

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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

FUNDING OPPORTUNITY TITLE: FY 2016 Announcement of Availability of Funds for a Project to Develop Patient Reported Outcome Performance Measures for Contraceptive Services

ACTION: Notice

ANNOUNCEMENT TYPE: Initial Competitive Cooperative Agreement

FUNDING OPPORTUNITY NUMBER: PA-FPR-16-001

CFDA NUMBER: 93.974

CFDA PROGRAM: Family Planning Service Delivery Improvement Grants

DATES: Non-binding letters of intent are due February 29, 2016

Your application is due April 15, 2016 by 5 p.m. Eastern Time. To receive consideration, your application must be received electronically via Grants.gov by the HHS Office of the Assistant Secretary for Health (HHS/OASH), Office of Grants Management (OGM) no later than this due date and time. If your application does not meet the specified deadline it will be returned to you unread. You must submit electronically via Grants.gov unless you obtain a written exemption from this requirement 2 business days in advance of the deadline from the Director, HHS/OASH Office of Grants Management. To obtain an exemption, you must request one via email from the HHS/OASH Office of Grants Management, and provide details as to why you are technologically unable to submit electronically through Grants.gov portal. Your request should be submitted at least 4 business days prior to the application deadline to ensure your request can

be considered prior to 2 business days in advance of the deadline. If you request an exemption, include the following in your e-mail request: the HHS/OASH announcement number; your organization's DUNS number; your organization's name, address and telephone number; the name and telephone number of your Authorizing Official; the Grants.gov Tracking Number (GRANTXXXX) assigned to your submission; and a copy of the "Rejected with Errors" notification from Grants.gov. Send the request with supporting documentation to ogm.oash@hhs.gov. Note: failure to have an active System for Account Management (SAM) registration will not be grounds for receiving an exemption to the electronic submission requirement.

The HHS/OASH Office of Grants Management will only accept applications via alternate methods (hardcopy paper via US mail or other provider or PDF via email) from applicants obtaining prior written approval. The application must still be submitted by the deadline. Only applications submitted through the Grants.gov portal or alternate format (hardcopy paper via US mail or other service or PDF via email) with an approved written exemption will be accepted. *See* Section D.7. ("Other Submission Requirements") for information on application submission mechanisms.

To ensure adequate time to successfully submit your application, HHS/OASH recommends that you register as early as possible 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.

Your organization is strongly encouraged to register multiple authorized organization representatives in Grants.gov to ensure someone is available to submit your application.

Technical Assistance: There will be a technical assistance webinar to briefly review the application process as well as the content of the funding opportunity announcement.

Representatives from the Office of Population Affairs (OPA) will be presenting information relevant to the FOA during the webinar. The webinar will be held only once, but will be posted on the OPA website following the event. The date for this webinar will be located on the OPA website at (<http://www.hhs.gov/opa>).

EXECUTIVE SUMMARY: The Office of Population Affairs (OPA) within the Office of the Assistant Secretary for Health (OASH) announces the availability of funds for Fiscal Year (FY) 2016 a cooperative agreement under Section 1004 of the Public Health Service Act to develop a patient-reported outcome performance measure (PRO-PM) for contraceptive services. Public and private nonprofit entities may apply.

The long-term, overarching goal of this effort is to improve reproductive health outcomes for men, women and adolescents by reducing unplanned pregnancies, improving birth spacing, and improving maternal and infant health. The use of clinical performance measures in the context of broader quality improvement processes has been shown to improve the quality of care,[1] which in turn can improve health outcomes.[2] The Institute of Healthcare Improvement's

Triple Aim has highlighted the importance of using quality improvement to monitor and drive improvements in health outcomes, client experience and cost savings.[3]

This funding opportunity focuses on filling a critical gap in performance measures for family planning services, i.e., the need for validated measures of client experience in contraceptive services. OPA intends that the measure will be developed in a manner such that the measure may subsequently be submitted to the National Quality Forum (NQF) for endorsement, either by the awardee or by the Office of Population Affairs.

A. PROGRAM DESCRIPTION:

The primary objective of this FOA is to develop a patient-reported outcome performance measure (PRO-PM) for contraceptive services, in a manner in which it may be submitted to the National Quality Forum (NQF) for endorsement. The use of clinical performance measures in the context of broader quality improvement processes has been shown to improve the quality of care.[1] The Triple Aim has highlighted the importance of using quality improvement to monitor and drive improvements in health outcomes, client experience and cost savings.[3] This effort focuses on filling a critical gap in performance measures, i.e., the need for validated measures of client experience with contraceptive services.

