# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Health Resources and Service Administration

#### Availability of the HRSA Preview

AGENCY: Health Resources and Services Administration, HHS. ACTION: General notice.

#### ACTION. General notice

**SUMMARY:** HRSA announces the availability of the *HRSA Preview* for fall 1998. This edition of the *HRSA Preview* is a comprehensive review of HRSA's Fiscal Year 1999 programs. The next edition of the *HRSA Preview* is scheduled to be published by early summer 1999.

The purpose of the HRSA Preview is to provide the general public with a single source of program and application information related to the Agency's competitive grant reviews. The HRSA Preview is designed to replace multiple Federal Register notices which traditionally advertised the availability of HRSA's discretionary funds for its various programs. In this edition of the HRSA Preview, HRSA's programs which provide funding for loan repayments and scholarships to individuals have been included in the section "Other HRSA Programs." It should be noted that other program initiatives responsive to new or emerging issues in the health care area and unanticipated at the time of publication of the HRSA Preview, may be announced through the Federal Register from time to time. Deadlines or other requirements appearing in the Federal Register are not changed by this notice.

The HRSA Preview contains a description of competitive and additional programs scheduled for review in Fiscal Year 1999 and includes instructions on how to access the Agency for information and receive application kits for all programs announced. Specifically, the following information is included in the HRSA Preview: (1) Program Title; (2) Legislative Authority; (3) Purpose; (4) Eligibility; (5) Estimated Amount of Competition: (6) Estimated Number of Awards; (7) Funding Priorities and/or Preferences; (8) Application Deadline; (9) Projected Award Date; (10) Application Kit Availability; (11) Catalog of Federal Domestic Assistance (CFDA) program identification number; and (12) Programmatic contact. Certain other information including, how to obtain and use the HRSA Preview, and grant terminology also may be found in the HRSA Preview.

This issue of the *HRSA Preview* includes funding for HRSA

discretionary authorities and programs as follows:

#### **Rural Health Programs**

State Rural Hospital Flexibility Program.Rural Network Development Grant

- Program.
- Rural Health Outreach Grant Program.
- Rural Health Policy Analytic Centers.

#### **Health Professions Programs**

- Nurse Anesthetists: Program Grants.
- Advanced Nurse Education.
- Physician Assistant Training.
- Departments of Family Medicine.
- Geriatric Education Centers.
- Basic/Core Area Health Education Centers.
- Model State-Supported Area Health Education Centers.
- Health Education and Training Centers.
- Quentin N. Burdick Rural Health
- Interdisciplinary Program.
  - Allied Health Projects.
  - Centers of Excellence.
  - Health Careers Opportunity Program.
- Minority Faculty Fellowship Program.

## **Primary Health Care Programs**

- Community and Migrant Health Centers.
- Health Care for the Homeless.
- Healthy Schools/Healthy Communities.Grants to States for Loan Repayment
- Programs.
  - Black Lung Clinics.

• New Delivery Sites and New Starts in Programs Funded Under The Health Centers Consolidation Act.

# **HIV/AIDS Programs**

- AIDS Education And Training Centers.
  Ryan White Title III HIV Early
- Intervention Services Grants.
- Ryan White Title III HIV Early Intervention Services Planning Grants.

 Ryan White Title IV Coordinated HIV Services and Access to Research—

Geographic Areas With Currently Funded Title IV Projects.

• Ryan White Title IV Coordinated HIV Services and Access to Research—New Geographic Areas.

# Maternal and Child Health Programs

- Genetic Services.
- Genetic Services—Integrated Services for Children with Genetic Conditions.
- Genetic Services—Newborn Screening.Genetic Services—National Genetic
- Resource Center.
- Comprehensive Hemophilia Diagnostic and Treatment Centers.
- Partnership for Information and Communications (PIC).
- Maternal and Child Health Research.
   Training Continuing Education (
- Training—Continuing Education/ Collaboration Pediatrics/Child Psychiatry.
- Training—Continuing Education and Development—Training Institute.
- Children With Special Health Care
  Needs: Adolescent Transition.
- Children with Special Health Care Needs Institute.

• Children With Special Health Care Needs: Medical Home Cooperative Agreement.

- Health Care Information and Education for Families of Children With Special Health Care Needs.
  - Early Discharge (Data).
- Healthy Tomorrows Partnership for Children.
- Community and School-Based Sealant Grants.
- Oral Health Integrated Systems Development Grants.
- Child Health Insurance Program
- Partnership.
  - Border Health Initiative.
- Emergency Medical Services for Children, Implementation Grants.
- Emergency Medical Services for Children, Partnership Grants.
- Emergency Medical Services for Children, Targeted Issue Grants.
- Emergency Medical Services for
- Children, Native American Project.Traumatic Brain Injury State
- Implementation Grants.
- Traumatic Brain Injury State Planning Grants.
- Improving Screening for Alcohol Use During Pregnancy Among Providers.
- Healthy Start Initiative: Eliminating Racial/Ethnic Disparities in Perinatal Health.
- Healthy Start Initiative: Infrastructure/ Capacity Building Projects.

#### Other HRSA Programs

- Faculty Loan Repayment Program.
- Scholarships for Disadvantaged Students.
- Nursing Education Loan Repayment Program.

*Contact Information:* Individuals may obtain the *HRSA Preview* by calling the toll free number, 1–888–333–HRSA (4772). The HRSA *Preview* may also be accessed on the World Wide Web on the HRSA Home Page at: http:// www.hrsa.dhhs.gov/. Please see our web site, or obtain a copy of the *HRSA Preview*, for a special message from the Administrator.

Dated: December 28, 1998.

# **Claude Earl Fox**,

Administrator.

# The Access Agency: Health Resources and Services Administration Office of Field Operations

HRSA has established a field structure that can address the changing health care needs of the Nation as we begin the 21st century. HRSA field staff implement HRSA programs to increase access to primary care for underserved populations, serve as a source of expertise on health services development, increase the capacity and capability of maternal and child health programs, provide a link to the community and school age children for information and financial aid regarding careers in the health professions, assist in health facilities construction and assist other health related programs such as Rural Health and HIV/AIDS

programs. The HRSA Field Offices, by virtue of their unique location in communities and States, are more than just an extension of HRSA programs; they are HRSA's resource for integrating and coordinating programs at the customer level. These ten Field Offices are organized into five Field Clusters. HRSA's customers, youth as well as adults, who want information about HRSA programs and opportunities for careers in the health professions, may contact the closest HRSA Field Office:

## **Northeast Cluster**

HRSA Boston Field Office, Barbara Tausey, (617) 565–1433

HRSA New York Field Office, Ronald Moss, (212) 264–2664

HRSA Philadelphia Field Office, Joseph Healey, (215) 861–4365

# Southeast Cluster

HRSA Atlanta Field Office, Ketty Gonzalez, (404) 562–7980

#### **Midwest Cluster**

HRSA Chicago Field Office, Deborah Willis-Fillinger, (312) 353–6835

# HRSA PROGRAMS AT A GLANCE

HRSA Kansas City Field Office, Hollis Hensley, (816) 426–5226

# West Central Cluster

HRSA Dallas Field Office, Frank Cantu, (214) 767–3872

HRSA Denver Field Office, Jerry Wheeler, (305) 844–3203

#### **Pacific West Cluster**

HRSA San Francisco Field Office, Antonio Duran, (415) 437–8090 HRSA Seattle Field Office, Douglas

Woods, (206) 615-2491

	Deadline
Rural Health Programs	
State Rural Hospital Flexibility Program	04/14/1999
Rural Network Development Grant Program	03/16/1999
Rural Health Outreach Grant Program	03/01/1999
Rural Health Policy Analytic Centers	03/05/1999
Health Professions Programs	
Nurse Anesthetist Program: Program Grants (as published in the summer HRSA Preview)	12/21/1998
Advanced Nurse Education (as published in the summer HRSA Preview)	12/21/1998
Physician Assistant Training	02/23/1999
Departments of Family Medicine	03/15/1999
Geriatric Education Centers (as published in the summer HRSA Preview)	12/21/1998
Basic/Core Area Health Education Centers	02/26/1999
Model State-Supported Area Health Education Centers	02/26/1999
Health Education and Training Centers	02/19/1999
Quentin N. Burdick Rural Health Interdisciplinary Program	02/12/1999
Allied Health Projects	02/16/1999
Centers of Excellence	03/29/1999
Health Careers Opportunity Program	03/12/1999
Minority Faculty Fellowship Program	01/29/1999
Primary Health Care Programs	
Community and Migrant Health Centers	(1)
Health Care for the Homeless	02/01/1999
Healthy Schools/Healthy Communities	05/01/1999
Grants to States for Loan Repayment Programs	05/01/1999
Black Lung Clinics	04/01/1999
New Delivery Sites and New Starts in Programs Funded under The Health Centers Consolidation Act	04/01/1999
HIV/AIDS Programs	
AIDS Education And Training Centers	04/01/1999
Ryan White Title III HIV Early Intervention Services Grants	05/01/1999
Ryan White Title III HIV Early Intervention Services Planning Grants	06/01/1999
Ryan White Title IV: Existing Geographic Areas	04/30/1999
Ryan White Title IV: New Geographic Areas	04/30/1999
Maternal and Child Health Programs	
Genetic Services	04/23/1999
Genetic Services—Integrated Services for Children with Genetic Conditions	04/23/1999
Genetic Services—Newborn Screening	04/23/1999
Genetic Services—National Genetic Resource Center	04/23/1999
Comprehensive Hemophilia Diagnostic and Treatment Centers Partnership for Information and Communications (PIC)	05/15/1999
Maternal and Child Health Research	02/23/1999
Training—Continuing Education/Collaboration Pediatrics/Child Psychiatry	03/01/1999 04/01/1999
Training—Continuing Education and Development—Training Institute	06/01/1999
Children With Special Health Care Needs: Adolescent Transition	03/01/1999
Children with Special Health Care Needs Institute	03/01/1999
Children With Special Health Care Needs: Medical Home Cooperative Agreement	03/01/1999
	03/01/1999
Farly Discharge (Data)	04/01/1999
	04/01/1999
	05/03/1999
	05/03/1999
Child Health Insurance Program Partnership	02/22/1999
	05/03/1999
Health Care Information and Education for Families of Children With Special Health Care Needs	03/01/1 04/01/1 04/01/1 05/03/1 05/03/1 02/22/1

Deadline

HRSA PROGRAMS	AT A	GLANCE—	Continued
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	Deadline
Emergency Medical Services for Children, Implementation Grants	03/15/1999
Emergency Medical Services for Children, Partnership Grants	03/15/1999
Emergency Medical Services for Children, Targeted Issue Grants	03/15/1999
Emergency Medical Services for Children, Native American Project	03/15/1999
Traumatic Brain Injury State Implementation Grants	03/01/1999
Traumatic Brain Injury State Implementation Grants Traumatic Brain Injury State Planning Grants	03/01/1999
Improving Screening for Alcohol Use During Pregnancy Among Providers	04/01/1999
Healthy Start Initiative: Eliminating Racial/Ethnic Disparities in Perinatal Health	04/01/1999
Healthy Start Initiative: Infrastructure/Capacity Building Projects	04/01/1999
Other HRSA Programs	
Faculty Loan Repayment Program Scholarships for Disadvantaged Students	06/30/1999
Scholarships for Disadvantaged Students	05/14/1999
Nursing Education Loan Repayment Program	06/30/1999

<sup>1</sup> Varies by Service Area.

# How to Obtain And Use The HRSA Preview

It is recommended that you read the introductory materials, terminology section, and individual program category descriptions before contacting the general number 1–888–333–HRSA. Likewise, we urge applicants to fully assess their eligibility for grants before requesting kits. As a general rule, no more than one kit per category will be mailed to applicants.

#### To Obtain A Copy of The HRSA Preview

To have your name and address added to or deleted from the *HRSA Preview* mailing list, please call the toll free number 1–888–333–HRSA (4772) or e-mail us at hrsa.gac@ix.netcom.com.

#### To Obtain An Application Kit

Upon review of the program descriptions, please determine which category or categories of application kit(s) you wish to receive and contact the 1–888–333–HRSA (4772) number to register on the specific mailing list. Application kits are generally available 60 days prior to application deadline. If kits are already available, they will be mailed immediately.

