

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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

FUNDING OPPORTUNITY TITLE: Announcement of Availability of Funds for Family Planning Research and Data Analysis Cooperative Agreements

ACTION: Notice

ANNOUNCEMENT TYPE: COMPETITIVE COOPERATIVE AGREEMENT

ANNOUNCEMENT NUMBER:

CFDA NUMBER: 93.974

CFDA PROGRAM: Family Planning Service Delivery Improvement Research Grants

DATES: Non-binding letters of intent are due March 21, 2014, 5:00pm ET

Applications are due April 14, 2014 by 5 p.m. ET. To receive consideration, applications must be received by the HHS Office of the Assistant Secretary for Health (HHS/OASH), Office of Grants Management (OGM) no later than the applicable due date listed in this announcement (Section IV. 3, Submission Dates and Times) and within the time frames specified in the announcement. All applications for this funding opportunity must be submitted electronically through Grants.gov, and must be received by 5:00 PM Eastern Time on the applicable due date.

All applicants must submit in this manner unless they obtain a written exemption from this requirement 48 hours in advance of the deadline by the Director, HHS/OASH Office of

Grants Management. Applicants must request an exemption in writing via email from the HHS/OASH Office of Grants Management, and provide details as to why they are technologically unable to submit electronically through Grants.gov portal. Note: failure to have an active System for Account Management (SAM) registration will not be grounds for receiving a waiver to the electronic submission requirement. If requesting a waiver, include the following in the e-mail request: the HHS/OASH announcement number; the organization's DUNS number; the name, address and telephone number of the organization; the name and telephone number of the Project Director; the Grants.gov Tracking Number (GRANTXXXX) assigned to the submissions; and a copy of the "Rejected with Errors" notification from Grants.gov. Send the request to ogm.oash@hhs.gov.

The HHS/OASH Office of Grants Management will only accept paper applications from applicants that received prior written approval. However, the application must still be submitted by the deadline. No other submission mechanisms will be accepted. Applications which do not meet the specified deadlines will be returned to the applicant unread. See the heading "**APPLICATION and SUBMISSION INFORMATION**" for information on application submission mechanisms.

To ensure adequate time to successfully submit the application, HHS/OASH recommends that applicants register immediately in Grants.gov since the registration process can take up to one month. For information on registering for Grants.gov, refer to <http://www.grants.gov> or contact the Grants.gov Contact Center 24 hours a day, 7 days a week (excluding Federal holidays) at 1-800-518-4726 or support@grants.gov.

Applicants are strongly encouraged to register multiple authorized organization representatives.

EXECUTIVE SUMMARY:

The Office of Population Affairs announces the anticipated availability of funds for Fiscal Year (FY) 2014 for a cooperative agreement program for family planning research. This notice solicits applications for competing cooperative agreement awards to collect and analyze data on issues of interest to the family planning field.

Title X of the Public Health Service Act, 42 U.S.C. 300, *et seq.*, authorizes programs related to family planning. Section 1004 of the Act, as amended, authorizes the Secretary of Health and Human Services to award grants to entities for research in the biomedical, contraceptive development, behavioral, and program implementation fields related to family planning and population. Regulations pertaining to grants for research projects are set out at 42 CFR part 52.

I. FUNDING OPPORTUNITY DESCRIPTION:

This Funding Opportunity Announcement (FOA) issued by the Office of Population Affairs (OPA) encourages grant applications from public or non-profit private entities to conduct research on selected topic areas in the field of family planning. The purpose is to support data collection and analysis which has broad generalizability to family planning centers across the US and will provide information on the changes happening in the field of family planning to help improve the delivery of family planning services offered under Title X of the Public Health Service Act.

Background

The Title X program is designed to provide comprehensive family planning and related preventive health services with priority given to persons from low income families. Section 1004 of the Public Health Service Act authorizes the Secretary to “make grants to public or nonprofit private entities...for projects for, research in the...program implementation fields related to family planning and population.” This section authorizes funding for projects to conduct data analysis and related research and evaluation on issues of interest to the family planning field, as well as research into specific topic areas related to service delivery improvement. This FOA solicits applications to collect and evaluate data to understand the status and changes occurring in publicly funded family planning services (including Title X centers) as a result of broader health system changes. The information will help family planning centers across the U.S improve their service delivery programs.

Data are needed to understand the changing healthcare system and the impact that such changes have on the populations currently served by Title X. The number of women in need of publicly funded contraceptive services increased by 17% between 2000 and 2010. Estimates show that 37 million were in need of contraceptive services in 2010 and of these, 19.1 million women were in need of publicly funded services because they had incomes below 250% of the federal poverty level or were younger than age 20.¹ Public spending for family planning totaled \$2.37 billion in FY 2010 with Title X accounting for 10% of all expenditures.² Publicly funded family planning services help women avoid 2.2 million unintended pregnancies,² which have been linked to adverse outcomes in pregnancy, infant mortality and morbidity, and long term

¹ Frost, Jennifer, Zolna, Mia, Frohwirth, Lori. *Contraceptive Needs and Services 2010*. Guttmacher Institute. July 2013. Available at: <http://www.guttmacher.org/pubs/win/contraceptive-needs-2010.pdf> Accessed: February 18, 2014.

