



# Medicare Rural Hospital Flexibility Program- Emergency Medical Services Competing Supplement Notice of Funding Opportunity

Technical Assistance Webinar  
*February 7, 2024*

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Federal Office of Rural Health Policy (FORHP)

**Vision: Healthy Communities, Healthy People**



# Agenda

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- Housekeeping Items
- NOFO Review
- Questions



# Housekeeping Items

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- Download today's slides
- Live questions at end of the call
- Use chat box for questions during the call
- Send an email to [Tchappel@hrsa.gov](mailto:Tchappel@hrsa.gov) to obtain a copy of the recorded session



# NOFO Review

U.S. Department of Health and Human Services

# HRSA

Health Resources & Services Administration

## NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2024

Federal Office of Rural Health Policy

Hospital State Division

**Medicare Rural Hospital Flexibility Program – Emergency Medical Services Supplement**

**Funding Opportunity Number:** HRSA-24-006

**Funding Opportunity Type(s):** Competing Supplement

**Assistance Listing Number:** 93.241

**Application Due Date:** April 25, 2024

Ensure your [SAM.gov](#) and [Grants.gov](#) registrations and passwords are current immediately!

We will not approve deadline extensions for lack of registration.

Registration in all systems may take up to 1 month to complete.

**Issuance Date:** January 24, 2024

Tahleah Chappel

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Email: [TChappel@HRSA.gov](mailto:TChappel@HRSA.gov)

See [Section VII](#) for a complete list of agency contacts.

Authority: 42 U.S.C. 1395i-4(g)(2) (§1820(g)(2) of the Social Security Act)



# Program Details

- **Grant Program Dates:** September 1, 2024 – August 31, 2029
- **Award Amount:** approximately \$250,000 per year
- **# of Awards:** up to 8 award
- **Applications Due:** April 25, 2024, no later than 11:59pm EST
- **Page Limit:** 20 pages
  - The following do not count toward the page limit:
    - ✓ Standard OMB-approved forms you find in the NOFO's workspace application package
    - ✓ Abstract (standard form "Project\_Abstract Summary")
    - ✓ Indirect Cost Rate Agreement
    - ✓ Proof of non-profit status (if it applies)
    - ✓ Letters of Support
    - ✓ Biographical Sketches of Key Personnel
  - The Flex program is authorized by Title XVIII, §1820(g)(2), of the Social Security Act (42 U.S.C. 1395i-4(g)(2)), which authorizes funding "for the establishment or expansion of a program for the provision of rural emergency medical services."



# EMS Supplement- Purpose

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The purpose of this funding is to enable states to establish or expand programs for the provision of rural EMS by strengthening the EMS workforce in rural areas through recruitment, retention and financial and operational strategies.



# Eligibility Requirements

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- Eligible applicants are state recipients funded under HRSA-24-002, Medicare Rural Hospital Flexibility Program cooperative agreement. This is a competitive supplemental funding opportunity. Only states eligible for cooperative agreements awarded under HRSA-24-002 are eligible to apply for funding under this notice.



# HRSA Involvement

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- Collaborating with award recipients to review and provide input on the Work Plans in alignment with HRSA priorities, state needs, and changes in the rural EMS environment through such activities as identifying and prioritizing needs to be addressed using federal funds
- Monitoring and supporting implementation of the Work Plan through progress report reviews
- Collaborating with technical assistance providers that are developing tools and resources for state Flex program use





# Recipient Responsibilities

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- Collaborating with HRSA on refining and implementing the Work Plan according to HRSA priorities, state needs, and changes in the rural EMS environment;
- Negotiating with HRSA to update Work Plans at least annually, or more frequently as needed (e.g., in response to identified challenges);
- Developing and implementing a state Flex EMS Supplement project as described in this notice;
- Ensuring that proposed EMS activities for this supplement differ from the activities proposed under the main Flex workplan.



# Project Narrative



# Introduction

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- Provide an overview of the purpose of the proposed project. Briefly and clearly describe the vision and goals for the five-year period of performance.



# Project Narrative - Organizational Information

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- Describe current staff and/or contractor experience, skills, and knowledge that will support your effective tracking of performance outcomes and execution of workplan activities.
- Briefly describe your organization's current mission, structure, and scope of current activities, and how these elements all contribute to your ability to implement the program and meet established expectations.
- Describe how you will ensure oversight and coordination between staff, contractors/subrecipients, and HRSA as applicable.
- Describe how the organization will properly account for the federal funds and document all costs to avoid audits.
- Include a staffing plan and job descriptions for key staff in Attachment 2. Include an organizational chart in Attachment 7.