#### World Wide Web Access

The *HRSA Preview* is available on the HRSA Homepage via the World Wide Web at: http://www.hrsa.dhhs.gov/. The fall 1998 *HRSA Preview* is also available in Spanish at HRSA's Homepage http:/ /www.hrsa.dhhs.gov/. It is hoped that the availability of the Spanish edition of the *HRSA Preview* increases your access to HRSA programs. Questions or comments in Spanish about our programs may be directed to Laura Shepherd, Office of Minority Health, at lshepherd@hrsa.dhhs.gov/.

Application materials are currently available for downloading in the current cycle for some HRSA programs. HRSA's goal is to post application forms and materials for all programs as soon as possible. You can download this issue of the *HRSA Preview* in Adobe Acrobat format (.pdf) from HRSA's web site at: http://www.hrsa.dhhs.gov/preview.htm

Also, you can register on-line to be sent specific grant application materials by following the instructions on the web page or accessing http://www.hrsa.gov/ g\_order3.htm directly. Your mailing information will be added to our database and material will be sent to you as it becomes available.

#### Grant Terminology

# Application Deadlines

Applications will be considered "on time" if they are either received on or before the established deadline date or postmarked on or before the deadline date given in the program announcement or in the application kit materials.

#### Authorizations

The citations of provisions of the laws authorizing the various programs are provided immediately preceding groupings of program categories.

#### CFDA Number

The Catalog of Federal Domestic Assistance (CFDA) is a Governmentwide compendium of Federal programs, projects, services, and activities which provide assistance. Programs listed therein are given a CFDA Number.

#### Cooperative Agreement

A financial assistance mechanism used when substantial Federal programmatic involvement, with the recipient during performance, is anticipated by the Agency.

#### Eligibility

Authorizing legislation and programmatic regulations specify

eligibility for individual grant programs. In general, assistance is provided to nonprofit organizations and institutions, State and local governments and their agencies, and occasionally to individuals. For-profit organizations are eligible to receive awards under financial assistance programs unless specifically excluded by legislation.

#### Estimated Amount of Competition

The funding level listed is provided for planning purposes and is subject to the availability of funds.

#### Funding Priorities and/or Preferences

Special priorities or preferences are those which the individual programs have identified for the funding cycle. Some programs give preference to organizations which have specific capabilities such as telemedicine networking or established relationships with managed care organizations. Preference also may be given to achieve an equitable geographic distribution and other reasons to increase the effectiveness of the programs.

#### Key Offices

The Grants Management Office serves as the focal point for business matters. A "key" symbol indicates the appropriate office for each program area and the main telephone number for the office.

# Matching Requirements

Several HRSA programs require a matching amount, or percentage of the total project support, to come from sources other than Federal funds. Matching requirements are generally mandated in the authorizing legislation for specific categories. Also, matching requirements may be administratively required by the awarding office. Such requirements are set forth in the application kit.

#### Project Period

The total time for which support of a discretionary project has been programmatically approved. Continuation of any project beyond the budget period is subject to satisfactory performance, availability of funds and program priorities.

# Review Criteria

The following are generic review criteria applicable to HRSA programs:

• That the estimated cost to the Government of the project is reasonable considering the anticipated results.

• That project personnel or prospective fellows are well qualified by training and/or experience for the support sought, and the applicant organization or the organization to provide training to a fellow has adequate facilities and manpower.

• That, insofar as practical, the proposed activities (scientific or other), if well executed, are capable of attaining project objectives.

• That the project objectives are capable of achieving the specific program objectives defined in the program announcement and the proposed results are measurable.

• That the method for evaluating proposed results includes criteria for determining the extent to which the program has achieved its stated objectives and the extent to which the accomplishment of objectives can be attributed to the program.

• That, in so far as practical, the proposed activities, when accomplished, are replicable, national in scope and include plans for broad dissemination.

The specific review criteria used to review and rank applications are included in the individual guidance material provided with the application kits. Applicants should pay strict attention to addressing these criteria as they are the basis upon which their applications will be judged.

#### Technical Assistance

A contact person is listed for each program and his/her e-mail address and telephone number provided. Some programs have scheduled workshops and conference calls as indicated by the "magnifying glass" in the *HRSA Preview*. If you have questions concerning individual programs or the availability of technical assistance, please contact the person listed. Also check your application materials and the HRSA web site http:// www.hrsa.dhhs.gov/ for the latest technical assistance information.

# Frequently Asked Questions

1. HRSA lists many telephone numbers and e-mail addresses. Who do I phone or e-mail and when?

Phone 1–888–333–HRSA (4772) to register for application kits. It will be helpful to the information specialist if you have the CFDA Number and title of the program handy for reference.

If, before you register, you want to know more about the program, an email/phone contact is listed. This contact can provide information concerning the specific program's purpose, scope and goals, and eligibility criteria. Usually, you will be encouraged to request the application kit so that you will have clear, comprehensive and accurate information available to you. The application kit lists telephone numbers for a program expert and a grants management specialist who will provide technical assistance concerning your specific program, if you are unable to find the information within the materials provided.

2. The dates listed in the *HRSA Preview* and the dates in the application kit do not agree. How do I know which is correct?

First, register at 1–888–333–HRSA (4772) for *each* program that you are interested in as shown in the *HRSA Preview.* 

HRSA Preview dates for application kit availability and application receipt deadline are based upon the best known information at the time of publication, often nine months in advance of the competitive cycle. Occasionally, the grant cycle does not begin as projected and dates must be adjusted. The deadline date stated in your application kit is correct. If the application kit has been made available and subsequently the date changes, notification of the change will be mailed to known recipients of the application kit. Therefore, if you are registered at 1-888–333–HRSA (4772), you will receive the most current information.

3. Are programs announced in the *HRSA Preview* ever canceled?

Infrequently, programs announced may be withdrawn from competition. If this occurs, a cancellation notice will be provided through the *HRSA Preview* at the HRSA Homepage http:// www.hrsa.dhhs.gov/.

If you still have unanswered questions, please contact Jeanne Conley of the Grants Policy Branch at 301–443– 4972 (jconley@hrsa.dhhs.gov).

#### **Rural Health Programs**

Grants Management Office: 1–301– 594–4235.

The Office of Rural Health Policy (ORHP) promotes better health care in

rural America through its grant programs for rural health outreach, network development, and research centers. Grants for the outreach program are used to expand access to essential health care services in rural areas, as well as to reduce the cost and improve the quality of these services. Since recipients of these grants are required to partner with at least two other organizations, outreach grants encourage the development of new and innovative health care delivery systems. Unlike the outreach grants, which focus on the actual delivery of health care services, the network grants are aimed at improving organizational capabilities. Network grants specifically support the planning and development of vertically integrated health care systems in rural areas. In the rapidly changing health care market, rural areas that develop vertically integrated systems will be better able to keep vital health care support within the community. ORHP's research grants fund centers to study a wide range of policy-relevant subjects in rural health, including issues of multi-State and national significance such as the emergence of managed care in rural communities. The work of the research centers is published in appropriate refereed journals and disseminated to a national audience.

# State Rural Hospital Flexibility Program

# Authorization

Section 1820 of the Social Security Act (42 U.S.C. 1395I–4) as amended in Public Law 105–33 SEC. 4201.

#### Purpose

The purpose of this grant program is to help States work with rural communities and hospitals to develop and implement a rural health plan, develop integrated networks of care, improve emergency medical services and designate Critical Access Hospitals.

#### Eligibility

The 50 States are eligible to apply.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$25,000,000.

Estimated Number of Awards

Up to 50.

Estimated Project Period 3 Years.

Application Availability: 02/10/1999

# **To Obtain This Application Kit**

CFDA Number: 93.912C.

Contact: 1–888–333–HRSA (4772). Application Deadline: 04/14/1999. Projected Award Date: 09/1999. Contact Person: Jerry Coopey, jcoopey@hrsa.dhhs.gov 1–301–443– 0835

# Rural Network Development Grant Program

#### Authorization

Section 330A of the Public Health Service Act, 42 U.S.C. 254c

# Purpose

The purpose of this program is to support the planning and development of vertically integrated health care networks in rural areas. Vertically integrated networks must be composed of three different types of providers. The emphasis of the program is on projects to develop the organizational capabilities of these networks. The network is a tool for overcoming the fragmentation of health care delivery services in rural areas. As such, the network provides a range of possibilities for structuring local delivery systems to meet health care needs of rural communities.

#### Eligibility

A rural public or nonprofit private organization that is or represents a network which includes three or more health care providers or other entities that provide or support the delivery of health care services is eligible to apply. The administrative headquarters of the organization must be located in a rural county or in a rural census tract of an urban county, or an organization constituted exclusively to provide services to migrant and seasonal farm workers in rural areas and supported under Section 330(g) of the Public Health Service Act. These organizations are eligible regardless of the urban or rural location of the administrative headquarters.

## Funding Priorities and/or Preferences

Funding preference may be given to applicant networks that include: (1) a majority of the health care providers serving in the area or region to be served by the network; (2) any Federally Qualified Health Centers, Rural Health Clinics, and local public health departments serving in the area or region; (3) outpatient mental health providers serving in the area or region; or (4) appropriate social service providers, such as agencies on aging, school systems and providers under the women, infants, and children program (WIC) to improve access to and coordination of health care services.

# **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$4,420,000.

Estimated Number of Awards 25.

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Estimated Project Period

1–3 Years.

Group Conference Call Date: 01/28/ 99, 2:00 p.m.(ET): Contact ORHP Operator, (301) 656–3100 or FAX (301) 652–5264.

# Application Availability: 12/01/1998

# **To Obtain This Application Kit**

CFDA Number: 93.912B. Contact: 1–888–333–HRSA (4772). Application Deadline: 03/16/1999. Projected Award Date: 09/1999. Contact Person: Eileen Holloran ehollaran@hrsa.dhhs.gov, 1–301–443– 0835.

# Rural Health Outreach Grant Program

# Authorization

Section 330A of the Public Health Service Act, 42 U.S.C. 254c.

## Purpose

The purpose of this grant program is to expand access to, coordinate, restrain the cost of, and improve the quality of essential health care services, including preventive and emergency services, through the development of integrated health care delivery systems or networks in rural areas and regions. Funds are available for projects to support the direct delivery of health care and related services, to expand existing services, or to enhance health service delivery through education, promotion, and prevention programs. The emphasis is on the actual delivery of specific services rather than the development of organizational capabilities. Projects may be carried out by networks of the same providers (e.g. all hospitals) or more diversified networks.

## Eligibility

Rural public or nonprofit private organizations that include three or more health care providers or other entities that provide or support the delivery of health care services are eligible to apply. The administrative headquarters of the organization must be located in a rural county or in a rural census tract of an urban county, or an organization constituted exclusively to provide services to migrant and seasonal farmworkers in rural areas and supported under Section 330(g) of the Public Health Service Act. Organizations that provide services to migrant and seasonal farmworkers in rural areas and are supported under Section 330(g) of the Public Health Service Act are eligible regardless of the urban or rural location of the administrative headquarters.

# Funding Priorities and/or Preferences

Funding preference may be given to applicant networks that include: (1) A majority of the health care providers serving in the area or region to be served by the network; (2) any Federally Qualified Health Centers, Rural Health Clinics, and local public health departments serving in the area or region; (3) outpatient mental health providers serving in the area or region; or (4) appropriate social service providers, such as agencies on aging, school systems, and providers under the women, infants, and children program (WIC), to improve access to and coordination of health care services.

#### **Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition

\$8,580,000.

Estimated Number of Awards 50.

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Estimated Project Period

1–3 Years.

Group Conference Call Date: 01/26/ 99, 2:00 p.m.(ET): Contact ORHP Operator, (301) 656–3100 or FAX (301) 652–5264.

Application Availability: 12/01/1998

#### **To Obtain This Application Kit**

CFDA Number: 93.912A. Contact: 1–888–333–HRSA (4772). Application Deadline: 03/01/1999. Projected Award Date: 09/1999. Contact Person: Eileen Holloran, eholloran@hrsa.dhhs.gov, 1–301–443– 0835.

# Rural Health Policy Analytic Centers

#### Authorization

Section 301 of the Public Health Service Act, 42 U.S.C. [241].

#### Purpose

The purpose of this program is to fund rural health services policy analytic centers to conduct policy relevant research on rural health services issues of multi-state and national significance, and disseminate the findings of their research. The centers study the critical issues facing rural communities in their quest to secure adequate, affordable, high quality health services. Rural health research findings are published in appropriate refereed journals and disseminated to a national audience.

