



Rural Health Clinic Vaccine Confidence Program

Funding Opportunity Number: HRSA-21-142

June 2, 2021

Lindsey Nienstedt
Public Health Analyst
Federal Office of Rural Health Policy (FORHP)

Nancy Gaines
Lead Grants Management Specialist
HRSA Office of Federal Assistance Management

Vision: Healthy Communities, Healthy People



Housekeeping Items

Notice of Funding Opportunity available through [Grants.gov](https://www.Grants.gov)

Instructions included in HRSA's [SF-424 Application Guide](#)

- Zoom Webinar Link: <https://hrsa-gov.zoomgov.com/j/1604108840>
- Call-In Number: 833 568 8864
- Webinar/Participant ID: 160 410 8840
- Accessing recorded session:
 - ✓ Available on the [Rural Health Clinic Vaccine Confidence \(RHCVC\) Program](#) webpage and linked in the [NOFO](#).
- Questions
 - ✓ Use of Q&A feature

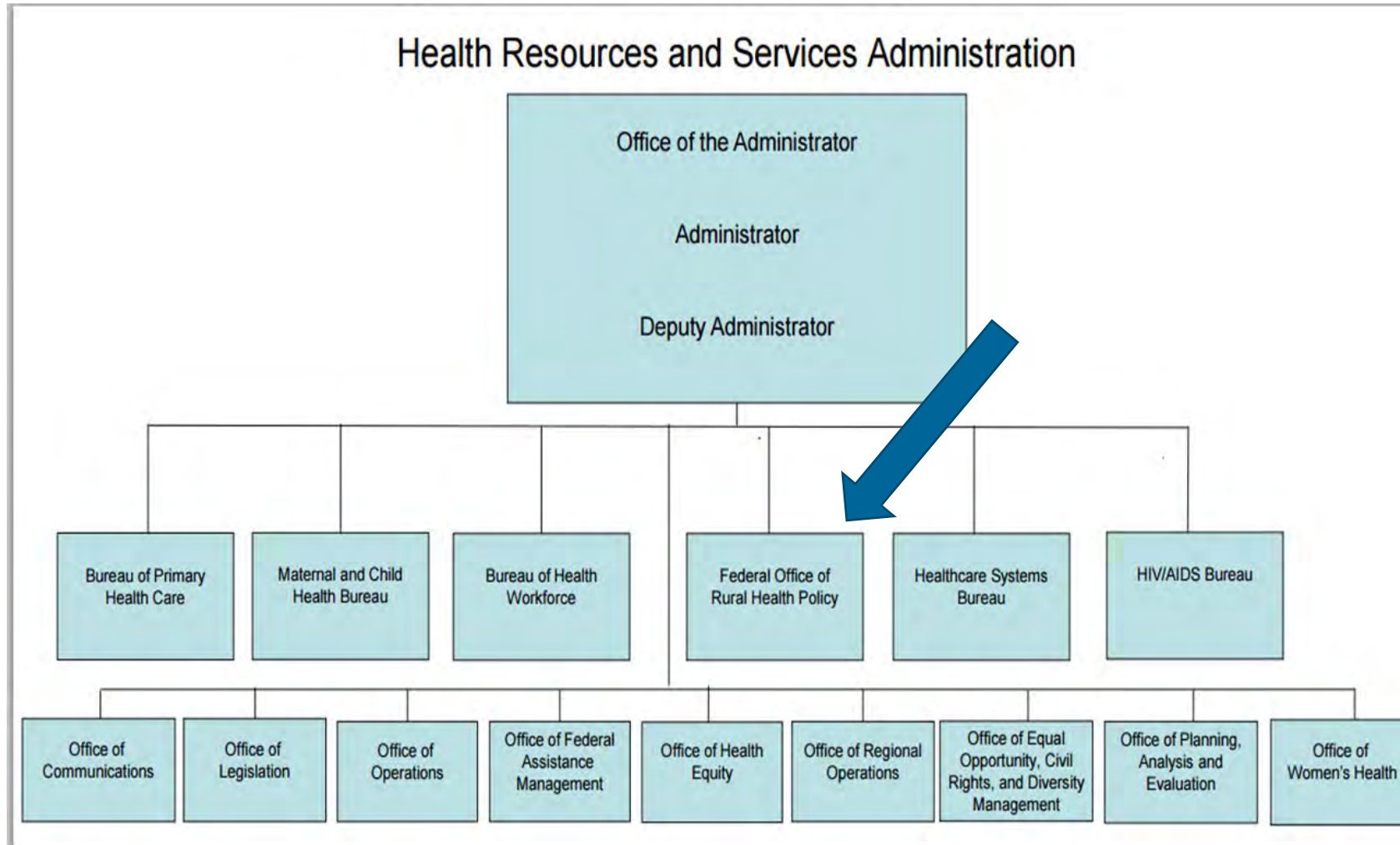


Agenda

- Federal Office of Rural Health Policy (FORHP)
- Navigating Grants.gov
- [Notice of Funding Opportunity \(NOFO\)](#)
- Award Information
- Application & Submission Information
- Award Administration Information
- How to Apply
- Q&A



Federal Office of Rural Health Policy (FORHP)



Policy Research Division

Community-Based Division

- Pilot Programs for Rural Communities
 - Expanding the Community Health Gateway
- Public Health Programs
 - Black Lung and Radiation Exposure

Policy Research Division

- Policy and Regulatory Analysis
- Research
- RHC COVID-19 Response Programs



Rural Strategic Initiatives Division

- Rural Communities Opioid Response Program
- Rural Tribal COVID-19 Response Program

Hospital-State Division

- Grants Focusing on Performance and Quality Improvement for Small Rural Hospitals
- State Offices of Rural Health

Office for the Advancement of Telehealth

- Telehealth Network Grants
- Telehealth Resource Centers
- Licensure and Portability

Navigating Grants.gov

Step 1

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FIND. APPLY. SUCCEED.SM

HELP REGISTER LOGIN

SEARCH: Grant Opportunities ▾ Enter Keyword... GO

HOME LEARN GRANTS SEARCH GRANTS APPLICANTS GRANTORS SYSTEM-TO-SYSTEM FORMS CONNECT SUPPORT

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VIEW GRANT OPPORTUNITY

HRSA-21-142
Rural Health Clinic Vaccine Confidence Program
Department of Health and Human Services
Health Resources and Services Administration

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SYNOPSIS VERSION HISTORY RELATED DOCUMENTS PACKAGE

Print Synopsis Details ?