Given the sensitive nature of contraceptive services and the potential for coercive practices,[4-7] it is particularly important to ensure that they are provided in a client-centered manner. OPA and the U.S. Centers for Disease Control and Prevention's CDC's clinical recommendations entitled *Providing Quality Family Planning Services, 2014* (QFP) emphasize the need for and

describe how to provide client-centered contraceptive services, and will be used to inform the development of the PRO-PM.[8] As such, “client-centered” contraceptive services are defined as follows:

Client-centered is defined as providing care that treats each person as a unique individual with respect, empathy and understanding, providing accurate, easy-to-understand information based on the client’s needs and goals, and reflecting the client’s preferences for decision making.

PRO performance measures capture the client’s report of how care is provided and are an essential aspect of monitoring health care quality.[3, 9] OPA anticipates that the measure will focus on the client’s actual experience of care, rather than on satisfaction with the services.[10] The Consumer Assessment of Healthcare Providers and Systems (CAHPS) program is an example of a standardized questionnaire assessing consumers’ experience with health care (www.cahps.ahrq.gov). Reports about experience with care are often regarded as more specific, actionable, understandable and objective than general satisfaction ratings alone.

The measure will be designed for use in any setting where contraceptive services are provided, including the Title X and other publicly funded primary care and family planning programs (e.g., by Medicaid providers or HRSA-supported community health centers).

The measure should be developed in accordance with National Quality Forum (NQF) guidance on this topic to ensure it is as rigorously validated as possible.[11] The NQF guidance includes the following steps:

- Define the patient reported outcome (PRO), e.g., obtain input from key stakeholders (such as patients, providers, and policymakers) and identify meaningful outcomes.
- Identify an appropriate patient reported outcome measure (PROM) for measuring the outcome in the target population of interest, which is reliable (internal consistency and reproducibility) and valid. If no existing PROM seems to be suitable, then a new PROM should be tested in the target population and in the intended setting to identify feasibility issues related to administration, data capture and workflow, provide feedback for self-management, and facilitate shared decision making.
- Specify and test a patient reported outcome performance measure (PRO-PM).

It is OPA's intention that the measure be submitted to NQF for endorsement after the developmental steps listed above are completed. NQF endorsement will greatly increase the chances that the measure will be used by public programs and private health plans. The entity that has been funded to develop the measure may submit the measure to NQF if it chooses to do so, and is willing to serve as the measure's steward in accordance with NQF requirements. However, OPA financial support for fulfilling the steward's responsibilities is not part of this FOA and cannot be guaranteed. If the awardee decides against submitting the measure to NQF, then OPA will have the opportunity to submit the measure to NQF and serve as the measure's steward.

The administrative and funding instrument used for this program will be a cooperative agreement, in which substantial OPA involvement should be expected to be above and beyond the normal stewardship role in awards. Under the cooperative agreement, OPA intends to support the awardee's activities by working jointly in a partnership role; it is not to assume prime responsibility or a dominant role in the activities. As such, OPA will maintain substantial involvement with, and monitoring of, the recipient as the project progresses. Regular communication with the assigned OPA project officer via email and conference calls scheduled every other month will be expected. For this cooperative agreement, the recipient will have lead responsibilities in all aspects of the study, including the recruitment plan and conduct of the study. Study instruments and draft publications will also require review by OPA. To help ensure responsiveness to OPA program priorities and direction, OPA will collaborate with the recipient as appropriate, and provide consultation, assistance, and support in planning and implementing all aspects of the proposed plan.

AUTHORITY: The authority for cooperative agreements for Title X research is set out at Section 1004 (42 U.S.C. §300a-2) of the Public Health Service Act. The statute states that “the Secretary may (1) conduct, and (2) make grants to public or nonprofit private entities and enter into contracts with public or private entities and individuals for projects for, research in the biomedical, contraceptive development, behavioral, and program implementation fields related to family planning and population.” Applicants should consult the Title X statute and regulations that are available on the OPA website, <http://hhs.gov/opa>, as well as other information included in this announcement, and in the application kit in developing their applications.

B. FEDERAL AWARD INFORMATION

The Office of Population Affairs intends to make available approximately \$400,000 for a competing cooperative agreement. We will fund grants in annual increments (budget periods) and generally for a project period of up to 3 years, although we may approve shorter project periods. Funding for all approved budget periods beyond the first year of the grant is generally level with the initial award amount and is contingent upon the availability of funds, satisfactory progress of the project, and adequate stewardship of Federal funds.

Award Information

Estimated Funds Available for Competition: \$400,000

Anticipated Number of Awards: One

Range of Awards: \$300,000-400,000 per budget period

Anticipated Start Date: 07/01/2016

Period of Performance: Not to exceed 3 years

Budget Period Length: 12 months

Type of Award: Cooperative Agreement. Agency substantial involvement is outlined in the Program Description in Section A.

