Informational Call:

Talking Points for Informational Conference Call for CDC-RFA-DP18-1803: State Public Health Approaches to Addressing Arthritis

Tuesday, February 13, 2018 @ 1:00 p.m. - 2:00 p.m. EST.

Dial-in Conference Line: (855) 644-0229 Conference ID: 2922594

Agenda: Introductions Margaret Kaniewski Welcoming Remarks Janet Croft General Overview of the NOFO Margaret Kaniewski **Application Content Highlights** Margaret Kaniewski Performance Measures Margaret Kaniewski **Budget Narrative** Keisha Thompson All (moderated by Erica Odom) **Questions and Answers Closing Reminders** Erica Odom

Introductions [Margaret Kaniewski]

Good afternoon. You are joining the Information Conference Call for the State Public Health Approaches to Addressing Arthritis DP18-1803 Notice of Funding Opportunity, which I will refer to from now on as NOFO.

Before we get started, I ask that you please mute your phones. Please do <u>not</u> place your phone on hold at any time during the call. If necessary, hang up and call back in, so that we can avoid any interruptions to the phone lines. Thank you.

My name is Margaret Kaniewski, I serve as a project officer for the Arthritis Program and will be your main contact for questions you may have regarding this NOFO and its application process. My contact information is provided in the NOFO. Should you have any questions that do not get addressed on this call you can send them to me via email. My email address is <u>mgk6@cdc.gov</u>. The call's script will be posted on the CDC Arthritis website soon after this call. The website link to NOFO-specific information and FAQs is provided in the NOFO under the Conference Call information section on page 1 of 52-(<u>https://www.cdc.gov/arthritis/about/nofo/2018/index.htm</u>). I will also post questions and answers on the website under the FAQ section. The FAQs will be routinely updated throughout the application process. We have already posted answers to questions on the site received over the past 2 weeks. Please check the FAQ section to see if your question may have already been answered.

Today's call will cover the general overview of the NOFO, application content highlights, including applicant's capacity to apply, required strategies, activities and performance measures, budget submission information, and provide an opportunity for questions and answers.

You will hear from the following individuals:

• Myself and then Janet Croft, Acting Chief of the Arthritis, Epilepsy, and Well-Being Branch in the Division of Population Health

- Erica Odom, Team Lead for Arthritis Program Visibility, Partnerships, and Policy Team in the Division of Population Health, and
- Keisha Thompson, Grants Management Specialist within CDC's Office of Financial Resources

Again, we will end today's call with time for questions and answers. Please hold your questions until that time. I am now going to turn it over to Dr. Janet Croft our acting Branch Chief to say a few welcoming remarks.

Welcoming Remarks [Janet Croft]:

Thank you Margaret. Welcome all those on the call to learn about the new funding opportunity DP18-1803: State Public Health Approaches to Addressing Arthritis.

The Arthritis, Epilepsy and Well Being Branch is pleased to bring this NOFO to you. The NOFO's purpose is to implement state-based approaches to increase self-management behaviors and improve the quality of life of adults with arthritis. The fundamental goal is to increase arthritis management and reduce arthritis impact.

We expect the strategies and activities to target adults with arthritis, address health inequities, and have state-wide impact. As stated in the NOFO, CDC intends to **fund one** grantee per state in up to 15 states to support **four main** strategies and associated activities.

Margaret will go through these strategies and highlight other information about the NOFO next, and give you an opportunity to ask questions at the end of the call. Again welcome and thank you for your interest.

General Overview of NOFO [Margaret Kaniewski]

Thank you Janet.

I will provide a general overview of the NOFO, including its primary purpose followed with specific highlights of the application content, including performance measures, and other important information about the NOFO.

First, please note that this **NOFO is being issued from** the Department of Health and Human Services, **Centers for Disease Control and Prevention (CDC)**.

This 5-year **open competition** funding opportunity is intended to be state-based, have-statewide impact, **leverage** partnerships, systems, and resources to establish complementary community, clinical and systems/policy approaches to improve arthritis management and to reduce arthritis impact.

Through this funding, the applicant is to accomplish four main strategies. The first strategy is to sustainably disseminate and thereby increase the availability of and participation in CDC-recommended arthritis appropriate evidence based interventions or AAEBIs, and other appropriate self-management interventions as described in the NOFO and Attachment 1. An applicant is expected to disseminate AT LEAST TWO different evidence based interventions and ensure sufficient capacity to continuously and sustainably deliver AAEBIs over the 5-year period and beyond. An applicant is expected to select at least one from the CDC Recommended or Promising AAEBIs list in Attachment 1. Additionally, the applicant may leverage the dissemination of no more than one Other Self-Management Interventions with the characteristics described in Attachment 1 under Other Self-Management Interventions.

