

linkages with one or more elementary, middle, or high schools with a high percentage of minority and disadvantaged students to: (1) Inform students and parents about health careers and financial aid to encourage interest in health careers; (2) promote rigorous academic course work to prepare for health professions training; or (3) provide support services such as mentoring, tutoring, counseling, after school programs, summer enrichment, and college visits. For more information, see: <http://www.bhpr.hrsa.gov>.

In accordance with Section 751(a)(1)(A)(vii) of the Public Health Service Act, special consideration will also be given to approved applicants who (a) develop new and innovative approaches to education and training using distance learning methodologies/telehealth, or (b) enhance or expand existing distance learning educational programs to prepare health professionals and health professional students to deliver quality health care in medically underserved communities.

Estimated Amount of This

Competition: \$8,000,000.

Estimated Number of Awards: 10.

Estimated Project Period: 3 years.

HRSA-04-018 Basic/Core Area Health Education Centers (BAHEC) *

Application Availability Date:

September 19, 2003.

Application Deadline: February 3, 2004.

Projected Award Date: September 1, 2004.

Program Contact Person: Louis D. Coccodrilli.

Marion Aldrich: CT, DC, FL, ME, RI, VA
Jan Clear: CA, CO, HI, IN, KS, MD, MN,
NV, OK, OR, WI

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HRSA-04-019 Model State-Supported Area Health Education Centers (MAHEC) *

CFDA: 93.107.

Legislative Authority: Public Health Service Act, Title VII, Section 751(a)(2), U.S.C. 294a.

Purpose: To improve the distribution, diversity, and quality of health personnel in the health services delivery system by encouraging the regionalization of health professions schools. Emphasis is placed on community-based training of primary care oriented students, residents, and providers, and health careers programs for K-12 students. The Area Health Education Centers (AHEC) program assists schools in the planning, development and operation of AHEC centers to initiate education systems incentives to attract and retain health care personnel in scarcity areas. By linking the academic resources of the university health science center with local planning, educational and clinical resources, the AHEC programs and AHEC centers establish a network of community-based training sites to provide educational services to students, faculty and practitioners in underserved areas, and ultimately to improve the delivery of health care in the service area.

* This program is not included in the President's budget for FY 2004. Potential applicants for funds should consider this announcement provisional until final Congressional action on appropriations is taken. Updated information on Congressional action on appropriations will be available on the HRSA Web site.

Cost Sharing: To be eligible to apply for funding under this authority, an entity must make available (directly through contributions from State, county or municipal government, an Indian Tribe or Tribal organization, or the private sector) recurring non-Federal contributions in cash toward the costs of operating the model AHEC program in an amount not less than 50 percent of this cost. It is expected that the non-Federal contributions in cash should be equal to the Federal request—that is, a one-to-one match. These funds shall be for the express use of the AHEC Programs and Centers to address AHEC project goals and objectives, and not funds designated for other categorical or specific purposes.

Eligibility: An entity that:

- Has previously received funding under Title VII of the Public Health Service Act for a Basic AHEC program;
- Is currently operating an AHEC program; and
- Is no longer receiving funds under the Title VII Basic AHEC authority.

Review Criteria: Final review criteria are included in the application kit.

Funding Preferences: All applicants have the option to request the general statutory funding preference found in Section 791(a) of the Public Health Service Act. Only data from the applicant/awardee school may be submitted. To be considered for this funding preference, an applicant must request it by either completing the appropriate table, or in the case of a new program, request and submit the appropriate narrative to support the request. For more information on the funding preferences, see the Model State Supported AHEC Program Application Kit under General Statutory Funding Preference.

Special Considerations: In accordance with Section 751(a)(1)(A)(iii) of the Public Health Service Act, special consideration will be given to approved applicants who support the Kids Into Health Careers initiative by establishing linkages with one or more elementary, middle, or high schools with a high percentage of minority and disadvantaged students to: (1) Inform students and parents about health careers and financial aid to encourage interest in health careers; (2) promote rigorous academic course work to prepare for health professions training; or (3) provide support services such as mentoring, tutoring, counseling, after school programs, summer enrichment, and college visits. For more information, see: <http://www.bhpr.hrsa.gov>.

In accordance with Section 751(a)(1)(A)(vii) of the Public Health Service Act, special consideration will also be given to approved applicants who (a) develop new and innovative approaches to education and training using distance learning methodologies/telehealth, or (b) enhance or expand existing distance learning educational programs to prepare health professionals and health professional students to deliver quality health care in medically underserved communities.

Estimated Amount of This

Competition: \$8,000,000.

Estimated Number of Awards: 15.

Estimated Project Period: 3 years.

HRSA-04-019 Model State-Supported Area Health Education Centers (MAHEC) *

Application Availability Date:

September 19, 2003.

Application Deadline: February 3, 2004.

Projected Award Date: September 1, 2004.

Program Contact Person: Louis D. Coccodrilli.

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