# Need

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- Provide an overview of the service area and target population to be served by the EMS workforce programs and or investments. Outline the needs of the EMS agencies that will participate. Use and cite demographic data whenever possible to support the information provided.
- Demonstrate understanding of the identified barriers (weak education pipeline, training needs, working with neighboring EMS agencies, maternity care deserts, etc.) related to recruitment and retention, and how the project will address such barriers.
- Identify contact(s) within the state office of EMS, local EMS agencies, and other relevant community leaders willing to work together for the duration of the project.



# Approach

- Tell us how you will increase rural EMS recruitment, retention and financial stability based on the needs identified for at least five rural EMS agencies.
- Explain the criteria used to prioritize agencies with the highest need (lack of staff and low percentage of runs/transports billed).
- Provide letters of support from at least five rural EMS agencies willing and able to fully participate in this project for the entire 5-year period of performance as Attachment 4.
- Describe how training, technical assistance, and other support will be targeted to the agencies with the highest needs and capacity to make changes.
- Discuss tools and strategies you plan to develop for staff training, outreach, collaborations, clear communication, and information sharing/dissemination with efforts to involve key partners.
- Discuss commitment and possible involvement from town, local and or county leadership.
- Include both recruitment and retention activities. Utilize existing resources on EMS recruitment and retention to help identify activities to implement.
- Propose a plan for continuing recruitment and retention efforts when federal funding ends. We expect you to keep up key strategies or services and actions which have led to improved practices and outcomes for the target population.
- Identify meaningful support and collaboration with key stakeholders in planning, designing, and implementing all activities listed in the workplan.



# Work Plan

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- Include the work plan as Attachment 1. Refer to the Flex Program Funding Guidance section of the Technical Assistance & Services Center website (TASC) for more information on the structure of the work plan.
- Include a brief description of each activity, year and quarter of anticipated completion date, expected outputs, actual outputs, and responsible staff.
- Describe how you'll achieve each of the objectives during the five-year period of performance. You find these in the Approach section.
- Include clearly defined outcomes for your project (to be measured annually). Include the goal you are trying to achieve, what the outcome measure is, the agencies participating, space to enter baseline data and data at the end of each project year, and space for comments on whether you met your goal.



# Resolution of Challenges

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- Discuss challenges that you are likely to encounter in designing and carrying out the activities in the work plan. Explain approaches that you'll use to resolve them.





# Evaluation and Technical Support Capacity

- Describe the strategy to collect, track and analyze data to measure impact (for example, assigned skilled staff, data management software) in a way that allows for accurate and timely reporting of those outcomes.
- Describe your plan to evaluate how the program performs and how that will contribute to continuous quality improvement. The evaluation should monitor ongoing processes and the progress towards the project's goals and objectives. Describe barriers and your plan to address them.
- At a minimum, the outcome measures included in the work plan should include the following (Please note that this is not an exhaustive list and additional project specific measures should be included):
  - The number of agencies that have increased their total number of paid and/or volunteer staff.
  - The number of agencies with an increase in EMS providers with advanced certifications, such as paramedics or Advanced Emergency Medical Technicians (AEMTs).
  - When applicable, the number of agencies that have increased their percentage of runs/transportations submitted for billing.
    - ✓ Please note that all proposed measures will be reviewed by the PO for project applicability.



# Budget Narrative

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- Funds requested for the Flex EMS Supplement may not duplicate costs already provided under the primary Flex Program cooperative agreement award. The corresponding budget narrative must justify only funds to be used to support additional activities derived from the supplemental funds.



# Budget Narrative - Continued

- Use the SF-424 Application Guide (linked in the NOFO)
- As noted in Section 4.1.v of HRSA's SF-424 Application guide, for any contractual costs or subawards, include a clear explanation as to the purpose of each contract/subaward, how the costs were estimated, and the specific deliverables.
- Do not provide line-item details on proposed contracts, rather you should provide the basis for your cost estimate for the contract.
- You are responsible for ensuring that your organization or institution has in place an established and adequate procurement system with fully developed written procedures for awarding and monitoring all contracts/subawards.
- Recipients must notify potential subrecipients that entities receiving subawards must be registered in SAM and provide the recipient with their UEI number (see 2 CFR part 25).
- For consultant services, list the total costs for all consultant services. In the budget narrative, identify each consultant, the services he/she will perform, total number of days, travel costs, and total estimated costs.
- For subawards to entities that will help carry out the work of the award, you should describe how you will monitor their work to ensure the funds are being properly used.



