



From Notice of Funding Opportunity to Implementation of Ryan White HIV/AID Program Part C Early Intervention Services: What you Need to Know 2022 National Ryan White Conference on HIV Care and Treatment

## August 25, 2022

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Vision: Healthy Communities, Healthy People



## Health Resources and Services Administration (HRSA) Overview



Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically challenged



HRSA does this through grants and cooperative agreements to more than 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities



Every year, HRSA programs serve tens of millions of people, including people with HIV, pregnant individuals, mothers and their families, and those otherwise unable to access quality health care





# HRSA's HIV/AIDS Bureau 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.





## HRSA's Ryan White HIV/AIDS Program (RWHAP) Overview

- Provides a comprehensive system of HIV primary medical care, medications, and essential support services for low-income people with HIV.
- Funds grants to states, cities, counties, and local community-based organizations to improve health outcome and reduce HIV transmission.
  - Recipients determine service delivery and funding priorities based on local needs and planning process.
- Provided services to nearly 562,000 people in 2020—more than half of all people with diagnosed HIV in the United States.
- 89.4% of RWHAP clients receiving HIV medical care were virally suppressed in 2020, exceeding national average of 64.6%<sup>i</sup>.





i. Centers for Disease Control and Prevention. Core indicators for monitoring the Ending the HIV Epidemic initiative (early release): National HIV Surveillance System data reported through December 2020; and pre-exposure prophylaxis (PrEP) data reported through September 2020. HIV Surveillance Data Tables [Table 5a] 2021;2(No. 2). http://www.cdc.gov/hiv/library/reports/surveillance-data-tables/vol-2-no-2/index.html. Published March 2021.

## **Session Overview**

- Identify the steps within the grant life cycle management process for a RWHAP Part C Early Intervention Services (EIS) award.
- Review the role and responsibilities of recipients, Project Officer and Grants Management Specialist for all phases within the grant life cycle management process.
- Review critical terms and conditions within the RWHAP Part C EIS award.
- Recognize best practices to incorporate into the monitoring stage for successful program outcomes.











## **Introduction to Grant Cycle**



# **Grant Cycle: Planning & Announcement**

## **Program Official**

## Grants Management

- Develops Bureaufocused grant programs to meet the HRSA mission
- Prepares draft Notice of Funding Opportunity (NOFO)

Reviews NOFO

## Program & Grants

- Identifies timing & resources
- Conducts Technical Assistance webinar

## Applicant

- Reviews NOFO
- Participates in Technical Assistance webinar
- Submits application





# **Grant Cycle: Application Evaluation & Negotiation**

## Program Official/Project Officer

- Attends review meetings
- Provides clarification on program requirements during objective review process if needed

## Grants Management

- Attends review meetings
- Provides clarification on fiscal and administrative requirements and records reviewers budget notes
- Negotiates award start date
- Revises budget and terms of award

## Program & Grants

 Reviews applications to certify eligibility

## Division of Independent Review

- Conducts Review Meetings
- Issues Summary Statements





## Program Official

- Recommends applications for funding
- Identifies potential conditions of award

## Grants Management

- Reviews applications for administrative requirements
- Examines costs for allowability, consistent with programmatic requirements
- Develops the Notice of Award

## Recipient

- Reviews Notice of Award (NoA)
- Acts on Conditions of Award
- Meets reporting requirements
- Performs the project per the approved application
- Expends funds appropriately
- Reports as scheduled on progress to Project Officer
- Submits accurate and timely reports