Type of Application Accepted: Electronic via Grants.gov **ONLY unless an exemption is granted**

C. ELIGIBILITY INFORMATION

- 1. Eligible Applicants.*
2. Any public or private nonprofit entity located in any one of the 50 United States, the 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/Alaskan Native/Native American (AI/AN/NA) organizations are eligible to apply for this Title X 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. *Cost Sharing or Matching*

Cost sharing or matching funds are not required for this program.

3. *Other Eligibility Information*

Application Screening Criteria

If your application is appropriately submitted, it will be screened to assure a level playing field for all applicants. If duplicate applications from the same organization for the same project are successfully submitted, only the last application received by the deadline will be reviewed. If your application fails to meet the screening criteria described below it will **not** be reviewed and will receive **no** further consideration.

1. Your application must be submitted electronically via www.grants.gov (unless an exemption was granted 2 business days prior to the deadline) by 5 pm ET on April 15, 2016.
2. Your 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. Your Project Narrative must **not** exceed 40 pages. NOTE: The following items do not count toward the page limit: all required forms, including SF-424, SF-424A, SF-424B, SF-LLL, Project Abstract Summary, and Budget Narrative (including budget tables).

4. Your total application, including the Project Narrative plus Appendices, must **not** exceed 100 pages. NOTE: items noted in #3 above do not count toward total page limit.
5. Your proposed budget does **not** exceed the maximum indicated in Range of Awards.
6. Your application meets the **Application Responsiveness Criteria** outlined above.

D. APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package

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

Office of Grants Management

Phone: 240-453-8822

Email: ogm.oash@hhs.gov

2. Content and Form of Application Submission

i. **Letter of Intent – Requested.**

If you plan to apply for this funding opportunity, you should submit a letter of intent as early as possible, but no later than the **deadline indicated in DATES on page 1 of this announcement**].

Although you are not required to submit a letter of intent, the information that it contains allows HHS/OASH to estimate the potential review workload and plan the review. A letter of intent is not binding, and does not enter into the review of a subsequent application. Your letter of intent should include a descriptive title of your proposed project, the name, address and telephone

number for the designated authorized representative of your organization, and the FOA number and title of this announcement. Your letter of intent should be sent to the address listed under the AGENCY CONTACTS section G.

ii. Application Format

Your application must be prepared using the forms and information provided in the online grant application package.

The Project Narrative, and total application including appendices, must adhere to the page limit indicated in Application Screening Criteria listed in Section C.

You must double-space the Project Narrative pages.

You should use an easily readable typeface, such as Times New Roman or Arial. You *must* use 12-point font. You may single-space tables or use alternate fonts but you must ensure the tables are easily readable. The page limit does not include the Budget Narrative (including budget tables), required forms, assurances, and certifications as described in Application Screening Criteria. Please do not number pages or include a table of contents. Our grants management system will generate page numbers once your application is complete.

If your application exceeds the specified page limits for the Project Narrative or Project Narrative plus Appendices when printed on 8.5” X 11” paper by HHS/OASH/OGM, it will not be considered. We recommend you print out your application before submitting electronically to ensure that it is within the page limits and is easily readable.

Appendices

Your Appendices should include any specific documents outlined in Section D.2.iii., under the heading “Appendices” in the Application Content section of this funding opportunity announcement. You should not include brochures and bound materials. If you create

Appendices specifically for this application, you should use the same formatting required for the Project Narrative, including double-line spacing. However, if you include appendix documents that were not created directly in response to this funding announcement, especially those imported from other sources and documents (e.g., organizational structure), you may retain the original formatting, but the pages must be easily readable.

Project Abstract

You must complete the Project Abstract Summary form provided in the application package. The abstract will be used to provide reviewers with an overview of the application and will form the basis for the application summary in grants management and program summary documents. HHS/OASH may publish your abstract if your project is funded; therefore, it should not include sensitive or proprietary information.

Budget Narrative

The Budget Narrative text should use the formatting required of the Project Narrative for the explanatory text. Budget tables may be single-spaced but should be laid out in an easily-readable format and within the printable margins of the page.

iii. 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:

Executive Summary

Understanding of the project's context and objectives

Technical approach

Project management and organizational capacity

Executive Summary. This section should include a brief description of the proposed project, including: goal(s), objectives, outcomes, and products to be developed.

Understanding of the project's context and objectives. This section should demonstrate a thorough understanding of the purpose, scope and activities of the project. In particular, the application should demonstrate knowledge and understanding in the following areas:

- The reproductive health burden in the U.S. caused by teen, unintended pregnancy and interpregnancy intervals that are too long or too short; the role of contraceptive services in reducing that burden; and why a client-centered approach to contraceptive services is important.
- The role of quality healthcare in improving health outcomes, how a PRO-PM focused on client-centered contraceptive services will contribute to the delivery of quality family planning services, and the potential benefits of obtaining NQF endorsement.

