Health Resources and Services Administration
Federal Office of Rural Health Policy

Medicare Rural Hospital Flexibility Program
FY 2022 Noncompeting Continuation (NCC) Progress Report
Instructions for Submission
Funding Announcement Number: HRSA-5-U2W-2022-01
Available in EHB: March 3, 2022
Due Date: May 4, 2022
Reporting Period: September 1, 2022– August 31, 2023

This is the Health Resources and Services Administration (HRSA) streamlined process to renew your budget period and release the continuation funding for your ongoing award. The continuation of funding is based on compliance with applicable statutory and regulatory requirements, demonstrated organizational capacity to accomplish the project's goals, adequate justification for all projected costs, availability of appropriated funds, and a determination that continued funding would be in the best interest of the Government. Inadequate justification and/or progress may result in the reduction of approved funding levels.

HRSA's expectations are that recipients will pursue all years of their projects as originally proposed and recommended for approval in competitive review, in terms of scope of work and budget line items. The continuation funding process is not a vehicle to request changes in scope or re-budgeting of your project. If significant changes in scope or budgeting are necessary, first discuss the proposed changed with your assigned HRSA FORHP Project Officer, and then request prior approval separately through EHB, as is specified in your Notice of Award (NOA).

The NCC Progress Report is intended to report on Medicare Rural Hospital Flexibility Program activities only and should not report on other HRSA funded programs unless the activity specifically relates to the Medicare Rural Hospital Flexibility Program. This NCC Progress Report will provide funding during the FY2022 budget year. The budget period start date is September 1, 2022. This is Year 4 of a 5-year project period (September 1, 2019 – August 31, 2024). The purpose of the Medicare Rural Hospital Flexibility Program is to enable state designated entities to support critical access hospitals in quality improvement, quality reporting, performance improvement, and benchmarking; to assist facilities seeking designation as critical access hospitals; and to create a program to establish or expand the provision of rural emergency medical services. Flex Program objectives include the areas of quality, operational, financial, and population health improvement with the goal of supporting access to necessary health care services in rural communities.

NCC Progress Report Required Sections
The following sections are required to submit the NCC Progress Report in HRSA EHBs:
- SF-PPR (EHB web-based form)
- SF-PPR-2 (cover page continuation; EHBs web-based form)
- Performance Narrative (no more than 10 pages)
- Attachments (see list below)

Performance Narrative Instructions

The Performance Narrative is uploaded as one attachment in the "Program Specific Information" section of the NCC Progress Report in the EHBs.

The purpose of the Performance Narrative is to provide a comprehensive overview of the project and to provide documentation of project activities and accomplishments during the current FY2021 budget period. Discuss progress on each funded activity during this current budget period (September 1, 2021 – August 31, 2022). **Do not delete any of the narrative headings.**

The Performance Narrative should include the following information in the order listed below and should be no more than 10 pages in length (appendices do not count towards page count). Information must be reported in a narrative form, portrait format. **Do not copy/paste your work plan**; rather frame the Performance Narrative as a summary of your work plan**.** Make sure document is clearly labeled with your organization's name and HRSA award number. **Reminder:** The NCC Progress Report is intended to report on Medicare Rural Hospital Flexibility Program activities only and should not report on other HRSA funded programs unless the activity specifically relates to the Flex Program.

I.   **Progress on Activities:** Provide a short high-level summary (2-3 paragraphs) on the progress of your program activities during the FY 2021 budget period. Provide a summary of the project's activities including the impact of activities and outcomes. Include other relevant accomplishments such as dissemination of completed projects and/or presentations. Indicate any barriers or challenges to the project's progress during the current budget period and describe efforts taken to address them. Additionally, if you incorporated health equity into your program related activities or program related data collection include a description that includes a brief summary and outcomes of that work.

II. **Significant Changes:** Summarize any significant changes to the project occurring during the reporting period that required the submission of a prior approval request, including changes of scope, supplemental funding requests, key personnel changes, etc.

III. **Plan for Upcoming Budget Year:** Discuss your project plan for the coming budget year (September 1, 2022 – August 31, 2023). Provide a detailed statement of the milestones or progress toward the outcome objectives planned for the period for which NCC funds are being sought and a description of the process objectives and activities that will be undertaken to achieve those milestones. Discuss any modifications (other than significant changes requiring a prior approval request) to the approved project plan, including changes to goals and/or objectives for the upcoming year (any anticipated change of scope will require a separate EHB prior approval submission).

Required Attachments

Only include the attachments listed below with the NCC Progress Report submission**. Each attachment must contain the Cooperative Agreement number, Project Title, Organization Name, and Primary Contact Name**. Ensure that each attachment is correctly labeled and attached in the "Appendices" section as follows:

1. Current Work Plan Matrix (spreadsheet)
2. Future Work Plan Matrix (spreadsheet)
*Current and Future Work Plan may be submitted in the same excel document with separate tabs
3. Budget Justification Narrative
4. Position Descriptions
5. Biographical Sketches/Resumes

- **Attachment #1:** Updated *Current Work Plan Matrix* for the current budget period (September 1, 2021 – August 31, 2022), in spreadsheet form, landscape format that includes activities, completion date, responsible staff and entity, progress/process measures and outcome/impact pertaining to the goals and objectives of the program. Please note that the progress/process measures section and outcomes/impact section should contain detailed information on progress made in the current budget period. The Current Work Plan Matrix is a snapshot of what will be captured in the Performance Narrative section. FORHP expects the Objectives, Activities, and Outcomes to be outlined in a spreadsheet format without narrative.