² Guttmacher Institute. *Facts on Publicly Funded Contraceptive Services in the United States*. July 2013. Available at: http://www.guttmacher.org/pubs/fb_contraceptive_serv.html Accessed: February 18, 2014

child and parental health. Data are needed to track trends in family planning services based on the changing healthcare system. Data will be used by family planning service providers and other stakeholders to improve the delivery of family planning services.

OPA has the following specific research priorities and is requesting applications that will specifically address these areas.

1) Provide an analysis of the current services provided by family planning centers across the U.S and how services are changing.

As a result of broader health system changes, a greater number of traditional family planning clients will have health insurance for a broad array of health services, including primary care. Family planning providers need to understand the types of services that can be provided in traditional family planning settings. Thus they need information on;

- What services family planning centers are providing. If existing centers have expanded services, what new services are they providing? Specifically, what are the types of preventive services that are provided?
- In the last 1-3 years, have there been changes in the way services are provided? What are the range of services offered onsite versus by referral?
- What are the contraceptive methods offered onsite versus by referrals?
- Are there differences by type of provider (for example health department, community health center, private non-profit, etc.) and services that are offered?

There is also increasing competition in the health care system among various types of providers. Thus Title X providers need to understand what services are provided in other

publicly funded family planning centers and understand whether Title X centers offer services differently from non-Title X centers.

Further, given the changing health system, family planning providers need to understand to what extent family planning centers are the usual source of care for women.

2) Provide an analysis of the long-term sustainability of family planning providers and how family planning providers are being funded:

Many publicly funded family planning centers are questioning whether their programs can be sustained long term. Therefore, an analysis of how family planning centers are assuring long term sustainability is needed. Are centers that traditionally deliver family planning services planning to stay in business long term? Are centers changing the way they do business and if so, how are they changing their business model or what infrastructure or service improvements are they making to assure long term sustainability?

Family planning providers also need to understand how much funding is available for family planning. Data is needed on the amount of public funding available for family planning services. These data help stakeholders understand changing revenue streams for family planning.

Further, data is needed on how many women continue to require Title X and other publicly funded family planning services and how many of these women continue to be served in publicly funded family planning centers by State and by county (including Title X-funded and non-Title X-funded centers).

3) Provide an analysis of the changes in the insurance status of women of reproductive age.

Title X providers need to know how insurance status for women of reproductive age is changing so they can appropriately plan their own operations. Thus, they need information on the changes in health insurance status of women of reproductive age in the U.S in the past 1-3 years and how health insurance status for women of reproductive age differs across States.

4) Provide an analysis of how women use contraception.

Family planning providers need to be aware of how women use contraception and, for women of reproductive age, how contraceptive use has changed over the past 1-5 years. To what extent have there been changes in whether women pay for contraceptive services? Changes in the health insurance market will allow many women to receive contraception without cost sharing. Title X providers need to understand whether contraceptive service utilization, including (but not limited to) method choice, or cost sharing has changed in the last 1-5 years.

The application should comprehensively address at least two of the priority areas above but as many as possible. Indicate whether new data will be collected or existing data sources will be used. The applicant should outline the frequency of any particular proposed analyses (i.e., continuously, annually, biennially, or once) during the five- year project period of this cooperative agreement, describe the methodologies to be used, and propose a plan to make accessible the products of this project to the audience intended, (i.e., administrators, providers and researchers).

As a cooperative agreement, OPA will have substantial involvement, as outlined in section II.

AUTHORITY: Section 1004 of the Public Health Service Act (42 U.S.C. 300a-2)

II. AWARD INFORMATION

The Office of Population Affairs intends to make available approximately \$800,000 for up to 2 competing cooperative agreements. Awards will range from \$200,000 to \$400,000 per year. Grants will be funded in annual increments (budget periods) and may be approved for a project period of up to five years. Funding for all budget periods beyond the first year of the grant is contingent upon the availability of funds, satisfactory progress of the project, and adequate stewardship of federal funds.

The administrative and funding instrument used for this program will be a cooperative agreement, an "assistance" mechanism (rather than an "acquisition" mechanism), in which substantial OPA programmatic involvement with the awardees is anticipated during the performance of the activities. Under the cooperative agreement, the OPA purpose is to support and stimulate the recipients' activities by involvement in and otherwise working jointly with the award recipients in a partnership role; it is not to assume direction, prime responsibility, or a dominant role in the activities. Consistent with this concept, the dominant role and prime responsibility resides with the awardees for the project as a whole, although specific tasks and activities may be shared among the awardees and OPA as defined below.