- The difference between client’s report of his/her experience with contraceptive care, rather than one focused on satisfaction.
- How a PRO-PM differs from a measure developed for use in research or other setting; i.e., what additional effort is needed to prepare a PRO-PM for NQF endorsement, in terms of the measure validation process.

Technical approach. This section should describe how the applicant would approach the development of the PRO-PM. The approach should be consistent with NQF guidance.[11] The applicant should demonstrate the approach it would use by:

- Demonstrating a clear understanding of the NQF requirements that are part of the measure testing/validation process. [11]
- Describing how the development/validation steps listed above will be implemented to develop a PRO-PM for contraceptive services. This includes the extent to which the application provides detailed descriptions of methods used to collect quantitative and qualitative data, estimated sample sizes for each relevant step, and the analytic methods to be used; and the extent to which they are in accordance with NQF guidance. [11]

Proposing to test the measure among Title X clients and those of at least one other publicly funded, non-Title X, program (e.g., Medicaid, community health centers, state health department, an MCH program); evidence of support from relevant program partners of their willingness to collaborate on the project. This will require approval from the Office of

Management Budget under the Paperwork Reduction Act. OPA will facilitate this process as the sponsor of the testing.

Project management and organizational capacity. This section should document the organization's ability to successfully implement the project. It should include a description of:

- The applicant agency, its mission/vision, how it is organized, the nature and scope of its work, and the capabilities it possesses. An organizational capability statement should be included, as well as an organizational chart showing the relationship of the project to the current organization. The ability to obtain an ethical review of the project protocol by an accredited Institutional Review Board (IRB) and the inclusion of a current Federalwide Assurance (FWA) number should also be documented.
- Staff that has expertise (i.e., relevant training and direct experience) in the development of patient-reported measures, as well as staff that have expertise in developing performance measures in accordance with NQF guidance. [11]
- A clear delineation of the roles and responsibilities of project staff and sub-recipients and how they will contribute to achieving the project's objectives and outcomes. The hours and percentage of time that each key staff member will contribute to the project should be described, and the application should justify why the amount of hours proposed for all staff is adequate and appropriate given the requirements of the project. Biographical sketches for key project personnel should be included, as well as 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.

- A project management plan, which describes the readiness of the agency to make rapid and effective use of the funding assistance, specifies who will oversee the project and how the project's on-going progress will be monitored, and describes plans for communicating with HHS/OASH as well as other partners. HHS/OASH expects that, throughout the grant period, the Project Director will have involvement in, and substantial knowledge about, all aspects of the project.

Budget Narrative

You are required to submit a combined multi-year Budget Narrative, as well as a detailed Budget Narrative for each year of the potential grant. Unless specified, you should develop your multi-year budgets based on level funding for each budget period. A level-funded budget is equal to the exact dollar figure of the year one budget. Your Budget Narrative should detail all costs. Please be sure to carefully review Section D.6 Funding Restrictions for specific information on allowable, unallowable, and restricted costs. Staff should be listed by position with salary and percentage of full-time equivalent to be devoted to this project, and the percentage of salary to be charged to the project. Any participant incentives proposed to be provided should be fully justified and include a description of internal controls in place to verify proper use. ***Please Note:*** Because your proposal must demonstrate a clear and strong relationship between the stated objectives, project activities, and the budget, the Budget Narrative should describe the ***cost estimated per proposed project, activity, service delivered, and/or product.*** The Budget

Narrative should define the amount of work that is planned and expected to be performed and what it will cost with an explanation of how you expect this to be cost effective. The Budget Narrative does not count toward your total application page limit.

Appendices

All items described in this section will count toward the total page limit of your application.

Work Plan. The Project Work Plan should reflect, and be consistent with, the Project Narrative and Budget, and must cover all years of the project period. However, each 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 discreet 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.

Letters of Commitment from Sub recipient Organizations and Agencies

Letters of Commitment are required for all organizations and entities that have 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 not be considered during the review.

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

- You are required to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal grants or cooperative agreements through Grants.gov. 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.
- You will find instructions on the Grants.Gov web site as part of the organization registration process at <http://www.grants.gov/web/grants/applicants/organization-registration.html>.
- Your organization must register online in the System for Account Management (SAM). **Grants.gov will reject submissions from applicants with nonexistent or expired SAM Registrations.**
- A quick start guide for grant registrants is available at https://www.sam.gov/sam/transcript/Quick_Guide_for_Grants_Registrations.pdf.

You should allow a *minimum* of five days to complete an initial SAM registration. Allow up to 10 business days *after you submit* your registration for it to be active in SAM.

- If your organization is already registered in SAM, 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 in SAM.
- It may take 24 hours or more for SAM updates to take effect in Grants.gov, so if you plan to apply for this funding opportunity or think you might apply, you should *check for active registration in SAM well before the application deadline*.
- If you are successful and receive a grant award, you must maintain an active SAM registration with current information at all times during which your organization has an active award or an application or plan under consideration by an HHS agency.