#### Eligibility

All public and private entities, both nonprofit and for-profit, are eligible to apply.

Funding Priorities and/or Preferences None.

**Review Criteria** 

Final criteria are included in the application kit.

Estimated Amount of This Competition \$1,000,000.

Estimated Number of Awards

2–4.

**Estimated Project Period** 

3 Years.

Application Availability: 12/01/1998

#### **To Obtain This Application Kit**

CFDA Number: 93.155. Contact: 1–888–333–HRSA (4772). Application Deadline: 03/05/1999. Projected Award Date: 07/1999. Contact Person: Jake Culp, jculp@hrsa.dhhs.gov, 1–301–443–0835.

#### **Health Professions Programs**

Grants Management Office: 1–301–443–6880.

**Note:** As the *HRSA Preview* was going to print, new legislation was passed reauthorizing many of the Health Professions Programs. Because the legislation may have altered important elements, such as program requirements, please read the application materials carefully.

Underlined areas provide additional or changed information to the Summer 1998 HRSA Preview.

Nurse Anesthetist Program: Program Grants

#### Authorization

Section 811 of the Public Health Service Act (Previously Section 831), 42 U.S.C. 297–1.

#### Purpose

Grants are awarded to assist eligible institutions to meet the costs of developing projects for the education of nurse anesthetists.

## Eligibility

Eligible applicants are public or private nonprofit institutions which provide registered nurses with full-time nurse anesthetist training and are accredited by an entity or entities designated by the Secretary of Education.

# Funding Priorities and/or Preferences

Statutory Funding Preference: As provided in Section 860(e) of the Public Health Service Act, preference will be given to qualified applicants that: (A) have a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or (B) have achieved, during the 2-year period preceding the fiscal year for which such an award is sought, a significant increase in the rate of placing graduates in such settings. This preference will only be applied to education program applications that rank above the 20th percentile of proposals recommended for approval by the peer review group.

"High rate" and "significant increase in the rate" have been redefined for this program. "High rate" is defined as a minimum of 35 percent of graduates in academic year 1995–1996, academic year 1996–1997, or academic year 1997– 1998, who spend at least 50 percent of their work time in clinical practice in the specified settings. Graduates who are providing care in a medically underserved community as a part of a fellowship or other educational experience can be counted.

"Significant increase in the rate" means that, between academic years 1996–1997 and 1997–1998, the rate of placing graduates in the specified settings has increased by a minimum of 50 percent and not less than 15 percent of graduates from the most recent year are working in these settings.

**Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition

\$400,000.

Estimated Number of Awards

2 Programs.

Estimated Project Period

3 Years.

Application Availability: 07/13/1998

#### **To Obtain This Application Kit**

CFDA Number: 93.916. Contact: 1–888–333–HRSA (4772). Application Deadline: 12/21/1998. Projected Award Date: 04/1999.

*Contact Person:* Marcia Starbecker, mstarbecker@hrsa.dhhs.gov, 1–301–443–6333.

Advanced Nurse Education

#### Authorization

Section 811 of the Public Health Service Act (Previously Section 821), 42 U.S.C. 296.

#### Purpose

Grants are awarded to assist eligible institutions plan, develop and operate new programs, or significantly expand existing programs leading to advanced degrees that prepare nurses to serve as nurse educators or public health nurses, or in other clinical nurse specialties determined by the Secretary to require advanced education.

## Eligibility

Eligible applicants are public and nonprofit private collegiate schools of nursing.

## **Funding Priorities and/or Preferences**

Statutory General Preference: As provided in Section 860(e)(1) of the Public Health Service Act, preference will be given to any qualified applicant that: (A) has a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or (B) during the 2-year period preceding the fiscal year for which such an award is sought, has achieved a significant increase in the rate of placing graduates in such settings. This preference will only be applied to applications that rank above the 20th percentile of proposals recommended for approval by the peer review group.

"High rate" and "significant increase in the rate" have been redefined for this program. "High rate" is defined as a minimum of 35 percent of graduates in academic year 1995–1996, academic year 1996–1997, or academic year 1997– 1998, who spend at least 50 percent of their work time in clinical practice in the specified settings. Graduates who are providing care in a medically underserved community as a part of a fellowship or other educational experience can be counted.

"Significant increase in the rate" means that, between academic years 1996–1997 and 1997–1998, the rate of placing graduates in the specified settings has increased by a minimum of 50 percent and not less than 15 percent of graduates from the most recent year are working in these settings.

Established Funding Priorities: A funding priority will be given to applications which develop, expand or implement course(s) concerning ambulatory, home health care and/or inpatient case management services for individuals with HIV disease. In determining the order of funding of approved applications, a funding priority will be given to applicant institutions which demonstrate either substantial progress over the last three years or a significant experience of ten or more years in enrolling and graduating trainees from those minority or low-income populations identified as at-risk of poor health outcomes.

## **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of the Competition \$4,000,000.

Estimated Number of Awards

20.

## Estimated Project Period

3 Years.

## Application Availability: 07/13/1998

# **To Obtain This Application Kit**

CFDA Number: 93.299. Contact: 1–888–333–HRSA (4772). Application Deadline: 12/21/1998. Projected Award Date: 04/1999. Contact Person: Karen Pane, kpane@hrsa.dhhs.gov, 1–301–443–6333.

#### Physician Assistant Training

#### Authorization

Section 747 of the Public Health Service Act (Previously Section 750), 42 U.S.C. 293n.

# Purpose

Grants are awarded under Section 747 of the Public Health Service Act for projects: (1) for the training of physician assistants; and (2) for the training of individuals who will teach in programs to provide such training. The projects supported must meet the following definition of a training program for physician assistants as defined under Section 799B of the Public Health Service Act: (1) has as its objective the education of individuals who will, upon completion of their studies in the program, be qualified to provide primary care under the supervision of a physician; (2) extends for at least one academic year and consists of supervised clinical practice and at least four months (in the aggregate) of classroom instruction directed toward preparing students to deliver health care; (3) has an enrollment of not less than eight students; and (4) trains students in primary care, disease prevention, health promotion, geriatric medicine, and home health care. The program assists schools to meet the costs of projects to plan, develop and

operate or maintain programs for the training of physician assistants and for the training of individuals who will teach in programs to provide such training. Programs must develop and use methods designed to encourage graduates of the program to work in health professional shortage areas. Programs also must develop and use methods for placing graduates in positions for which they have been trained.

## Eligibility

Public or nonprofit private hospitals, schools of medicine, or osteopathic medicine or a public or private nonprofit entity are eligible to apply. Eligible physician assistant programs are those which are either accredited by the American Medical Association's Committee on Allied Health Education and Accreditation (AMA–CAHEA) or its successor organization, the Commission on Accreditation of Allied Health Education Programs (CAAHEP).

# Funding Priorities and/or Preferences

As provided in Section 791(a) of the Public Health Service Act, statutory preference will be given to any qualified applicant that: (A) has a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or (B) during the 2-year period preceding the fiscal year for which such an award is sought, has achieved a significant increase in the rate of placing graduates in such settings. This statutory general preference will only be applied to applications that rank above the 20th percentile of applications recommended for approval by the peer review group.

A statutory priority will be given to qualified applicants that have a record of training individuals who are from disadvantaged backgrounds (including racial and ethnic minorities underrepresented among physician assistants).

A special consideration will be given under Section 747(c)(3) in awarding grants to projects which prepare practitioners to care for underserved population and other high-risk groups such as the elderly, individuals with HIV–AIDS, substance abusers, homeless, and victims of domestic violence.

## **Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition \$900,000.

Estimated Number of Awards

6.

#### **Estimated Project Period**

#### 3 Years.

Technical Assistance Group Conference Call: To be held on January 21, 1999. Contact Ed Spirer by January 14, 1999 to participate by calling 301– 443–1467 or e-mail espirer@hrsa.dhhs.gov.

# Application Availability: 12/15/1998

# **To Obtain This Application Kit**

CFDA Number: 93.886. Contact: 1–888–333–HRSA (4772). Application Deadline: 02/23/1999. Projected Award Date: 06/1999. Contact Person: Ed Spirer, espirer@hrsa.dhhs.gov, 1–301–443– 1467.

#### Departments of Family Medicine

#### Authorization

Section 747 of the Public Health Service Act, 42 U.S.C. 293k.

# Purpose

Grants are awarded to establish, maintain, or improve academic administrative units to provide clinical instruction in family medicine; to plan and develop model educational predoctoral, faculty development, and graduate medical education programs in family medicine which will meet the requirements of Section 747(a) by the end of the project period of Section 747(b) support; to support academic and clinical activities relevant to the field of family medicine; and to strengthen the administrative base and structure responsible for the planning, direction, organization, coordination, and evaluation of all undergraduate and graduate family medicine activities.

#### Eligibility

Public, or private nonprofit accredited schools of medicine or osteopathic medicine are eligible to apply.

#### Funding Priorities and/or Preferences

As provided in Section 791(a) of the Public Health Service Act, statutory preference will be given to any qualified applicant that: (A) has a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or (B) during the 2-year period preceding the fiscal year for which such an award is sought, has achieved a significant increase in the rate of placing graduates in such settings. This statutory general preference will only be applied to applications that rank above the 20th percentile of applications recommended for approval by the peer review group.

Under Section 747(b), a funding preference is provided for qualified applicants that agree to expend the award for the purpose of: (1) establishing an academic administrative unit defined as a department, division, or other unit, for programs in family medicine; or (2) substantially expanding the programs of such a unit.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$3,600,000.

Estimated Number of Awards

20.

Estimated Project Period

3 Years.

Technical Assistance Conference Call: February 15, 1999. Contact Shelby Biedenkapp by January 29 to participate, 301–443–1467, or e-mail sbiedenkapp@hrsa.dhhs.gov.

#### Application Availability: 10/09/1998

#### **To Obtain This Application Kit**

CFDA Number: 93.984. Contact: 1–888–333–HRSA (4772). Application Deadline: 03/15/1999. Projected Award Date: 08/1999. Contact Person: Shelby Biedenkapp, sbiedenkapp@hrsa.dhhs.gov, 1–301– 443–1467.

#### Geriatric Education Centers

#### Authorization

Section 753 of the Public Health Service Act (Previously Section 777(a)), 42 U.S.C. 2940.

#### Purpose

Grants are awarded to support the development of collaborative arrangements involving several health professions schools and health care facilities. Geriatric Education Centers (GECs) facilitate training of health professional faculty, students, and practitioners in the diagnosis, treatment, and prevention of disease, disability, and other health problems of the aged. Health professionals include allopathic physicians, osteopathic physicians, dentists, optometrists, podiatrists, pharmacists, nurse practitioners, physician assistants, chiropractors, behavioral and mental health professionals, health administrators, and other allied health professionals. Projects supported under these grants must offer training involving four or more health professions, one of which

must be allopathic or osteopathic medicine, and must address one or more of the following statutory purposes: (a) improve the training of health professionals in geriatrics; (b) develop and disseminate curricula relating to the treatment of health problems of elderly individuals; (c) support the training and retraining of faculty to provide such instruction in geriatrics; (d) support continuing education of health professionals and allied health professionals who provide such treatment; and (e) provide students with clinical training in geriatrics in nursing homes, chronic and acute disease hospitals, ambulatory care centers, and senior centers.

#### Eligibility

Grants may be made to accredited health professions schools as defined by Section 799B(1), or programs for the training of physician assistants as defined by Section 799B(3), or schools of allied health as defined by Section 799B(4), or schools of nursing as defined by Section 853(2).

Funding Priorities and/Or Preferences None.

**Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition \$1,100,000.

Estimated Number of Awards 8.

**Estimated Project Period** 

3 years.

Application Availability: 10/05/1998

#### **To Obtain This Application Kit**

CFDA Number: 93.969. Contact: 1–888–333–HRSA (4772). Application Deadline: 12/21/1998. Projected Award Date: 04/1999. Contact Person: Barbara Broome, bbroome@hrsa.dhhs.gov 1–301–443– 6887.

Basic/Core Area Health Education Centers

#### Authorization

Section 751(a)(1) of the Public Health Service Act (Previously Section 746(a)(1)), 42 U.S.C. 293j.