The Project Director (PD) will have the primary responsibility for:

- Determining and coordinating the data collection approaches and procedures, analyzing and interpreting research data generated under this award.
- Meeting or exceeding the timeline stated in the application.

- Providing briefings to OPA staff and attend meetings as needed to consult on project activities.
- Ensuring that results are published and disseminated in a timely manner.
- Awardees will retain custody of and have primary rights to the data and software developed under these awards, subject to Government rights of access consistent with current HHS regulations and policies.

OPA staff will have substantial programmatic involvement that is above and beyond the normal stewardship role in awards, as described below. The Project Officer (PO) assigned to this award will be responsible for:

- Providing scientific and programmatic stewardship and guidance.
- Reviewing progress reports and other documents from the awardees and providing advice on the progress being made by the awardee as well as about progress being made by others in the field.

Areas of Joint Responsibility include:

- The PO will work with the PD in prioritizing identified research activities proposed and/or identifying additional research topics or approaches. Other research, changing conditions, or new priorities may cause some activities proposed, particularly for the later years of this project, to be superseded in importance, and may necessitate modifications in actual work plans. This reprioritization will be negotiated between the PD and PO.

In all cases, the role of OPA staff will be to assist and facilitate, but not to direct activities.

Award Information

Estimated Funds Available for Competition: \$800,000

Anticipated Number of Awards: 1-2

Range of Awards: \$200,000 - \$400,000

Anticipated Start Date: 07/01/2014

Period of Performance: Not to exceed 5 years

Budget Period Length: 12 months

Type of Award: Cooperative Agreement

Type of Application Accepted: Electronic via Grants.gov **ONLY unless a waiver is granted**

III. ELIGIBILITY INFORMATION

1. Eligible Applicants

Any public or private nonprofit entity located in a State (which includes one of the 50 United States, District of Columbia, Commonwealth of Puerto Rico, U.S. Virgin Islands, Commonwealth of the Northern Mariana Islands, American Samoa, Guam, Republic of Palau, Federated States of Micronesia, and the Republic of the Marshall Islands) is eligible to apply for a grant under this announcement. Faith-based organizations and American Indian/Alaska Native/Native American (AI/AN/NA) organizations are eligible to apply for this family planning research cooperative agreement. Private nonprofit entities must provide proof of nonprofit status. See Section IV.2 for information regarding acceptable proof of nonprofit status.

2. Cost Sharing or Matching

No cost sharing or matching is required.

3. *Responsiveness and Screening Criteria*

Applications will be reviewed to determine whether they meet the following responsiveness criteria. Those that do not meet the criteria below will be administratively eliminated from the competition and will not be reviewed.

The applicant:

- The application must demonstrate a clear relationship to one or more of the FOA research priority areas by specifically stating in the abstract which focus area(s) are to be addressed. Applications that lack a clear relationship to the FOA focus areas will not be considered for funding.

Application Screening Criteria

All applications will be screened to assure a level playing field for all applicants. Applications that fail to meet the screening criteria described below will **not** be reviewed and will receive **no** further consideration.

1. Applications must be submitted electronically via www.grants.gov (unless a waiver has been granted) by April 14, 2014, 5:00pm ET.
2. The Project Narrative section of the application must be double-spaced, on the equivalent of 8 ½" x 11" inch page size, with 1" margins on all sides (top, bottom, left and right) and font size not less than 12 points.
3. The Project Narrative must not exceed 40 pages. NOTE: The following items do not count toward the page limit: required forms, including SF 424 and SF 424A, Budget justification and/or budget narrative.
4. Total application must not exceed 80 pages. Proposed budget does not exceed maximum indicated in Range of Awards.

5. The application has met the **Application Responsiveness Criteria** outlined above.

IV. APPLICATION AND SUBMISSION INFORMATION

1. Information to Request Application Package

Application kits may be obtained electronically by accessing Grants.gov at <http://www.grants.gov/>. If you have problems accessing the application or difficulty downloading, contact:

Grant Operations Center, Office of Grants Management Operations Center, telephone 1-888-203-6161, or email ASH@LCGnet.com.

2. Content and Form of Application Submission

Letter of Intent

Prospective applicants are asked to submit a letter of intent as early as possible, but no later than **5:00 p.m. Eastern Time on March 21, 2014**. Although a letter of intent is not required, is not binding, and does not enter into the review of a subsequent application, the information that it contains allows HHS/OASH staff to estimate the potential review workload and plan the review. The letter of intent should be sent to the address listed under the AGENCY CONTACTS section below. The letter of intent should include a descriptive title of the proposed project, the name, address and telephone number for the designated authorized representative of the applicant organization, and the FOA number and title of this announcement.

Applications

Applications must be prepared using forms and information provided in the online application kit.

The application narrative must be limited to no more than 40 double-spaced pages, and the total application, including appendices, may not exceed the equivalent of 80, 8 ½” x 11” pages when printed by HHS/OASH/OGM.