General Information

Document Type:	Grants Notice	Version:	Synopsis 1
Funding Opportunity Number:	HRSA-21-142	Posted Date:	May 26, 2021
Funding Opportunity Title:	Rural Health Clinic Vaccine Confidence Program	Last Updated Date:	May 26, 2021
Opportunity Category:	Discretionary	Original Closing Date for Applications:	Jun 23, 2021
Opportunity Category Explanation:		Current Closing Date for Applications:	Jun 23, 2021



Navigating Grants.gov

Step 2

HOME LEARN GRANTS SEARCH GRANTS APPLICANTS GRANTORS SYSTEM-TO-SYSTEM FORMS CONNECT SUPPORT

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VIEW GRANT OPPORTUNITY

HRSA-21-142
Rural Health Clinic Vaccine Confidence Program
Department of Health and Human Services
Health Resources and Services Administration

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SYNOPSIS VERSION HISTORY RELATED DOCUMENTS PACKAGE

Select Grant Opportunity Package

Print Package List ?

PLEASE READ BEFORE APPLYING!
If you view and complete your application package using Grants.gov downloadable PDF forms, you **MUST** have Adobe Reader installed. You may receive a validation error using incompatible versions of Adobe Reader. To prevent a validation error, it is now recommended you uninstall any earlier versions of Adobe Reader and install the latest compatible version of Adobe Reader. If more than one person is working on the PDF forms, **ALL** applicants must be using the same Adobe Reader version. [Click for more information on Adobe Reader Compatibility.](#)

Opportunity Package(s) Currently Available for this Funding Opportunity:

CFDA	Competition ID	Competition Title	Opportunity Package ID	Opening Date	Closing Date	Actions
93.912	HRSA-21-142	Rural Health Clinic Vaccine Confidence Program	PKG00267381	05/26/2021	06/23/2021	Preview Apply



Navigating Grants.gov

Step 3

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VIEW GRANT OPPORTUNITY

Back | Link

Preview Opportunity Package Details

Opportunity Package Details:

Agency Contact Information: Contact Lindsey Nienstedt at (301)443-0835 or email RHCvaxConfidence@hrsa.gov

Who Can Apply: Organization Applicants

PACKAGE FORMS: [Download Instructions](#)

Mandatory Forms (Click to Preview)	Optional Forms (Click to Preview)
<ul style="list-style-type: none">» Application for Federal Assistance (SF-424) [V3.0]» Attachments [V1.2]» Project/Performance Site Location(s) [V3.0]» Project Narrative Attachment Form [V1.2]» Grants.gov Lobbying Form [V1.1]» Budget Narrative Attachment Form [V1.2]» Budget Information for Non-Construction Programs (SF-424A) [V1.0]» Key Contacts [V2.0]» Project Abstract Summary [V2.0]	<ul style="list-style-type: none">» Disclosure of Lobbying Activities (SF-LLL) [V2.0]

Close



Navigating Grants.gov

Step 4

HOME LEARN GRANTS SEARCH GRANTS APPLICANTS GRANTORS SYSTEM-TO-SYSTEM FORMS CONNECT SUPPORT

GRANTS.GOV > View Opportunity

VIEW GRANT OPPORTUNITY

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HRSA-21-142
Rural Health Clinic Vaccine Confidence Program
Department of Health and Human Services
Health Resources and Services Administration

Apply **Subscribe**

SYNOPSIS **VERSION HISTORY** **RELATED DOCUMENTS** **PACKAGE**

[Print Related Documents List](#) ?

Click on the following file link(s) to download the related document(s):

File Description	File Name	Last Updated Date/Time	File Size
Folder: Full Announcement - HRSA-21-142	HRSA-21-142-Full Announcement - HRSA-21-142.zip	May 26, 2021 02:58:25 PM EDT	410.8 KB
HRSA-21-142	FORHP HRSA-21-142 RHCVC FINAL.pdf	May 26, 2021 02:58:25 PM EDT	427.4 KB
Folder: Other Supporting Documents - Spreadsheet	HRSA-21-142-Other Supporting Documents - Spreadsheet.zip	May 26, 2021 09:04:00 AM EDT	14.5 KB
Your DUNS_RHCVC_Proof_of_Eligibility	Your DUNS_RHCVC_Proof_of_Eligibility.xlsx	May 26, 2021 09:04:00 AM EDT	20.2 KB



Notice of Funding Opportunity

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

HRSA
Health Resources & Services Administration
Federal Office of Rural Health Policy
Policy Research Division

Rural Health Clinic Vaccine Confidence Program

Funding Opportunity Number: HRSA-21-142
Funding Opportunity Type: New
Assistance Listings (CFDA) Number: 93.912

NOTICE OF FUNDING OPPORTUNITY
Fiscal Year 2021

Application Due Date: June 23, 2021

Ensure your Grants.gov registration and password is current immediately!
SAM.gov and Grants.gov administrative flexibilities have been implemented.
Please see [Section IV.3](#) for more information.

Issuance Date: May 26, 2021

Lindsey Nienstedt
Public Health Analyst, Federal Office of Rural Health Policy
Telephone: (301) 443-0835
Email: RHCVaxConfidence@hrsa.gov

Authority: Section 711(b)(5) of the Social Security Act (42 U.S.C. 912(b)(5)); Section 2302 of the American Rescue Plan Act of 2021 (P.L. 117-2)

What's Inside?

- Program Funding Opportunity Description
- Award Information
- Eligibility Information
- Application and Submission Information
- Application Review Information
- Award Administration Information
- Agency Contacts
- Other Information



Notice of Funding Opportunity

Summary

- Notice of Funding Opportunity available through [Grants.gov](https://www.Grants.gov)
- [SF-424 Application Guide](#)
- Award Amount: Anticipated \$50,000 for one year per RHC.
- **HRSA will award grants to all eligible RHCs that submit an acceptable and fundable application.**
- **Application Due: June 23, 2021**
- Program Start Date: July 1, 2021
- Program End Date: June 30, 2022
- One Year
- Application Length Suggestion: 10-15 pages
 - The application must include the project abstract, project and budget narratives, and attachments.
 - You may submit applications fewer than 10 pages and greater than 15 pages so long as the requested information is included and is relevant to this funding opportunity.



Program Funding Opportunity Description

Purpose

The COVID-19 Vaccine:

**ANOTHER
IMPORTANT
TOOL TO STOP
THE PANDEMIC**

Learn how you can get a COVID-19 vaccine to keep you and your family safe.

www.cdc.gov

Purpose of the Funding Opportunity

- Fund **ALL eligible RHC applicants** to address gaps in the COVID-19 vaccination rate by offering support and resources.
- Improve vaccine confidence and counter vaccine hesitancy in rural communities.
- Fund a broad range of efforts to improve health care in rural areas that reinforce basic messages about prevention and treatment of COVID-19 and other infectious diseases.