#### Purpose

Grants are awarded to assist schools to improve the distribution, supply 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. The Area Health Education Centers (AHEC) program assists schools in the planning, development, and operation of AHEC's to initiate educational system 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 program establishes 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. The program embraces the goal of increasing the number of health professions graduates who ultimately will practice in underserved areas.

# Eligibility

The types of entities eligible to apply for this program have been expanded from public or private nonprofit accredited schools of medicine and osteopathic medicine to include incorporated consortia of such schools, or the parent institution of such schools. Also, in States in which no area health education center program is in operation, an accredited school of nursing is also an eligible applicant.

## Matching Requirements

Awardees shall make available (directly or through contributions from State, county or municipal governments, or the private sector) non-Federal contributions in cash in an amount that is not less than 50 percent of the operating costs of the AHEC Program, except that the Secretary may grant a waiver for up to 75 percent of the amount required in the first 3 years in which an awardee receives funds under Section 751(a)(1).

#### Funding Priorities and/or Preferences

Funds shall be awarded to approved applicants in the following order: (1) competing continuations; (2) new starts in States with no AHEC program; (3) other new starts; and (4) competing supplementals. Applications reviewed and scored in the lowest 25th percentile may be partially funded or may not be funded.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$7,625,000.

935

Estimated Number of Awards

9.

0

9.

Estimated Project Period 3 Years.

Application Availability: 10/09/1998

#### **To Obtain This Application Kit**

*Contact:* 1–888–333–HRSA (4772) *CFDA Number:* 93.824. *Application Deadline:* 02/26/1999.

Projected Award Date: 05/1999. Contact Persons: Louis D. Coccodrilli (lcoccodrilli@hrsa.dhhs.gov); Carol S. Gleich (cgleich@hrsa.dhhs.gov), 1–301– 443–6950.

#### Model State-Supported Area Health Education Centers

# Authorization

Section 751(a)(2) of The Public Health Service Act (Previously Section 746 (a)(3)), 42 U.S.C. 293j.

# Purpose

The program assists schools to improve the distribution, supply, 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. The Area Health Education Centers (AHEC) program assists schools in the development, and operation of AHEC's to implement educational system 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 program establishes a network of health-related institutions to provide educational services to students, faculty and practitioners and ultimately, to improve the delivery of health care in the service area. These programs are collaborative partnerships which address current health workforce needs within a region of a State, or in an entire State.

#### Eligibility

The types of entities eligible to apply for this program have been expanded from public or private nonprofit accredited schools of medicine and osteopathic medicine to include incorporated consortia of such schools, or the parent institution of such schools. Applicants must also have previously received funds but are no longer receiving funds under Section 751(a)(1), formerly Section 746(a)(1), and are operating an AHEC program.

# Matching Requirements

Awardees shall make available (directly or through contributions from State, county or municipal governments, or the private sector) recurring non-Federal contributions in cash in an amount not less than 50 percent of the operating costs of the Model State-Supported AHEC Program.

#### Funding Priorities and/or Preferences

Funds shall be awarded to approved applicants in the following order: (1) competing continuations; (2) new starts in States with no AHEC program; (3) other new starts; and (4) competing supplementals. Applications reviewed and scored in the lowest 25th percentile may be partially funded or may not be funded.

# **Review Criteria**

Final criteria are included in the application kit.

Estimated Number of Awards 9.

9.

Application Availability: 10/09/1998

# **To Obtain This Application Kit**

CFDA Number: 93.107. Contact: 1–888–333–HRSA (4772). Application Deadline: 02/26/1999. Projected Award Date: 05/1999. Contact Persons: Louis D. Coccodrilli (lcoccodrilli@hrsa.dhhs.gov); Carol S. Gleich (cgleich@hrsa.dhhs.gov), 1–301– 443–6950.

# Health Education and Training Centers

#### Authorization

Section 752 of The Public Health Service Act (Previously Section 746(f)), 42 U.S.C. 293j.

## Purpose

Grants are awarded to assist schools to improve the distribution, supply, quality and efficiency of personnel providing health services in the State of Florida or along the border between the United States and Mexico and in other urban/rural areas of the United States to any population group that has demonstrated serious unmet health care needs. The program encourages health promotion and disease prevention through public education in border and non-border areas. Each Health Education and Training Center (HETC) project will: (a) conduct or support not less than one training and educational program for physicians and one for nurses for at least a portion of the clinical training of such students in the proposed service area; (b) conduct or support training in health education services. A school of public health

located in the HETC service area shall participate in the HETC program if the school requests to participate.

Note that funds shall be awarded in such a way that 50 percent of amounts appropriated for each fiscal year are for the establishment or operation of health education training centers in States along the United States and Mexican border and in the State of Florida.

#### Eligibility

The types of entities eligible for this program have been expanded from public or private nonprofit accredited schools of medicine and osteopathic medicine, to include incorporated consortia of such schools, or the parent institution of such schools. In States in which no area health education center program is in operation, an accredited school of nursing is also an eligible applicant.

# Funding Priorities and/or Preferences

Fifty percent of the appropriated funds each year must be made available for approved applications for Border HETCs. The amount allocated for each approved Border HETC application shall be determined in accordance with a formula. Approved non-Border HETC applications scored in the lowest 25th percentile may be partially funded or may not be funded. The following funding priorities are being applied in FY 1999: (1) Implementation of HETC Programs training a minimum of 50 under-represented minority trainees annually for service to medically underserved populations; (2) Implementation of a substantial public health training experience between 4 to 8 weeks for a minimum of 25 trainees annually; (3) As part of their advisory group, a proposed project must have representation from a health department from the area being served.

#### Matching Requirement

Awardees shall provide matching funds from non-Federal sources (directly or through donations from public or private entities, in cash or inkind) in an amount not less than 25 percent of total operating costs of the HETC project.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated amount of This Competition \$3,550,000.

Estimated Number of Awards 10–15.

**Estimated Project Period** 

3 Years.

#### Application Availability: 10/09/1998

# To Obtain This Application Kit

CFDA Number: 93.189. Contact: 1–888–333–HRSA (4772). Application Deadline: 02/19/1999. Projected Award Date: 06/1999. Contact Persons: Louis D. Coccodrilli (lcoccodrilli@hrsa.dhhs.gov); Carol S. Gleich (cgleich@hrsa.dhhs.gov), 1–301– 443–6950.

# Quentin N. Burdick Rural Health Interdisciplinary Program

# Authorization

Section 754 of the Public Health Service Act, 42 U.S.C. 294p.

## Purpose

The goal of this program is to provide or improve access to health care in rural areas. Specifically, projects funded under this authority shall be designed to: (a) Use new and innovative methods to train health care practitioners to provide services in rural areas; (b) demonstrate and evaluate innovative interdisciplinary methods and models designed to provide access to costeffective comprehensive health care; (c) deliver health care services to individuals residing in rural areas; (d) enhance the amount of relevant research conducted concerning health care issues in rural areas; and (e) increase the recruitment and retention of health care practitioners in rural areas and make rural practice a more attractive career choice for health care practitioners.

## Eligibility

Applications will be accepted from health professions schools, academic health centers, State or local governments or other appropriate public or private nonprofit entities for funding and participation in health professions and nursing training activities. Applications shall be jointly

Applications shall be jointly submitted by at least two eligible applicants with the express purpose of assisting individuals in academic institutions in establishing long-term collaborative relationships with health care providers in rural areas.

Applicants must designate a rural health care agency or agencies for clinical treatment or training including hospitals, community health centers, migrant health centers, rural health clinics, community behavioral and mental health centers, long-term care facilities, Native Hawaiian health centers or facilities operated by the Indian Health Service or an Indian tribe or tribal organization or Indian organization under a contract with the Indian Health Service under the Indian Self Determination Act. Funding Priorities and/or Preferences

A preference will be given to any qualified applicant that: (1) has a high rate for placing graduates in practice settings having the principal focus of serving residents of medically underserved communities; or (2) during the 2-year period preceding the fiscal year for which such an award is sought, has achieved a significant increase in the rate of placing graduates in such settings. So that new applicants may compete equitably, a preference will be given to those new programs that meet at least four of the criteria described in Section 791(c)(3) concerning medically underserved communities and populations.

A priority will be given to approved applicant institutions (academic) which demonstrate either substantial progress over the last three years or a significant experience of ten or more years in enrolling and graduating trainees from those minority and low income populations identified as at risk of poor outcomes.

# Special Considerations

Special consideration will be given to qualified applicants who increase the number of disadvantaged health professions students and provide community-based training experiences designed to improve access to health care services in underserved areas. This will include being responsive to population groups addressed in the President's Executive Orders 12876, 12900, and 13021. These include such applicants as Hispanic Serving Institutions, Historically Black Colleges and Universities, and Tribal Colleges and Universities serving Native Americans.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of this Competition \$1.800.000.

Estimated Number of Awards

#### 12.

Estimated Project Period

3 Years.

Application Availability: 11/01/1998

#### **To Obtain This Application Kit**

CFDA Number: 93.192. Contact: 1–888–333–HRSA (4772). Application Deadline: 02/12/1999. Projected Award Date: 05/1999. Contact Person: Judith E. Arndt, jarndt@hrsa.dhhs.gov, 1–301–443–6763.

# Allied Health Projects

## Authorization

Section 755 of the Public Health Service Act, 42 U.S.C. 294e.

#### Purpose

Grants are awarded to assist eligible entities in meeting the costs associated with expanding or establishing programs that will: expand enrollments in allied health disciplines that are in short supply or whose services are most needed by the elderly; provide rapid transition training programs in allied health fields to individuals who have baccalaureate degrees in health-related sciences; establish community-based training programs that link academic centers to rural clinical settings; provide career advancement training for practicing allied health professionals; expand or establish clinical training sites for allied health professionals in medically underserved or rural communities in order to increase the number of individuals trained; develop curriculum that will emphasize knowledge and practice in the areas of prevention and health promotion, geriatrics, long-term care, home health and hospice care, and ethics; expand or establish interdisciplinary training programs that promote the effectiveness of allied health practitioners in geriatric assessment and the rehabilitation of the elderly; expand or establish demonstration centers to emphasize innovative models to link allied health, clinical practice, education, and research; and, to plan, develop, and operate or maintain graduate programs in behavioral and mental health professions.

#### Eligibility

"Eligible entity" for the purpose of this grant program means health professions schools, academic health centers, State or local governments or other appropriate public or private nonprofit entities for funding and participation in health professions training activities.

Eligible academic institutions shall also be required to use funds in collaboration with two or more disciplines.

#### Funding Priorities and/or Preferences

A funding preference will be given to applicants who: (a) have a high rate for placing graduates in practice settings having the focus of serving residents of medically underserved communities, or (b) during the 2-year period preceding the fiscal year for which such an award is sought, have achieved a significant increase in the rate of placing graduates in such settings. So that new applicants may compete equitably, a preference will be given to those new programs that meet at least four of the criteria described in Section 791(c)(3) concerning medically underserved communities and populations.

A priority will be given to qualified applicants who provide communitybased training experiences designed to improve access to health care services in underserved areas. This will include being responsive to population groups addressed in the President's Executive Orders 12876, 12900 and 13021. These will include such applicants as Hispanic Serving Institutions, Historical Black Colleges and Universities, and Tribal Colleges and Universities serving Native Americans.

Special consideration will be given to applicants that work with school systems through the high school level, especially in those areas where there is a high percentage of disadvantaged students, to encourage them to work toward careers in the allied health professions.

**Review Criteria** 

Final criteria are included in the application kit.

Estimated Amount of This Competition \$ 830,000.

Estimated Number of Awards

9.

Estimated Project Period

3 Years.

Application Availability: 11/01/1998

# **To Obtain This Application Kit**

CFDA Number: 93.191. Contact: 1–888–333–HRSA (4772). Application Deadline: 02/16/1999. Projected Award date: 06/1999. Contact Person: Norman L. Clark, nclark@hrsa.dhhs.gov, 1–301–443–1346.

Centers of Excellence (COE)

Authorization

Section 736 of the Public Health Service Act, 42 U.S.C. 293c.