The applicant should use an easily readable typeface, such as Times New Roman or Arial, 12-point font. Tables may single spaced and use alternate fonts but must be easily readable. The page limit does not include budget, budget justification, required forms, assurances, and certifications. All pages, charts, figures, and tables should be numbered, and a table of contents provided. Applications that exceed the specified limits of 80 pages when printed by HHS/OASH/OGM will be deemed non-responsive and will not be considered. It is recommended that applicants print out their applications before submitting electronically to ensure that they are within the page limit.

Appendices may include curriculum vitae, organizational structure, examples of organizational capabilities, or other supplemental information which supports the application. Brochures and bound materials should not be submitted. Appendices are for supportive information only and should be clearly labeled. All information that is critical to the proposed project should be included in the body of the application. Appendices created for the application should use the formatting required for the narrative. Appendices from other sources and documents may use other formatting but must be easily readable.

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

1. A reference to the Applicant organization’s listing in the Internal Revenue Service’s (IRS) most recent list of tax-exempt organizations described in the IRS code;

2. A copy of a currently valid IRS tax exemption certificate;
3. A statement from a State taxing body, State attorney general, or other appropriate State official certifying that the applicant organization has a nonprofit status and that none of the net earnings accrue to any private shareholders or individuals; or
4. A certified copy of the organization's certificate of incorporation or similar document that clearly establishes nonprofit status.

For local, nonprofit affiliates or State or national organizations, a statement signed by the parent organization indicating that the applicant organization is a local nonprofit affiliate must be provided in addition to any one of the above acceptable proof of nonprofit status.

Applications must include an abstract of the proposed project. The abstract will be used to provide reviewers with an overview of the application, and will form the basis for the application summary in grants management documents.

The HHS Office of the Assistant Secretary for Health (HHS/OASH) requires that all applications be submitted electronically via the Grants.gov portal unless a waiver has been granted. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, *will not* be accepted for review.

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

Applications will not be considered valid until all electronic application components are received by the HHS/OASH Office of Grants Management according to the deadlines specified above. Application submissions that do not adhere to the due date requirements will be considered late and will be deemed ineligible.

Applicants are encouraged to initiate electronic applications early in the application development process. This will aid in addressing any problems with submissions prior to the application deadline. Any files uploaded or attached to the Grants.gov application must be of the following file formats – Microsoft Word, Excel or PowerPoint, Adobe PDF, or image formats (JPG, GIF, TIFF, or BMP only). Even though Grants.gov allows applicants to attach any file format as part of their application, HHS/OASH restricts this practice and only accepts the file formats identified above. Any file submitted as part of the Grants.gov application that is not in a file format identified above will not be accepted for processing and will be excluded from the application during the review process. The application must be submitted in a file format that can easily be copied and read by reviewers. It is recommended that scanned copies not be submitted through Grants.gov unless the applicant confirms the clarity of the documents. Pages cannot be reduced resulting in multiple pages on a single sheet to avoid exceeding the page limitation. All documents that do not conform to the above will be excluded from the application during the review process.

A. Important Grants.gov Information

Electronic submission via Grants.gov is a two-step process. Upon completion of a successful electronic application submission via the Grants.gov Website Portal, the applicant will be provided with a confirmation page from Grants.gov indicating the date and time (Eastern Time) of the electronic application submission, as well as the Grants.gov Receipt Number. It is critical that the applicant print and retain this confirmation for their records, as well as a copy of the entire application package.

All applications submitted via the Grants.gov Website Portal then will be validated by Grants.gov. Any applications deemed “Invalid” by the Grants.gov Website Portal will not be

transferred to HHS/OASH, and HHS/OASH has no responsibility for any application that is not validated and transferred to HHS/OASH from the Grants.gov Website Portal. Grants.gov will notify the applicant regarding the application validation status.

You will initially receive a notice that your application has been received by Grants.gov and is being validated. Validation may take up to 2 business days. You will receive a notice via email when your application has been validated by Grants.gov and is ready for the HHS/OASH to retrieve and review. If your application fails validation it will **not** be accepted for review. Therefore, **you should submit your electronic application with sufficient time to ensure that it is validated in case something needs to be corrected.**

Applicants should contact Grants.gov with any questions or concerns regarding the electronic application process conducted through the Grants.gov Website Portal.

- You may access the electronic application for this program on <http://www.grants.gov>. You must search the downloadable application page by the Funding Opportunity Number or CFDA number.
- At the <http://www.grants.gov> website, you will find information about submitting an application electronically through the site, including the hours of operation. HHS/OASH strongly recommends that you do not wait until the application due date to begin the application process through <http://www.grants.gov> because of the time involved to complete the registration process.
- Since October 1, 2003, the Office of Management and Budget has required applicants to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal grants or cooperative agreements. It is entered on

the SF 424. It is a unique, nine-digit identification number, which provides unique identifiers of single business entities. The DUNS number is *free and easy* to obtain.