Award Information

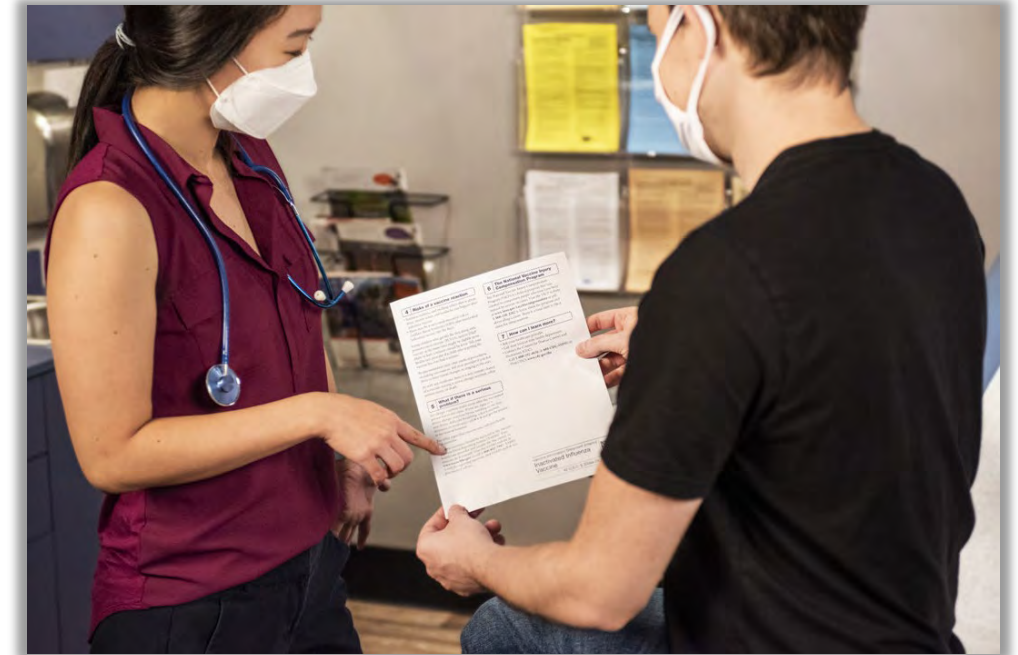
Type of Application and Award

Type of Applications Sought

- New

Type of Award

- Grant



A grant is a way the government funds your ideas and projects to provide public services and stimulate the economy. Grants support critical recovery initiatives, innovative research, and many other programs listed in the Catalog of Federal Domestic Assistance (CFDA).

Award Information

Summary of Funding

- Estimated \$50,000 per RHC
- Award amounts may be higher or lower than \$50,000 per RHC depending on the number of RHCs that apply for the RHCVC Program. This is not guaranteed.
- Organizations that own and operate multiple RHCs may apply for up to \$50,000 per RHC. The organization should submit ONE application for all RHCs owned and operated under the EIN/TIN.
 - For example: An organization that owns and operates three RHCs can apply for a total of up to \$150,000 on one application.
 - Organizations may choose to distribute funds equally to RHC sites or pool funds to achieve program goals. HRSA will confirm applicant Employer Identification Number (EIN) and CCN to verify eligibility.
 - HRSA will use the number of verified CCNs included in your application to calculate the number of RHCs and the total award amount for your application.



Award Information

Eligible Applicants

- **ALL Medicare-certified RHCs and organizations that own and operate Medicare-certified RHCs.**
- Eligible applicants include public, nonprofit, or for-profit Medicare-certified RHCs or organizations that own public, nonprofit, or for-profit Medicare-certified RHCs.
- **Organizations should apply using their EIN/TIN and include all RHC CCNs.**
- A CCN may only be included on one application. If HRSA receives multiple applications that include the same CCN, HRSA may disqualify one or more applications as duplicates.



Eligibility Information

Additional Considerations

Cost Sharing/Matching

- Not required for this program

HRSA will not consider:

- **Applications that do not meet the deadline: June 23 at 11:59 PM.**
- Multiple applications from the same organization

HRSA will only accept your last validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application.



Application and Submission Information

Requirements

Application Section	NOFO Info
1. Project Abstract	Page 5
2. Project Narrative <ul style="list-style-type: none">• Methodology• Work Plan• Organizational Information	Pages 5-6
3. Budget	Page 6-7
4. Budget Narrative	Page 7
5. Attachment	Pages 7-8
6. Application Components	Page 8

- Suggested application length: 10-15 pages
 - What is most important is that you provide the information requested in the notice.
 - You may submit applications fewer than 10 pages and greater than 15 pages so long as the requested information is included and is relevant to this funding opportunity.
- Remember to also refer to the [HRSA-SF-424 Application Guide](#) as referenced throughout the [NOFO](#)



Application and Submission Information

Project Abstract

Purpose: Brief, high-level summary of who you are and what you propose to do.

Use the Standard OMB-approved Project Abstract Summary Form 2.0 included in the Grants.gov workspace application package. **Do not upload the abstract as an attachment.**

Include the following information in the Project Abstract Summary Form:

- Funding Opportunity Number: HRSA-21-142
- CFDA: 93.912
- Applicant Name: The name of the organization submitting this grant
- Descriptive Title: [RHC or Organization Name] Vaccine Confidence Project
- Project Abstract (a bulleted list is acceptable):
 - Name or Names of RHCs included in this application
 - Applicant organization website, if applicable
 - Brief description of your planned activities
 - Brief description of your project goal



Application and Submission Information

Project Abstract Example

[View Burden Statement](#)

OMB Number: 4040-0019
Expiration Date: 02/28/2022

Project Abstract Summary

This Project Abstract Summary form must be submitted or the application will be considered incomplete. Ensure the Project Abstract field succinctly describes the project in plain language that the public can understand and use without the full proposal. Use 4,000 characters or less. Do not include personally identifiable, sensitive or proprietary information. Refer to Agency instructions for any additional Project Abstract field requirements. If the application is funded, your project abstract information (as submitted) will be made available to public websites and/or databases including USA Spending.gov.

Funding Opportunity Number

HRSA-21-142

CFDA(s)

93.912

93.912

Applicant Name

[RHC or Organization Name Submitting the Grant]

Descriptive Title of Applicant's Project

[RHC or Organization Name] Vaccine Confidence Project

Project Abstract

o [Name or Names of RHCs included in this application]
o [Applicant organization website, if applicable]
o [Brief description of your planned activities] Activities include: vaccine dissemination to rural residents about how and where to get vaccinated, coordinating with existing vaccination sites and public health partners to identify isolated and/or vaccine hesitant populations, and increased rural community and individual patient literacy on benefits of broad vaccination and the safety of vaccines to more quickly allow for continued re-openings of businesses and schools.

o [Brief description of your project goal] Help our RHC service area/rural communities make informed decisions about their health and COVID-19, improve health care in rural areas, and reinforce basic messages about prevention and treatment of COVID-19 and other infectious diseases.

