

## Frequently Asked Questions

HRSA-20-101 FY 2020 Non-Competing Continuation Update (NCC Update)  
Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program Formula Awards  
March 2020

### Purpose

This Frequently Asked Questions (FAQs) document serves as a resource for MIECHV awardees in developing applications in response to the FY 2020 Non-Competing Continuation Update (HRSA-20-101). Awardees are advised to fully read [HRSA-20-101 NCC Update](#) in its entirety for complete information.

### Additional Resources

- [Technical Assistance Webinar](#) - A recording of the March 10<sup>th</sup> webinar outlining instructions and helpful hints to avoid common pitfalls.
- [EHBs Applicant User Guide](#) - This guide will provide detailed instructions on how to access and submit the FY 2020 Non-Competing Continuation Update through the EHBs.

### Table of Contents

I. Funding and Eligibility .....	1
II. Application Submission .....	2
III. Project Narrative .....	4
IV. Budget .....	5
V. Other .....	5

### I. Funding and Eligibility

#### 1. How much total funding is available for FY 2020 MIECHV formula grants?

In FY 2020, up to \$342 million is available for awards to the 56 eligible entities that currently receive FY 2019 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?

The following formula is applied to FY 2020 funding available to states, nonprofit organizations, and territories:

- Need Funding—Approximately one-third of the grant allocation available under this funding opportunity was distributed based on the proportion of children under 5 living in poverty as calculated by the Census Bureau’s Small Area Income and Poverty Estimates (SAIPE). The 2018 SAIPE data were used to the extent available, and these data may vary from previous year’s SAIPE data. The Puerto Rico Community Survey (PRCS) data were used as a proxy to determine need funding for Puerto Rico.

If applicable, the calculated amount was reduced by the proportion of the FY 2016 de-obligation amount to the total FY 2016 award, as reported to HRSA as of February 5, 2020.

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

- Base Funding—Approximately two-thirds of the grant allocation available under this funding opportunity was proportionally distributed based on each recipient’s base funding portion of the FY 2019 formula grant award ceiling amounts.
- Guard Rails—In an effort to maintain stability, the total amount for which an applicant may apply was 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, 2020.

### 5. What is the period of performance?

The period of performance extends from September 30, 2020 to September 29, 2022.

### 6. Will competitive awards be awarded in FY 2020?

No. HRSA will only issue awards for formula grants in FY 2020.

## II. Application Submission

### 7. Who can submit the application?

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

### 8. Where can I obtain a copy of the FY 2020 NCC Update (HRSA-20-101)?

The [FY 2020 NCC Update \(HRSA-20-101\)](#) is accessible on the MIECHV program webpage.

### 9. When are applications due?

HRSA recognizes that this is a challenging time and the COVID-19 public health emergency is impacting home visiting service delivery in states and local programs in multiple ways. HRSA is granting an extension for submission of the FY 2020 Non-Competing Continuation Update funding application until May 29, 2020 at 11:59pm ET. Please reach out to your Project Officer if you have any questions.

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](#) 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 February 27, 2020 to AOs and PDs 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?

There are no major changes in the submission requirements this year. Applications should be submitted in the EHBs by accessing an EHBs link and eligibility code sent to AOs and PDs designated in the EHBs.

14. Are there any major changes to program activities and expectations in FY 2020?

Program activities and expectations in FY 2020 are largely consistent with those in FY 2019.

Please note the restrictions on types of evaluations to which you can allocate FY 2020 funds. These are described starting on page 7 of the NCC Update.

15. What is in a complete FY 2020 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; and
  - SF-424A Budget Information - Non-construction Programs.

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

- 2) Abstract;
- 3) FY 2020 Project Narrative;
- 4) FY 2020 Budget Narrative; and
- 5) Attachments, of which 4 are required for all applications, and others must be submitted as applicable.

#### 16. Which attachments are required?

Attachments 1 through 4 are required for all applications. All other attachments are required as applicable. Please read the NCC Update carefully to assess which additional attachments are required in your submission.

Required Attachments:

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

Attachment 5: *(Only if applicable)* Updated Organizational Chart

Attachment 6: *(Only if applicable)* Model Developer Documentation

Attachment 7: *(Only if applicable)* Justification to use the Enrollment Slot Method

Attachment 8: *(Only if applicable)* Indirect Cost Rate Agreement

Attachments 9 -15: Other relevant documents

### III. Project Narrative

17. In the outline of required sections on p. 3 of the [HRSA-20-101 NCC Update](#), in the Project Narrative, *Section I.A.2 Description of Specific Implementation Activities* is referenced, but not subsequently not described in the body of the guidance. Is this section required?

Applicants should disregard the reference to *Section I.A.2 Description of Specific Implementation Activities* in the Outline of Required Sections, and are not required to respond to this section in the application. Please follow the instructions for submitting the required sections of the Project Narrative application as outlined in the body of the NCC Update, beginning on p. 4.

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

The FY 2020 NCC Update Project Narrative is similar to the FY 2019 NCC Update regarding 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 2019 period of performance to the present; and 2) proposed activities for the FY 2020 period of performance, extending from September 30, 2020 through September 29, 2022.

Instructions for the Project Narrative start on page 4 of the FY 2020 NCC Update.

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

Yes. The FY 2020 NCC Update [TA Resource Tables](#) are available this year.

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

No. The FY 2020 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.

## IV. Budget

21. Are fees/dues related to membership in a professional or technical organizations an allowable expenditure under the MIECHV grant?

Dues or membership fees are allowable to the extent described in the [U.S. Department of Health and Human Services \(HHS\) Grants Policy Statement \(GPS\)](#), as follows:

[A]llowable as an indirect cost for organizational membership in business, professional, or technical organizations or societies. Payment of dues or membership fees for an individual's membership in a professional or technical organization is allowable as a fringe benefit or an employee development cost, if paid according to an established organizational policy consistently applied regardless of the source of funds.  
(HHS GPS, page II-33).

22. 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. If you want to bring more than five people, please consult with your HRSA Project Officer. You may budget any remaining FY 2019 formula funds or FY 2020 formula funds, as applicable, to support the costs of these two meetings.

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

For each LIA contract, you must provide a breakdown of costs, including the level of effort for home visitor personnel (e.g., full-time equivalent). Both of the following examples are allowable:

- 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.

24. Must I propose FY 2020 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.

## V. Other

25. Is Attachment 8 (Indirect Cost Rate Agreement) a required attachment this year?

If your organization has an approved indirect cost rate agreement or cost allocation plan and will charge the MIECHV grant for indirect costs, the approved indirect cost rate agreement must be included with the application as Attachment 8. The approved rate used to calculate the indirect costs must also be reflected in the budget narrative.

26. Does the Indirect Cost Rate Agreement count towards the 50-page limit for the application submission?

Yes, the Indirect Cost Rate Agreement does count toward the total 50-page limit. However, if you are concerned about going over the page limit, you may submit only the first page of the indirect cost agreement which provides the Indirect Cost Rate and Rate Type with date of the agreement as Attachment 8.

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

Please note that only FY 2019 state-led evaluations may be continued using FY 2020 Formula Funds. While 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 2020 formula funds for a **new** state-led evaluation?

No. New state-led evaluations cannot be funded through the FY 2020 NCC Update. However, evaluations (new or continuing) of a promising approach home visiting model can be funded using FY 2020 formula funds.

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

Yes, but only if the evaluation is a continuation of an existing evaluation proposed under the FY 2019 formula award. To propose continuing a state-led evaluation from an FY 2019 formula award, you should describe:

- The rationale for continuing the evaluation.
- How the evaluation meets the following criteria:
  - There are minimal changes to the data collection plan and/or analysis plan from the FY 2019 evaluation and these changes have been proposed to increase study rigor (e.g., using repeated measures, same target population followed for a longer period of time, increased sample size, etc.).
  - The evaluation questions are the same as the FY 2019 evaluation (i.e., no new evaluation questions).

Refer to pages 7-8 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. Can I propose re-locating services based on my statewide needs assessment update that is due October 1, 2020? 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 that has been approved by HRSA 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 2020 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.