- Organizations can receive a DUNS number at no cost by calling the dedicated toll-free DUNS Number request line at 1-866-705-5711 or by using this link to access a guide: https://www.whitehouse.gov/omb/grants/duns_num_guide.pdf. Instructions are also available on the Grants.Gov web site as part of the registration process.
- All applicants must register in the System for Account Management (SAM) (formerly the Central Contractor Registry (CCR)). You should allow a minimum of five days to complete the SAM registration. Grants.gov will reject submissions from applicants with nonexistent or expired SAM Registrations. You can register with the SAM online and it will take about 30 minutes (<http://sam.gov>.)

You must renew your SAM registration each year. Organizations registered to apply for Federal grants through <http://www.grants.gov> will need to *renew* their registration with the SAM. It may take 24 hours or more for updates to take effect, so potential applicants should ***check for active registration well before the application deadline.***

- Effective October 1, 2010, HHS requires all entities that plan to apply for and ultimately receive Federal grant funds from any HHS Operating/Staff Division (OPDIV/STAFFDIV) or receive sub-awards directly from the recipients of those grant funds to:

1. Be registered in the SAM prior to submitting an application or plan;

2. Maintain an active SAM registration with current information at all times during which it has an active award or an application or plan under consideration by an OPDIV; and
3. Provide its DUNS number in each application or plan it submits to the OPDIV.

An award cannot be made until the applicant has complied with these requirements. At the time an award is ready to be made, if the intended recipient has not complied with these requirements, the OPDIV/STAFFDIV:

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

Additionally, all first-tier sub-award recipients must have a DUNS number at the time the sub-award is made.

- You must submit all documents electronically, including all information included on the SF-424 and all necessary assurances and certifications.
- Prior to application submission, Microsoft Vista and Office 2007 users should review the <http://www.grants.gov> compatibility information and submission instructions provided at <http://www.grants.gov> (click on “**Vista and Microsoft Office 2007 Compatibility Information**”).
- Your application must comply with any page limitation requirements described in this Program Announcement.

- Valid file names may only include the following **UTF-8 characters**:

B. Application Content

Successful applications will contain the following information:

Project Narrative

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

The components of the Project Narrative counted as part of the 40 page limit include:

- Summary
- Problem Statement
- Goal(s) and Objective(s)
- Proposed Methodology
- Evaluation
- Dissemination
- Organizational Capability and Project Management

Summary: This section should include a brief - no more than one page, description of the proposed project, including: goal(s) and objectives, methodology, outcomes, and products to be developed.

Problem Statement: This section should describe, in both quantitative and qualitative terms, the nature and scope of the specific and particular problem or issue, and the proposed intervention it is designed to address. It should describe the importance and uses of any proposed data collection and/or analysis. It should detail how the project will potentially affect the targeted population, specific subgroups within those populations, and other interested stakeholders as identified. It is recommended that the applicant focus the problem statement on the specific aspects of the history, extant literature, current status, and policy considerations bearing on the field of family planning or the Title X program.

Goals and Objectives: This section should consist of a description of the project's goal(s) and major objectives. The need for, and importance of, these goals/objectives should be clearly articulated in the section above (problem statement).

Proposed Methodology: This section should provide a clear and concise description of the methodology to be used to address the need identified in the program announcement and the problem described in the "Problem Statement" above. Applicants are expected to explain the rationale for using a particular methodology and to present a clear connection between identified gaps and needs and the proposed activities. Proposals should detail the nature of all data collection or data analysis activities including the frequency of collection or analysis. Also note any major barriers you anticipate encountering and how your project will be able to overcome those barriers. At a minimum, applicants should:

1. Indicate why the chosen methodology for analysis of existing data or collection of new data is appropriate to answer the research questions of interest to OPA.
2. Provide detailed descriptions of the specific methodology to be used. If existing data will be analyzed, indicate the specific datasets to be used, and how you are contributing new analysis. If a new data collection is proposed, describe how the data will be collected, the target population, the timeline for data collection etc.
3. If the proposed methodology will require review from an Institutional Review Board (IRB), the applicant must detail the process and timeline for IRB review and approval. This activity should also be included in the workplan.
4. Provide specifics about the expected outcomes (including sample size to be collected or analyzed), and barriers for all anticipated years of the grant. Applicants must describe how they envision the project will benefit the field at large. List all measurable outcomes that are discussed and include it in the work plan.

Note: A “measurable outcome” is an observable end-result that describes how a particular intervention benefits either the Title X program, publicly funded family planning centers, or the women in need of publicly funded family planning. It demonstrates the “impact” of the data analysis/collection. You should keep the focus of this section on describing *what* outcome(s) will be produced by the project. You should use the Evaluation section noted below to describe *how* the outcome(s) will be measured and reported.

If subrecipients will be used, describe the role and makeup of potential subrecipients intended to be involved in completing specific tasks, and identify the percentage of level of effort subrecipients are anticipated to provide in completing programmatic activities.