#### Purpose

The goal of this program is to assist eligible schools in supporting programs of excellence in health professions education for underrepresented minority individuals. The grantee is required to use the funds awarded: to develop a large competitive applicant pool through linkages with institutions of higher education, local school districts, and other community-based entities and establish an education

pipeline for health professions careers; to establish, strengthen, or expand programs to enhance the academic performance of underrepresented minority students attending the school; to improve the capacity of such school to train, recruit, and retain underrepresented minority faculty including the payment of stipends and fellowships; to carry out activities to improve the information resources, clinical education, curricula and cultural competence of the graduates of the schools as it relates to minority health issues; to facilitate faculty and student research on health issues particularly affecting underrepresented minority groups, including research on issues relating to the delivery of health care; to carry out a program to train students of the school in providing health services to a significant number of under-represented minority individuals through training provided to such students at community-based health facilities that provide such health services and are located at a site remote from the main site of the teaching facilities of the school; and to provide stipends. The \$500,000 minimum award per year is no longer required.

## Eligibility

Eligible applicants are accredited schools of allopathic medicine, osteopathic medicine, dentistry, pharmacy, graduate programs in behavioral or mental health, or other public and nonprofit health or educational entities.

Funding Priorities and/or Preferences

None.

**Review Criteria** 

Final criteria are included in the application kit.

Estimated Amount of This Competition

\$11,000,000.

Estimated Number of Awards

20.

Estimated Project Period

3 Years.

Application Availability: 11/01/1998

## **To Obtain This Application Kit**

CFDA Number: 93.157. Contact: 1–888–333–HRSA (4772). Application Deadline: 03/29/1999. Projected Award Date: 09/1999. Contact Person: Roland Garcia, rgarcia@hrsa.dhhs.gov, 1–301–443– 2100. Health Careers Opportunity Program (HCOP)

#### Authorization

Section 739 of the Public Health Service Act, 42 U.S.C. 293d.

#### Purpose

The goal of this program is to assist individuals from disadvantaged backgrounds to undertake education to enter a health profession. The HCOP program works to build diversity in the health fields by providing students from disadvantaged backgrounds an opportunity to develop the skills needed to successfully compete, enter, and graduate from health professions schools.

The legislative purposes for which HCOP funds may be awarded are: identifying, recruiting, and selecting individuals from disadvantaged backgrounds for education and training in a health profession; facilitating the entry of such individuals into such a school; providing counseling, mentoring, or other services designed to assist such individuals to complete successfully their education at such a school; providing, for a period prior to the entry of such individuals into the regular course of education of such a school, preliminary education and health research training designed to assist them to complete successfully such regular course of education at such a school, or referring such individuals to institutions providing such preliminary education; publicizing existing sources of financial aid available to students in the education program of such a school or who are undertaking training necessary to qualify them to enroll in such a program; paying scholarships, as the Secretary may determine, for such individuals for any period of health professions education at a health professions school; paying such stipends for such individuals for any period of education in studentenhancement programs (other than regular courses), except that such a stipend may not be provided to an individual for more than 12 months; carrying out programs under which such individuals gain experience regarding a career in a field of primary health care through working at facilities of public or private nonprofit community-based providers of primary health services; and conducting activities to develop a larger and more competitive applicant pool through partnerships with institutions of higher education, school districts, and other community-based entities.

The "scholarships" provision will not be implemented in FY 1999.

# Eligibility

Eligible applicants include schools of medicine, osteopathic medicine, public health, dentistry, veterinary medicine, optometry, pharmacy, allied health, chiropractic, podiatric medicine, public or nonprofit private schools that offer graduate programs in behavioral and mental health, programs for the training of physician assistants, and other public or private nonprofit health or educational entities.

Funding Priorities and/or Preferences

A funding preference will be given to approved applications for programs that involve a comprehensive approach by several public or nonprofit private health or educational entities to establish, enhance and expand educational programs that will result in the development of a competitive applicant pool of individuals from disadvantaged backgrounds who desire to pursue health professions careers.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$13,000,000.

Estimated Number of Awards 67.

**Estimated Project Period** 

3 Years.

Application Availability: 11/01/1998

# To Obtain This Application Kit

CFDA Number: 93.822. Contact: 1–888–333–HRSA (4772). Application Deadline: 03/12/1999. Projected Award Date: 08/1999. Contact Person: Mario Manecci, mmanecci@hrsa.dhhs.gov, 1–301–443–

4493. Minority Faculty Fellowship Program

(MFFP)

# Authorization

Section 738(b) of the Public Health Service Act, 42 U.S.C. 293b.

# Purpose

The purpose of the Minority Faculty Fellowship Program is to increase the number of underrepresented minority individuals who are members of the faculty in health professions schools. Applicants must demonstrate that they have or will have the ability to: (1) identify, recruit and select underrepresented minority individuals who have the potential for teaching, administration, or conducting research at a health professions institution; (2) provide such individuals with the skills necessary to enable them to secure a tenured faculty position at such institution, which may include training with respect to pedagogical skills, program administration, the design and conduct of research, grant writing, and the preparation of articles suitable for publication in peer reviewed journals; (3) provide services designed to assist individuals in their preparation for an academic career, including the provision of counselors; and (4) provide health services to rural or medically underserved populations.

# Eligibility

Eligible applicants are schools of medicine, nursing, osteopathic medicine, dentistry, pharmacy, allied health, podiatric medicine, optometry, veterinary medicine, public health, or schools offering graduate programs in behavioral and mental health.

Funding Priorities and/or Preferences

In determining awards, the Secretary will also take into consideration equity among health disciplines and geographic distribution.

#### **Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition

#### \$200,000.

Estimated Number of Awards

6.

**Estimated Project Period** 

3 Years.

Application Availability: 11/1/1998

#### **To Obtain This Application Kit**

CFDA Number: 93.923. Contact: 1–888–333–HRSA (4772). Application Deadline: 01/29/1999. Projected Award Date: 05/1999. Contact Person: Armando Pollack, apollack@hrsa.dhhs.gov, 1–301–443– 2100.

# **Primary Health Care Programs**

Grants Management Office: 1–301– 594–4235.

# Community and Migrant Health Centers

## Authorization

Section 330 of the Public Health Service Act, 42 U.S.C. 254b.

#### Purpose

The Community Health Center and Migrant Health Center (C/MHC) programs are designed to promote the development and operation of community-based primary health care service systems in medically underserved areas for medically underserved populations. It is the intent of HRSA to continue to support health services in these areas, given the unmet need inherent in their provision of services to medically underserved populations. HRSA will open competition for awards under Section 330 of the Public Health Service Act (U.S.C. 254b for CHCs and U.S.C. 254b(g) for MHCs) to support health services in the areas currently served by these grants. Fifty-six C/MHC grantees will reach the end of their project periods during the second half of FY 1999.

## Eligibility

Applicants are limited to currently funded programs whose project periods expire during the second half of FY 1999 and new organizations proposing to serve the same populations currently being served by these existing programs.

City	State	Deadline
HRSA Boston Field Office (617) 565–1482		
Boston Littleton	MA NH	03/01/1999 03/01/1999
HRSA New York Field Office (212) 264–2664		
St. Thomas West New York Brooklyn New Brunswick	VI (2) NJ NY NJ	02/01/1999 03/01/1999 03/01/1999 03/01/1999

City	State	Deadline
HRSA Philadelphia Field Office (215) 861–4422	1	
Blacksville	WV	02/01/1999
St. Charles	VA	02/01/1999
Philadelphia	PA	02/01/1999
Suffolk	VA	03/01/1999
HRSA Atlanta Field Office (404) 562–2996	1	
Little River	SC	02/01/1999
Jefferson	SC	02/01/1999
Trenton	FL	02/01/1999
Shabuta	MS FL	02/01/1999
St. Petersburg Broward County	FL	02/01/1999
Waycross	GA	03/01/1999
Wilmington	NC	03/01/1999
Tallahassee	FL	03/01/1999
Columbus	GA	03/01/1999
Jacksonville	FL	03/01/1999
HRSA Chicago Field Office (312) 353–1715		
Champaign	IL	02/01/1999
Wausau	WI	03/01/1999
Kenosha	WI	03/01/1999
Evansville	IN	03/01/1999
Ft. Wayne	IN	03/01/1999
Lafayette	IN	03/01/1999
Chicago	IL	03/01/1999
Muskegon Hts.	MI	03/01/1999
Indianapolis	IN	02/01/1999
HRSA Dallas Field Office (214) 767–3872	1	
Benavides	ТХ	02/01/1999
Clarendon	AR	02/01/1999
St. Gabriel	LA	03/01/1999
Oklahoma City	OK (2)	03/01/1999
El Paso	TX	03/01/1999
Lordsburg	NM	03/01/1999
HRSA Kansas Field Office (816) 426–5296	1	
Garden City	кs	03/01/1999
Emporia	KS	03/01/1999
Council Bluffs	IA	03/01/1999
HRSA Denver Field Office (303) 844–3203	1	
	<u></u>	00/04/4000
Dove Creek	CO MT	02/01/1999
Helena Livingston	MT	03/01/1999
HRSA San Francisco Field Office (415) 437–8090		
Carson City	NV	02/01/1999
Nogales	AZ	02/01/1999
San Mateo	CA	03/15/1999
Berkeley	CA	03/01/1999
Elfrida	AZ	03/01/1999
Waimanalo	HI	03/01/1999
Redding Flagstaff	CA AZ	03/01/1999
HRSA Seattle Field Office (206) 615–2491		
	WA	03/01/1000
Grays Harbor Sand Point	AK	03/01/1999
Everett	WA	03/01/1999
Longview	WA	03/01/1999

# Special Considerations

Communication with Field Office staff is essential for interested parties in deciding whether to pursue Federal funding as a C/MHC. Technical assistance and detailed information about each service area, such as census tracts, can be obtained by contacting the HRSA Field Office.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$30,280,000.

Estimated Number of Awards 56.

Estimated Project Period

1-5 Years.

**Application Availability: Continuous** 

#### **To Obtain This Application Kit**

CFDA Number:

93.224 Community Health Centers

93.246 Migrant Health Centers Contact: 1–888–333–HRSA (4772) Application Deadline: Current grant expiration dates vary by area.

Applications for competing continuation grants are due 120 days prior to the expiration of the current grant award.

*Contact Person:* Richard Bohrer, rbohrer@hrsa.dhhs.gov, 1–301–594–4300.

## Health Care for the Homeless

#### Authorization

Section 330 of the Public Health Service Act, 42 U.S.C. 254b(h).

## Purpose

The Health Care for the Homeless (HCH) program is designed to increase the access of homeless populations to cost-effective, case managed, and integrated primary care and substance abuse services provided by existing community-based programs/providers. It is the intent of HRSA to continue to support health services to the homeless populations in these areas/locations given the continued need for costeffective, community-based primary care services for medically underserved populations within these geographic areas. One HCH grantee will reach the end of its project period during the second half of FY 1999.

#### Eligibility

Applicants are limited to the currently funded program whose project period expires in FY 1999 and new organizations proposing to serve the same population currently being served by this existing program.

## Special Consideration

Communication with Field Office staff is essential for interested parties in deciding whether to pursue Federal funding as an HCH. Detailed information about each service area, such as census tracts, can be obtained by contacting the appropriate HRSA Field Office listed below:

City	State	Deadline
HRSA Chicago Field Office (312) 353–1715		
Indianapolis	IN	02/01/1999

Estimated Amount of This Competition \$350,000.

# Estimated Project Period

1-5 Years.

Application Availability: Continuous

# **To Obtain This Application Kit**

CFDA Number: 93.151. Contact: 1–888–333–HRSA (4772). Application Deadline: Current grant expiration dates vary by area. Applications for competing continuation grants are normally due 120 days prior to the expiration of the current grant award.

*Contact Person:* Jean Hochron, jhochron@hrsa.dhhs.gov, 1–301–594– 4430.

Healthy Schools/Healthy Communities

#### Authorization

Title III of the Public Health Service Act, 42 U.S.C. 241 *et seq.* 

#### Purpose

The Healthy Schools, Healthy Communities (HSHC) program supports community-based primary health care providers with experience in this area as demonstrated by having entered into partnerships with schools or school districts to establish school-based health

centers that provide comprehensive primary and preventive services. The Bureau of Primary Health Care plans to hold one competition during the summer of 1999 for the funds associated with: (1) the entire group of HSHC grantees that will be completing their approved project period on one of the two dates listed below, plus (2) a portion of the FY 1999 increase in funds appropriated to programs supported under the Health Centers Consolidation Act that will be used to support new Healthy Schools Healthy Communities projects. Any application submitted by a currently-funded grantee with a December 1 start date that is successful in this competition will be held and awarded early in FY 2000, subject to the availability of funds.

# Eligibility

Public and private nonprofit organizations are eligible to apply.

Funding Priorities and/or Preferences

Final administrative funding priorities/preferences are included in the application materials.

# **Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition \$8,000,000.

Estimated Number of Awards

40.

Estimated Project Period

3 Years.

Application Availability: 02/01/1999

# **To Obtain This Application Kit**

CFDA Number: 93.151A. Contact: 1–888–333–HRSA (4772). Application Deadline: 05/01/1999. Projected Award Date: 09/1999 and 12/1999.

*Contact Person:* LaVerne Green, lgreen@hrsa.dhhs.gov, 1–301–594–4450.

Grants to States for Loan Repayment Programs

#### Authorization

Section 338I of the Public Health Service Act, 42 U.S.C. 254q–1.

#### Purpose

The purpose of these grant funds is to assist States in operating programs for the repayment of educational loans of health professionals in return for their practice in federally designated Health Professional Shortage Areas to increase the availability of primary health services in health professionals shortage areas.

# Eligibility

Any State is eligible to apply for funding.

Funding Priorities and/or Preferences None.

## Matching Requirements

States seeking support must provide adequate assurance that, with respect to the costs of making loan repayments under contracts with health professionals, the State will make available (directly or through donations from public or private entities) non-Federal contributions in cash in an amount equal to not less than \$1 for \$1 of Federal funds provided in the grant. In determining the amount of non-Federal contributions in cash that a State has to provide, no Federal funds may be used in the State's match.

# **Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of this Competition \$2.454.000.

Estimated Number of Awards

Estimated Project Period

3 Years.

Application Availability: 01/01/1999

# To Obtain This Application Kit

CFDA Number: 93.165. Contact: 1–888–333–HRSA (4772). Application Deadline: 05/01/1999. Projected Award Date: 09/1999. Contact Person: Susan Salter, ssalter@hrsa.dhhs.gov 1–301–594–4400.

## Black Lung Clinics

## Authorization

Section 427(a) of the Black Lung Benefits Reform Act of 1977, 30 U.S.C. 937(a).

# Purpose

The primary purpose of the Black Lung Clinics grant program is to provide treatment and rehabilitation for Black Lung patients and others with occupationally-related pulmonary diseases. In addition, individual grantee programs are expected to include case finding and outreach, preventive and health promotion services, education for patients and their families, and testing to determine eligibility for Department of Labor or State benefits. Although the number of active coal miners has decreased substantially because of mechanization, there has been an increase in the number of retired coal miners with the disease and in the number of pulmonary patients from other occupations. A current objective of the program is to expand outreach so that more of the eligible population is made aware of the services offered by the grantee clinics.

## Eligibility

Health clinics that serve patients with Black Lung disease and other occupationally-related respiratory diseases are eligible to apply.

Funding Priorities and/or Preferences

A priority will be given to clinics that provide a combination of services, i.e., outreach, testing, treatment and rehabilitation.

#### **Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of this Competition \$5.000.000.

Estimated Number of Awards

15.

Estimated Project Period

3 Years.

Application Availability: 01/04/1999

# **To Obtain This Application Kit**

CFDA Number: 93.965. Contact: 1–888–333–HRSA (4772). Application Deadline: 04/01/1999. Projected Award Date: 09/1999. Contact Person: Remy Arnoff, rarnoff@hrsa.dhhs.gov, 1–301–594– 4450.

New Delivery Sites and New Starts in Programs Funded Under the Health Centers Consolidation Act

#### Authorization

Section 330 of the Public Health Service Act, 42 U.S.C. 254b, 254b(g), 254b(h) and 254d

# Purpose

The HRSA will support the establishment of new service delivery sites for existing centers and/or new health centers in some or all of the following programs: Community and Migrant Health Centers, Health Care for the Homeless and Public Housing Primary Care. The purpose of the Community/Migrant Health Centers programs is to extend preventive and primary health services to populations currently without such services and to improve the health status of medically underserved individuals by supporting the establishment of new points of access to care. The Health Care for the Homeless program is designed to increase the homeless population's access to cost-effective communitybased programs/providers. The Public Housing Primary Care program increases access to health care and improves the health status of public housing residents by providing comprehensive primary health care services in or near public housing projects, directly or through collaborative arrangements with existing community based programs/providers.

# Eligibility

Public and private nonprofit entities are eligible to apply.

Funding Priorities and/or Preferences

Final priorities and/or preferences are included in the application materials.

# **Review Criteria**

Final criteria are included in the application kits.

Estimated Amount of this Competition \$25,000,000.

Estimated Number of Awards

75-100.

**Estimated Project Period** 

3 Years.

Application Availability: 11/01/1998

# **To Obtain These Application Kits**

## CFDA Numbers:

- 93.224 Community Health Centers
- 93.246 Migrant Health Centers
- 93.151 Health Care for the Homeless
- 93.927 Public Housing
- Contact: 1–888–333–HRSA (4772). Application Deadline: 04/01/1999. Projected Award Date: 09/1999.

# **Contact Persons**

- 93.224 Dick Bohrer
  - (dbohrer@hrsa.dhhs.gov) 1–301– 594–4300
- 93.246 Jack Egan (jegan@hrsa.dhhs.gov) 1–301–594– 4303
- 93.151 Jean Hochron (jhochron@hrsa.dhhs.gov) 1–301– 594–4430
- 93.927 Sherilyn Pruitt (spruitt@hrsa.dhhs.gov) 1–301– 594–4430

#### **HIV/AIDS Programs**

Grants Management Office: 1–301–443–2280

# Aids Education and Training Centers

# Authorization

Section 2692(a) of the Public Health Service Act, 42.U.S.C. 300ff–11.

# Purpose

The purpose of this competition is to provide funding to public and private nonprofit entities and schools and academic health science centers in meeting the costs of projects-training health personnel, including practitioners under this title and other community providers in the diagnosis, treatment and prevention of HIV disease, including the prevention of perinatal transmission of the disease and including measures for the prevention and treatment of opportunistic infections; to train the faculty of schools and graduate departments or programs of medicine, nursing, osteopathic medicine, dentistry, public health, allied health, and mental health practice to teach health professions students to provide for the health care needs of individuals with HIV disease; and to develop and disseminate curricula and resource materials relating to the care and treatment of individuals with such disease and the prevention of the disease among the individuals who are at risk of contracting the disease.

# Eligibility

Eligible organizations are public and nonprofit private entities and schools and academic health science centers.

Funding Priorities and/or Preferences

Preference will be given to projects which will: (A) train or result in the training of health professionals who will provide treatment for minority individuals with HIV disease and other individuals who are at high risk of contracting such disease; and (B) train, or result in the training of, minority health professionals and minority allied health professionals to provide treatment for individuals with such disease.

# Special Considerations

Special consideration will be given to projects that are consistent, logical, geographical or epidemiological conformations and those projects that can demonstrate educational outcomes or clinical impact of their projects.

# Review Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition \$17,000,000.

Estimated Number of Awards

5–10.

Estimated Project Period 1–3 Years.

# Application Availability: 01/04/1999

# To Obtain This Application Kit

CFDA Number: 93.145 Contact: 1–888–333–HRSA (4772). Application Deadline: 04/01/1999. Projected Award Date: 07/1999. Contact Person: Joan Holloway, jholloway@hrsa.dhhs.gov, 1–301–443– 9091.

# Ryan White Title III HIV Early Intervention Services Grants

Part C of Title XXVI of The Public Health Service Act, as amended by the Ryan White Care Act Amendments of 1996, Public Law 104–146, 42 U.S.C. 300ff–51—300ff–67.

# Purpose

The purpose of this program is to provide, on an outpatient basis, high quality early intervention services/ primary care to individuals with HIV infection. This is accomplished by increasing the present capacity and capability of eligible ambulatory health service entities. These expanded services become a part of a continuum of HIV prevention and care for individuals who are at risk for HIV infection or are HIV infected. All Title III programs must provide: HIV counseling and testing; counseling and education on living with HIV; appropriate medical evaluation and clinical care; and other essential services such as oral health care. outpatient mental health services and nutritional services, and appropriate referrals for specialty services.

## Eligibility

Eligible applicants are public or nonprofit private entities that are: Section 330 Health Centers; grantees funded under Section 1001 regarding Family Planning; Comprehensive Hemophilia Diagnostic and Treatment Centers; Federally Qualified Health Centers; or nonprofit private entities that provide comprehensive primary care services to populations at risk of HIV disease.

Funding Priorities and/or Preferences

In awarding these grants, priority will be given to approved/unfunded applicants who submitted an application for funding in FY 1998.

#### **Review Criteria**

Final criteria will be included in the application kit.

Estimated Amount of This Competition \$6.400.000.

Estimated Number of Awards 20.

Estimated Project Period

3 Years.

Application Availability: 01/30/1999

# **To Obtain This Application Kit**

#### CFDA Number: 93–918A

Contact: 1–888–333–HRSA (4772). Application Deadline: 05/01/1999. Projected Award Date: 07/1999. Contact Person: Andrew Kruzich, akruzich@hrsa.dhhs.gov, 1–301–443– 0735.

# Ryan White Title III HIV Early Intervention Services Planning Grants

Part C of Title XXVI of the Public Health Service Act, as amended by The Ryan White Care Act Amendments of 1996, Public Law 104–146, 42 U.S.C. 300ff–51—300ff–67.

## Purpose

The purpose of this grant program is to support communities and health care service entities in their planning efforts to develop a high quality and broad scope of primary health care services for people in their service areas who are living with HIV or at risk of infection. Applications must propose planning activities which will lead to the establishment of comprehensive outpatient HIV primary care services. This grant program supports activities of the planning process and does not fund any service delivery or patient care.

#### Eligibility

Eligible applicants are public or nonprofit private entities; applicants can not be current Ryan White Title III Early Intervention Service Program grant recipients.

## Funding Priorities and/or Preferences

In awarding these grants, priority will be given to: 1) applicants located in rural or underserved areas where emerging or ongoing HIV primary health care needs have not been adequately met and 2) applicants proposing to build HIV primary care capacity of indigenous organizations serving African American populations.

# **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$3.943.000.

Estimated Number of Awards 79

**Estimated Project Period** 

1 or 2 Years.

Application Availability: 02/28/1999

# To Obtain This Application Kit

# CFDA Number: 93.918B

Contact: 1–888–333–HRSA (4772). Application Deadline: 06/18/1999. Projected Award Date: 09/1999. Contact Person: Andrew Kruzich, akruzich@hrsa.dhhs.gov, 1–301–443– 0735.

# Ryan White Title IV: Existing Geographic Areas

# Authorization

Section 2671 of The Public Health Service Act, 42 U.S.C. 300ff–71.

#### Purpose

The purpose of the Title IV funding is to improve access to primary medical care, research, and support services for children, youth, women and families infected with HIV. Funded projects will link clinical research and other research with comprehensive care systems, and improve and expand the coordination of a system of comprehensive care for women, infants, children and youth who are infected/affected by HIV. Funds will be used to support programs that: (1) cross established systems of care to coordinate service delivery, HIV prevention efforts, and clinical research and other research activities; and (2) address the intensity of service needs, high costs, and other complex barriers to comprehensive care and research experienced by underserved at-risk and limited populations. Activities under these grants should address the goals of: enrolling and maintaining clients in HIV primary care; increasing client access to research by linking HIV/AIDS clinical research trials and activities with comprehensive care; fostering the development and support of comprehensive, community-based and family centered care infrastructures, and emphasizing prevention within the care system including the prevention of perinatal HIV transmission.

## Eligibility

Eligible organizations are public or private nonprofit entities that are currently funded Title IV programs whose project periods expire in FY 1999 and new organizations proposing to serve the same populations currently being served by these existing projects. These areas are:

State	Areas	
AL CA	Birmingham/Monto LaJolla/San Diego San Francisco. Hartford/New Haven.	gomery.
UT	Haven.	London/New

State	Areas
DC FL MD NI NC NH NY	Bridgeport/Stamford. Washington. Orlando. Statewide. Detroit. Charlotte/Durham. Statewide. Manhattan. Stony Brook. Queens.
PA SC	Philadelphia. Statewide.

Funding Priorities and/or Preferences

Funding priority in this category will be given to projects that support a comprehensive, coordinated system of HIV care serving children, youth, women and families and are linked with or have initiated activities to link with clinical trials or other research.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$9,400,000.