## Now You Have the Award – Entering the Post Award Process

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			
0.5. DELAKTIMENT OF HERETT AND HOMAN SERVICES			
HRSA		Department of Health and Human Services Health Recourses and Services Administration	Notice of Award FAINI Federal Award Date: 08/10/2020
Health Resources & Services Administration	<b>X</b>	Recipient Information Fede	ral Award Information
		1. Recipient Name 11. Award Number	
HIV/AIDS Bureau Division of Community HIV/AIDS Programs		Longuestional District of Recipient     Of     Statutory Authority     Angenest System Identifier (ID)     Angenest System Identifier (ID)     Angenest System Identifier (ID)     Angenest System Identifier (ID)	Section 330 330, 42 U.S.C. 254b 3
Ryan White HIV/AIDS Program Part C Early Intervention Services Program: Existing Geographic Service Areas	AWARD	5. Data Universal Numbering System (DUNS) Public Health Service Act, Section Public Health Service Act, Section Section 330 of the Public Health	et, Section 330, 42 U.S.C. 254b, as amended 330, 42 U.S.C. 254b, as amended 330(e), 42 U.S.C. 254b envice Art, as amended (42 U.S.C. 254b, as amended) and
Funding Opportunity Numbers: HRSA-22-011, HRSA-22-014, HRSA-22-015		Section 330 of the Public Health	ection and Affordable Care Act (RL 111-148) iervice Act, as amended (42 U.S.C. 254b)
Funding Opportunity Numbers: HRSA-22-011, HRSA-22-014, HRSA-22-015 Funding Opportunity Type(s): New and Competing Continuation		Section 330 of the Public Health	330, as amended (42 U.S.C. 254b) iervice (PHS) Act, as amended (42 U.S.C. 254b, as amended)
Assistance Listings (CFDA) Number: 93.918		CEO Section su or the viulic Health @email.com Public Health Service Act, Section (000)000-000 and/or (i)))	ervice Act, as amended (42 U.S.C. 254b, as amended) 330(e), (g), (h), or (i),, as amended (42 U.S.C. 254b(e), (g), (h)
		Authorized Official     The Health Center Program is au     Service Act, as amended (42 U.S.	horized by Section 330(e), (g), (h) and/or (i) of the Public Health C. § 254b(e), (g), (h), and/or (i)). Specifically, IBHS supplemental
NOTICE OF FUNDING OPPORTUNITY		Federal Agency Information 14. Federal Award Project Title	ction 330(e
NOTICE OF FUNDING OFFORTUNITY		9. Awarding Agency Information Health Center Program 15. Assistance Listing Number	
Fiscal Year 2022		Health Resources and Services Administration 93.224	
		(000)000-000 16. Assistance Listing Program Little Community Health Centers	
Application Due Date: June 21, 2021		10. Program Official Contact Information 17. Award Action Type Administrative	
		Health Resources and Services Administration @email.com 18. Is the Award R&D?	
Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately! HRSA will not approve deadline extensions for lack of registration.		(000)000-000 No	
Registration in all systems, including SAM.gov and Grants.gov,		Summary Fede 19. Budget Period Start Date 04/c	ral Award Financial Information
may take up to 1 month to complete.		19. Budget Penod Start Date UA/C 20. Total Amount of Federal Fund	
		20a. Direct Cost Amount	
Issuance Date: March 29, 2021		20b. Indirect Cost Amount 21. Authorized Carryover	\$0.00
		21. Authorized Carryover 22. Offset	\$0.00
Hanna Endale		23. Total Amount of Federal Funds C	
Chief, Atlantic Branch		24. Total Approved Cost Sharing of	
Division of Community HIV/AIDS Programs (DCHAP)		25. Total Federal and Non-Federal	
E-mail: HEndale@hrsa.gov		26. Project Period Start Date 04/0 27. Total Amount of the Federal Awa	
Telephone: (301) 443-1326		Cost Sharing or Matching this Project	
		28. Authorized Treatment of Progra Addition	n Income
Authority: 42 U.S.C. §§ 300ff-51-67 and 300ff-121 (sections 2651-2667 and 2693 of the Public		29. Grants Management Officer – Si	gnature
Health Service (PHS) Act).		on 08/10/2020	
· · · · · ·		30. Remarks	



# **HRSA: Roles and Responsibilities**

## **Program Officials**

### Project Officer (PO or Program Official in EHB)

- Reviews terms and conditions of the Notice of Award
- Responsible for developing and defining overall programmatic objectives
- Monitors performance and provides technical assistance
- Provides recommendations to grants management staff on disposition of recipient requests
- Consults with the Grants Management Specialist on complex or questionable matters needing resolution for the recipient

### Branch Chief (Program Quality Controller or PQC in EHB)

- Provides a Mission-critical role in grants making processes that include:
  - Assisting in the development of NOFOs
  - Supervising staff in review of noncompeting and competing applications
  - Making funding recommendations
  - Assessing overarching recipient needs and issues that affect program implementation and
  - linforming the Office Director of recipient progress, issues, and trends.