# Funding Restrictions

## Program-specific Restrictions

### You cannot use funds under this notice for the following:

- For direct patient care services (including health care services, equipment, and supplies);
- To purchase ambulances and any other vehicles or major equipment (including software that costs more than \$5000/unit);
- To purchase or improve real property;
- Authorizing legislation 42 U.S.C. 1395i-4(g)(2) (Title XVIII, §1820(g)(2)) of the Social Security Act limits indirect costs under the Flex Program. Indirect costs will be budgeted and reimbursed at the lesser of 15 percent of total direct costs or the applicant's negotiated Indirect Cost Rate Agreement (ICRA). This limitation on indirect cost rates is a requirement of this federal award and, as required in 45 CFR § 75.351-353, the limitation includes subrecipients; and
- For any purpose which is inconsistent with the language of this NOFO or 42 U.S.C. 1395i-4(g)(2) (§1820(g)(2)) of the Social Security Act



# Attachments

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## **Attachment 1: Work Plan**

- Attach the project's work plan. Make sure it includes everything that Section IV.2.ii. Project Narrative details. If you'll make subawards or spend funds on contracts, describe how your organization will document funds.

## **Attachment 2: Staffing Plan and Job Descriptions for Key Personnel (see Section 4.1. of the Application Guide)**

- Keep each job description to one page. Include the role, responsibilities, and qualifications of proposed project staff. Describe your organization's timekeeping process. This ensures that you'll comply with federal standards related to recording personnel costs.

## **Attachment 3: Biographical Sketches of Key Personnel (Does not count towards the page limit)**

- Include biographical sketches for people who will hold the key positions you describe in Attachment 2. Keep it to two pages or less per person. Do not include addresses or SSNs. If you include someone you have not hired yet, include a letter of commitment from that person with the biographical sketch.



# Attachments Cont'd

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## **Attachment 4: Letters of Support (Does not count towards the page limit)**

- Make sure letters of support are dated and signed. Each letter should clearly describe the entity's intent to fully participate in the entire 5-year period of performance if your application is funded.

## **Attachment 5: Indirect Cost Rate (Does not count towards the page limit)**

- Provide the current federally negotiated indirect cost rate agreement used to substantiate indirect costs in the proposed budget.

## **Attachment 6: For Multi-Year Budgets--5th Year Budget**

- After using columns (1) through (4) of the SF-424A Section B for a 5-year period of performance, you need to submit the budget for the 5th year as an attachment. SF-424A Section B does not count in the page limit; however, any related budget narrative does count. See Section 4.1.iv of the Application Guide.

## **Attachment 7: Project Organizational Chart**

- Provide a one-page figure that shows the project's organizational structure.



# Attachments Cont'd

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## Attachments 8-15: Other Relevant Documents (no more than 15)

- Include any other documents that are relevant to the application. This may include tables or charts that give more details about the proposal (for example, Gantt or PERT charts, flow charts, or logic models), or letters of support, which are not required for eligibility but you may have already developed for your program. Letters must show a commitment to the project/program (in-kind services, dollars, staff, space, equipment, etc.). These documents do count toward the page limit.



# Reporting Requirements

Award recipients must comply with Section 6 of the Application Guide and the following reporting and review activities:

- 1) Federal Financial Report.** The Federal Financial Report (SF-425) is required. The report is an accounting of expenditures under the project that year. Financial reports must be submitted electronically. Visit [Reporting Requirements | HRSA](#). More specific information will be included in the NOA.
- 2) Progress Report(s).** The recipient must submit information related to the competing supplement as part of the Flex Program report narrative. Refer to HRSA-24-002 for details on the Non-Competing Continuation Renewal Submission.
- 3) Integrity and Performance Reporting.** The NOA will contain a provision for integrity and performance reporting in SAM.gov Entity Information Responsibility / Qualification (formerly named FAPIIS), FAPIIS, as 45 CFR part 75 Appendix I, F.3. and 45 CFR part 75 Appendix XII require.





# Review Process

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- Applications are due **April 25, 2024**
- Application reviews conducted by outside review panel
- Look at “Review Criteria” section to see how the “Narrative” sections will be reviewed and scored
- Acceptance and non-acceptance letters sent out prior to award date
- Notice of Award sent out prior to September 1, 2024 start date



# EMS Supplement Program – Contact Information

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## **Program Contact:**

Tahleah Chappel

Federal Office of Rural Health Policy – Hospital State Division

Health Resources and Services Administration

Email: [Tchappel@hrsa.gov](mailto:Tchappel@hrsa.gov)

Phone: 301-443-0197

## **Grants Management (Fiscal/Administrative) Contact:**

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# Questions

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