HHS/OASH cannot make an award until you have complied with these requirements. In accordance with 2 CFR § 25.205, at the time an award is ready to be made, if you have not complied with these requirements, HHS/OASH:

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

Should you successfully compete and receive an award, all first-tier sub-award recipients must have a DUNS number at the time you, the recipient, make a sub-award.

4. Submission Dates and Times

You must submit your application for this funding opportunity by **5:00 p.m. Eastern Time on the date indicated in the DATES section on page 1 of this announcement**. Your submission time will be determined by the date and time stamp provided by Grants.gov when you **complete** your submission.

If you fail to submit your application by the due date and time, we will not review it, and it will receive no further consideration. You are strongly encouraged to submit your application a minimum of 3-5 days prior to the application closing date. Do not wait until the last day in the event you encounter technical difficulties, either on your end or with <http://www.grants.gov>. Grants.gov can take up to 48 hours to notify you of a successful submission. You are better off having a less-than-perfect application successfully submitted than no application at all.

If your submission fails due to problems with Grants.gov, we may consider your application if you provide verification from Grants.gov indicating system problems existed at the time of your submission **and that time was before the submission deadline**.

5. 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.

6. Funding Restrictions

The allowability, allocability, reasonableness, and necessity of direct and indirect costs that may be charged to HHS/OASH grants must be in accordance with Department regulations

and policy effective at the time of the award. Current requirements are outlined at 45 CFR part 75 “Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards.”

Indirect costs may be included per 45 CFR § 75.414. Applicants should indicate which method and/or rate is used for this application. To obtain a negotiated indirect cost rate with the Federal Government you may contact the U.S. Department of Health and Human Services Cost Allocation Services (CAS) regional office that is applicable to your State. A list of CAS regional offices is included in the grant application package for this announcement.

Pre-Award Costs:

Pre-award costs are not allowed.

Salary Limitation:

The Consolidated Appropriations Act, 2016 (P.L. 114-113) limits the salary amount that you may be awarded and charge 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 **\$185,100**. 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 subawards/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 \$185,100, their direct salary would be \$92,550 (50% FTE), fringe benefits of 25% would be \$23,137.50, and a total of

\$115,687.50 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
<p>Amount that may be claimed on the application budget due to the legislative salary limitation:</p> <p>Individual's base full time salary <i>adjusted</i> to Executive Level II: \$185,100</p> <p>50% of time will be devoted to the project</p>	
Direct salary	\$92,550.00
Fringe (25% of salary)	\$23,137.50
Total amount	\$115,687.50

Appropriate salary limits will apply as required by law.

7. Other Submission Requirements

Electronic Submission

HHS/OASH requires that all applications be submitted electronically via the Grants.gov portal unless an exemption has been granted. If you submit an application via any other means of electronic communication, including facsimile or electronic mail, it *will not* be accepted for review.

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

Your application will not be considered valid until all application components are received via Grants.gov by the HHS/OASH Office of Grants Management according to the deadlines specified in the DATES section on page 1 of this announcement. If your application does not adhere to the due date and time requirements, it will be deemed ineligible and receive no further consideration.

If you choose to apply, you are encouraged to initiate electronic applications early in the application development process. Applying in advance of the deadline will allow you to address 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. If you submit any file part of the Grants.gov application that is not in a file format identified above, it will not be accepted for processing and will be excluded from your application during the review process. You must submit your application in a format that can easily be copied and read by

reviewers. We do not recommend that you submit scanned copies through Grants.gov unless you confirm the clarity of the documents. Pages cannot be reduced resulting in multiple pages on a single sheet to avoid exceeding the page limitation. If you submit documents that do not conform to the above, we will exclude them from your application during the review process.

Important Grants.gov Information

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, both of which can be found on page 1 of this funding opportunity announcement.

To ensure successful submission of your application, you should carefully follow the step-by-step instructions provided at <http://www.grants.gov/web/grants/applicants/apply-for-grants.html>. These instructions are kept up-to-date and also provide links to Frequently Asked Questions and other troubleshooting information.

You should contact Grants.gov with any questions or concerns regarding the electronic application process conducted through Grants.gov. See Section D.3 for requirements related to DUNS numbers and SAM registrations.

E. APPLICATION REVIEW INFORMATION

1. **Criteria:** Eligible applications will be assessed according to the following criteria:

Understanding of the project's context and objectives [15 points]

For this criterion, the application will be assessed by narrative that addresses the points in the 'understanding of the project's context and objectives' section of the FOA, which includes:

- Document how and why a PRO-PM focused on client-centered contraceptive services will contribute to the delivery of quality family planning services.
- The extent to which the application proposes development of a PRO-PM of client experience with contraceptive care, rather than one focused on client satisfaction.
- Explain how a PRO-PM differs from a measure developed for use in research or other setting.
- Demonstrate understanding of what is needed to submit a PRO-PM to NQF for endorsement, in terms of the measure validation process.