- **Attachment #2:** Provide a *Future Work Plan Matrix* for the budget period (September 1, 2022 – August 31, 2023), in spreadsheet form, landscape format that includes activities, anticipated completion date, responsible staff and entity, expected progress/process measures and outcome/impact pertaining to the goals and objectives of the program. The Future Work Plan should include any adaptions or updated progress/process measures for the upcoming year based upon FY2021 results. Include ongoing activities that will continue from the current budget period, and any new activities. Projects designed for a single budget year should fully develop their measurement strategy and present it clearly. Projects designed for more than one year will need to define the measurement strategy and set intermittent targets reflective of the activities to be executed in addressing the Objectives. FORHP expects the Objectives, Activities, and Outcomes to be outlined in a spreadsheet format without narrative.

- **Attachment #3:** Provide a *Budget Justification Narrative* that sufficiently details each object class category as follows: (1) Personnel category: Indicate the employee name, title, base salary, FTE, salary requested. (2) Fringe Benefits: indicate the fringe benefit rate and benefit breakdown, i.e. insurance at .55%. (3) Travel category: for local travel indicate the staff member(s), number of trips, mileage and mileage rate; for long distance travel indicate the staff member(s), airfare, hotel, per diem, mileage, mileage rate, car rental/ground transportation and parking. (4) Equipment category: list equipment costs and provide justification for the need of the equipment to carry out the program's goals. (5) Supplies category: list the items that the project will use to implement the proposed project such as office supplies or educational supplies (brochures, videos). (6) Contractual category: Itemized services provided. (7) Other category: Include all costs that do not fit into any other category. In some cases, rent or utilities. (8) Indirect costs. If indirect costs are included in the budget, attach a copy of the current indirect cost rate agreement. Discuss any significant changes to your budget relative to the budget laid out in your competitive application.

- **Attachment #4:** *Position Descriptions* for all new or revised positions for which program support is requested. State "no changes" on attachment if applicable. *New staff listed as the "Project Director" on the Notice of Award must go through the Prior Approval process in EHBs.

- **Attachment #5:** *Biographical sketches or resumes* for any staff hired since submission of prior NCC application. State "no changes" on attachment if applicable.

Reporting Requirements

Federal Financial Report (FFR) submitted through the Payment Management System (PMS).
Annual FFRs are due on January 30 and must be submitted electronically through the Payment Management System (PMS). While it is an expectation that all funds are used within the year they are awarded, if you anticipate that there will be an unobligated balance (UOB) of funds at the end of the current budget period, you must note this in the 'FFR Remarks' block of the FFR. Additionally, you must request prior approval to use the UOB as carryover for your project in the new budget period. You may do so by submitting a prior approval request through the HRSA EHBs within 30 days of the electronic FFR submission. The request to use the UOB shall include an explanation of why the funds were not spent and why the carryover is needed, a detailed budget justification and SF424A. Only activities listed in the approved work plan are eligible for carryover into the next budget period.

Performance Improvement Management System (PIMS)
The Federal Office of Rural Health Policy has created specific performance measures that recipients will be required to report within the Performance Improvement System (PIMS) located in HRSA's Electronic Handbook (EHB). Recipients are required to update the program specific information in the HRSA Electronic Handbooks (EHBs) annually. Further instructions will be provided by your Project Officer.

End of Year Report
The End of Year Report captures the completed work plan for the completed budget year and a narrative report which captures noteworthy accomplishments.

Recipients are encouraged to request assistance, if needed, when submitting their NCC Progress Report. Please contact your FORHP project officer to obtain additional information regarding overall program issues:

Victoria (Tori) Leach
Medicare Rural Hospital Flexibility Program Coordinator
Health Resources and Services Administration
Federal Office of Rural Health Policy
Room 17W 166B
5600 Fishers Lane
Rockville, MD 20857
Telephone: 301.945.3988
Email: vleach@hrsa.gov

Recipients may obtain additional information regarding business, administrative, or fiscal issues related to this NCC Progress Report by contacting:

Bria Haley
Grants Management Specialist
HRSA Division of Grants Management Operations, OFAM, HRHB
5600 Fishers Lane

Rockville, MD 20857
Telephone: 301.443.3778
Email: bhaley@hrsa.gov

Recipients may need assistance when working online to submit their information electronically through HRSA's Electronic Handbooks. For assistance with submitting information in HRSA's EHBs (i.e. technical system issues), contact the HRSA Call Center, Monday-Friday, 9:00 a.m. to 5:30 p.m. ET:

HRSA Call Center
Phone: (877) 464-4772
TTY: (877) 897-9910
Fax: (301) 998-7377
E-mail: CallCenter@HRSA.GOV

APPENDIX A: FY 2022 FUNDING LEVELS

This table shows the FY 2022 Flex funding levels by state that are the same from FY 2021 funding levels. These funding levels are contingent upon final appropriation dollars available.