Please carefully review Attachment 1 that is available on the Arthritis NOFO website I mentioned earlier. <u>https://www.cdc.gov/arthritis/about/nofo/2018/index.htm</u>. The Attachment specifically describes the acceptable categories and characteristics of interventions that can be implemented under this funding.

The <u>second strategy</u> is for the applicant to adopt innovative and systems-based approaches that will help establish or enhance <u>healthcare provider patient counseling about physical activity and referral for patients diagnosed with arthritis to proven intervention programs</u>. The intention of this strategy is to support a sustainable counseling and referral process that will engage healthcare providers (for example: physicians, pharmacists, physical therapists, nurses, community health workers or others) and increase their counseling of adults with arthritis about the importance and benefits of physical activity for managing arthritis, including walking, and facilitate referrals to proven physical activity interventions.

Attachment 2 referred to in the NOFO provides examples of current tools and best practices that support strategy 2 and other NOFO strategies. Attachment 2 can also be found on the CDC Arthritis NOFO webpage.

Moving on to the <u>third strategy</u>. This strategy is for the applicant to **promote walking**. The applicant is to promote widely available, existing state/county-wide walking initiatives or programs with infrastructure and potential for sustainability, and whose purpose is facilitating routine physical activity, and ensure they address the unique needs and barriers of adults with arthritis and increase walking among adults with arthritis. Attachment 2 provides examples of walking initiatives and other relevant information.

And lastly, the <u>fourth strategy</u> is for the applicant to raise awareness about arthritis impact and management including physical activity, walking, AAEBIs (including other self-management interventions if applicable), and provider counseling and referrals in ways that will help facilitate achievement of key NOFO outcomes. Applicants are expected to collect and disseminate Behavioral Risk Factor Surveillance System (BRFSS) arthritis data. Applicant may need to partner with the state health department to collect state BRFSS data. BRFSS data can be used to raise awareness about arthritis burden in the state and track outcome measures for this 5-year project period.

And this leads me to comment about the Performance Measures associated with this NOFO.

Performance Measures

CDC requires that applicants develop and submit a performance monitoring plan to track progress towards the strategies and activities identified in an applicant's work plan. CDC's strategy for evaluation and performance measurement is based on the logic model included in the NOFO. CDC will use the Behavioral Risk Factor Surveillance System Module questions to assess awardees' progress toward the defined outcome measures described in the NOFO. Carefully review pages 14-17 of the NOFO to understand how you are to prepare your performance monitoring plan. NOFO also provides examples of additional outcome measures should applicant choose to propose additional outcome measures.

Recipients will be expected to submit a more detailed Evaluation and Performance Measurement plan within the first 6 months of award. The sample work plan on page 19 illustrates how the outcome measures, targets, strategies and activities come together to set milestones and track progress. Awardees will have an opportunity to make work plan modifications in the first 6 months with their assigned project officer.

Other Important Highlights

I will take a moment to highlight a few other important items that are found in the NOFO.

First, take note that for the four strategies, the applicant is expected to engage **underserved** adult populations in the state to address **health disparities among adults with arthritis**. Applicant is expected to engage delivery partners, if/as needed, who serve these underserved populations.

Second, successful applicants are expected to be those with **direct access** to a sizeable percentage of the state population and who possess the capacity to carry-out activities that will have measurable, state-wide impact on arthritis outcomes and associated health behaviors. Let me stress that CDC expects the applicant to achieve **state-level impact** for the strategies and activities. This implies the applicant needs to be able to demonstrate having **direct access to a minimum of 1.4%** of the adult state population for the dissemination of AAEBIs and other appropriate evidence based interventions. Additional details about direct access can be found in the NOFO Glossary section.

Thirdly, please make note this is a full and open competition NOFO. Eligible applicants include any organization type which is able to achieve state-level impact and has the organizational capacity to implement the strategies. Applicants should carefully review the NOFO requirements and expectations for this funding opportunity. In particular, applicants should review the organizational capacity in making a decision about whether to apply. Each application will be competitively scored by an objective review panel against criteria, specified in the NOFO. Within these criteria, applicants are expected to achieve state-level impact and have direct access to the target population to implement some of the NOFO's strategies and activities, and achieve the required performance outcomes at the end of the 5-year project period. Additional information about organizational capacity, expectations about partnerships, and funding preferences may be found on pages 17-19, and pages 14 and 38 of the NOFO. Criteria that objective reviewers will use to review and score applications are described on pages 35-38. Expected NOFO outcomes, in terms of state level impact, from each applicant are included on pages 5-7 and 14-16.