Estimated Number of Projects 16.

**Estimated Project Period** 

3 Years.

Application Availability: 02/26/1999

## **To Obtain This Application Kit**

CFDA Number: 93.153A

Contact: 1–888–333–HRSA (4772). Application Deadline: 04/30/1999. Projected Award Date: 08/1999. Contact Person: Wayne Sauseda, wsauseda@hrsa.dhhs.gov, 1–301–443– 9051.

*Ryan White Title IV: New Geographic Areas* 

# Authorization

Section 2671 of The Public Health Service Act, 42 U.S.C. 300ff–71.

#### Purpose

Organizations should be able to demonstrate expertise in the coordination or provision of comprehensive medical and social services to children, youth, women and families. The purpose of the Title IV funding is to improve access to primary medical care, research and support services for children, youth, women and families infected with HIV. Funded projects will link clinical research and other research with comprehensive care systems, and improve and expand the coordination of a system of comprehensive care for women, infants,

children and youth who are infected/ affected by HIV. Funds will be used to support programs that: (1) Cross established systems of care to coordinate service delivery, HIV prevention efforts, and clinical research and other research activities; and (2) address the intensity of service needs, high costs, and other complex barriers to comprehensive care and research experienced by underserved, at-risk and limited populations. Activities under these grants should address the goals of: enrolling and maintaining clients in HIV primary care; increasing client access to research by linking HIV/AIDS clinical research trials and activities with comprehensive care; fostering the development and support of comprehensive, community-based and family centered care infrastructures; and, emphasizing prevention within the care system including the prevention of perinatal HIV transmission.

#### Eligibility

Eligible organizations are public or private nonprofit entities that provide or arrange for primary care.

Funding Priorities and/or Preferences

Preference for funding may be given to applicants which help to achieve an equitable geographical distribution of programs across all States and Territories, especially programs that provide services in rural or underserved communities where the HIV/AIDS epidemic is increasing.

## Special Consideration

This initiative is targeted to applicants in geographic areas where the HIV/AIDS epidemic is increasing among women, children and adolescents and where other resources targeted to these populations are limited or non-existent. These grants are for geographic areas *not* listed below.

State	Areas
AZ	Phoenix.
CA	Los Angeles. Oakland.
CO	Denver.
FL	Tampa/St. Petersburg.
	Ft. Lauderdale. Miami.
	Jacksonville.
GA	Atlanta.
IL	Chicago.
LA MA	New Orleans.
MO	Statewide. St. Louis.
NC	Washington.
NJ	Statewide.
NV	Las Vegas.
NY	Albany.
	Bronx.
	Brooklyn.

State	Areas
OH PR RI TN TX	Columbus. Statewide. Statewide. Memphis. Dallas. Fort Worth. Houston. San Antonio. Seattle.
WI	Statewide.

# **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition

\$1,450,000.

Estimated Number of Awards

5.

Estimated Project Period

3 Years.

Application Availability: 02/26/1999

## **To Obtain This Application Kit**

CFDA Number: 93.153B Contact: 1–888–333–HRSA (4772). Application Deadline: 04/30/1999. Projected Award Date: 08/1999. Contact Person: Wayne Sauseda, wsauseda@hrsa.dhhs.gov, 1–301–443–

9051.

# **HIV/AIDS Program Notes**

The Bureau of HIV/AIDS anticipates the announcement of the Fiscal Year 1999 Special Projects of National Significance (SPNS) Program later in the Summer 1999 *HRSA Preview*.

#### Maternal and Child Health Programs

Grants Management Office: 1–301–443–1440.

#### Eligibility

42 CFR Part 51a.3 \*.

(a) With the exception of training and research, as described in paragraph (b) of this section, any public or private entity, including Indian tribe or tribal organization (as those terms are defined at 25 U.S.C. 450b) is eligible to apply for Federal funding under this Part; (b) Only public or nonprofit private institutions of higher learning may apply for training grants. Only public or nonprofit institutions of higher learning and public or private nonprofit agencies engaged in research or in programs relating to maternal and child health and/or services for children with special health care needs may apply for grants, contracts or cooperative agreements for research in maternal and child health services or in services for children with special health care needs.

Genetic Services

#### Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

#### Purpose

This program supports a cooperative agreement to develop standardized guidelines for vision screening for the preschool child. Funds will be used to promote: (1) development and maintenance of systems of care that ensure early identification of children with special health care needs, including those with genetic conditions, (2) development and demonstration of linkages between screening programs and medical homes for timely and appropriate intervention, (3) creative approaches for provider and consumer genetics education, and (4) strategies for developing and tracking quality indicators that focus on the structure of delivery and outcome of care. Such information will provide the basis for needs assessment, policy development and quality improvement efforts. Federal involvement will be specified in the application materials.

#### Eligibility

42 CFR Part 51a.3 \*.

Funding Priorities and/or Preferences

Special consideration for funding will be given to organizations with special knowledge and expertise of vision screening programs at the State and local level.

**Review** Criteria

Final criteria are included in the application kit

Estimated Amount of This Competition \$200.000.

Estimated Number of Awards

1.

Estimated Project Period

1 Year.

Application Availability: 01/11/1999

## **To Obtain This Application Kit**

CFDA Number: 93.110A Contact: 1–888–333–HRSA (4772). Application Deadline: 04/23/1999. Projected Award Date: 09/1999. Contact Person: Michele Lloyd-Puryear, mpuryear@hrsa.dhhs.gov 1– 301–443–1080.

Genetic Services—Integrated Services For Children With Genetic Conditions

#### Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

#### Purpose

Grants are awarded for projects that coordinate care and integrate community services for individuals with genetic conditions such as individuals with thalassemia and infants with sickle cell disease identified through State newborn screening programs.

# Eligibility

42 CFR Part 51a.3\*.

Funding Priorities and/or Preferences

Special consideration for funding will be given to: (1) projects that evaluate the impact of early intervention on morbidity and mortality of infants with disease detected by State newborn screening programs, (2) public and private community based entities; community/State agency partnerships; and community coalitions.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of this Competition \$800,000.

Estimated Number of Awards

4–7.

**Estimated Project Period** 

1-3 Years.

Application Availability: 01/11/1999

#### **To Obtain This Application Kit**

CFDA Number: 93.110A Contact: 1–888–333–HRSA (4772). Application Deadline: 04/23/1999. Projected Award Date: 09/1999. Contact Person: Michele Lloyd-Puryear, mpuryear@hrsa.dhhs.gov, 1–

301-443-1080.

Genetic Services—Newborn Screening

#### Authorization

Title V of the Social Security Act, 42 U.S.C. 701.

#### Purpose

Grants are awarded for projects that develop and demonstrate the use of information systems for the integration of State newborn screening programs with population based, community based and family centered early intervention programs that are tied to outcome driven systems of service to families with special health needs.

### Eligibility

42 CFR Part 51a.3\*.

Funding Priorities and/or Preferences

Priority will be given to Community/ State agency partnerships in coalition with public and private community based providers.

**Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition \$700,000.

Estimated Number of Awards

8-12.

Estimated Project Period

1-3 Years.

Application Availability: 01/11/1999

# **To Obtain This Application Kit**

CFDA Number: 93.110A

Contact: 1–888–333–HRSA (4772). Application Deadline: 04/23/1999. Projected Award Date: 09/1999. Contact Person: Michele Lloyd-

Puryear, mpuryear@hrsa.dhhs.gov, 1–301–443–1080.

Genetic Services—National Genetic Resource Center

#### Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

## Purpose

The purpose of this cooperative agreement is to support a national policy center to outline national policy to improve the quality, accessibility and utilization of genetic services at the national, State, and community level. The center's activities would include: (1) provide assistance to implement strategic planning to assure the availability of genetic services at the State and community level, (2) collect and analyze State newborn screening data to provide information at the State and community level, (3) address relevant issues pertinent to the utilization of genetic medicine and technologies at regional and national conferences, (4) develop, coordinate, and promote genetics educational activities for primary care providers and consumers, and (5) form a newborn screening expert panel to respond to state requests for consultation and technical assistance. Federal involvement will be specified in the application materials.

# Eligibility

42 CFR Part 51a.3\*.

Funding Priorities and/or Preferences

Preferences will be given to national organizations with expertise in the arena of newborn screening and genetics and with an existing infrastructure for policy analysis at the national level on issues related to genetics.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of Tthis Competition \$350.000.

Estimated Number of Awards

1.

Estimated Project Period

1-3 Years.

# Application Availability: 01/11/1999

# **To Obtain This Aapplication Kit**

CFDA Number: 93.110A Contact: 1–888–333–HRSA (4772). Application Deadline: 04/23/1999. Projected Award Date: 09/1999. Contact Person: Michele Lloyd-Puryear, mpuryear@hrsa.dhhs.gov, 1–

301–443–1080. Comprehensive Hemophilia Diagnostic & Treatment Centers

#### Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

# Purpose

This program supports the provision of comprehensive care to people with hemophilia and their families through an integrated regional network of centers of excellence in the diagnosis and treatment of hemophilia and related bleeding disorders. Funds will be used to promote: (1) maintenance and enhancement of comprehensive care teams to meet the medical, psychosocial, peer support, genetic counseling, and financial support needs of patients and their families, (2) continued outreach to unserved and underserved people with congenital bleeding disorders, (3) collaboration with the prevention and peer support and education activities funded at these centers by the Centers for Disease Control and Prevention (CDCP), (4) continued collaboration with hemophilia treatment centers within the defined Maternal and Child Health Bureau (MCHB) regions and promotion of family-centered care within the patient population.

## Eligibility

42 CFR Part 51a.3 \*.

Funding Priorities and/or Preferences

Special consideration for funding will be given to: (1) previously funded Regional grantees who have developed, maintained, and improved the network of integrated treatment centers within their respective MCHB regions; (2) public and private organizations that can demonstrate the ability to organize and administer a regional network of affiliated treatment centers, meeting the standards and criteria for comprehensive care centers of the National Hemophilia Foundation (NHF) and the requirements of the MCHB Hemophilia Program Guidance for 1999.

**Review Criteria** 

Final criteria are included in the application kit.

Estimated Amount of This Competition \$5,300,000.

Estimated Number of Awards

12.

**Estimated Project Period** 

3 Years.

Application Availability: 03/19/1999

# **To Obtain This Application Kit**

CFDA Number: 93.110B

Contact: 1–888–333–HRSA (4772). Application Deadline: 05/15/1999. Projected Award Date: 09/1999. Contact Person: Patrick McGuckin, pmcguckin@hrsa.dhhs.gov, 1–301–443– 1080.

Partnership For Information and Communications (PIC)

#### Authorization

Title V of the Social Security Act, 42 U.S.C. 701.

# Purpose

This program supports cooperative agreements with governmental, professional and private organizations represented by leaders concerned with issues related to maternal and child health and involved in sustaining systems of care and/or providing family support to persons affected by severe illness or injury.

Further, these partnerships will promote attention to issues related to services across the continuum of care, including training, prevention and service delivery enhancement, through direct communication with and information sharing among the MCHB and other affiliated stakeholders. Federal involvement will be specified in the guidance.

# Eligibility

42 CFR Part 51a.3 \*.

Funding Priorities and/or Preferences

For FY 1999, preference will be given to national membership organizations representing survivors of traumatic brain injury (TBI), providing emergency medical care for children, and representing State TBI and Emergency Medical Service programs.

### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$800,000.

Estimated Number of Awards

4.

Estimated Project Period

5 Years.

Application Availability: 01/04/1999

## **To Obtain This Application Kit**

CFDA Number: 93.110G

Contact: 1–888–333–HRSA (4772). Application Deadline: 02/23/1999. Project Award Date: 04/1999. Contact Person: David Heppel, dheppel@hrsa.dhhs.gov 1–301–443– 2250.

Maternal and Child Health Research

#### Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

## Purpose

The purpose of this program is to seek new knowledge and support applied research to improve maternal and child health which has the potential for ready transfer of findings to State and community health care delivery programs.

#### Eligibility

42 CFR Part 51a.3 \*.

Funding Priorities and or Preferences

A comprehensive research agenda based upon the needs of children and families is part of the application guidance. Special consideration will be given to projects which emphasize the need for new knowledge for: assuring access to quality care through outreach and removal of barriers to care for lowincome, hard-to-reach and at-risk populations particularly in inner-city and rural areas; eliminating racial and ethnic child health status disparities; preventing preterm delivery and low birth weight, and enhancing the content and quality of pre- and postnatal care, including overcoming barriers to prenatal care and factors influencing decision-making and care seeking behavior; the role that fathers play in caring for and nurturing the health, growth, and development of children;

the effects of health care reform and managed care on access to, and use of, maternal and child health services.