Evaluation: This section should describe the methods that you will use to evaluate whether or not the proposed activities achieve the measurable outcome(s) and assess and evaluate the impact of activities for which you are applying. You should describe the quantitative and qualitative tools and techniques that you will employ to measure the outcome(s) and how you will identify and document the “lessons learned.”

Dissemination: This section should describe the method that will be used to disseminate the project’s results and findings in a timely manner and in easily understandable formats to the target audience, the general public, and other parties who might be interested in using the results of the project. All appropriate findings and products may be posted on a HHS/OASH sponsored website as determined by the HHS/OASH. Therefore, applicants should propose other innovative approaches to informing parties who might be interested in using the results of the project to inform practice, service delivery, program development, and/or policy-making, especially to those parties who would be interested in replicating the project. HHS/OASH expects that nationwide dissemination of products and knowledge will occur.

Organizational Capability and Project Management: Each application must include an organizational capability statement and vitae for key project personnel. The organizational capability statement should describe how the applicant agency (or the particular division of a larger agency which will have responsibility for this project) is organized, the nature and scope of its work, and the capabilities it possesses. This description should cover capabilities of the applicant agency not included in the program narrative, such as any current or previous relevant experience and/or the record of the project team in preparing cogent and useful reports, publications, and other products. This section should also describe prior experience with

conducting similar work, specifically in the field of family planning. If appropriate, include an organization chart showing the relationship of the project to the current organization. Neither curriculum vitae nor an organizational chart will count towards the narrative page limit.

Also include information about any contractual and/or supportive staff/organization(s) that will have a secondary role(s) in implementing the project and achieving project goals or the methodology and process for how they will be identified.

This section should also include a clear delineation of the roles and responsibilities of project staff and subrecipients and how they will contribute to achieving the project's objectives and outcomes. It should specify who would have day-to-day responsibility for key tasks such as: leadership of project; monitoring the project's on-going progress; preparation of reports; and communications with other partners and HHS/OASH. It should also describe the approach that will be used to monitor and track progress on the project's tasks and objectives. HHS/OASH expects that, throughout the grant period, the Project Director will have involvement in, and substantial knowledge about, all aspects of the project.

Work Plan

The Project Work Plan should reflect, and be consistent with, the Project Narrative and Budget, and must cover all five years of the proposed project period. However, each individual year's activities should be fully attainable in one budget year. Multi-year activities may be proposed, as well as activities that build upon each other, but each phase of the project must be discrete and attainable within a single budget year. The Work Plan should include a statement of the project's overall goal, anticipated outcome(s), key objectives, and the major tasks, action steps, or products that will be pursued or developed to achieve the goal and outcome(s). For each major task of each year, action step, or product, the work plan should identify the

timeframes involved (including start- and end-dates), and the lead person responsible for completing the task. Note: the work plan can be single spaced and in a narrative or table format.

Letters of Commitment from Subrecipient Organizations and Agencies

Letters of Commitment are required for each organization and entity that has been specifically named as a subrecipient to carry out any aspect of the project. The signed letters of commitment *must detail* the specific role and resources that will be provided, or activities that will be undertaken, in support of the applicant. The organization’s expertise, experience, and access to the targeted population(s) should also be described in the letter of commitment.

Letters of commitment are not the same as letters of support. Letters of support are letters that are general in nature that speak to the writer’s belief in the capability of an applicant to accomplish a goal/task. Letters of support also may indicate an intent or interest to work together in the future, but they lack specificity. Applicants should NOT provide letters of “support,” and letters of support such as this will be removed from the application package and not considered during the review.

Budget Narrative/Justification

A combined multi-year Budget Narrative/Justification, as well as a detailed Budget Narrative/Justification for each year of potential grant funding is required. *Please Note:* Because the proposal must demonstrate a clear and strong relationship between the stated objectives, project activities, and the budget, the budget justification should describe the *cost estimated per proposed project, activity, or product*. This budget justification should define the amount of work that is planned and expected to be performed and what it will cost.

3. Submission Dates and Times

The deadline for the submission of applications under this Program Announcement is **5:00 p.m. Eastern Time on April 14**. Applications must be submitted by that date and time.

Applications that fail to meet the application due date will not be reviewed and will receive no further consideration. You are strongly encouraged to submit your application a minimum of 3-5 days prior to the application closing date. Do not wait until the last day in the event you encounter technical difficulties, either on your end or with <http://www.grants.gov>. Grants.gov can take up to 48 hours to notify you of a successful submission.

Unsuccessful submissions will require authenticated verification from <http://www.grants.gov> indicating system problems existed at the time of your submission. For example, you will be required to provide an <http://www.grants.gov> submission error notification and/or tracking number in order to substantiate missing the cut off date.

Grants.gov (<http://www.grants.gov>) will automatically send applicants a tracking number and date of receipt verification electronically once the application has been successfully received and validated in <http://www.grants.gov>.