Descriptive Title of Applicant's Project

[RHC or Organization Name] Vaccine Confidence Project

Project Abstract

o [Name or Names of RHCs included in this application]
o [Applicant organization website, if applicable]
o [Brief description of your planned activities] Activities include: vaccine dissemination to rural residents about how and where to get vaccinated, coordinating with existing vaccination sites and public health partners to identify isolated and/or vaccine hesitant populations, and increased rural community and individual patient literacy on benefits of broad vaccination and the safety of vaccines to more quickly allow for continued re-openings of businesses and schools.

o [Brief description of your project goal] Help our RHC service area/rural communities make informed decisions about their health and COVID-19, improve health care in rural areas, and reinforce basic messages about prevention and treatment of COVID-19 and other infectious diseases.



Application and Submission Information

Project Narrative (pg. 6-7)

1. Methodology

- Provide a description of how you propose to increase vaccine confidence and vaccine accessibility for your community, RHC service area, and/or patient population.

2. Work Plan

- See [Appendix A](#) for required work plan format and examples. You can tailor the suggested activities and approaches to fit your community and/or patient population. You can include additional activities not listed in these examples and you are not required to include all of the example activities.

3. Organizational Information

- Provide information about the person who will be responsible for managing this award (Project Director). The person you identify will be the main point of contact with HRSA staff upon award. You must also include information to verify the eligibility of the RHC or RHCs included in this application in [Attachment 1](#).



Application and Submission Information

Project Narrative Section 1: Methodology & Interest in Increased Funding (pg. 6)

- You are encouraged to use the same description language in the methodology section as used in the project abstract.
- **If you are willing and able to accept increased funding above the \$50,000 per-RHC anticipated funding amount, you MUST include a statement at the beginning of your methodology section.**
 - “[Your Organization Name] is willing and able to accept increased funding for the Rural Health Clinic Vaccine Confidence Program.”
- Applications which lack this statement of interest in increased funding will receive \$50,000 per RHC and will not be considered for increased funding.
- Applications with the statement of interest do not need to include an increased funding amount.
- You are not at a competitive advantage or disadvantage if you choose to include the increased funding statement.



Application and Submission Information

Methodology & Interest in Increased Funding Example

HEADER: METHODOLOGY

- [Your Organization Name] is willing and able to accept increased funding for the Rural Health Clinic Vaccine Confidence Program.
- [Your Organization Name] Vaccine Confidence Project planned activities include: vaccine promotion, information dissemination to rural residents about how and where to get vaccinated, coordinating with existing vaccination sites and public health partners to identify isolated and/or vaccine hesitate populations, and increased rural community and individual patient literacy on benefits of broad vaccination and the safety of vaccines to more quickly allow for continued re-openings of businesses and schools.
- [Your Organization Name] Vaccine Confidence Project goal is to help our RHC service area/rural communities make informed decisions about their health and COVID-19, improve health care in rural areas, and reinforce basic messages about prevention and treatment of COVID-19 and other infectious diseases.



Application and Submission Information

Project Narrative Section 2: Work Plan Format and Example (pg. 6-7; Appendix A)

HEADER: WORK PLAN

- See additional suggested vaccine confidence activities to include in your RHCVC work plan in Appendix A of the [NOFO](#).

ACTIVITY	DESCRIPTION	TIMELINE
EMPOWER HEALTHCARE PERSONNEL	<i>Promote vaccine confidence to RHC staff with listening sessions and regular communication</i>	<i>Ongoing basis, July - September</i>
EMAIL DISTRIBUTION	<i>Email mailing list and fundraising partners with vaccine availability and confidence messaging.</i>	<i>Monthly, July - December</i>
ENGAGE LOCAL PARTNERS	<i>Make vaccine confidence presentations at least twice a month to local partners including school board, city hall, PTA, and VFW.</i>	<i>Monthly, July - December</i>
TRANSPORTATION TO PATIENT VACCINE APPOINTMENT	<i>Set up a ride scheduling service to transport people to vaccination appointments. Set up a home visiting resource car that clinic staff can use to visit and vaccinate homebound patients.</i>	<i>As needed, July - December</i>



Application and Submission Information

Project Narrative Section 3: Organizational Information (pg. 7; Attachment 1)

HEADER: ORGANIZATIONAL INFORMATION

- Provide information about the person who will be responsible for managing this award (Project Director). The person you identify will be the main point of contact with HRSA staff upon award. You must also include information to verify the eligibility of the RHC or RHCs included in this application in [Attachment 1](#).
- Note: If the Project Director or other staff members paid through this award are also paid through other federal awards, the full-time equivalent (FTE) for those staff members may not exceed 1.0 FTE across all awards.



Application and Submission Information

Proof of Eligibility Example (Attachment 1)

The screenshot shows an Excel spreadsheet with the following data:

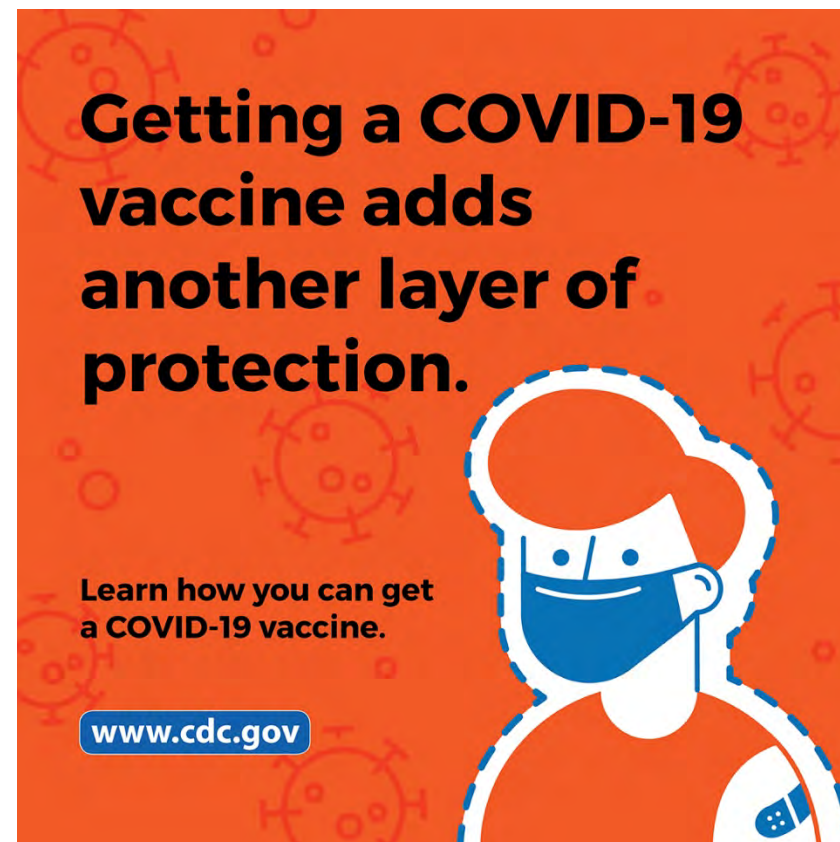
	A	B	C	D	E	F	G	H
1	RHC_Name	RHC_Street_Address	RHC_City	RHC_State	RHC_Zip_Code	RHC_County_Name	RHC_EIN	RHC_CCN
2	Example RHC, please delete t	100 Pinetree Road	Scarborou	ME	04007	Cumberland	012345678	058699
3	Example RHC, please delete	200 Oak Street	Abbot	ME	04006	Piscataquis	012345678	123456
4								
5								



Application and Submission Information

Data Sources and Resources for your Application (pg. 17)

- Program Planning Data Sources
 - [Disparities in COVID-19 Vaccination Coverage Between Urban and Rural Counties – United States, December 14, 2020 – April 10, 2021](#) (CDC/MMWR, May 2021)
 - [Vaccine Hesitancy for COVID-19: State, County, and Local Estimates](#) (HHS/ASPE April 2021)
- Other HHS-Funded COVID-19 Vaccine Outreach
 - [We Can Do This, COVID-19 Public Education Campaign](#)
 - [We Can Do This, Rural Community Toolkit](#)
 - [Vaccinate with Confidence](#)
- [CDC Photo Gallery](#) (today's webinar pictures)



Application and Submission Information

Budget (pg. 7)

- Assume that HRSA will fund awards at \$50,000 per RHC
- Organizations that own or operate multiple RHCs should submit their budget for the TOTAL amount.
 - For example: An organization that owns and operates three RHCs can apply for a total of up to \$150,000 on one application and should submit a budget for \$150,000.
- Follow the instructions in Section 4.1. iv. and v. of [HRSA SF-424 Application Guide](#) (pg. 18-31) for the budget and budget narrative (may differ from Grants.gov)
- Reminder:
 - Total Project or Program Costs are the total allowable costs incurred by the recipient to carry out HRSA-supported project
- Salary Limitations
 - Funds and program income generated by HRSA awards may not be used to pay salaries in excess of the salary rate limitation (\$199,300 in 2021).



Application and Submission Information

Budget Narrative (pg. 7-8)

- Purpose
 - How you will use the funding over the 1-year period of performance (from July 1, 2021 to June 30, 2022)
 - Aligns with the needs and activities you identified in the Project Narrative portion of your application
- **You may request reimbursement of allowable costs incurred retroactive to March 15, 2021.**
- If you have received any other CARES Act or Paycheck Protection Program and Health Care Enhancement Act funding for COVID-19 response from HRSA or other federal sources, including Provider Relief Fund Payments and RHC COVID-19 Testing Program Payments, briefly explain how the work you will do with the RHCVC Program funding will supplement and align with (but not duplicate) those funded activities.



Application and Submission Information

Budget Narrative (pg. 7-8, Appendix B)

- Required budget categories (as applicable) include:
 - Personnel
 - Fringe Benefits
 - Travel
 - Equipment (Note: You should classify items with a unit cost of \$5,000 or more and a useful life of 1 or more years as Equipment.)
 - Supplies (Note: You should classify items with a unit cost of less than \$5,000 per item as Supplies.)
 - Contractual
 - Other Direct Charges
 - Indirect Charges
- Budget narrative example can be found in Appendix B of the [NOFO](#)



Application and Submission Information

COVID-19 Rewards/Incentives

FAQs—Application of OIG's Administrative Enforcement Authorities to Arrangements Directly Connected to the Coronavirus Disease 2019 (COVID-19) Public Health Emergency

In the limited context of the COVID-19 public health emergency, a health care provider offering or providing a reward or incentive in connection with the beneficiary receiving the COVID-19 vaccine (either one or both doses) would be sufficiently low risk under the Federal anti-kickback statute and Beneficiary Inducements CMP if the following safeguards were met:

1. the incentive or reward is furnished in connection with receiving a required dose of a COVID-19 vaccine (which could include either one or two doses, depending on vaccine type);
2. the vaccine is authorized or approved by the Food and Drug Administration as a COVID-19 vaccine and is administered in accordance with all other applicable Federal and State rules and regulations and the conditions for the provider or supplier receiving vaccine supply from the Federal government;
3. the incentive or reward is not tied to or contingent upon any other arrangement or agreement between the entity offering the incentive or reward and the Federal health care program beneficiary;
4. the incentive or reward is not conditioned on the recipient's past or anticipated future use of other items or services that are reimbursable, in whole or in part, by Federal health care programs;
5. the incentive or reward is offered without taking into account the insurance coverage of the patient (or lack of insurance coverage) unless the incentive or reward is being offered by a managed care organization and eligibility is limited to its enrollees;
6. the incentive or reward is provided during the COVID-19 public health emergency.

All HRSA awards are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements at [45 CFR part 75](#).



Application and Submission Information

Funding Restrictions (pg. 11-12)

- You may request funding for a period of performance of one year. HRSA anticipates that RHCVC awards will be approximately \$50,000 per RHC per year (inclusive of direct and indirect costs).
- You cannot use funds under this notice to build or acquire real property, construction or major renovation, or alteration of any space.
- All program income generated as a result of awarded funds must be used for approved project-related activities. The program income alternative applied to the award(s) under the program will be the addition/additive alternative. You can find post-award requirements for program income at 45 CFR § 75.307.
- You are required to have the necessary policies, procedures, and financial controls in place to ensure compliance with all legal requirements and restrictions applicable to the receipt of federal funding.
- HRSA's Standard Terms apply to this program. Please see Section 4.1 of [HRSA's SF-424 Application Guide](#) for more information regarding funding restrictions.



Application and Submission Information

Application Components (pg. 10)

Form Name	Instructions
Application for Federal Assistance (SF-424) [V3.0]	Complete form in Grants.gov
Attachments [V1.2]	Use form to attach Proof of Eligibility as Attachment 1
Project/Performance Site Location(s) [V3.0]	Complete form in Grants.gov
Project Narrative Attachment Form [V1.2]	Use form to upload your Project Narrative document
Grants.gov Lobbying Form [V1.1]	Complete form in Grants.gov
Budget Narrative Attachment Form [V1.2]	Use form to upload your Budget Narrative document
Budget Information for Non-Construction Programs (SF-424A) [V1.0]	Complete form in Grants.gov
Key Contacts [V2.0]	Complete form in Grants.gov
Project Abstract Summary [V2.0]	Complete form in Grants.gov



Award Administration Information

Award Notice/Notice of Award (pg. 13)

- Notice of Award (NOA) issued mid-July, 2021.
- Period of Performance: July 1, 2021 to June 30, 2022.
- Oversight: HRSA staff will review program requirements and grants processes with RHCs within two weeks of the Notice of Award and conduct quarterly check-ins with recipients.
- See Section 5.4 of HRSA's [SF-424 Application Guide](#) for additional information.



