need
Approach	(2) Response
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (5) Resources/Capabilities
Budget Narrative	(6) Support Requested



Please refer to pages 12 and 13 of the NOFO



Reporting Requirements

- **Federal Financial Report**
 - The Federal Financial Report (SF-425) is required. The report is an accounting of expenditures under the project that year.
- **Progress Reports**
 - The 1st progress report is due six months after the project start date.
 - A final report is due 90 days after the project end date.

Please note: Current RWHAP Part C and/or Part D recipients will be required to provide updated progress on the impact of capacity funded activities in their NCC Submission.



Please refer to page 31 of the NOFO



Application Package: Where is it?

- Located at www.grants.gov
 - Search by opportunity number HRSA-24-062 that corresponds to the project period start date for the service area

Funding Opportunity Number	Project Start Date	Period of Performance
HRSA-24-062	September 1, 2024	September 1, 2024, to August 31, 2025 (one year)

- The Application Guide is available at <https://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf> or click the links in the NOFO
- Grants.gov “Workspace” instructional information and videos are available online at <https://www.grants.gov/web/grants/applicants/workspace-overview.html>



Application Submission Tips

- Read the NOFO and the *SF-424 Application Guide* carefully and follow instructions
- Include your agency name and the name of this program on all pages (RWHAP Part C Capacity Development Program)
- Refer to section **4.7** of the *SF-424 Application Guide* for additional Tips for Writing a Strong Application
- Apply early and do not wait until the last minute in case you run into challenges
- Make sure the person who can submit for your organization will be available
- **Ensure SAM.gov and Grants.gov registration and passwords are current immediately!**

Have all your PIN numbers and passwords handy!



Grants.gov Contact Information

When to contact Grants.gov Helpdesk

- Error messages
- Other technical issues
- Application did NOT transmit to HRSA
- **If you have any submission problems, please contact Grants.gov immediately!**

Grants.gov Contact Center (24/7 except Federal holidays):

- 1-800-518-4726, or
- support@grants.gov, or
- <https://grants-portal.psc.gov/Welcome.aspx?pt=Grants>



Please refer to page 32 of the NOFO



Four E-mails from Grants.gov

Submission Type	E-mail	Subject	Time Frame	Sent By	Recipient
Competing Application	1 st e-mail	Submission Receipt	Within 48 hours	Grants.gov	AOR
	2 nd e-mail Most Crucial	Submission Validation Receipt OR Rejected with Errors	Within 48 hours	Grants.gov	AOR
	3 rd e-mail	Grantor Agency Retrieval Receipt	Within Hours of second e-mail	Grants.gov	AOR
	4 th e-mail	Agency Tracking number assignment	Within 3 business days	Grants.gov	AOR



[SF424 Application Guide](#) page 48, section 8.2.5



Contact Information

Applicants who need additional information may contact:

Program Contact	Grants Management Contact
Brian Fitzsimmons Public Health Advisor, Division of Community HIV/AIDS Programs Email: AskPartCCapacity@hrsa.gov	Bria Haley Grants Management Specialist, Division Grant Management Operations Email: BHaley@hrsa.gov



Please refer to page 32 of the NOFO



REMINDERS

- Your application must be electronically submitted through and successfully validated on the [Grants.gov](https://www.grants.gov) website:

http://www.grants.gov/applicants/apply_for_grants.jsp

no later than

April 16, 2024, 11:59 pm ET

- We suggest you submit your application to [Grants.gov](https://www.grants.gov) at least 3 calendar days before the deadline to allow for any unexpected events.



Please refer to page 22 of the NOFO



Q&A - Your Questions are Welcome!



Send Questions To: AskPartCCapacity@hrsa.gov
Presentation Available On: TargetHIV
<https://targethiv.org/>

Connect with HRSA

Learn more about our agency at:

www.HRSA.gov



[Sign up for the HRSA eNews](#)

FOLLOW US:

