



Centers for Disease Control and Prevention

National Center for Chronic Disease Prevention and Health Promotion

Guidance for Supplemental CDC/NCCDPHP/BRFSS Funding Opportunity Announcement (FOA)
CDC-RFA-DP15-15130201SUPPPPHF16 Behavioral Risk Factor Surveillance System (BRFSS)

CDC-RFA-DP15-15130201SUPPPPHF16

Application Due Date: 07/14/2016

Guidance for Supplemental CDC/NCCDPHP/BRFSS Funding Opportunity Announcement (FOA)
CDC-RFA-DP15-15130201SUPPPPHF16 Behavioral Risk Factor Surveillance System (BRFSS)

CDC-RFA-DP15-15130201SUPPPPHF16

TABLE OF CONTENTS

[Part 1. Overview Information](#)

[Part 2. Full Text of the Announcement](#)

[Section I. Funding Opportunity Description](#)

[Section II. Award Information](#)

[Section III. Eligibility Information](#)

[Section IV. Application and Submission Information](#)

[Section V. Application Review Information](#)

[Section VI. Award Administration Information](#)

[Section VII. Agency Contacts](#)

[Section VIII. Other Information](#)

Part 1. Overview Information

Federal Agency Name:

Federal Centers for Disease Control and Prevention (CDC)

Funding Opportunity Title:

Guidance for Supplemental CDC/NCCDPHP/BRFSS Funding Opportunity Announcement (FOA)
CDC-RFA-DP15-15130201SUPPPPHF16 Behavioral Risk Factor Surveillance System (BRFSS)

Announcement Type:

Agency Funding Opportunity Number:

CDC-RFA-DP15-15130201SUPPPPHF16

Catalog of Federal Domestic Assistance Number:

93.336

Key Dates:

Due Date for Application: 07/14/2016

Application must be successfully submitted to Grants.gov by 11:59pm Eastern Standard Time on the deadline date.

Additional Overview Content:

Executive Summary:

The CDC established the BRFSS in 1984 with 15 states participating in monthly data collection. Since that time, the BRFSS has grown to be the only continuous, state-based, health surveillance system that is conducted nationwide. The purpose of this FOA is to continue to provide financial and technical assistance to state and territorial health departments to maintain behavioral surveillance through the BRFSS and increase the use of BRFSS data by health departments to inform public health actions to improve health.

Measurable outcomes of the program will be in alignment with one (or more) of the following performance goal(s) for the NCCDPHP:

Healthy People 2020

This announcement is only for non-research activities supported by CDC. If research is proposed, the application will not be reviewed. For the definition of research, please see the CDC Web site at the following Internet address: <http://www.cdc.gov/od/science/integrity/docs/cdc-policy-distinguishing-public-health-research-nonresearch.pdf>.

Part 2. Full Text

Section I. Funding Opportunity Description

Statutory Authority

A. Sections 301 and 317(k)(2) of the Public Health Service Act (as amended).

Background

N/A

Purpose

The purpose of this Supplemental award is to continue the financial and technical assistance that CDC has provided to states and territories through CDC-RFA-DP 15-1513CONT16 to collect data on health risk behaviors, health status, health care access, and preventive health practices. These data have been used to assist states and localities in monitoring population health, planning and evaluating public health interventions, and setting and tracking public health objectives.

Data collection activities within this FOA align with several "Healthy People 2020" topic areas including Cancer, Social Determinants of Health, Access to Health Services, and Health-Related Quality of Life and Well-Being for all Individuals.

Of the Healthy People 2020 objectives, this FOA supports the collection of data used to monitor progress towards Diabetes (D-9, D-11, D-13, and D-14), Disability and Health (DH-17) and Older Adults (OA-2.1 and OA-2.2) targets.

Contraceptive use among women at risk for unintended pregnancy (FP-6).

See <http://www.healthypeople.gov>

Other National Public Health Priorities and Strategies are: HHS Strategic Goal 2, Objective E to “improve laboratory, surveillance, and epidemiology capacity.”

Program Implementation

Recipient Activities

The Awardees are to continue the following activities under this supplemental award:

- Construct a state-specific BRFSS questionnaire
- Collect and submit data using BRFSS surveillance methodologies and protocols
- Form and/or maintain collaborations among chronic disease prevention programs and surveillance system administrators
- Participate in CDC-sponsored training opportunities
- Disseminate data and findings to users through multiple channels
- Track how health department staff use BRFSS data

In a cooperative agreement, CDC staff is substantially involved in the program activities, above and beyond routine grant monitoring.

CDC Activities

CDC will continue to monitor activities by conducting routine and ongoing communications between CDC and awardees, site visits, and awardee reporting (including work plans, performance, and financial reporting) and conduct other activities deemed necessary to monitor the award, if applicable. These activities may include monitoring and reporting activities that assist grants management staff (e.g., grants management officers and specialists, and project officers) in the identification, notification, and management of high-risk grantees.

These activities are consistent with applicable grants regulations and policies.

Section II. Award Information

| | |
|---------------------------|---|
| Type of Award: | Cooperative Agreement CDC substantial involvement in this program appears in the Activities Section above. |
| Award Mechanism: | Supplemental |
| Fiscal Year Funds: | 2016 |

Approximate Total Supplemental \$5,225,000

Funding:

This amount is subject to availability of funds. Includes direct and indirect costs.

Please note, this supplemental FOA is being offered as a multi component award. Component A describes activities continued under the CDC-RFA-DP 15-1513CONT16 continuation announcement, Components B and C offer additional funding to collect data in to evaluate state based estimates of contraceptive access which may inform state response plans in anticipation of local Zika transmission.

COMPONENT A

Applicants requesting funds under this component will be required to continue the activities awarded under the CDC-RFA-DP 15-1513CONT16 to collect data on health risk behaviors, health status, health care access, and preventive health practices. These data have been used to assist states and localities in monitoring population health, planning and evaluating public health interventions, and setting and tracking public health objectives. Funds may be awarded for population over sample.

FUNDING FOR COMPONENT A

Total estimated available funds offered for Component A are: 4,000,000.00. Applicant awards range from \$10,000.00 to \$160,000.00 Funding is subject to availability.

COMPONENT B

CDC is providing states the opportunity to apply for additional funding to add an optional Family Planning Module that will include three questions to assess contraceptive use among women ≤ 50 years. Nationally, nearly half (45%) or 2.8 of 6.1 million pregnancies in the United States are unintended. State-level estimates of contraceptive use are needed to assess the impact of state policies and ongoing programs to prevent unintended pregnancies through increased access to effective contraception. Given the upcoming potential for local transmission of the Zika virus within the United States, and adverse outcomes associated with infection during pregnancy (e.g., congenital brain abnormalities, eye defects, pregnancy loss, intrauterine growth restriction), there is a heightened need for states to ensure the availability of effective contraception for women who do not wish to become pregnant; current contraceptive use assessments can help inform state response.

The additional funding will support implementation of questions last included on the 2011 BRFSS as an optional Family Planning Module (<http://www.cdc.gov/brfss/questionnaires/pdf-ques/2011brfss.pdf>; see p. 37, questions #3-5 -- please note the 2017 questions will not include the skip pattern to question 6 but will stop at question 5). CDC will provide technical support to finalize the module based on cognitive testing. Additionally CDC will provide recodes to estimate the following:

- Proportion of women at risk for unintended pregnancy
- Proportion of women in need of contraceptive services
- Distribution of contraceptive methods used (by individual method and category of effectiveness: highly effective, <1% annual failure; moderately effective, 6-9% annual failure; less effective, $\geq 18\%$ annual failure)

Funding under Component B is intended to provide support for states to add the Family Planning module beginning in January 2017.

FUNDING FOR COMPONENT B

Total estimated funds offered under Component B are: \$1,075,000.00. Applicant awards range from \$7,000.00 to \$35,000.00. The anticipated average award will be between \$15,000.00 and \$20,000.00. Applications that come in over the ceiling will not be disqualified from review however, the maximum award amount for component B is \$35,000.00. Awards are subject to availability of funds. Please consider the following criteria when developing your component B budget narrative:

- skip patterns, complexity of survey, use of outside contractors, sample size, etc.

COMPONENT C

States that apply for additional funding through Component B also will be eligible to apply for additional supplemental funding through Component C.

Component C funds will provide support for jurisdictions to begin implementation of the Family Planning Module in September 2016 as a means for facilitating rapid response and planning for local Zika transmission. Jurisdictions will be given priority for Component C funding according to their risk for local Zika transmission. The highest priority will be given to jurisdictions in Risk Group 1* that have current or past (within the last 20 years) local transmission of Zika, Dengue or Chikunguna virus; the next highest priority will be jurisdictions in Risk Group 2** that are within the range of Aedes aegypti, the most efficient vector for transmission of the Zika virus. Risk Group 3***all other states.

FUNDING FOR COMPONENT C

Total estimated fund for Component C are: \$150,000.00. Applicant awards range from \$3,000.00 to \$5,000.00 Awards are subject to availability of funds.

Risk Group 1 jurisdictions include: Puerto Rico, Virgin Islands, Guam, Florida, Hawaii and Texas

Risk Group 2 jurisdictions include: Alabama, Arizona, Arkansas, California, Connecticut, Delaware, Georgia, Indiana, Kansas, Kentucky, Louisiana, Maryland, Mississippi, Missouri, Nevada, New Jersey, New Mexico, New York, North Carolina, Ohio, Oklahoma, Pennsylvania, South Carolina, Tennessee, Utah, Virginia, West Virginia and the District of Columbia.

Risk Group 3 jurisdictions include: All other States

Approximate Number of Awards: 57

Approximate Average Award: \$90,000

This amount is for the budget period only and includes direct costs and indirect costs as applicable.

Floor of Individual Award Range: \$10,000

Ceiling of Individual Award \$160,000

Range:

This ceiling is for a 12-month budget period.

The Budget and Project Period for this Supplemental FOA is: 8/30/16 - 3/29/17

Anticipated Award Date: 08/30/2016

Budget Period Length: 7 month(s)

Project Period Length: 1 year(s)

Section III. Eligibility Information

Eligible Applicants

The following recipients may submit an application:

Eligibility Category: State governments

Eligible Applicants that can apply for this funding opportunity are the National Center for Chronic Disease Prevention and Health Promotion Behavioral Risk Factor Surveillance System (BRFSS) sites currently funded under the (FOA) DP15-1513.

Required Registrations

System for Award Management and Universal Identifier Requirements

An organization must be registered at the three following locations before it can submit an application for funding at www.grants.gov.

a. Data Universal Numbering System: All applicant organizations must obtain a Data Universal Numbering System (DUNS) number. A DUNS number is a unique nine-digit identification number provided by Dun & Bradstreet (D&B). It will be used as the Universal Identifier when applying for federal awards or cooperative agreements. The applicant organization may request a DUNS number by telephone at 1-866-705-5711 (toll free) or Internet at <http://fedgov.dnb.com/webform/displayHomePage.do>. The DUNS number will be provided at no charge. If funds are awarded to an applicant organization that includes sub-awardees, those sub-awardees must provide their DUNS numbers before accepting any funds.

b. System for Award Management (SAM): The SAM is the primary registrant database for the federal government and the repository into which an entity must submit information required to conduct business as an awardee. All applicant organizations must register with SAM, and will be assigned a SAM number. All information relevant to the SAM number must be current at all times during which the applicant has an application under consideration for funding by CDC. If an award is made, the SAM information must be maintained until a final financial report is submitted or the final payment is received, whichever is later. The SAM registration process usually requires not more than five business days, and registration must be renewed annually. Additional information about registration procedures may be found at www.SAM.gov.

c. Grants.gov: The first step in submitting an application online is registering your organization through www.grants.gov, the official HHS E-grant website. Registration information is located at the "Get Registered" option at www.grants.gov. All applicant organizations must register with www.grants.gov. The one-time registration process usually takes not more than five days to complete. Applicants must start the registration process as early as possible.

Cost Sharing or Matching

| | |
|--------------------------------------|----|
| Cost Sharing / Matching Requirement: | No |
|--------------------------------------|----|

Other

Special Requirements

Note: Title 2 of the United States Code Section 1611 states that an organization described in Section 501(c)(4) of the Internal Revenue Code that engages in lobbying activities is not eligible to receive Federal funds constituting a grant, loan, or an award.

Maintenance of Effort

Section IV. Application and Submission Information

Address to Request Application Package

Applicants must download the application package associated with this funding opportunity from Grants.gov. If access to the Internet is not available or if the applicant encounters difficulty accessing the forms on-line, contact the HHS/CDC Office of Grants Services (OGS) Technical Information Management Section (TIMS) staff at (770) 488-2700 for further instruction. CDC Telecommunications for the hearing impaired or disable is available at: TTY 1-888-232-6348.

If the applicant encounters technical difficulties with Grants.gov, the applicant should contact Grants.gov Customer Service. The Grants.gov Contact Center is available 24 hours a day, 7 days a week, with the exception of all Federal Holidays. The Contact Center provides customer service to the applicant community. The extended hours will provide applicants support around the clock, ensuring the best possible customer service is received any time it is needed. You can reach the Grants.gov Support Center at 1-800-518-4726 or by email at support@grants.gov. Submissions sent by email, fax, CD's or thumb drives of applications will not be accepted.

Content and Form of Application Submission

Unless specifically indicated, this announcement requires submission of the following information:

Section I: Project Narrative

The project narrative must include the following proposed objectives and activities:

- **Work Plan** –Awardees must update work plan each budget period.
- **Successes**
 - Awardees must report progress on completing activities outlined in the work plan.
 - Awardees must describe any additional successes (e.g., identified through evaluation results or lessons learned) achieved in the past year.
 - Awardees must describe success stories.
- **Challenges**
 - Awardees must describe any challenges that might affect their ability to achieve annual and project-period outcomes, conduct performance measures, or complete the activities in the work plan.
 - Awardees must describe any additional challenges (e.g., identified through evaluation results or lessons learned) encountered in the past year.

Please include all performance progress for the period of January 2016 – March 30, 2016 in your narrative, this will serve as your end of year performance report.

CDC Program Support to Awardees

- Awardees must describe how CDC could help them overcome challenges to achieving annual and project-period outcomes and performance measures, and completing activities outlined in the work plan.

Administrative Reporting (No page limit)

- SF-424A Budget Information-Non-Construction Programs.
- Budget Narrative–must use the format outlined in “Content and Form of Application Submission, Budget Narrative” section.
- Indirect Cost-Rate Agreement.

Section II. New Budget Period Proposed Objectives and Activities:

List proposed objectives for the upcoming budget period. These objectives must support the intent of the original Funding Opportunity Announcement (FOA) or Program Announcement (PA).

1. Each objective and activity must contain a performance or outcome measure that assesses the effectiveness of the project.
2. For each objective:
 1. List activities that will be implemented;
 2. Provide a timeline for accomplishment;
 3. Identify and justify any redirection of activities; and
 4. Explain the methods you will use to implement the new, redirected activities.
3. In addition to this information, include comments pertaining to budgetary issues that might hamper the success or completion of the project as originally proposed and approved. Please utilize the work plan format in the original work plan, if applicable.

For budget period 02 and beyond of the award, awardees may request up to 75% of their estimated unobligated funds be carried over into the next budget period.

The carryover request must:

- Express a bona fide need for permission to use an unobligated balance;
- Include a signed, dated, and accurate Federal Financial Report (FFR) for the budget period from which funds will be transferred (NTE 75% of unobligated balances); and
- Include a list of proposed activities, an itemized budget, and a narrative justification for those activities.]

Indirect Cost Rate Agreement

- If indirect costs are requested, include a copy of the current negotiated federal indirect cost rate agreement or a cost allocation plan approval letter for those Grantees under such a plan.
- Clearly describe the method used to calculate indirect costs. Make sure the method is consistent with the Indirect Cost Rate Agreement.
- To be entitled to use indirect cost rates, a rate agreement must be in effect at the start of the budget period.
- If an Indirect Cost Rate Agreement is not in effect, indirect costs may be charged as direct if (1) this practice is consistent with the grantee's/applicant's approved accounting practices; and (2) if the costs are adequately supported and justified. Please see the Budget Guidelines (<http://www.cdc.gov/od/pgo/funding/grants/foamain.shtm>) for additional information.
- If applicable, attach in the "Mandatory Documents" box under "Other Attachments Form". Name document "Indirect Cost Rate."

General Application Packet Tips:

- Properly label each item of the application packet
- Each section should use 1.5 spacing with one-inch margins
- Number all narrative pages only
- This report must not exceed 10 pages excluding administrative reporting; allowed, but web links are allowed
- Where the instructions on the forms conflict with these instructions, follow these instructions

CDC requires the use of PDF format for ALL attachments.

1. Use of file formats other than PDF may result in the file being unreadable by CDC staff.
2. Directions for creating PDF files can be found on www.Grants.gov

A Project Abstract must be completed in the Grants.gov application forms. The Project Abstract must contain a summary of the proposed activity suitable for dissemination to the public. It should be a self-contained description of the project and should contain a statement of objectives and methods to be employed. It should be informative to other persons working in the same or related fields and insofar as possible understandable to a technically literate lay reader. This abstract must not include any proprietary/confidential information.

The project abstract must be a self-contained, brief summary of the proposed project including the purpose and outcomes. This summary must not include any proprietary or confidential information.

(Maximum 1 page) A project abstract is included on the mandatory documents list and must be submitted at www.grants.gov. The project abstract must be a self-contained, brief summary of the proposed project including the purpose and outcomes. This summary must not include any proprietary or confidential information. Applicants must enter the summary in the "Project Abstract Summary" text box at www.grants.gov.

A Project Narrative must be submitted with the application forms. The project narrative must be uploaded in a PDF file format when submitting via Grants.gov. The narrative must be submitted in the following format:

- Maximum number of pages: 10. If your narrative exceeds the page limit, only the first pages which are within the page limit will be reviewed.
- Font size: 12 point unreduced, Times New Roman
- Double spaced
- Page margin size: One inch
- Number all narrative pages; not to exceed the maximum number of pages.

Awardees are expected to continue the activities as submitted in the DP15-1513CONT16 work plan, which include:

- Submitting a state specific BRFSS questionnaire including core and optional module components for CDC review by November 30 of each calendar year.
- Collecting and submitting cleaned and edited BRFSS data to CDC in accordance with specified monthly data submission protocols.

The narrative should address activities to be conducted over the entire project period and must include the following items in the order listed:

- **Work Plan**
- **Successes**
- **Challenges**

CDC Program Support to Awardees

- Awardees must describe how CDC could help them overcome challenges to achieving annual and project-period outcomes and performance measures, and completing activities outlined in the work plan.

Administrative Reporting (No page limit)

- SF-424A Budget Information-Non-Construction Programs.

- Budget Narrative—must use the format outlined in “Content and Form of Application Submission, Budget Narrative” section.
- Indirect Cost-Rate Agreement.

Additional information may be included in the application appendices. The appendices must be uploaded to the "Other Attachments Form" of application package in Grants.gov. Note: appendices will not be counted toward the narrative page limit. This additional information includes:

Additional information submitted via Grants.gov must be uploaded in a PDF file format, and should be named:

No more than 0 electronic attachments should be uploaded per application.

CDC Assurances and Certifications: All applicants are required to sign and submit “Assurances and Certifications” documents indicated

at [http://wwwn.cdc.gov/grantassurances/\(S\(mj444mxct51lnrv1hljjmaa\)\)/Homepage.aspx](http://wwwn.cdc.gov/grantassurances/(S(mj444mxct51lnrv1hljjmaa))/Homepage.aspx).

Applicants may follow either of the following processes:

- Complete the applicable assurances and certifications with each application submission, name the file “Assurances and Certifications” and upload it as a PDF file with at www.grants.gov
- Complete the applicable assurances and certifications and submit them directly to CDC on an annual basis at [http://wwwn.cdc.gov/grantassurances/\(S\(mj444mxct51lnrv1hljjmaa\)\)/Homepage.aspx](http://wwwn.cdc.gov/grantassurances/(S(mj444mxct51lnrv1hljjmaa))/Homepage.aspx)

Assurances and certifications submitted directly to CDC will be kept on file for one year and will apply to all applications submitted to CDC by the applicant within one year of the submission date.

Submission Dates and Times

This announcement is the definitive guide on application content, submission, and deadline. It supersedes information provided in the application instructions. If the application submission does not meet the deadline published herein, it will not be eligible for review and the recipient will be notified the application did not meet the submission requirements.

This section provides applicants with submission dates and times. Applications that are submitted after the deadlines will not be processed.

If Grants.gov is inoperable and cannot receive applications, and circumstances preclude advance notification of an extension, then applications must be submitted by the first business day on which grants.gov operations resume.

Application Deadline Date

Due Date for Applications: **07/14/2016**

Explanation of Deadlines: Application must be successfully submitted to Grants.gov by 11:59pm Eastern Standard Time on the deadline date.

Intergovernmental Review

Executive Order 12372 does not apply to this program.

Pilot Program for Enhancement of Employee Whistleblower Protections

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

Copyright Interest Provisions

This provision is intended to ensure that the public has access to the results and accomplishments of public health activities funded by CDC. Pursuant to applicable grant regulations and CDC's Public Access Policy, Recipient agrees to submit into the National Institutes of Health (NIH) Manuscript Submission (NIHMS) system an electronic version of the final, peer-reviewed manuscript of any such work developed under this award upon acceptance for publication, to be made publicly available no later than 12 months after the official date of publication. Also at the time of submission, Recipient and/or the Recipient's submitting author must specify the date the final manuscript will be publicly accessible through PubMed Central (PMC). Recipient and/or Recipient's submitting author must also post the manuscript through PMC within twelve (12) months of the publisher's official date of final publication; however the author is strongly encouraged to make the subject manuscript available as soon as possible. The recipient must obtain prior approval from the CDC for any exception to this provision.

The author's final, peer-reviewed manuscript is defined as the final version accepted for journal publication, and includes all modifications from the publishing peer review process, and all graphics and supplemental material associated with the article. Recipient and its submitting authors working under this award are responsible for ensuring that any publishing or copyright agreements concerning submitted articles reserve adequate right to fully comply with this provision and the license reserved by CDC. The manuscript will be hosted in both PMC and the CDC Stacks institutional repository system. In progress reports for this award, recipient must identify publications subject to the CDC Public Access Policy by using the applicable NIHMS identification number for up to three (3) months after the publication date and the PubMed Central identification number (PMCID) thereafter.

Federal Funding Accountability and Transparency Act of 2006 (FFATA), P.L. 109–282, as amended by section 6202 of P.L. 110–252 requires full disclosure of all entities and organizations receiving Federal funds including awards, contracts, loans, other assistance, and payments through a single publicly accessible Web site, www.USASpending.gov.

Compliance with this law is primarily the responsibility of the Federal agency. However, two elements of the law require information to be collected and reported by applicants: 1) information on executive compensation when not already reported through the SAM, and 2) similar information on all sub-awards/subcontracts/consortiums over \$25,000.

For the full text of the requirements under the FFATA and HHS guidelines, go to:

- http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=109_cong_bills&docid=f:s2590enr.txt.pdf
- https://www.frs.gov/documents/ffata_legislation_110_252.pdf
- http://www.hhs.gov/asfr/ogapa/aboutog/Grants%20Management%20Information/ffata_guidelines.html

Funding Restrictions

Restrictions, which must be taken into account while writing the budget, are as follows:

- Recipients may not use funds for research.
- Recipients may not use funds for clinical care.
- Recipients may only expend funds for reasonable program purposes, including personnel, travel, supplies, and services, such as contractual.
- Awardees may not generally use HHS/CDC/ATSDR funding for the purchase of furniture or equipment. Any such proposed spending must be identified in the budget.
- The direct and primary recipient in a cooperative agreement program must perform a substantial role

in carrying out project objectives and not merely serve as a conduit for an award to another party or provider who is ineligible.

Other than for normal and recognized executive-legislative relationships, no funds may be used for: publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

See [Additional Requirement \(AR\) 12](#) for detailed guidance on this prohibition and [additional guidance on lobbying for CDC awardees](#)

Restrictions that must be considered while planning the programs and writing the budget are:

- Awardees may not use funds for research.
- Awardees may not use funds for clinical care.
- Awardees may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- Generally, awardees may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Reimbursement of pre-award costs is not allowed.

Other than for normal and recognized executive-legislative relationships, no funds may be used for: publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

See

[Additional Requirement \(AR\) 12](#) for detailed guidance on this prohibition and [additional guidance on lobbying for CDC awardees](#).

The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.

Restrictions that must be considered while planning the programs and writing the budget are:

- Awardees may not use funds for research.
- Awardees may not use funds for clinical care.
- Awardees may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.

Generally, awardees may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.

Reimbursement of pre-award costs is not allowed.

Other than for normal and recognized executive-legislative relationships, no funds may be used for: publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or

pending before any legislative body.

See

[Additional Requirement \(AR \) 12](#) for detailed guidance on this prohibition and [additional guidance](#) on lobbying for CDC awardees.

The recipient can obtain guidance for completing a detailed justified budget on the CDC website, at the following Internet address: <http://www.cdc.gov/grants/interestedinapplying/applicationprocess.html>

Other Submission Requirements

Application Submission

Submit the application electronically by using the forms and instructions posted for this funding opportunity on www.Grants.gov. If access to the Internet is not available or if the recipient encounters difficulty in accessing the forms on-line, contact the HHS/CDC Office of Grants Services (OGS) Technical Information Management Section (TIMS) staff at (770) 488-2700 for further instruction.

Note: Application submission is not concluded until successful completion of the validation process. After submission of your application package, recipients will receive a "submission receipt" email generated by Grants.gov. Grants.gov will then generate a second e-mail message to recipients which will either validate or reject their submitted application package. This validation process may take as long as two (2) business days. Recipients are strongly encouraged check the status of their application to ensure submission of their application package is complete and no submission errors exists. To guarantee that you comply with the application deadline published in the Funding Opportunity Announcement, recipients are also strongly encouraged to allocate additional days prior to the published deadline to file their application. Non-validated applications will not be accepted after the published application deadline date.

In the event that you do not receive a "validation" email within two (2) business days of application submission, please contact Grants.gov. Refer to the email message generated at the time of application submission for instructions on how to track your application or the Application User Guide, Version 3.0 page 57.

Electronic Submission of Application:

Applications must be submitted electronically at www.Grants.gov. Electronic applications will be considered as having met the deadline if the application has been successfully made available to CDC for processing from Grants.gov on the deadline date.

The application package can be downloaded from www.Grants.gov. Recipients can complete the application package off-line, and then upload and submit the application via the Grants.gov website. The recipient must submit all application attachments using a PDF file format when submitting via Grants.gov. Directions for creating PDF files can be found on the Grants.gov website. Use of file formats other than PDF may result in the file being unreadable by staff.

Applications submitted through www.Grants.gov, are electronically time/date stamped and assigned a tracking number. The AOR will receive an e-mail notice of receipt when HHS/CDC receives the application. The tracking number serves to document submission and initiate the electronic validation process before the application is made available to CDC for processing.

If the recipient encounters technical difficulties with Grants.gov, the recipient should contact Grants.gov Customer Service. The Grants.gov Contact Center is available 24 hours a day, 7 days a week. The Contact

Center provides customer service to the recipient community. The extended hours will provide recipients support around the clock, ensuring the best possible customer service is received any time it's needed. You can reach the Grants.gov Support Center at 1-800-518-4726 or by email at support@grants.gov. Submissions sent by e-mail, fax, CD's or thumb drives of applications will not be accepted.

Organizations that encounter technical difficulties in using www.Grants.gov to submit their application must attempt to overcome those difficulties by contacting the Grants.gov Support Center (1-800-518-4726, support@grants.gov). After consulting with the Grants.gov Support Center, if the technical difficulties remain unresolved and electronic submission is not possible to meet the established deadline, organizations may submit a request prior to the application deadline by email to the Grants Management Specialist/Officer for permission to submit a paper application. An organization's request for permission must: (a) include the Grants.gov case number assigned to the inquiry, (b) describe the difficulties that prevent electronic submission and the efforts taken with the Grants.gov Support Center (c) be submitted to the Grants Management Specialist/Officer at least 3 calendar days prior to the application deadline. Paper applications submitted without prior approval will not be considered.

If a paper application is authorized, the recipient will receive instructions from OGS TIMS to submit the original and two hard copies of the application by mail or express delivery service.

Section V. Application Review Information

Eligible recipients are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of the **CDC-RFA-DP15-15130201SUPPPHF16**. Measures of effectiveness must relate to the performance goals stated in the "Purpose" section of this announcement. Measures of effectiveness must be objective, quantitative and measure the intended outcome of the proposed program. The measures of effectiveness must be included in the application and will be an element of the evaluation of the submitted application.

Criteria

Eligible recipients will be evaluated against the following criteria:

Approved or Dissapproved.

Maximum Points: 0

The applications will be reviewed but not ranked.

The amount of funds available is \$5,225,000.00 and the application is due July 14, 2016. Please be sure to include a detailed budget and 424a with your application.

Review and Selection Process

Review

Eligible applications will be jointly reviewed for responsiveness by **NCCDPHP** and PGO. Incomplete applications and applications that are non-responsive will not advance through the review process. Recipients will be notified in writing of the results.

An objective review panel will evaluate complete and responsive applications according to the criteria listed in Section V. Application Review Information, subsection entitled "Criteria".

This supplemental applications will be reviewed by the BRFSS Project Officers as they are individual(s) who have particular knowledge and expertise pertinent to the application. Although the applications will be reviewed, they will not be ranked however, a summary statement will be provided based on the following review criteria:

- Summary of the Project (provided by applicant)
- Summary of Strengths
- Summary of Weaknesses / Concerns
- Budget
- Human Subject Issues
- Recommendation(s)

Selection

Once the application is completed, the PD/PI will receive a notice of his or her Summary Statement (written critique) via the email at the address provided on the supplement application.

CDC will provide justification for any decision to fund out of rank order.

Anticipated Announcement and Award Dates

Application due date – July 14, 2016, **Award date** – August 30, 2016, **Project start date** – August 30, 2016

Award Notices

Any applications awarded in response to this supplement will be subject to the DUNS, CCR Registration, and Transparency Act requirements. If the application is under consideration for funding, HHS/CDC will request "just-in-time" information from the applicant as described in the HHS Grants Policy Statement.

A formal notification in the form of a Notice of Award (NoA) will be provided to the applicant organization for successful applications. The NoA signed by the grants management officer is the authorizing document and will be sent via email to the grantee business official.

Section VI. Award Administration Information

Award Notices

Successful recipients will receive a Notice of Award (NoA) from the CDC Office of Grants Services. The NoA shall be the only binding, authorizing document between the recipient and CDC. The NoA will be signed by an authorized Grants Management Officer and e-mailed to the program director. A hard copy of the NoA will be mailed to the recipient fiscal officer identified in the application.

Unsuccessful recipients will receive notification of the results of the application review by mail.

Administrative and National Policy Requirements

Successful recipients must comply with the administrative requirements outlined in 45 Code of Federal Regulations (CFR) 2 Part 215 or Part 92, as appropriate. For competing supplements, ARs remain in effect as published in the original announcement.

Continuing Continuations -

For more information on the Code of Federal Regulations, see the National Archives and Records Administration at the following Internet address: <http://www.access.gpo.gov/nara/cfr/cfr-table-search.html>.

Reporting

Federal Funding Accountability and Transparency Act of 2006 (FFATA), P.L. 109–282, as amended by section 6202 of P.L. 110–252 requires full disclosure of all entities and organizations receiving Federal funds including awards, contracts, loans, other assistance, and payments through a single publicly accessible Web site, <http://www.USASpending.gov>

Compliance with this law is primarily the responsibility of the Federal agency. However, two elements of the law require information to be collected and reported by applicants: 1) information on executive compensation when not already reported through the SAM, and 2) similar information on all sub-awards/subcontracts/consortiums over \$25,000.

For the full text of the requirements under the FFATA and HHS guidelines, go to:

- http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=109_cong_bills&docid=f:s2590enr.txt.pdf
- https://www.fsrc.gov/documents/ffata_legislation_110_252.pdf

PPHF Grantees Semi-annual Reporting

CDC Office of Appropriations (OA) will distribute the pre-populated reporting templates to PPHF Grantees through the OA mailbox (PPHF@cdc.gov). All recipients will receive their pre-populated template prior to the start of the reporting period with additional guidance. CDC will validate grantee email addresses through the Procurement and Grants Office and PPHF programs. The prime grantee will receive the report and will be responsible for populating the sub-award information.

Section VII. Agency Contacts

CDC encourages inquiries concerning this announcement.

For **programmatic technical assistance and general inquiries**, contact:

Rosalyn Bell, Project Officer
Department of Health and Human Services
Centers for Disease Control and Prevention
4770 Buford Hwy, N.E.
F-78
Atlanta, GA 30347
Telephone: (770) 488-2809
Email: AI19@cdc.gov

For **financial, grants management, budget assistance and general inquiries**, contact:

Kathy Raible, Grants Management Specialist
Department of Health and Human Services
CDC Procurement and Grants Office
2920 Brandywine Road
Colgate building, MS-E09
Atlanta, GA 30347
Telephone: (770) 488-2045
Email: Kcr8@cdc.gov

For **application submission** questions, contact:
Technical Information Management Section
Department of Health and Human Services
CDC Office of Grants Services
2920 Brandywine Road, MS E-14
Atlanta, GA 30341
Telephone: 770-488-2700
Email: ogstims@cdc.gov

Section VIII. Other Information

Other CDC funding opportunity announcements can be found at www.grants.gov.

All awards are subject to the terms and conditions, cost principles, and other considerations described in the HHS Grants Policy Statement.