Award Administration Information

Reporting (pg. 14)

Reporting Award recipients must comply with [Section 6 of HRSA's SF-424 Application Guide](#) and the following reporting and review activities:

- 1. Federal Financial Report.** The Federal Financial Report (SF-425) will be required no later than October 30, 2022 for the one-year budget period ending June 30, 2022. The report is an accounting of expenditures under the project that year. The recipient must submit financial reports electronically through the Payment Management System. HRSA will provide more specific information in the NOA.
- 2. Integrity and Performance Reporting.** The NOA will contain a provision for integrity and performance reporting in FAPIIS, as required in 45 CFR part 75 Appendix XII.
- 3. Final performance/closeout report(s).** Organizations are required to submit performance data and information to HRSA at the end of the period of performance to enable HRSA to determine the impact of the activities and RHCVC Program more generally. Further instructions for this report will be provided during the period of performance.



How to Apply

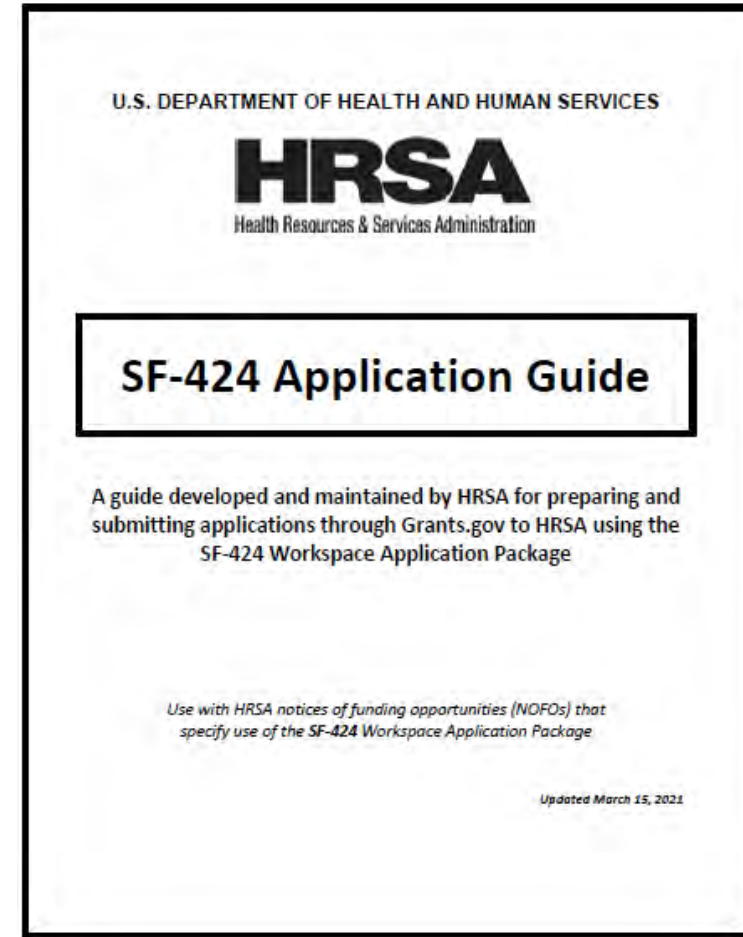
Summary

Register in 3 different systems using EIN/TIN (one registration per EIN/TIN)

- [DUNS](#)
- [SAM](#)
- [Grants.gov](#)

Follow instructions in [SF-424 Application Guide](#)

Applications must be complete and validated by Grants.gov prior to the deadline to be considered.



How to Apply Registration

Must register in 3 different systems

System	Why is it important?	Website	Support
Data Universal Number System (DUNS)	DUNS numbers are required to identify organizations and it tracks how federal grant money is allocated.	https://www.dnb.com/duns-number/get-a-duns.html	https://support.dnb.com/ 1-844-225-9892 customerlearning@dnb.com
System for Award Management (SAM)	Designating an e-business point of contact. Registering with SAM is required for organizations to use Grants.gov	https://sam.gov/SAM/pages/public/index.jsf	Federal Service Desk https://www.fsd.gov/gsafsd_sp 1-866-606-8220 Monday-Friday, 8 AM to 8 PM ET.
Grants.gov	Submit grant applications	https://www.grants.gov/web/grants/register.html	https://gditshared.servicenowservices.com/hhs_grants 1-800-518-4726 support@grants.gov 24 hours a day 7 days a week.



How to Apply

START NOW

The 3 step registration process can take up to 3 weeks



START NOW!

- [SF-424 Application Guide](#) – Link found throughout [NOFO](#)
- Registration is FREE!

How to Apply

Step 1: Dun & Bradstreet Number (DUNS)

- Your organization must have a DUNS Number.
- Register with DNB at <http://fedgov.dnb.com/webform>
- Requires EIN/TIN from IRS and organization information
- You will be issued a DUNS Number
- ~1 – 2 business days

dun & bradstreet
Government iUpdate

[Webform Home](#)

Welcome to Government iUpdate – The easy way to manage Dun & Bradstreet’s information on your company!
Government iUpdate provides non-publicly traded companies that are doing business with the US Federal Government convenient access to Dun & Bradstreet information on their business. Registered users can view, print, and submit updates to their Dun & Bradstreet record as well as request a new DUNS Number. DUNS Number assignment and modifications are done rapidly and free of charge.

Register to use iUpdate!
Sign-up now to access your company’s information. To safeguard your identity, registrants will be asked to answer a short authentication quiz. Click below to get started.
[Start Now](#)

Find DUNS or Request new DUNS
Enter here to find your company’s DUNS Number or request a new DUNS Number.
[Start Now](#)

Already Registered? - Sign-in to iUpdate
iUpdate ID (Your Email Address)

Password ***See Important Alert Below***

[Start Now](#) [Forgot your password?](#)



How to Apply

Step 2: System for Award Management (SAM)

- Your organization must register with the System for Award Management (SAM).
- Use DUNS to register with SAM at www.SAM.gov
- Establish E-Business Point of Contact (EBiz POC): Individual who oversees all activities for organization within Grants.gov and approves the AOR
- ~7-10 business days after registering, including submitting notarized letter to SAM