## **Grants Managements**

### **Grants Management Officer (GMO)**

- Responsible for business management and other nonprogrammatic aspects
- Evaluates grant applications for administrative content and compliance with statutes, regulations, and guidelines
- Provides consultations and technical assistance to applicants and recipients
- Interprets grants policy and award administration
- Is the only official authorized to obligate HRSA's funds, change the funding, duration or other terms and conditions

### **Grants Management Specialist (GMS)**

- Ensures that the budget is reasonable, allocable, and allowable, and in accordance with HHS policy and the NOFO
- Acts on prior approval requests or for changes in the terms and conditions of award
- Provides consultation and technical assistance to applicants, recipients, and HRSA staff, on interpretation of Federal awards administration policies and provisions
- Administers, monitors, and closes out Federal awards.





# **Recipient: Roles and Responsibilities**

## Recipient

- Authorizing Organization Representative (AOR)
  - Authorized to act on behalf of the organization to do business with the federal government
  - Responsible for registering in systems (SAM.gov; Grants.gov; EHBs)
  - Assures compliance with Federal laws, regulations, certifications, and award terms
- Business Official
  - Accesses grant funds for project needs
  - Interacts with Payment Management System (PMS)





# **Recipient: Roles & Responsibilities**



- Program Director (PD)
  - Responsible for project performance, daily operations
  - Works closely with recipient organizational officials to ensure compliance with the financial and administrative aspect of the award
- Financial Reporting Administrator (FRA)
  - Confirms award expenditures are consistent with projects goals and objectives
  - Responsible for financial reporting on federal awards





# Payment Management / Roles & Responsibilities

## Payment Management System (PMS) Liaison Accountant

- Can be found at <u>Payment Management System (https://pms.psc.gov)</u>
  - Find your PMS Liaison Accountant
  - Select your state or territory
- The accountant reviews, approves, and monitors the drawdown of funds.
- Accountant can also provide you with payment reports and they oversee debt collection.



PMS HelpDesk 1-877-614-5533

PMSSupport@psc.hhs.gov



## Federal Awardee Performance and Integrity Information System (FAPIIS)

- FAPIIS and Mandatory Disclosure Requirements
  - Publicly accessible online database established to store data about recipients' qualification to receive awards
  - Several systems feed into FAPIIS, including The System for Award Management, Contractor Performance Assessment Reporting System, and Past Performance Information Retrieval System
  - FAPIIS impacts how federal agencies evaluate awardees
  - Data about awardees is stored in FAPIIS for five years





# Notice of Award (NoA)

- The legally binding document, issued by a Grants Management Officer (GMO) that:
  - 1. Notifies the recipient of the award of a grant;
  - 2. Contains or references all the terms and conditions of the grant and federal funding limits; and
  - 3. Provides the documentary basis for recording the obligation of federal funds in the agency accounting system.







