

Frequently Asked Questions

HRSA-19-075 FY 2019 Non-Competing Continuation Update (NCC Update)
Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program Formula Awards
April 2019

Purpose

This Frequently Asked Questions (FAQs) document serves as a resource for MIECHV awardees in developing applications in response to the FY 2019 Non-Competing Continuation Update (HRSA 19-075). Awardees are encouraged to fully read HRSA-19-075 NCC Update [here](#) in its entirety for complete information.

Additional Resources

- The pre-recorded technical assistance webinar for HRSA-19-075 is accessible from the MIECHV Program webpage under Program Implementation and Fiscal Management Resources [here](#).
- The EHBs Applicant User Guide is accessible [here](#).

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Funding and Eligibility

1. How much total funding is available for FY 2019 MIECHV formula grants?

In FY 2019, up to \$351 million is available for awards to the 56 eligible entities that currently receive FY 2018 MIECHV formula funding to continue to deliver coordinated and comprehensive high-quality, and voluntary early childhood home visiting services to eligible families.

2. How were award ceiling amounts calculated?

Consistent with the FY 2018 funding formula, the following formula is applied to FY 2019 funding available to states and territories (up to \$351.0 million):

- Need Funding—Up to \$123.0 million of the grant allocation available under this funding opportunity is distributed based on the proportion of children under five living in poverty as calculated by the Census Bureau’s Small Area Income and Poverty Estimates (SAIPE). 2017 SAIPE data were used. Since SAIPE data are not available for territories, the Puerto Rico Community Survey (PRCS) was used as a proxy to determine need funding for Puerto Rico.

The calculated amount is subtracted by the proportion of the FY 2015 de-obligation amount to the total FY 2015 award, as reported to HRSA as of March 19, 2019, if applicable.

There is a \$1.0 million minimum need-based award for recipients.

- Base Funding—Approximately \$228.0 million of the grant allocation available under this funding opportunity is proportionally distributed based on each awardee’s base funding portion of the FY 2018 formula grant award ceiling amounts.
- Guard Rails—In an effort to maintain stability, the total amount for which an applicant may apply will be adjusted, where appropriate, to ensure that any available recipient funding does not fluctuate by more than 7.5 percent from the prior year award.

3. How much can eligible entities request?

Eligible entities may not request more than the total grant award ceiling for their state, territory or jurisdiction, and may choose to request less.

4. When will awards be issued?

HRSA expects to issue Notices of Award prior to the project period start date of September 30, 2019.

5. What is the period of performance?

The period of performance extends from September 30, 2019 to September 29, 2021.

6. Will competitive awards be awarded in FY 2019?

No. HRSA will only issue awards for formula grants in FY 2019.

Application Submission

7. Who can submit the application?

Only the EHB-designated Authorizing Official (AO) can submit the application to HRSA. Program Directors and other authorized staff may prepare the application for review and submission by the AO. Applicants are strongly encouraged to communicate with the AO and leave adequate time for him/her to complete the submission process prior to the deadline. Please refer to the EHBs Applicant User Guide [here](#) for complete instructions on how to submit the application.

8. Where can I obtain a copy of the FY 2019 NCC Update (HRSA-19-075)?

The FY 2019 NCC Update (HRSA-19-075) is accessible on the MIECHV website [here](#).

9. When are applications due?

Applications are due May 30, 2019 no later than 11:59 p.m. Eastern Time in the HRSA EHBs.

10. When will the HRSA Electronic Handbooks (EHBs) module be available for NCC Update submission?

The HRSA EHBs module is available for submissions now. Please refer to the EHBs Applicant User Guide [here](#) for complete instructions on how to submit the application.

11. What is the activity code for this grant award?

The activity code for this grant is X10.

12. Where is the eligibility code to access the EHBs?

See the EHBs email communication sent April 10, 2019 to Authorizing Officials and Project Directors designated in the EHBs for the eligibility code to access the EHBs. If you did not receive this email, please contact your HRSA Project Officer.

13. What is main difference between application submission requirements this year compared to last year?

This year, applications should be submitted in the EHBs by accessing an EHBs link and eligibility code sent to Authoring Officials and Project Directors designated in the EHBs. Last year, FY 2018 applications were submitted on the [Grants.gov](#) Workspace.

14. Are there any major changes to program activities and expectations in FY 2019?

Program activities and expectations in FY 2019 are largely consistent with those in FY 2018.

Please note restrictions around which types of evaluations you can continue to allocate FY 2019 funds starting on page 7 of the NCC Update.

In FY 2018, HRSA issued a supplement of up to \$200,000 to each awardee's formula award to support activities related to the statewide needs assessment. There is no funding supplement in FY 2019.