4. Intergovernmental Review

This program is not subject to the Intergovernmental Review requirements of Executive Order 12372, "Intergovernmental Review of Federal Programs," as implemented by 45 CFR Part 100.

5. Funding Restrictions

The allowability, allocability, reasonableness and necessity of direct and indirect costs that may be charged to HHS/OASH grants are outlined in the following documents: 2 CFR § 220 (OMB Circular A- 21, for Institutions of Higher Education); 2 CFR § 225 (OMB Circular A-87, for State, Local, and Indian Tribal Governments); 2 CFR § 230 (OMB Circular A-122, for Nonprofit Organizations); and 45 CFR part 74, Appendix E (Hospitals). Copies of the Office of Management and Budget (OMB) Circulars are available on the Internet at <http://www.whitehouse.gov/omb/circulars/>.

In order to claim indirect costs as part of a budget request, an applicant must have an indirect cost rate which has been negotiated with the Federal Government. The Health and Human Services Division of Cost Allocation (DCA) Regional Office that is applicable to your State can provide information on how to receive such a rate. A list of DCA Regional Offices is included in the application kit for this announcement.

Salary Limitation:

The Consolidated Appropriations Act, 2014 (P.L. 113-76) limits the salary amount that may be awarded and charged to HHS/OASH grants and cooperative agreements. Award funds should not be budgeted to pay the salary of an individual at a rate in excess of Executive Level II. Currently, the Executive Level II salary of the Federal Executive Pay scale is \$181,500. This amount reflects an individual's base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to the applicant organization. This salary limitation also applies to sub-awards/subcontracts under an HHS/OASH grant or cooperative agreement.

As an example of the application of this limitation: If an individual’s base salary is \$350,000 per year plus fringe benefits of 25% (\$87,500) and that individual is devoting 50% of their time to this award, their base salary should be adjusted to \$181,500, their direct salary would be \$90,750 (50% FTE), fringe benefits of 25% would be \$22,687.50, and a total of \$113,437.50 may be included in the project budget and charged to the award in salary/fringe benefits for that individual. See the breakdown below:

Individual’s <i>actual</i> base full time salary: \$350,000	
50% of time will be devoted to project	
Direct salary	\$175,000
Fringe (25% of salary)	\$43,750
Total	\$218,750
Amount that may be claimed on the application budget due to the legislative salary limitation:	
Individual’s base full time salary <i>adjusted</i> to Executive Level II: \$181,500	
50% of time will be devoted to the project	
Direct salary	\$90,750
Fringe (25% of salary)	\$22,687.50
Total amount	\$113,437.50

Appropriate salary limits will apply as required by law.

6. Other Submission Requirements

If human subjects are involved, the project must be in compliance with the Department of Health and Human Services (HHS) regulations for protection of human subjects (45 CFR Part

46), as applicable (<http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html>). Applicants should describe plans for obtaining Institutional Review Board (IRB) approval if needed.

V. APPLICATION REVIEW INFORMATION

1. Criteria

Eligible applications will be assessed according to the following criteria:

The award decision will take into account the extent to which the organization’s proposal represents a comprehensive plan for developing data analyses, estimates and assessments useful to planners and providers of family planning services, local, State and Federal administrators and researchers in the areas of family planning and population studies, according to the following criteria. The matrix below provides the review criteria and the points assigned to each criterion, as well as the suggested section of the narrative where the criteria should be addressed.

Review Criteria and Points	Suggested Narrative Section where criteria should be addressed.
1. The scientific merit and significance of the project. (5 points)	Problem Statement
2. The extent to which the proposal addresses OPA priorities listed in this FOA. (15 points)	Goal(s) and Objective(s)
3. The extent to which the proposal presents a coherent and well-justified plan for data analysis and research for the 5 year term of the cooperative agreement. (10 points)	Proposed Methodology Evaluation
4. The extent to which the application reflects a good understanding of the systems for provision of family planning services in the United States and familiarity with data systems and relevant research.	Proposed Methodology
5. The feasibility of the project and the likelihood of its producing meaningful results within the proposed project period. (25 points)	

6. The extent to which the applicant organization demonstrates in the application its ability to analyze data and make these analyses accessible to providers, planners, administrators and researchers in the area of family planning. (15 points)	Dissemination
7. The extent to which the organization demonstrates having the necessary experience, and expertise, to complete the research proposed.	Organizational Capability and Project Management
8. The competency of the proposed staff in relation to the type of research involved. (15 points)	
9. The extent to which the organization proposes a clear project management plan to accomplish stated objectives. (5 points)	Organizational Capability and Project Management
10. Reasonableness of proposed budget in relation to the proposed project, the amount of grant funds necessary for completion of the project and adequacy of resources already available for the project (10 points)	Budget Narrative

2. Review and Selection Process

Each HHS/OASH Program's office is responsible for facilitating the process of evaluating applications and setting funding levels according to the criteria set forth in 42 CFR § 52.5(a).