Technical approach [50 points]

For this criterion, the application will be assessed by narrative that addresses the points in the ‘technical approach’ section of the FOA, which includes:

- The extent to which the application demonstrates a profound and detailed understanding of the NQF requirements that are part of the measure testing/validation process. [11]
- The extent to which the application describes how it will implement each of the steps that are needed to develop a PRO-PM, and the extent to which the process is consistent with NQF guidance. [11] This includes whether the application provides detailed descriptions of methods used to collect quantitative and qualitative data, estimated sample sizes for each relevant step, and the analytic methods to be used.
- Specifications of whether the application proposes to test the measure among Title X clients and those of at least one other publicly funded, non-Title X, program (e.g., Medicaid, community health centers, state health department, an MCH program);

evidence of support from relevant program partners of their willingness to collaborate on the project. The application should acknowledge that approval from OMB per the Paperwork Reduction Act will be required before any data collection can begin.

Project management and organizational capacity [35 points]

For this criterion, the application will be assessed by narrative that addresses the points in the “project management and organizational capacity” section of the FOA, which includes:

- The administrative and management capability and competence of the applicant;
- The ability to obtain an ethical review of the project protocol by an accredited Institutional Review Board (IRB) and the inclusion of a current Federalwide Assurance (FWA) number;
- The competence of the project staff in relation to the tasks to be provided; and
- The capacity of the applicant to make rapid and effective use of the funding assistance.

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.

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 E.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 his/her designee.

All award decisions, including level of funding if an award is made, are final and not appealable to any office or official in HHS/OASH.

Review of Risk Posed by Applicant

The HHS/OASH will evaluate each application in the fundable range for risks posed by an applicant before issuing an award in accordance with 45 CFR § 75.205. This evaluation may incorporate results of the evaluation of the applicant's eligibility or the quality of its application. If we determine that a Federal award will be made, special conditions that correspond to the degree of risk assessed by the applicant will be applied to the Federal award. OASH will use a risk-based approach and may consider any items such as the following:

- (1) Applicant's financial stability;
- (2) Quality of management systems and ability to meet the management standards prescribed in 45 CFR part 75;
- (3) History of performance. The applicant's record in managing Federal awards, if it is a prior recipient of Federal awards, including timeliness of compliance with applicable reporting requirements, conformance to the terms and conditions of previous Federal awards, and if applicable, the extent to which any previously awarded amounts will be expended prior to future awards;
- (4) Reports and findings from audits performed; and

(5) The applicant's ability to effectively implement statutory, regulatory, or other requirements imposed on non-Federal entities.

Prior to making a Federal award with a total Federal share greater than the simplified acquisition threshold (currently \$150,000), we are required to review and consider any information about you that is in the designated integrity and performance system accessible through the System for Award Management (SAM) (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). You may, at your option, review information in SAM and comment on any information about yourself that a Federal awarding agency previously entered and is currently available through SAM. We will consider any comments by you, in addition to the other information in the designated system, in making a judgment about your integrity, business ethics, and record of performance under Federal awards when completing the review of risk posed by applicants.

4. Anticipated Announcement and Federal Award Dates

HHS/OASH seeks to award funds as much in advance of the anticipated project start date shown in Section B “Federal Award Information,” as practicable, with a goal of 10-15 days.

F. FEDERAL AWARD ADMINISTRATION INFORMATION

1. Federal Award Notices

The HHS Office of the Assistant Secretary for Health does not release information about individual applications during the review process. If you would like to track your application, please see instructions at <http://www.grants.gov/web/grants/applicants/track-my-application.html>. The official document notifying you that a project application has been

approved for funding is the Notice of Award (NOA), approved by a Grants Management Officer of the HHS/OASH Office of Grants Management. If you are successful, you will receive this document via system notification from our grants management system (Grant Solutions) and/or via e-mail. This document notifies the successful recipient of 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 applicable. 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.

If you are unsuccessful, you will be notified by the program office by email and/or letter and will receive summary comments pertaining to the application resulting from the review process. On occasion, some applicants may receive a letter indicating that an application was approved but unfunded. These applications are kept active for one year and may be considered for award without re-competing should funds become available during the hold period.

2. Administrative and National Policy Requirements

If you are successful and receive a Notice of Award, in accepting the grant award, you stipulate that the award and any activities thereunder are subject to all provisions of 45 CFR part 75, currently in effect or implemented during the period of the grant or other Department regulations and policies effective at the time of the award.