15. What is in a complete FY 2019 NCC Update submission?

A complete submission includes 5 parts:

- 1) The first is completion of three standard OMB forms built in the EHBs:
 - SF-424 Instructions for Application for Federal Assistance
 - SF-424A Budget Information - Non-construction Programs; and
 - SF-424B Assurances - Non-construction Programs.

The remaining four parts of the application must be uploaded under the applicable section in the EHBs:

- 2) Abstract
- 3) FY 2019 Project Narrative
- 4) FY 2019 Budget Narrative; and
- 5) Attachments, of which 4 are required and others to be submitted as applicable.

16. Which attachments are required?

Attachments 1 through 4 are required. Please read the NCC Update carefully to assess which additional attachments are required in your submission.

Required:

Attachment 1: Work Plan Timeline

Attachment 2: At-Risk Communities, Local Implementing Agencies, and Caseload of Family Slots

Attachment 3: Period of Availability Spreadsheet

Attachment 4: Maintenance of Effort Chart

If applicable:

Attachment 5: Model Developer Documentation

Attachment 6: Updated Organizational Chart

Attachment 7: Justification to use the Enrollment Slot Method

Attachment 8-15: Other relevant documents (e.g. indirect cost rate agreements, etc.)

Project Narrative

17. Are there major changes to the information I have to report in the Project Narrative this year?

Last year, the FY 2018 NOFO requested more detail in the Project Narrative.

This year, the FY 2019 NCC Update Project Narrative reduces the amount of information you have to report to HRSA, and consists of two main parts: 1) Progress to date and significant changes since the beginning of the FY 2018 period of performance to the present; and 2) proposed activities for the FY 2019 period of performance, extending from September 30, 2019 through September 29, 2021.

Instructions for the Project Narrative start on page 3 of the FY 2019 NCC Update.

18. Will the Technical Assistance (TA) Resource Tables be made available again this year?

Yes. The FY 2019 NCC Update TA Resource Tables can be accessed [here](#).

19. Do I have to use the templates included in the TA Resource Tables?

No. The FY 2019 NCC Update TA Resource Tables are for optional use. You can use templates of your own, if you wish, as long as they include the required information outlined in the NCC Update.

Budget

20. Will additional supplement funds to support activities related to the update to the statewide needs assessment be issued this year?

No additional supplement funds will be issued this year.

21. How should I budget for the All Grantee Meeting?

You should budget for a total of two All Grantee Meetings (AGM) in the Washington, DC area, one for each year of the two-year project period. For each AGM, you should budget for up to five people for five days, and can budget for fewer than five people. If you want to bring more than five people, please consult your HRSA Project Officer. You may budget any remaining FY 2018 formula funds or FY 2019 formula funds, as applicable, to support the costs of these two meetings.

22. How should I report the level of effort for home visitor personnel (e.g. full-time equivalent)?

You must provide a breakdown of costs, including the level of effort for home visitor personnel (e.g., full-time equivalent). For each LIA contract, include the level of effort for each home visitor:

- Example 1: HV 1: 100%; HV 2: 75%; HV 3: 50%; or HV 4: 50%; or
- Example 2: 1 home visitor at 100% FTE; 1 home visitor at 75% FTE; 2 home visitors at 50% FTE.

As an option, you may choose to provide a listing of each home visitor personnel. Please note that HRSA reserves the right to request a more detailed, line item breakdown for each contract.

23. Are there any changes to how I should submit a budget narrative this year compared to last year?

Last year...	This year...
Verification of administrative expenditures and recipient-level infrastructure costs reported in the Period of Availability spreadsheet.	Verification of administrative expenditures and recipient-level infrastructure costs reported in a detailed line-item breakout within the budget narrative.
Evaluation costs reported in the Period of Availability spreadsheet.	Evaluation costs reported in a detailed line-item breakout within the budget narrative.
Supplement funds of up to \$200,000 for the statewide needs assessment update, in addition to formula award.	No supplement funds in addition to FY 2019 formula award. Option to budget FY 2019 formula funds to support costs of completing the statewide needs assessment update; include a detailed line-item breakdown in the budget narrative; requesting funds for this purpose should NOT result in a reduction in home visiting services.
Maintenance of effort chart: Actual for the fiscal year prior, and estimate for the current fiscal year of application.	Maintenance of effort chart: Actual for two fiscal years prior, actual for fiscal year prior, and estimate for current fiscal year of application. Complete instructions are included in Attachment 4 on page 13 of the NCC Update.
At-risk communities, local implementing agencies, and caseload of family slots reported in separate attachments.	At-risk communities, local implementing agencies, and caseload of family slots reported in one attachment.

24. Can I budget FY 2019 formula funds for activities to complete the statewide needs assessment update?

Yes. In FY 2018, you were able to apply for up to \$200,000 in supplement funds to support activities to complete the statewide needs assessment update. The option to allocate FY 2019 formula funds is intended to further support your ability to comply with the statutory requirement for submission of the update by October 1, 2020.