An independent review panel will evaluate applications that pass the screening and meet the responsiveness criteria if applicable. These reviewers are experts in their fields, and are drawn from academic institutions, non-profit organizations, state and local government, and Federal government agencies. Based on the Application Review Criteria as outlined under [Section V.1], the reviewers will comment on and score the applications, focusing their comments and scoring decisions on the identified criteria. In addition to the independent review panel, Federal staff will review each application for programmatic, budgetary, and grants management compliance.

Final award decisions will be made by the Deputy Assistant Secretary for Population Affairs or designee.

VI. AWARD ADMINISTRATION INFORMATION

1. Award Notices

The HHS Office of the Assistant Secretary for Health does not release information about individual applications during the review process. When final funding decisions have been made, each applicant will be notified by letter of the outcome. The official document notifying an applicant that a project application has been approved for funding is the Notice of Award (NOA), approved by the Director of the HHS/OASH Office of Grants Management. This document specifies to the grantee the amount of money awarded, the purposes of the grant, the anticipated length of the project period, terms and conditions of the grant award, and [the amount of funding to be contributed by the grantee to project costs if needed]. Grantees should pay specific attention to the terms and conditions of the award as indicated on the NOA, as some may require a time-limited response. The NOA will also identify the Grants Management Specialist and Program Project Officer assigned to the grant.

2. Administrative and National Policy Requirements

In accepting the grant award, the grantee stipulates that the award and any activities thereunder are subject to all provisions of 45 CFR parts 74 and 92, currently in effect or implemented during the period of the grant.

In addition, recipients must comply with all terms and conditions outlined in their grant awards, the Department of Health and Human Services (HHS) Grants Policy Statement,

requirements imposed by program statutes and regulations and HHS grant administration regulations, as applicable, as well as any requirements or limitations in any applicable appropriations acts.

Grant funds may only be used to support activities outlined in the approved project plan. The successful applicant will be responsible for the overall management of activities within the scope of the approved project plan. The HHS/OASH strongly encourages all grant recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products. This is consistent with the HHS/OASH mission to protect and advance the physical and mental health of the American people.

Federal grant support must be acknowledged in any publication developed using funds awarded under this program. All publications developed or purchased with funds awarded under this program must be consistent with the requirements of the program. Pursuant to 45 CFR § 74.36(a), HHS may reproduce, publish, or otherwise use materials developed under this grant for Federal purposes, and may authorize others to do so.

Trafficking in Persons

Awards issued under this funding opportunity announcement are subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to http://www.hhs.gov/opa/grants/trafficking_in_persons_award_condition.html. If you are unable to access this link, please contact the Grants Management Specialist identified in this funding opportunity announcement to obtain a copy of the term.

Efficient Spending

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

Pilot Whistleblower Protection

A standard term and condition of award will be in the final notice of award; all applicants will be subject to a term and condition that applies the terms of 48 CFR section 3.908 to the award, and requires that grantees inform their employees in writing of employee whistleblower rights and protections under 41 U.S.C. 4712 in the predominant native language of the workforce.

Reporting

Programmatic Reporting

Applicants will be required to provide a report to OASH at least annually. Annual reports will be due 30 days after the end of each budget period.

In addition, a final progress report covering the entire project period is due 90 days after the end of the project period.

Financial Reporting

Grantees are required to submit quarterly and annual Federal Financial Reports (FFR). Reporting schedules will be issued as a condition of grant award. A final FFR covering the entire project period is due 90 days after the end of the project period.

Grantees that receive \$500,000 or greater of Federal funds must also undergo an independent audit in accordance with OMB Circular A-133.

Each year of the approved project period, grantees are required to submit a noncompeting application which includes a progress report for the current budget year, and work plan, budget and budget justification for the upcoming year.

FFATA and FSRS Reporting

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

VII. AGENCY CONTACTS

Administrative and Budgetary Requirements and Program Requirements:

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

Ms. Deborah Speight

1101 Wootton Parkway, Suite 550

Rockville, MD

Phone: 240-453-8822

Email: deborah.speight@hhs.gov

For information on program requirements, contact the program office. Non-binding letters of intent should be sent via email to:

Tasmeen Weik, DrPH, MPH

1101 Wootton Parkway, Suite 550

Rockville, MD

Phone: 240-453-2802

Email: tasmeen.weik@hhs.gov

VIII. OTHER INFORMATION

Application Elements

SF 424 – Application for Federal Assistance

SF 424A – Budget Information

Separate Budget Narrative/Justification

SF 424B – Assurances.

Lobbying Certification

Proof of non-profit status, if applicable.

Copy of the applicant's most recent indirect cost agreement, if requesting indirect costs. If any sub-contractors or sub-grantees are requesting indirect costs, copies of their indirect cost agreements must also be included with the application.

Project Narrative with Work Plan

Organizational Capability Statement and Vitae for Key Project Personnel.

Letters of Commitment from Key Partners, if applicable.

18 February, 2014

Susan Moskosky, Acting Director
Office of Population Affairs