# Let's Take a Closer Look at the Notice of Award!







# **Recipient Information**







# **Awarding Agency Contact Information**



# **Statutory Authority**

	Federal Award Information	Federal Award Information	
13. The Statutory Authority	Provides the citation or text referencing the authorizing legislation.	2 H76HA 29-00 12. Unique Federal Award Identification Number (FAIN) H76 13. Statutory Authority	
14. The Federal Award Project Title	Provides a brief, descriptive title of the recipient's activity or project associated with the grant application as submitted by the applicant, or as stated on the Federal award.	PY 2007 Part C of TTHE XXVI of the PHS Act, 42 U.S.C. section 300-F53 et seq. [as amended]). Sections 2651 and 2693 et seq., of the Public Health Service Act, as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 [RL 111-87] Sections 2651 - 2667 and 2693 of the Public Health Service Act (42 USC 300ff -51, and 121), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 [RL 111-87] Sections 2651 - 2667 and 2693 of the Public Health Service Act (42 USC 300ff -51, 67, and 121), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 [RL 111-87] Sections 2651 - 2667 and 2693 of the Public Health Service Act (42 USC 300ff -51-67, and 121), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 [RL 111-87] Sections 2651 - 2667 and 2693 of the Public Health Service Act (42 USC 300ff -51-67, and 121), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 [RL 111-87] Sections 2651 - 2667 and 2693 of the Public Health Service Act [42 USC 300ff -51-67, and 121], as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 [RL 111-87] Sections 2651 - 2667 and 2693 of the Public Health Service Act [42 USC 300ff -51-67, and 121], as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 [RL 111-87] Title XXVI of the Public Health Service Act, [42 USC 300ff -51-67] and section 2693 [42 USC. §300ff -121] of the Public Health Service Act, as amended by the IIV/AIDS Treatment Extension Act of 2009 [RL 111-87] Sections 2651 - 2667 of the Public Health Service Act, [42 USC §300ff -51-67] and section 2693 [42 USC. §300ff -121] of the Public Health Service Act, as amended by the IIV/AIDS Treatment Extension Act of 2009 [RL 111-87] Sections 2551 - 2667 of the Public Health Service Act, [42 USC §300ff -51-67] and section 2693 of the Public Health Service Act, as amended by the IIV/AIDS Treatment Extension Act of 2009 [RL 111-87] Sections 2551 - 2667 of the Public Health Service Act, [42 USC §300ff -51-67] and section 2693 of the	
15. The Assistance Listing Number	Provides the number assigned to a federal program in the Assistance Listings (formerly Catalog of Federal Domestic Assistance (CFDA))		
16. The Assistance Listing Program Title	Provides the title of the program under which the Federal award was funded in the Assistance Listings (formerly Catalog of Federal Domestic Assistance (CFDA))	44. U.S.C. 9 JOUIT-91, JOUIT-91  14. Federal Award Project Title Ryan White Part C Outpatient EIS Program  15. Assistance Listing Number  93.918  16. Assistance Listing Program Title Grants to Provide Outpatient Early Intervention Services with Respect to HIV Disease	
17. The Award Action Type	The type of activity that has been applied to the grant award.	17. Award Action Type Competing Continuation 18. Is the Award R&D? No	



# **Summary Federal Award Financial Information**

Financial Information		
20. Total Amount of Federal Funds Obligated by this Action	Provides the amount of funds obligated and/or de-obligated on each NoA. For a de-obligation and/or offset, the funds provided beside this data element will be surrounded in parentheses ().	
21. Authorized Carryover	Provides the unobligated federal funds remaining at the end of a budget period that may be carried forward to a subsequent budget period to cover allowable costs of that budget period as additional authorization.	
22. Offset	Provides the unobligated federal funds remaining at the end of a budget period that may be used to reduce the federal funding of a subsequent budget period by the excess amount.	
23. Total Amount of Federal Funds Obligated this Budget Period	Shows the funds obligated in the current budget period.	
25. Total Federal and Non-Federal Approved this Budget Period	The sum of the Total Amount of Federal Funds Obligated this Budget Period (NoA Cover Sheet Data Field# 23) and the Total Approved Cost Sharing or Matching, where applicable (NoA Cover Sheet Data Field# 24).	
26. Authorized Treatment of Program Income	Deduction, Addition, Cost Sharing and/or Matching.	





# **Budget Period Financial Information**

19. Budget Period Start Date XX/XX/XXXX – End Date XX/XX/XXXX			
20. Total Amount of Federal Funds Obligated by this Action	\$	0	
20a. Direct Cost Amount	\$	0	
20b. Indirect Cost Amount	\$	0	
21. Authorized Carryover	\$	0	
22. Offset	\$	0	
23. Total Amount of Federal Funds Obligated this budget period	\$	0	
24. Total Approved Cost Sharing or Matching, where applicable	\$	0	
25. Total Federal and Non-Federal Approved this Budget Period		0	