Home Search Data Bank Data Services Help

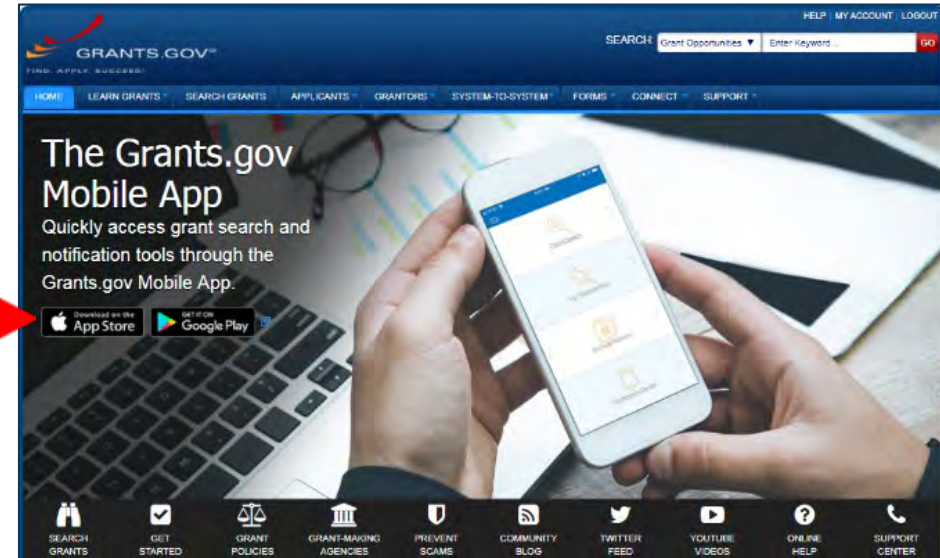
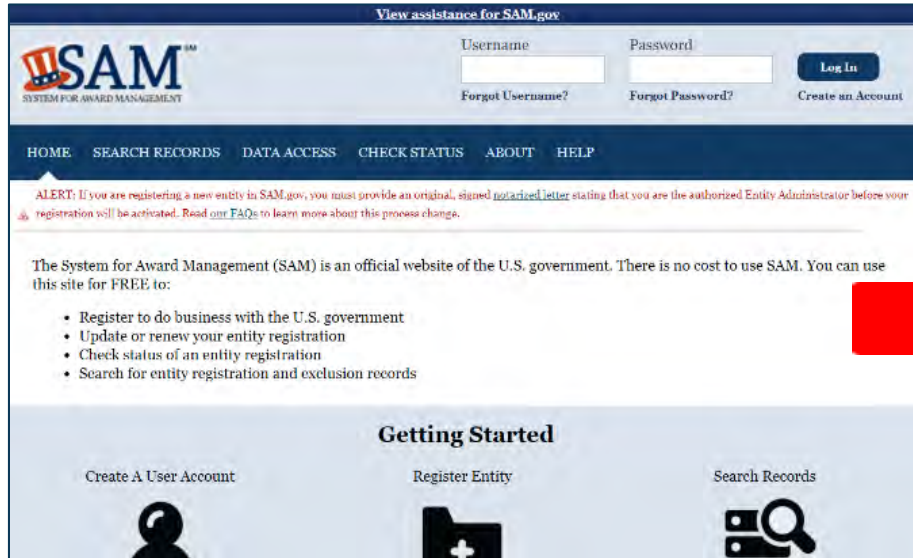
The screenshot shows the SAM.GOV website. At the top, there are navigation links: Home, Search, Data Bank, Data Services, and Help. The main header features the SAM.GOV logo and a badge that says "Official U.S. Government Website 100% Free". Below the header, there are two main sections. The left section is titled "The Official U.S. Government System for:" and lists several services: Contract Opportunities (was fbo.gov), Contract Data (Reports ONLY from fpds.gov), Wage Determinations (was wdol.gov), Federal Hierarchy (Departments and Subtiers), Assistance Listings (was cfda.gov), Entity Registration (Including Disaster Response Registry), Entity Reporting (SCR and Bio-Preferred Reporting), and Exclusions. The right section is titled "Register Your Entity" and contains three buttons: "Get Started", "Renew Entity", and "Check Registration Status". The "Get Started" and "Renew Entity" buttons are circled in red.

100% FREE

New SAM user

Existing SAM user

How to Apply SAM and Grants.gov



- Organization data and EBiz POC information are transferred from SAM to Grants.gov
- People within the organization are able to register with Grants.gov and then add a profile to associate with organization

How to Apply

Step 3: Grants.gov

GRANTS.GOVSM
FIND. APPLY. SUCCEED.SM

HELP | REGISTER | LOGIN

SEARCH: Grant Opportunities Enter Keyword... GO

HOME | LEARN GRANTS | SEARCH GRANTS | APPLICANTS | GRANTORS | SYSTEM-TO-SYSTEM | FORMS | CONNECT | SUPPORT

REGISTER

Registering with Grants.gov

One account to manage all your profiles, applications, and subscriptions.

Applicants

1. Complete the required form fields.
2. Confirm your email address.
3. Add an organization applicant profile or an individual applicant profile after registering.

Learn more on the [Applicant Registration page](#).

Grantors

1. Complete the required form fields.
2. Confirm your email address.
3. Ask your agency point of contact to associate your email address with the agency.

Learn more on the [Grantor Registration page](#).

[Get Registered Now »](#)

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HEALTH & HUMAN SERVICES: [HHS.gov](#) | [EEOC / No Fear Act](#) | [Accessibility](#) | [Privacy](#) | [Disclaimers](#) | [Site Map](#)

COMMUNITY: [USA.gov](#) | [WhiteHouse.gov](#) | [USAspending.gov](#) | [SBA.gov](#) | [CFDA.gov](#) | [SAM.gov](#) | [DUNS Request](#) | [Report Fraud](#)

GRANTS.GOV > Register

REGISTER

Please enter your information below to create an Account.

- Required fields are denoted with an asterisk (*).
- The following special characters are allowed: question marks, periods, dashes, underscores, and @ symbol (Password is not subject to these restrictions).
- Username cannot resemble UEL. 12 character usernames must contain a special character.
- Password requirements: Your password must contain at least eight characters including: at least one uppercase letter (A-Z), at least one lowercase letter (a-z), at least one number (0-9); and at least one special character (e.g. ! @ # \$ % ^ & *). Your password must not contain dictionary words, names, or your Username.
- If Mobile Phone Number is provided, it must be a US number and it can be used to reset forgotten password.

Contact Information:

*First Name:

Middle Initial:

*Last Name:

*Email Address:

*Primary Phone Number:

Mobile Phone Number (US Only):
(Can be used to reset forgotten password)

Confirm Mobile Phone Number:

Account Details:

*Username:

*Password: (Case Sensitive)

*Confirm Password: (Case Sensitive)

Communications:

Subscribe:

- GRANTS.GOV ALERTS
Yes, I want to receive email messages containing time-sensitive information about Grants.gov changes that potentially impact users.
- GRANTS.GOV NEWSLETTER
Yes, I want to receive occasional emails highlighting system enhancements, training resources, and other topics relevant to the federal grant community.