Budgeting FY 2019 formula funds to support costs of completing the statewide needs assessment update should NOT result in a reduction in home visiting services. Page 6 of the NCC Update instructs you to describe how you will ensure allocation of funds to the needs assessment will not result in a reduction in home visiting services compared to the previous year.

25. Will FY 2019 formula funds allocated for the statewide needs assessment update count towards the 25% limit on recipient-level infrastructure costs?

No. FY 2019 formula funds proposed for a statewide needs assessment update are NOT subject to the recipient-level infrastructure limit. However, these funds, like all MIECHV grant funds, are subject to the statutory requirement that not more than 10 percent of the grant award may be used for administering the grant. See page 12 of the NCC Update for complete instructions on proposing FY 2019 funds for the statewide needs assessment update.

26. Can I propose FY 2019 formula funds to support continuous quality improvement (CQI) activities as part of my CQI Plan?

Yes. Proposed activities for CQI should align with your HRSA-approved CQI Plan.

Other

27. Is there a minimum or maximum amount I can propose for evaluations of state-led activities?

There is no minimum or maximum amount requirement for allocating formula funds for evaluations of state-led activities. The NCC Update refers applicants to [Appendix A of HRSA-18-091](#) which states:

Budgets for evaluations should be: 1) appropriate to the evaluation design and question(s); 2) adequate to ensure quality and rigor, and; 3) in line with available program and organizational resources. HRSA recommends a maximum funding ceiling of 10 percent of the total requested budget for evaluation activities. HRSA also recommends that a minimum of \$100,000 be devoted to evaluation-related activities to ensure the appropriate level of quality and rigor.

28. Can I use FY 2019 formula funds for a **new** state-led evaluation?

No. New state-led evaluations cannot be funded through the FY 2019 NCC Update. However, evaluations (new or continuing) of a promising approach home visiting model can be funded through this NCC Update.

29. Can I continue a **previous** state-led evaluation?

Yes. If the evaluation is continuing from an FY 2016 competitive innovation award, and/or an FY 2017 or FY 2018 formula award, you should:

- Describe progress to date.
- Describe how findings from the existing evaluation to date were used to inform current evaluation questions, program improvement, and/or practice change.
- Describe how the evaluation meets either of the following criteria (not required for continuing promising approach evaluations):
 - One or more new questions of interest appropriate to the evaluation design and analysis plan.
 - An innovation that will increase study rigor, such as a proposed increase to the study sample size. Describe how the innovation will enhance the evaluation's rigor and the generalizability of evaluation findings.

Refer to page 7 of the NCC Update for complete instructions on continuing state-led evaluations. You can also refer to [Appendix A of HRSA-18-091](#) for complete information on HRSA's expectations for research and evaluation activities.

30. If I report in the FY 2019 NCC Update that I will use a specific method (i.e., simplified or independent) for identifying at-risk communities in my statewide needs assessment update, is this plan binding?

No. Stating your intention for use of the simplified method or an independent method to identify at-risk communities in your statewide needs assessment update is non-binding and does not preclude you from changing your selected method at a later time. For complete information on the simplified method or independent method, access the Supplemental Information Request (SIR) guidance documents and technical assistance resources on the MIECHV Program webpage under [Program Implementation and Fiscal Management Resources](#).

31. What should I do if I need to propose changes to FY 2018 formula budgeted activities to complete the statewide needs assessment update?

Please reach out to your HRSA Project Officer for guidance on how you can submit a request to revise your approved FY 2018 budget. Additionally, refer to page 5-6 of the NCC Update for complete instructions on the information you need to submit in your Project Narrative regarding your plans for completing the statewide needs assessment update.

32. In my FY 2019 NCC Update application, can I propose re-locating home visiting services to communities NOT identified as at-risk in my most recently completed statewide needs assessment before my statewide needs assessment update is complete? What if these communities were identified as at-risk in data recently provided by HRSA in my state's MIECHV Needs Assessment Data Summary?

No. You should continue to refer to your most *current and complete* statewide needs assessment for your current list of identified at-risk communities. As noted in the Statewide Needs Assessment

Supplemental Information Request (SIR): “beginning in FY 2021 and in subsequent years (pending the availability of future funding), HRSA will use the information submitted in [the needs assessment update] in tandem with information submitted through funding applications to assure compliance with all statutory requirements regarding the provision of services in at-risk communities.”

If you would like to re-locate home visiting services to an at-risk community identified in your most current and complete statewide needs assessment, then you can propose re-locating home visiting services in your FY 2019 NCC Update application or submit a prior approval request for the change at any time.

HRSA encourages you to carefully consider what the implications would be if the statewide needs assessment update you are working on now indicates, once complete, that any newly served community is no longer at-risk.