# **Project Period Financial Information**







## **Important Information in Your NoA**







## **Terms and Conditions**

#### Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

#### Grant Specific Term(s)

- This action reflects a new document number. Please refer to this number when contacting the Payment Management System or submitting drawdown requests. Reporting on the FFR (Federal Financial Report) SF 425-Federal Cash Transaction Report (FCTR) should reflect this number for all disbursements related to this project period.
- 45 CFR Part 75 applies to all federal funds associated with the award. Part 75 has been effective since December 26, 2014. All references
  to prior OMB Circulars for the administrative and audit requirements and the cost principles that govern Federal monies associated with this
  award are superseded by the Uniform Guidance 2 CFR Part 200 as codified by HHS at 45 CFR Part 75.
- 3. All post-award requests, such as significant budget revisions or a change in scope, must be submitted as a Prior Approval action via the Electronic Handbooks (EHBs) and approved by HRSA prior to implementation. Grantees under "Expanded Authority," as noted in the Remarks section of the Notice of Award, have different prior approval requirements. See "Prior-Approval Requirements" in the DHHS Grants Policy Statement: http://www.hrsa.gov/grants/hhsgrantspolicy.pdf
- 4. The funds for this award are in a sub-account in the Payment Management System (PMS). This type of account allows recipients to specifically identify the individual grant for which they are drawing funds and will assist HRSA in monitoring the award. Access to the PMS account number is provided to individuals at the organization who have permissions established within PMS. The PMS sub-account code can be found on the HRSA specific section of the NoA (Accounting Classification Codes). Both the PMS account number and sub-account code are needed when requesting grant funds. Please note that for new and competing continuation awards issued after 10/1/2020, the sub-account code will be the document number.

You may use your existing PMS username and password to check your organizations' account access. If you do not have access, complete a PMS Access Form (PMS/FFR Form) found at: https://pmsapp.psc.gov/pms/app/userrequest. If you have any questions about accessing PMS, contact the PMS Liaison Accountant as identified at:

http://pms.psc.gov/find-pms-liaison-accountant.html

5. This Part C Early Intervention Services program funding supports outpatient HIV primary care services targeted to low-income, vulnerable medically underserved people living with HIV for the following service area: Counties in

#### Program Specific Term(s)

- 1. Funds awarded for pharmaceuticals must only be spent to assist clients who have been determined not eligible for other pharmaceutical programs, especially the AIDS Drug Assistance Program and/or for drugs that are not on the State ADAP or Medicaid formulary.
- 2. The Ryan White HIV/AIDS Program legislation specifies criteria for the expenditure of Part C grant funds. After reserving funds for administration and clinical quality management, at least 75 percent of the remaining funds must be spent on Core Medical Services, which includes Early Intervention Services (EIS). At least 50 percent of the total funds awarded must be spent on Early Intervention Services. No more than 10 percent of the funds awarded may be spent on administrative costs, including planning and evaluation and excluding costs of a clinical quality management program. The remainder of the funds may be spent on support services, defined as those services needed for low income individuals with HIV/AIDS to achieve their medical outcomes.
- The recipient is required to establish and maintain a process for protecting client confidentiality throughout the project period. Client confidentiality requirements apply to all phases of the project.
- 4. Funding beyond this budget period is contingent upon the availability of appropriated funds for this program in subsequent fiscal years, recipient satisfactory performance, and a decision that continued funding is in the best interest of the Federal Government.
- 5. Consistent with Departmental guidance, HRSA grantees that purchase, are reimbursed or provide reimbursement to other entities for

- Legal requirements that the recipient must meet according to statute, regulation, or policy.
- Conditions specified in the NoA require a response from the recipient which is submitted through the EHBs and reviewed by the PO and GMS.
- The recipient indicates acceptance of the award and all terms and conditions of the award by drawing down funds from the Payment Management System.





## **Example Conditions of Award**

- Budget: Additional/Revised Information
  - Budget Form (SF-424)
  - Line Item Budget and Narrative Justification (specific items of cost)

### HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit

https://grants3.hrsa.gov/2010/WebEPSExternal/Interface/common/accesscontrol/login.aspx to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

#### **Terms and Conditions**

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Condition(s)

- 1. Due Date: Within 30 Days of Award Issue Date
- In consultation with your Project Officer, submit a revised work plan and budget with SF-424A.