In addition, your organization must comply with all terms and conditions outlined in the Notice of Award, the U.S. Department of Health and Human Services (HHS) Grants Policy Statement (GPS), requirements imposed by program statutes and regulations and HHS grant administration regulations, as applicable, as well as any requirements or limitations in any

applicable appropriations acts. The current HHS GPS is available at <http://www.hhs.gov/asfr/ogapa/aboutog/hhsgps107.pdf>. Please note HHS plans to revise the HHS GPS to reflect changes to the regulations; 45 CFR parts 74 and 92 have been superseded by 45 CFR part 75.

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. Please consult the HHS GPS Section II and 45 CFR §75.308 for aspects of your grant award that will require prior approval for any changes from the Grants Management Officer. Modifications to your approved project that will require prior approval, include but are not limited to, a change in the scope or the objective of the project or program (even if there is no associated budget revision); budget revisions, including changes in the approved cost-sharing or matching; a change in a key person specified in your application; reduction in time devoted to the project by the approved project director or principal investigator, either as percentage of full-time equivalent of 25% or more or absence for 3 months or more; or the subawarding, transferring or contracting out of any work that was not described in the approved proposal.

Lobbying Prohibitions

Pursuant to the Consolidated Appropriations Act, 2016 (P.L. 114-113), you shall not use any funds from an award made under this announcement for other than normal and recognized executive legislative relationships. You shall not use funds for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the

enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.

You shall not use any funds from an award made under this announcement to pay the salary or expenses of any employee or subrecipient, or agent acting for you, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.

The above prohibitions include any activity to advocate or promote any proposed, pending, or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.

Non-Discrimination Requirements

Pursuant to Federal civil rights laws, if you receive an award under this announcement you must not discriminate on the basis of race, color, national origin, disability, age, and in some cases sex and religion. The HHS Office for Civil Rights provides guidance to grantees in

complying with civil rights laws that prohibit discrimination.

www.hhs.gov/ocr/civilrights/understanding/index.html.

HHS provides guidance to recipients of federal financial assistance on meeting the legal obligation to take reasonable steps to provide meaningful access to persons with limited English proficiency. See *Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons*, 68 Fed. Reg. 47311, 47313 (HHS Office for Civil Rights, 2003, www.gpo.gov/fdsys/pkg/FR-2003-08-08/pdf/03-20179.pdf) or www.hhs.gov/ocr/civilrights/resources/laws/revisedlep.html . You must ensure your contractors and subrecipients also comply with federal civil rights laws.

The *National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care* (National CLAS Standards), 78 Fed. Reg. 58539, 58543 (HHS Office of Minority Health, 2013, www.gpo.gov/fdsys/pkg/FR-2013-09-24/pdf/2013-23164.pdf), provides a practical framework for grant applicants to provide quality health care and services to culturally and linguistically diverse communities, including persons with limited English proficiency. Compliance with the National CLAS Standards meets the legal obligation to take reasonable steps to provide meaningful access to persons with limited English proficiency

Smoke- and Tobacco-free Workplace

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.

Acknowledgement of Funding and HHS Rights to Materials and Data

Federal grant support must be acknowledged in any publication you develop using funds awarded under this program, with language such as:

This publication (journal article, etc.) was supported by Award No. _____ from the Office of the Assistant Secretary of Health (OASH). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of OASH.

All publications you develop or purchase with funds awarded under this announcement must be consistent with the requirements of the program. Pursuant to 45 CFR § 75.322(b), you own the copyright for materials that you develop under this grant, and HHS reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use those materials for Federal purposes, and to authorize others to do so. In addition, pursuant to 45 CFR § 75.322(d), the Federal government has the right to obtain, reproduce, publish, or otherwise use data produced under this grant and has the right to authorize others to receive, reproduce, publish, or otherwise use such data for Federal purposes.

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

Pilot Whistleblower Protection

If you receive an award, you will be subject to a term and condition that applies the terms of 48 CFR § 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.

Same-sex Spouses, Marriages, and Households

A standard term and condition of award will be included in the final Notice of Award (NOA) that states: “In any grant-related activity in which family, marital, or household considerations are, by statute or regulation, relevant for purposes of determining beneficiary eligibility or participation, grantees must treat same-sex spouses, marriages, and households on the same terms as opposite-sex spouses, marriages, and households, respectively. By “same-sex spouses,” HHS means individuals of the same sex who have entered into marriages that are valid in the jurisdiction where performed, including any of the 50 states, the District of Columbia, or a U.S. territory or in a foreign country, regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. By “same-sex marriages,” HHS means marriages between two individuals validly entered into in the jurisdiction where performed,

including any of the 50 states, the District of Columbia, or a U.S. territory or in a foreign country, regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. By “marriage,” HHS does not mean registered domestic partnerships, civil unions or similar formal relationships recognized under the law of the jurisdiction of celebration as something other than a marriage.”