[Continue »](#) [Cancel](#)



How to Apply Registration

Grants.gov (Roles)

EBiz Point of Contact, AOR role, Workspace Manager role

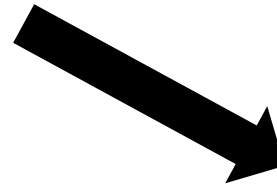
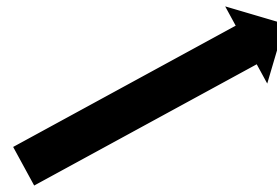


Each **organization** has one EBiz POC

EBiz POCs assigned in SAM.gov



EBiz POC assigns roles:
AOR or Workspace Manager



Users with **Standard AOR role** can submit applications

One organization can have many users with AOR role



Users with **Workspace Manager role** can create workspaces

[Refer to Workspace Roles page for more detailed information](#)

How to Apply

Reminders

- Read [NOFO](#) for all the details
- Register in DUNS, SAM and Grants.gov ASAP (or make sure your information is current)
- Review application to make sure you have included the required information

- Submit application in Grants.gov by **June 23, 2021 at 11:59 p.m. ET**

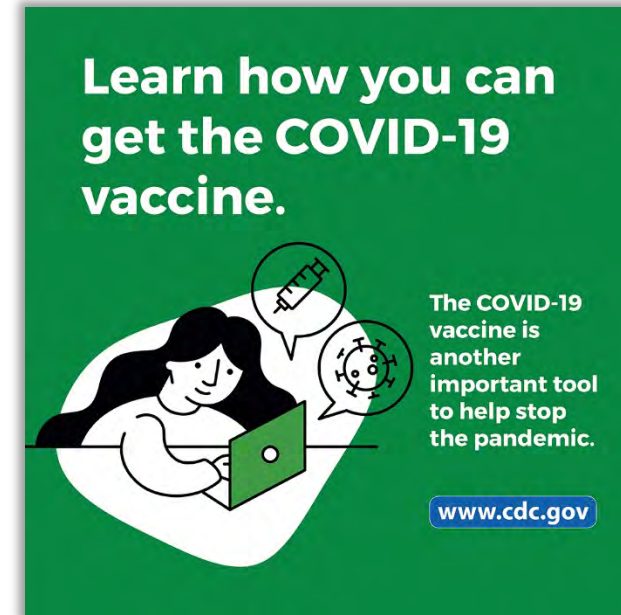
HRSA suggests submitting applications to Grants.gov at least **3 calendar days before the deadline** (June 20, 2021).



Application Review Information

Application Scoring

1. Proof of Eligibility, Attachment 1
2. Methodology
3. Work Plan
4. Organizational Information
5. Budget Narrative
6. Budget, SF-424A budget forms



- The RHCVC Program will use a review process that funds **ALL ELIGIBLE ENTITIES** that submit complete applications and have an acceptable assessment of risk.
- HRSA will review and assess each application for completeness and eligibility using the above review elements.

Application Completeness Checklist

Appendix C

- Have I read this [NOFO](#) thoroughly and referred to the [SF-424 Application Guide](#) where indicated?
- Is my organization a Medicare-certified RHC or an organization that owns and operates Medicare-certified RHCs and therefore eligible to apply for this funding opportunity?
- Am I applying to the correct funding opportunity number for the RHCVC Program (HRSA-21-142)?
- Does my proposed project increase vaccine confidence and accessibility for my community and/or patient population as specified in this [NOFO](#)?
- Does my application request a total of \$50,000 per RHC, understanding that the total award amount may be higher or lower depending on the number of applicants?
- Have I completed all forms and attachments as requested in Section IV of this [NOFO](#) and in the [SF-424 Application Guide](#)?**
- Have I provided the information requested in this [NOFO](#) in 10-15 pages or less?
- Will I apply at least 3 calendar days before the deadline to accommodate any unforeseen circumstances?
- Have I received confirmation emails from Grants.gov noting validation of successful submission?



RHC Vaccine Confidence Program Communication

- Questions
 - ✓ RHCVaxConfidence@hrsa.gov
- HRSA RHC Vaccine Confidence Program Webpage
 - ✓ <https://www.hrsa.gov/coronavirus/rural-health-clinics/confidence>
- Subscribe to RHC Vaccine Confidence Program Listserv for HRSA updates.
 - ✓ <https://list.nih.gov/cgi-bin/wa.exe?SUBED1=RHC-VAX-CONFIDENCE-PROGRAM&A=1>

Subscribe or Unsubscribe to the RHC-VAX-CONFIDENCE-PROGRAM List

RHC-VAX-CONFIDENCE-PROGRAM@LIST.NIH.GOV

This screen allows you to subscribe or unsubscribe to the RHC-VAX-CONFIDENCE-PROGRAM list. To confirm your identity and prevent third parties from subscribing you to a list against your will, an email message with a confirmation code will be sent to the address you specify. Simply wait for this message to arrive, then follow the instructions to confirm the operation.

Alternatively, you can update your subscription interactively by [logging in with your LISTSERV password](#).

Name:

Email Address:

Select List:

Subscription Type Regular [NODIGEST]
 Digest (traditional) [NOMIME DIGEST]



Contact Information

Lindsey Nienstedt

Public Health Analyst

**Federal Office of Rural Health Policy
(FORHP)**

Health Resources and Services

Administration (HRSA)

Email: RHCVaxConfidence@hrsa.gov

Phone: (301) 443-0835

Nancy Gaines

Grants Management Specialist

**Division of Grants Management
Operations (OFAM)**

Health Resources and Services

Administration (HRSA)

Email: RHCVaxConfidence@hrsa.gov

Phone: (301) 443-5382



Questions

FAQs and Open Q&A (Q&A icon at bottom of your screen)

Can we brand materials we develop with our logo?

Yes.* You may put your provider logo on materials you develop. HRSA requires grant recipients acknowledge HRSA when describing projects or programs funded in whole or in part with HRSA funds. Information and suggested language can be found [here](#).

Do I need to register for DUNS, SAM, and Grants.gov for each RHC owned by my organization?

No. Organizations that own or operate multiple RHCs should register with DUNS, SAM, and Grants.gov using their EIN.

Does the RHCVC Program include other infectious diseases such as childhood immunizations, flu, and pneumococcal vaccines?

Yes. You may use grant funds to promote other infectious disease vaccines and combat general vaccine hesitancy.

*All HRSA awards are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements at [45 CFR part 75](#).



Questions

FAQs and Open Q&A (Q&A icon at bottom of your screen)

Can we use RHCVC Program funds to record a PSA?

Yes.* RHCs may distribute/host/participate in a PSA to educate people about the importance of vaccination and basic prevent measures to prevent COVID-19. See Appendix A of the NOFO for more details.

Can we use RHCVC Program funds to purchase equipment for vaccine appointments and community outreach activities?

Yes.* As long as the expense is allowable, allocable, and reasonable. Equipment (e.g. van for transportation) are permitted expenses so long as the equipment need, type and cost is reasonably justified and the equipment will be used for the RHCVC Program for the duration.

Can we partner with a local organization for RHCVC Program outreach?

Yes. Community partnerships are encouraged and an allowable use of RHC Vax Confidence Program funds. List the local organization in your budget narrative as a subrecipient. See the SF-424 Application Guide and Appendix A of the NOFO for more details.

*All HRSA awards are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements at [45 CFR part 75](#).



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