#### Grant Specific Term(s)

 This Notice of Award is issued based on HRSA's approval of the Non-Competing Continuation (NCC) Progress Report. All previously conveyed terms remain in effect. All post-award requests, such as significant budget revisions or a change in scope, must be submitted as a Prior Approval action via the Electronic Handbooks (EHBs) and approved by HRSA prior to implementation. See 45 CFR §75.308 and "Prior-Approval Requirements" in the DHHS Grants Policy Statement:

http://www.hrsa.gov/grants/hhsgrantspolicy.pdf.





# Maintenance of Effort – RWHAP Part C Early Intervention Services (EIS)

Recipients must agree to maintain non-RWHAP Part C expenditures for early intervention services at a level equal to, but not less than the level of such expenditures maintained by the State for the fiscal year preceding the fiscal year for which the recipient is apply to receive a RWHAP Part C grant

Reference: Section 2664(d) of the Public Health Service Act





# Maintenance of Effort – RWHAP Part C Competitive Application

NON-FEDERAL EXPENDITURES		
Applicant's FY Prior to	Applicant's Current FY of	
Application (Actual)	Application (Estimated)	
Actual prior FY non-Federal	Estimated current FY non-Federal	
funds, including in-kind,	funds, including in-kind,	
expended for EIS activities	designated for EIS activities	
proposed in this application.	proposed in this application.	
Amount: \$	Amount: \$	





The maintenance of effort (MOE) requirement is important in ensuring that RWHAP funds are used to supplement existing expenditures for HIV-related care and treatment services and to prevent RWHAP Part C funds from being used to offset specific HIV-related budget reductions at the recipient level.

**Program Specific Term:** 15. These grant funds shall not be used to take the place of current funding for activities described in the application. Grantees must maintain non-Federal funding for HIV early intervention services at a level that is not less than expenditures for such activities during the fiscal year prior to receiving this grant.





# **NoA: Reporting Requirements**

- Federal Financial Report (FFR) SF-425
- Program Reporting Requirements
  - RWHAP Allocations Report
  - RWHAP Expenditure Report
  - Ryan White Services Report (RSR)
  - Non-Competing Continuation Progress Report (NCC)
  - Final Program Performance Report due at the end of the Project Period





# **Reporting Requirements**

### Reporting Requirement(s)

1. Due Date: Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due Quarter End Date after 90 days of reporting period.

The recipient must submit an annual Federal Financial Report (FFR). The report should reflect cumulative reporting within the project period of the document number. Effective October 1, 2020, all FFRs will be submitted through the Payment Management System (PMS). Technical questions regarding the FFR, including system access should be directed to the PMS Help Desk by submitting a ticket through the self-service web portal (PMS Self-Service Web Portal), or calling 877-614-5533.

The FFR will be due 90, 120, or 150 days after the budget period end date. Please refer to the chart below for the specific due date for your FFR.

- Budget Period ends August October: FFR due January 30
- Budget Period ends November January: FFR due April 30
- Budget Period ends February April: FFR due July 30
- Budget Period ends May July: FFR due October 30
- 2. Due Date: Within 90 Days of Budget End Date

Submit a Ryan White HIV/AIDS Program Expenditure Report by March 31, 2023.

3. Due Date: 03/27/2023

Submit the Ryan White Services Report (RSR) which consists of recipient, service provider, and patient level reports for the calendar year via the EHBs by 6:00 PM ET on the last Monday in March. See https://hab.hrsa.gov/program-grants-management/data-reporting-requirementsand-technical-assistance for additional information.

Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.





# **Allocation and Expenditure Report: PTR System**

## **RWHAP Parts C and D recipients must submit two program-specific reports to HRSA:**

- RWHAP Allocation Report
- RWHAP Expenditure Report



These reports serve as a reference to determine how recipients allocate and subsequently expend funds each budget period. It is important to note that the RWHAP annual allocation and expenditure reports do not serve as a source for determining the total amount of funds awarded and unspent by recipients.





