

HRSA-04-040 State Primary Care Associations Supplemental Funding for Managing Health Center Growth and Quality (PCA) *

CFDA: 93.129.

Legislative Authority: Public Health Service Act, Title III, Section 330, 42 U.S.C. 254b.

Purpose: The HRSA announces an opportunity for existing Primary Care Associations (PCAs) to apply for supplemental funding to advance the goals of the President's initiative to expand health centers. The purpose of the funding is to support and expand the PCAs capacity to address the following three strategies: (1) Strengthening and expanding existing health center grantees; (2) creating new access points; and (3) improving health status outcomes and reducing disparities through evidence-based quality care and quality improvement in all HRSA-supported programs. Each proposed activity must be clearly linked to strengthening health centers' ability to contribute to the President's Initiative.

Eligibility: Applicants are limited to currently funded PCAs.

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

Estimated Amount of This

Competition: \$3,000,000.

Estimated Number of Awards To Be Made: 25.

Estimated Project Period: 1-5 years.

HRSA-04-040 State Primary Care Associations Supplemental Funding for Managing Health Center Growth and Quality (PCA)

Application Availability Date: November 1, 2003.

Application Deadline: January 5, 2004.

Projected Award Date: April 1, 2004.

Program Contact Person: Cephas Goldman.

Program Contact Phone: 301-594-4488.

Program Contact E-Mail: cgoldman@hrsa.gov.

HRSA-04-041 Operational Health Center Networks (OHCN) *

CFDA: 93.224.

Legislative Authority: Public Health Service Act, Section 330(e)(1)(C).

Purpose: Operational Health Center Networks (OHCN) support health centers that receive assistance under section 330, or at the request of the health centers, directly to a managed care or practice management network or plan that is at least majority controlled and, as applicable, at least majority owned by such health centers receiving

assistance under section 330 for the costs associated with the operation of such network or plan, including the purchase or lease of equipment (including the costs of amortizing the principal of, and paying the interest on, loans for equipment). Operational networks are defined as a group of three or more health centers that can demonstrate that an essential, mission-critical function is performed at the network level for the network members, enabling the member centers to perform their business and clinical operations more efficiently and effectively.

Eligibility: The following entities are eligible to apply for funding under this announcement:

(1) A health center, as defined and funded under section 330 of the Public Health Service Act, acting on behalf of the member health centers and the network;

(a) A health center applying on behalf of a managed care network or plan must have received Federal grants under subsection (e)(1)(A) of section 330 for at least two consecutive preceding years;

(b) A health center (Community Health Center, Migrant Health Center, Health Care for the Homeless, Public Housing Primary Care and School Based Health Centers) applying on behalf of a practice management network must have received Federal grants under section 330 for at least two consecutive years;

(c) Eligibility is limited to public and non-profit organizations; or

(2) Operational networks, controlled by and acting on behalf of the health center(s) as defined and funded under section 330 of the Public Health Service Act. At the request of all the member health centers, a network may apply for direct funds if it is at least majority controlled and, as applicable, at least majority owned, by such health centers.

Matching or Cost Sharing

Requirement: Grantees must provide at least 60 percent of the total approved cost of the project. The total approved cost of the project is the sum of the HRSA share and the non-Federal share. Applicants must demonstrate that at least 30 percent of the cost-sharing requirement is met through cash contributions. The remaining non-Federal share may be met by cash or in kind contributions.

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

Funding Preference: A funding preference will be given to applicants proposing to serve sparsely populated rural or frontier areas.

Estimated Amount of This Competition: \$2,100,000.

Estimated Number of Awards To Be Made: 5-7 Awards.

Estimated Project Period: 3 years.

HRSA-04-041 Operational Health Center Networks (OHCN)

Application Availability Date:

November 1, 2003.

Application Deadline: March 8, 2004.

Projected Award Date: August 1, 2004.

Program Contact Person: Susan Lumsden.

Program Contact Phone: 301-594-4472.

Program Contact E-Mail: Slumsden@hrsa.gov.

HIV/AIDS Programs

HRSA-04-042 Special Projects of National Significance (SPNS)

CFDA: 93.928.

Legislative Authority: Public Health Service Act, Section 2691; 42 U.S.C. 300ff-101.

Purpose: The purpose of this program is to fund Demonstration Models of Outreach, Care, and Prevention Engaging Young HIV Seropositive Men of Color. In the United States, the predominant mode of transmission of HIV remains men who have sex with men (MSM). Over half of new AIDS cases reported among men who have sex with men occur in young men of color.

This funding initiative will support 4-5 projects targeting young (ages 13-24), HIV seropositive MSM of color. The funding start date and duration of this initiative will be the same for both the Evaluation Center and the demonstration projects.

The purpose of this initiative is to support the development and evaluation of innovative service models designed to reach young, HIV seropositive MSM of color not engaged in clinical care and link them to appropriate clinical, supportive, and preventive services. The specific objectives of this initiative are to: (1) Conduct outreach, (2) conduct HIV counseling and testing, (3) link HIV-infected persons with primary care services, and (4) prevent transmission of HIV infection from HIV positive men to others, among young MSM of color. The Evaluation Center will evaluate model effectiveness in reaching and engaging HIV seropositive young MSM in clinical, supportive, and preventive services. The Center will also support the replication of effective models.

Eligibility: Eligible applicants are public and private nonprofit entities, including faith-based and community-based organizations. Existing HIV clinical entities that collaborate with faith-based and community-based organizations are also eligible to apply.