Human Subjects Protection

Federal regulations (45 CFR Part 46) require that applications and proposals involving human subjects must be evaluated with reference to the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained. If research involving human subjects is anticipated, you must meet the requirements of the HHS regulations to protect human subjects from research risks as specified in 45 CFR part 46 – Protection of Human Subjects. You may find it online at <http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html>.

3. Reporting

Performance Reports

You must submit performance reports on a semi-annual basis. Your performance reports must address content required by 45 CFR § 75.342(b)(2). You must submit your performance reports by upload to our grants management system (GrantSolutions.gov), in the Grant Notes module.

You will also be required to submit a final progress report covering the entire project period 90 days after the end of the project period. You must submit the final report by upload to our grants management system (GrantSolutions.gov), in the Grant Notes module.

Performance Measures

We will review the awardee's semi-annual progress reports to determine the extent to which tasks/activities that were included in the annual workplan have been completed, reasons for not completing any tasks/activities, and steps that are being taken to address any uncompleted tasks/activities. This information will be submitted to OPA through GrantSolutions.

Financial Reports

You will be required to submit quarterly and annual Federal Financial Reports (FFR) (SF-425). Your specific reporting schedule will be issued as a condition of grant award. You will also be required to submit a final FFR covering the entire project period 90 days after the end of the project period. You must submit FFRs via our grants management system (GrantSolutions.gov) FFR module.

Quarterly cash reporting to the HHS Payment Management System on the FFR is also required. Please note, at this time, these FFR reports are separate submissions via the Payment Management Services. At this time, data is not transferable between the two systems and you will report twice on certain data elements.

Audits

If your organization receives \$750,000 or greater of Federal funds, it must undergo an independent audit in accordance with 45 CFR part 75, subpart F or regulations and policy effective at the time of the award.

Non-competing Continuation Applications and Awards

Each year of the approved project period, you will be required to submit a noncompeting application which includes a progress report for the current budget year, and work plan, budget and budget justification for the upcoming year. Specific guidance will be provided via Grant Solutions well in advance of the application due date. HHS/OASH will award continuation funding based on availability of funds, satisfactory progress of the project, and grants management compliance, including timely reporting. Additionally, failure to provide final progress or financial reports on other grants with HHS may affect continuation funding.

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.

G. HHS 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.

Jessica Shields 1101 Wootton Parkway, Suite 550

Rockville, MD

Phone: 240-453-8822

Email: jessica.shields@hhs.gov

For information on program requirements, contact the program office. Letters of Intent should be sent to:

Lorrie Gavin, MPH, PhD

1101 Wootton Parkway, Suite 550

Rockville, MD

Phone: 240-453-8822

Email: lorrie.gavin@hhs.gov

H. OTHER INFORMATION

Awards under this Announcement

We are not obligated to make any Federal award as a result of this announcement. Only the grants officer can bind the Federal government to the expenditure of funds. If you receive communications to negotiate an award or request additional or clarifying information, this does not mean you will receive an award; it only means that your application is still under consideration.

Application Elements

The below is a summary listing of all the application elements required for this funding opportunity.

Application for Federal Assistance (SF-424)

Budget Information for Non-construction Programs (SF-424A)

Assurances for Non-construction Programs (SF-424B)

Disclosure of Lobbying Activities (SF-LLL)

Project Abstract Summary

Project Narrative

Budget Narrative

Appendices [project work plan, letters of commitment, biographic sketches for key staff,
organizational chart]

Susan B. Moskosky 1-20-2016

Susan B. Moskosky, MS, WHNP-BC

Acting Director, OPA

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3. Berwick, D., T. Nolan, and J. Whittington, *The Triple Aim: Care, Health and Cost*. Health Affairs, 2008. **27**(3): p. 759-769.
4. Dehlendorf, C., H. Bellanca, and M. Policar, *Performance measures for contraceptive care: what are we actually trying to measure?* Contraception, 2015. **91**(6): p. 433-7.
5. Gomez, A., L. Fuentes, and A. Allina, *Women or LARC first? Reproductive autonomy and the promotion of long-acting reversible contraceptive methods*. Perspect Sex Reprod Health, 2014. **46**(3).
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8. Gavin, L., et al., *Providing quality family planning services: Recommendations of CDC and the U.S. Office of Population Affairs*. MMWR Recomm Rep, 2014. **63**(RR-04): p. 1-54.
9. Institute of Medicine (U.S.). Committee on Quality of Health Care in America., *Crossing the quality chasm : a new health system for the 21st century*. 2001, Washington, D.C.: National Academy Press.
10. Cella, D., et al., *Methodological issues in the selection, administration and use of patient-reported outcomes in performance measurement in health care settings: A report prepared for NQF PRO Workshop #1 - July 30-31, 2012*. 2012, National Quality Forum: Washington, DC.
11. National Quality Forum, *Patient Reported Outcomes (PROs) in Performance Measurement*. 2013, National Quality Forum: Washington, DC. p. 35.