# Ryan White HIV/AIDS Service Report (RSR)

- The RSR is an annual client-level data reporting requirement that monitors the characteristics of RWHAP recipients, providers, and clients served.
- The RSR is comprised of:
  - The Recipient Report
  - The Provider Report
  - The Client Report







# **Non-Competing Continuation Progress Report**

- Purpose: To evaluate the recipient's programmatic performance and permit them to continue and carry out their approved scope as submitted within their project period.
- Eligibility of funding recipient is dependent on:
  - Availability of appropriations
  - Compliance with terms and conditions
  - Progress and Performance (progress reports are required annually as part of the NCC process)
- NCC progress reports are due approximately 90 days before the start of the budget period.





# **Final Program Performance Report**

- The final report collects information relevant to program-specific goals and progress on strategies; core performance measurement data; impact of the overall project; the degree to which the 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 during the entire project period.
- A final report is due within 90 days after the project period ends.




## **Post-Award Monitoring**

#### Recipient

- Responsible for the oversight of the operations of the Federal award-supported activities
- Must monitor its activities under Federal awards to assure compliance with applicable Federal requirements and performance expectations are being achieved
- Timely responses to conditions and reporting requirements, as well as submission of Prior Approval requests, are a significant part of this requirement

#### PO

• Post award monitoring is a joint effort

GMS

• Names and contact information are on the Notice of Award







## It's All About Partnership

Recipient's Business Officials Program Director Grants Management Specialist Project Officer Branch Chief





# Monitoring

Joint Responsibility Between PO and GMS



# **PO and GMS Roles: Monitoring**

#### **PO: Program Issues**

- First point of contact on programmatic matter and provides technical advice
- Monitors the recipient's compliance with program requirements
- Monitors progress toward expected outcomes
- Reviews Budget Modifications and Prior Approvals

#### **GMS: Fiscal Issues**

- First point of contact on business and financial issues, including:
  - Federal awards
  - Post-award actions
  - Reviews and Approves Federal Financial Reports (FFRs)
  - Payment Management System (PMS)
  - Approves Prior Approval requests





## **Post Award Submissions: Prior Approval Requests**

- HRSA approval is required when Recipient has a change to certain aspects of the approved application
- Recipient submits request via EHBs
- Approval of the request is provided in the form of a revised NoA
- See 45 CFR §75.308

- Examples:
  - Budget Revisions
  - Key Personnel Changes
  - Work Scope Changes
  - Carryover Requests
  - No-cost Extension
  - Change in Recipient
  - Relinquishment







PO reviews request and sends recommendation to the PQC PQC reviews request and the PO recommendation and sends request to GMS GMS reviews request and PO's recommendation and makes final decision to approve/disapprov e request

If approved, HRSA issues a revised NOA to recipient

#### **Prior Approval Process in the EHBs**





# **Prior Approval Requests: Budget Revision**

#### **Budget Revisions Requiring Prior Approval:**

1. Cumulative transfers among direct cost budget categories (i.e., Personnel, Fringe, Travel, Equipment, Supplies, Contractual, etc.) for the current budget period exceed 25% of the total approved budget (which includes direct and indirect costs) for that budget period or \$250,000, whichever is less; or

2. Moving costs between funding categories would result in failure to meet the statutorily required distributions (e.g., exceeding the 10% of the award amount for admin, failure to allocate at least 75% of the remaining funds for Core Medical Services, etc.); or

3. Substantial changes are made to the approved work plan or project scope (e.g., changing the model of care, transferring substantive work from personnel to contractual); or

4. Recipient wants to purchase a piece of equipment that exceeds \$25,000 and was not included in the approved project budget/application.



#### **Prior Approval Requests: Name Change for Program Director**

#### **Required documents:**

- Letter of justification for name change on official organizational letterhead
  - Include effective date of change
  - Must be signed by an authorizing official
  - Brief note of the proposed candidate's grants management experience
- CV or Resume for the new Program Director





### **Prior Approval Requests: Changes in Program Scope**

**Required documents:** 

- Letter of justification for change in scope of work, provided on official organizational letterhead, signed by an authorizing official, including effective date of change
- Narrative justification to include how this change in scope will enhance the HIV services and the impact on the populations served.
- Re-budgeting documentation if appropriate