And lastly, let me talk about the Letter of Intent, or LOI. A LOI is strongly encouraged but not required as part of the application for this NOFO. Letters of Intent help us determine the number of reviewers needed for the objective review panel and plan accordingly. All LOIs are requested by **February 19**, **2018.** In the LOI, please include the suggested items described in the NOFO on page 26, including stating which **state** the applicant is representing.

I want to emphasize that we are requesting Letters of Intent to help us have an estimate of the number of applications expected so that we can prepare for the objective review process and better prepare our technical assistance package. Again, Letters of Intent are requested by February 19th.

And, now I will turn it over to **Keisha Thompson**, our grants management specialist, to talk about grant and budget information.

Grants Management Specialist, Budget Narrative [Keisha Thompson]:

Thank you Margaret.

The Budget Period or Budget Year refers to the duration of each individual funding period within the five-year project period. For this NOFO, budget periods are 12 months long.

This NOFO is for **non-research activities.** The total project period length will be five years. It is estimated that up to \$4 million will be awarded annually for a total of up to 12-15 awardees during the 2018 – 2023 project period. CDC will issue awards with a ceiling of \$500,000 and an award floor of \$150,000 per awardee. The average expected award will most likely be around \$280,000 per awardee. Let me further comment about the ceiling of \$500,000. For the first year, CDC does not expect to have funding available to support each individual award at \$500,000, however, applicants may request up to this amount. Funding is subject to availability. And as Margaret stated, only one award will be issued per state. CDC will consider any application requesting an award higher than \$500,000 as **non-responsive** and it will receive no further review. Throughout the project period, CDC will continue to award based on the availability of funds, the evidence of satisfactory progress by the awardee (as documented in required reports), and the determination that continued funding is in the best interest of the federal government. The total number of years for which federal support has been approved (project period) will be shown in the "Notice of Award".

Applicants must submit an itemized budget narrative and justification. When developing the budget narrative, applicants must consider whether the proposed budget is reasonable and consistent with the purpose, outcomes, and program strategies outlined in the projective narrative. The budget must include: salaries, fringe benefits, consultant costs, supplies, travel, other categories, contractual costs, total direct costs, and total indirect costs.

For guidance on completing a detailed budget, see Budget Preparation Guidelines at:

<u>https://www.cdc.gov/grants/applying/application-resources.html</u>. This website also gives you other useful information for applying for a NOFO. I strongly encourage you to visit this website. Should you have questions about the grant or budget process please direct them to Margaret Kaniewski at <u>mg6@cdc.gov</u> during the application process.

Please remember that an organization must obtain three registrations before it can submit an application for funding at www.grants.gov.

The first is the Data Universal Numbering System, or DUNS: All applicant organizations must obtain a 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 or Internet at <u>http://fedgov.dnb.com/webform</u>.

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.

The second is the System for Award Management, or 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 10 or more business day and registration must be renewed annually. Additional information about registration procedures may be found at <u>www.SAM.gov</u>.

The last is Grants.gov: Once you have a DUNS number and an active SAM account, you are ready to register your organization at www.grants.gov, the official HHS E-grant website. The first step in submitting an application online is having access to Grants.gov. Registration information is located at the "Get Registered" option at <u>www.grants.gov</u> All applicant organizations must register at 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.

The websites I mentioned can be found on pages 26-28 of the NOFO. You will want to register soon to ensure you have everything in place to submit an application by the April 2, 2018, deadline. If the application is not submitted by the deadline published in the NOFO, it will not be processed

Unsuccessful applicants will receive notification by mail. Successful applicants will receive a notice of award by June 29th, 2018, the anticipated project start date.

I will now turn it over to Erica Odom, the Team Lead for the Arthritis Program and Communication Team to answer your questions.

Questions and Answers [Erica Odom]:

Now, we would like to open it up to questions that you may have. Before we open the line for questions, please be sure that your phones are on mute unless you are asking a question. To unmute your line, please press unmute button or *6. Also, I'd like to remind you to <u>not</u> place your phone on hold during the call. If necessary, hang up and call back in so that we can avoid any interruptions to the phone lines.

We do not have a moderated line, so please state your name and affiliation if you have a question. Again, questions and answers from this call will be posted publically on the NOFO webpages of the CDC arthritis site.

If you have questions after this call, please e-mail them to Margaret.

Closing Remarks and Reminders [Erica Odom]:

On behalf of CDC's Arthritis, Epilepsy, and Well-being Branch, and the Arthritis Program, we are looking forward to supporting this important NOFO.

Reminders

- Letter of Intent Due Date: Feb 19, 2018
- Application Due Date: Apr 02, 2018
- Award Start Date: Jun 29, 2018

We thank you for your participation on today's call.