State	Recipient Name	Cooperative Agreement#	FY 2022 Funding
AK	HEALTH AND SOCIAL SERVICES, ALASKA DEPARTMENT OF	U2WRH33307	$611,422
AL	PUBLIC HEALTH, ALABAMA DEPARTMENT OF	U2WRH33293	$364,358
AR	ARKANSAS DEPARTMENT OF HEALTH	U2WRH33304	$602,319
AZ	UNIVERSITY OF ARIZONA	U2WRH33311	$551,961
CA	DEPARTMENT OF HEALTH CARE SERVICES	U2WRH33322	$542,359
CO	COLORADO RURAL HEALTH CENTER	U2WRH33305	$655,393
FL	HEALTH, FLORIDA DEPARTMENT OF	U2WRH33316	$511,289
GA	COMMUNITY HEALTH, GEORGIA DEPT OF	U2WRH33286	$651,413
HI	HEALTH, HAWAII DEPARTMENT OF	U2WRH33309	$446,074
IA	PUBLIC HEALTH, IOWA DEPARTMENT OF	U2WRH33302	$757,191
ID	HEALTH AND WELFARE, IDAHO DEPARTMENT OF	U2WRH33308	$641,351
IL	PUBLIC HEALTH, ILLINOIS DEPARTMENT OF	U2WRH33301	$824,375
IN	INDIANA STATE DEPARTMENT OF HEALTH	U2WRH33300	$656,819
KS	HEALTH AND ENVIRONMENT, KANSAS DEPARTMENT OF	U2WRH33306	$968,815
KY	UNIVERSITY OF KENTUCKY	U2WRH33312	$602,464
LA	HEALTH AND HOSPITALS, LOUISIANA DEPARTMENT OF	U2WRH33310	$563,812
MA	PUBLIC HEALTH, MASSACHUSETTS DEPT OF	U2WRH33294	$316,735
ME	HEALTH AND HUMAN SERVICES, MAINE DEPARTMENT OF	U2WRH33288	$437,911
MI	MICHIGAN CENTER FOR RURAL HEALTH	U2WRH33317	$692,449
MN	DEPARTMENT OF HEALTH MINNESOTA	U2WRH33314	$911,531
MO	HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF	U2WRH33295	$510,424
MS	HEALTH, MISSISSIPPI STATE DEPARTMENT OF	U2WRH33290	$488,194
MT	PUBLIC HEALTH AND HUMAN SERVICES, MONTANA DEPARTMENT OF	U2WRH33320	$806,474
NC	HEALTH & HUMAN SERVICES, NORTH CAROLINA DEPARTMENT OF	U2WRH33287	$626,231
ND	UNIVERSITY OF NORTH DAKOTA	U2WRH33321	$815,742
NE	HEALTH AND HUMAN SERVICES, NEBRASKA DEPARTMENT OF	U2WRH33315	$882,649
NH	HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF	U2WRH33289	$431,566
NM	HEALTH, NEW MEXICO DEPARTMENT OF	U2WRH33297	$317,683
NV	UNIVERSITY OF NEVADA, RENO	U2WRH33318	$495,108
NY	HEALTH RESEARCH, INC.	U2WRH33296	$394,932
OH	HEALTH, OHIO DEPARTMENT OF	U2WRH33298	$688,294
OK	OKLAHOMA STATE UNIVERSITY	U2WRH33319	$673,496
OR	OREGON HEALTH & SCIENCE UNIVERSITY	U2WRH33327	$697,883
PA	PENNSYLVANIA STATE UNIVERSITY, THE	U2WRH33292	$444,516

SC	SOUTH CAROLINA OFFICE OF RURAL HEALTH	U2WRH33328	$394,458
SD	SOUTH DAKOTA DEPARTMENT OF HEALTH	U2WRH33329	$673,740
TN	HEALTH, TENNESSEE DEPT OF	U2WRH33325	$498,448
TX	AGRICULTURE, TEXAS DEPARTMENT OF	U2WRH33313	$901,523
UT	DEPARTMENT OF HEALTH UTAH	U2WRH33323	$391,386
VA	HEALTH, VIRGINIA DEPARTMENT OF	U2WRH33299	$356,713
VT	HUMAN SERVICES, VERMONT AGENCY OF	U2WRH33291	$320,206
WA	HEALTH, WASHINGTON STATE DEPARTMENT OF	U2WRH33326	$686,629
WI	UNIVERSITY OF WISCONSIN SYSTEM	U2WRH33303	$804,871
WV	HEALTH AND HUMAN RESOURCES, WEST VIRGINIA DEPARTMENT OF	U2WRH33324	$551,220
WY	WYOMING, DEPARTMENT OF HEALTH	U2WRH33330	$497,399
	Totals	**45**	$26,659,826