# **Prior Approval Requests: Carryover Requests**

- Unobligated balance may be carried over to the subsequent budget period
- Must submit budget documents for carryover funding only
- Use the same level of detail as is required in any other budget
- Must indicate intention to carryover funds in the FFR
- Must submit request within 30 days of submission of FFR
- Request should include:
  - Cover Letter requesting approval and the reason for the unobligated funds
  - SF-424A
  - Budget and Narrative Justification (specific items requested)
- Approval is at the discretion of program



# **Prior Approval Requests: No-Cost Extension**

- Extension of project period to complete approved activities
- Extension requests can be for up to 12 months
- Submit 60 days prior to end of project period; <u>must</u> be submitted prior to the end of the project period
- Cannot be used merely for the purpose of using unobligated balances
- Approval is at the discretion of program





#### **Prior Approval Requests: Relinquishment/Change in Recipient**

- Process used to transfer the legal and administrative responsibility for a funded project from one legal entity to another before the ending date of the approved period of performance.
- Program staff should meet with recipient to provide TA before a final decision is made.





# **Grant Cycle: Closeout**

#### **Program Official**

 Reviews final reports and other reporting requirements to ensure originally awarded purposes were accomplished

#### Grants Management

- Reviews final reports to ensure originally awarded purposes were accomplished and for adherence to requirements and terms of the award
- Reconciles final costs
- Determines final disposition amounts resulting in closing grant account

#### Recipient

- Submits final reports and other reporting requirements
- Accounts for all expenditures







### Closeout

- Purpose: To protect the Federal Government's financial interests
- Closeout procedures ensure that:
  - Final reports are received and evaluated
  - Allowable costs are determined
  - Amounts either due to the agency or the recipient are determined
  - Payment arrangements are made
- Two Types
  - Document closeout: End of a competitive segment of a federal award
  - Grant closeout: Recipient performance is completed or terminated







## **Components of a Grant Closeout**

- Final Federal Financial Report
  - Unliquidated obligations (costs incurred but not yet paid) should not be included in the final FFR
  - An extension of the report for 90 days must be requested by recipient if unable to liquidate valid obligations
- Final Progress or Performance Report
  - Due 90 days after grant period end date
  - Recipients that don't submit by the deadline can have awards held up in other program offices/bureaus or imposed as high risk
- Property Accountability
  - Recipients who purchased equipment greater than \$5K or have residual supplies must submit final inventory to HRSA





### **Closeout Process**



### **Best Practices for Success**

- Review your NoA and the NOFO throughout the life of the Project period
- Submit Accurate and Timely Reports
- Actively Participate in Monitoring Calls
- Work in Collaboration with your PO and GMS
- Showcase your program during Stakeholder calls
- As always HRSA is here to help you succeed!







# **Pondering**?







### **Teamwork Makes the Dream Work!**

**REMEMBER:** 

#### PO and GMS work in partnership to effectively provide assistance to You, the Recipient, and ultimately, the people we serve







#### Resources

**Shifts HIV/AIDS** Program





- Ryan White HIV/AIDS Program Recipient Resources: <u>https://ryanwhite.hrsa.gov/grants/manage/recipient-resources</u>
- Target HIV: <u>https://targethiv.org/</u>
- Grant Maintenance Information: <u>https://ryanwhite.hrsa.gov/grants</u>
- Policy Clarification Notices: <u>https://ryanwhite.hrsa.gov/grants/policy-notices</u>
- EHB Help and Knowledge Bases: https://help.hrsa.gov/display/public/EHBSKBFG/Index
- RWHAP Compass Dashboard: <u>https://targethiv.org/RWHAPCompass</u>
- RSR Data Report <u>www.TargetHIV.org/topics/RSR</u>









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- DCHAP, STTA Workgroup
- HIV/AIDS Bureau (HAB)
- Health Resources and Services Administration (HRSA)
- Web: <a href="mailto:ryanwhite.hrsa.gov">ryanwhite.hrsa.gov</a>





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Sign up for the Ryan White HIV/AIDS Program Listserv: <u>https://public.govdelivery.com/accounts/USHHSHRSA/signup/29907</u>





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