# **Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition

\$866,000.

Estimated Number of Awards

10.

Estimated Project Period

1 Year

Application Availability: 11/01/1998

# **To Obtain This Application Kit**

CFDA Number: 93.110RS

Contact: 1–888–333–HRSA (4772). Application Deadline: 03/01/1999. Projected Award Date: 08/1999. Contact Person: Gontran Lamberty, glamberty@hrsa.dhhs.gov, 1–301–443– 2190.

Training—Continuing education/ Collaboration Pediatrics/Child Psychiatry

#### Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

# Purpose

The purpose of this program is to foster joint pediatrics-child psychiatry continuing education in the psychosocial-developmental aspects of child health, utilizing a study group approach that emphasizes the practical challenges confronted by communitybased practitioners. This program promotes collaboration in education between pediatricians and child psychiatrists in order to address unmet needs for enhanced attention to psychosocial-developmental aspects of child health. This objective reflects the need for reduction of adolescent suicide, integration of mental health services into health homes and assurance of the health and well being of MCH target populations. These developments should lead to more integration of health/mental health care with concomitant gains, especially in health promotion and primary and secondary prevention of psychosocial problems and disorders.

# Eligibility

42 CFR Part 51a.3 \*.

Funding Priorities and/or Preferences None.

# **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition. \$150,000.

Estimated Number of Awards 10–12.

Estimated Project Period

3 Years.

Application Availability: 02/01/1999

# **To Obtain This Application Kit**

CFDA Number: 93.110TN

Contact: 1–888–333–HRSA (4772). Application Deadline: 04/01/1999. Projected Award Date: 07/1999. Contact Person: Shelley Benjamin, sbenjamin@hrsa.dhhs.gov, 1–301– 443–2190.

Training—Continuing Education and Development—Training Institute

## Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

#### Purpose

Continuing Education and Development (CED) focuses on increasing leadership skills of MCH professionals; facilitating timely transfer and application of new information, research findings and technology related to MCH; and updating and improving the knowledge and skills of health and related professionals in programs serving mothers and children. The CED program will support conduct of shortterm, non-degree related courses, workshops, conferences, symposia, institutes, and distance learning strategies and/or; development of curricula, guidelines, standards of practice, and educational tools/ strategies intended to assure quality health care for the MCH population.

## Eligibility

42 CFR Part 51a.3 \*.

Funding Priorities and/or Preferences None.

## **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of this Competition \$275,000.

Estimated Number of Awards

1.

Estimated Project Period

3 Years.

# Application Availability: 04/01/1999

# To Obtain This Application Kit

CFDA Number: 93.110TO Contact: 1–888–333–HRSA (4772). Application Deadline: 06/01/1999. Projected Award Date: 08/1999. Contact Person: Diana Rule, drule@hrsa.dhhs.gov 1–301–443–2190.

#### Children With Special Health Care Needs: Adolescent Transition

## Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

#### Purpose

This program supports ongoing efforts to develop comprehensive, culturally competent, community-based, familycentered, coordinated care systems for adolescents with special health care needs and their families. The funds are intended to establish public/private partnerships to: (1) establish models of coordination and transition between tertiary and specialty care providers and community providers in the pediatric and adult health care field; (2)strengthen the community provider network for adolescents and young adults with special health care needs; (3) establish medical homes, through pediatric/adult stages, for adolescents with special health care needs; and (4) maximize potential for employment with adequate health benefits. These efforts are based, in part, on the work of the Federal SSI/CSHCN workgroup, the Academy of Pediatrics, Shriners Hospitals, and the Healthy and Ready to Work Network, which have identified barriers faced by adolescents with special health care needs.

#### Eligibility

42 CFR Part 51a.3 \*.

Funding Priorities and/or Preferences

Preference will be given to entities with national expertise and established capacity in addressing the goals of this priority. The application must, at a minimum, include State Title V CSHCN programs, community based pediatric and adult health care providers, and tertiary and specialty care networks.

## **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$300,000.

Estimated Number of Awards

Estimated Project Period

4 Years.

Application Availability: 10/30/1998

# **To Obtain This Application Kit**

CFDA Number: 93.110D Contact: 1–888–333–HRSA (4772). Application Deadline: 03/01/1999. Projected Award Date: 07/1999. Contact Person: Tom Gloss, tgloss.@hrsa.dhhs.gov, 1–301–443–2370.

*Children With Special Health Care* 

# Needs Institute Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

#### Purpose

This program will fund a grant to support a Children with Special Health Care Needs (CSHCN) Institute. The purpose of the Institute is to provide technical assistance and training for the leadership in State Title V CSHCN Programs. The Institute will build on the legislative requirements for Title V CSHCN Programs and will provide 2-3 sessions yearly on new critical issues. The funds will be used to address such issues as: (1) State standardization of definitions of CSHCNs; (2) improved performance measurement using core national indicators; and (3) interpretation and implementation of Title V statutory requirements.

Eligibility

42 CFR Part 51a.3 \*.

Funding Priorities and/or Preferences

Preference will be given to entities with clearly demonstrated national expertise and capacity in addressing issues related to children with special health care needs and State Title V CSHCN programs.

**Review Criteria** 

Final criteria are included in the application kit.

Estimated Amount of This Competition \$200.000

Estimated Number of Awards

1.

Estimated Project Period

4 Years.

Application Availability: 10/30/1999

# **To Obtain This Application Kit**

CFDA Number: 93.110E

*Contact:* 1–888–333–HRSA (4772). *Application Deadline:* 03/01/1999. *Projected Award Date:* 07/1999.

*Contact Person:* Diana Denboba, ddenboba@hrsa.dhhs.gov, 1–301–443– 2370.

## Children With Special Health Care Needs: Medical Home Cooperative Agreement

# Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

# Purpose

This program will fund a cooperative agreement to support the activities of the MCHB CSHCN Integrated Services: Medical Home Initiative. The agreement will: (1) provide a forum for interaction between medical home grantees and other organizations regarding policy initiatives related to the establishment of medical homes for children and adolescents with special health care needs; (2) establish and implement a strategy to enhance timely interactive communication, including telecommunication, among pediatricians, health care providers, community leaders and policy-makers concerned with access, appropriateness, and coordination of primary care with specialty care and the array of other services required for this population of children and families; (3) expand and enhance the capacity to collect, analyze, and use quantitative and qualitative data to promote medical homes for children with special health care needs; and (4) coordinate the activities of a National Medical Home Network. Federal involvement will be specified in the application materials.

## Eligibility

42 CFR Part 51a.3 \*.

Funding Priorities and/or Preferences

Preference will be given to entities with clearly demonstrated national expertise and capacity in addressing issues related to medical homes and children with special care needs and their families.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of this Competition \$700,000.

Estimated Number of Awards

1.

Estimated Project Period

5 Years.

Application Availability: 10/30/1998

# **To Obtain This Application Kit**

#### CFDA Number: 93.110F

Contact: 1–888–333–HRSA (4772). Application Deadline: 03/01/1999. Projected Award Date: 07/1999. *Contact Person:* Irene Forsman, iforsman@hrsa.dhhs.gov, 1–301–443– 2370.

*Health Care Information and Education For Families of Children With Special Health Care Needs* 

#### Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

## Purpose

This proposal supports a cooperative agreement for planning, and piloting a strategy for the establishment of a national network to provide health care information and education for families of children with special health care needs. This network will be planned and administered by families, and will provide capacity at policy and program level to insure that children have access to early identification/intervention, medical homes, adequate insurance, and organized and easily accessible network of services.

#### Eligibility

42 CFR Part 51a.3\*.

Funding Priorities and/or Preferences

Preference will be given to nationally recognized family organizations with clearly demonstrated national expertise and capacity in addressing health issues related to children with special health care needs and their families, and to applicants building upon current family/professional partnership, family training and empowerment activities in collaboration with the Title V Block Grant and discretionary grant efforts. Federal involvement will be specified in the application materials.

#### **Review Criteria**

Final criteria are included in the application kit

Estimated Amount of this Competition \$500.000.

Estimated Number of Awards

Estimated Project Period

1 Year.

1.

#### Application Availability: 12/15/1998

#### **To Obtain This Application Kit**

CFDA Number: 93.110S Contact: 1–888–333–HRSA (4772). Application Deadline: 03/01/1999. Projected Award Date: 07/1999. Contact Persons: Bonnie Strickland (bstrickland@hrsa.dhhs.gov), Diana Denboba (ddenboba@hrsa.dhhs.gov), 1– 301–443–2370.

# Early Discharge (DATA)

Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

## Purpose

This program will continue the research on the myriad of issues related to early discharge of neonates and their mothers. As part of the VA-HUD and Independent Agencies Appropriations Act, 1996 (P.L. 104-204), Title VI (Newborns' and Mothers' Health Protection Act of 1996) requires the Department of Health and Human Services to support and conduct studies on the factors affecting newborns and their mothers. Studies must be able to answer the following questions: (1) What are the "Best Practices" to be recommended for postnatal and postpartum care?; (2) What postnatal/ postpartum services are actually being received by newborns and mothers?; (3) What have been the effects of the Newborns' and Mothers' Health Protection Act?: (4) What are the unmet needs of mothers and newborns who lack both public and private insurance?; (5) What are the essential health services that mothers should receive around the 3rd or 4th postpartum day?; and (6) Development of a practical risk assessment instrument(s).

Eligibility

42 CFR Part 51a.3\*.

Funding Priorities and/or Preferences

A funding priority will be given to institutions of higher learning with extensive experience in early discharge research, linkage with the Secretary's Advisory Committee on Infant Mortality, published research and recognition in the relevant field.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$275,000.

Estimated Number of Awards

1.

Estimated Project Period

5 Years.

Application Availability: 02/01/1999

## **To Obtain This Application Kit**

CFDA Number: 93.110U Contact: 1–888–333–HRSA (4772). Application Deadline: 04/01/1999. Projected Award Date: 06/1999. Contact Person: Michele Kiely, mkiely@hrsa.dhhs.gov, 1–301–443– 8041. Healthy Tomorrows Partnership for Children

#### Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

#### Purpose

The purpose of this program is to support projects for mothers and children that improve access to health services and utilize preventive strategies. The initiative encourages additional support from the private sector and from foundations to form community-based partnerships to coordinate health resources for pregnant women, infants and children.

#### Eligibility

42 CFR Part 51a.3 \*.

#### Matching Requirement

The applicant must demonstrate the capability to meet cost participation goals by securing matching funds for the second through fifth year of the project. The specific requirements are detailed in the application materials.

#### Funding Priorities and/or Preferences

In the interest of equitable geographic distribution, special consideration for funding will be given to projects from States without a currently funded project in this category. These States are: Arizona, Arkansas, Colorado, Connecticut, Delaware, Georgia, Indiana, Iowa, Louisiana, Massachusetts, Missouri, Mississippi, Montana, Nebraska, Nevada, North Carolina, North Dakota, Pennsylvania, South Carolina, South Dakota, Texas, Utah, West Virginia, and Wyoming.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of this competition

\$500,000.

Estimated Number of Awards

10.

**Estimated Project Period** 

# 5 Years.

Application Availability: 01/01/1999

# **To Obtain This Application Kit**

#### CFDA Number: 93.110V

Contact: 1–888–333–HRSA (4772). Application Deadline: 04/01/1999. Projected Award Date: 08/1999.

Contact Person: Latricia C. Robertson, lrobertson@hrsa.dhhs.gov, 1-301-443-8041. Community and School-Based Sealant Grants

#### Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

#### Purpose

The purpose of this program is to implement dental sealant programs which may be community or schoolbased. At the end of the project period programs should be fully implemented and self sustaining either through fees collected or alternate funding. The intent of these grants are: (a) to increase access to dental sealants which is an MCH Block Grant Performance Measure and a Year 2000 and 2010 Oral Health Objective for the Nation; (b) to serve as a vehicle to assure that follow up oral health services are provided through the public or private sector and (c) to utilize participation in the sealant programs as an entry point for enrollment in Medicaid and Children's Health Insurance Program (CHIP).

# Eligibility

42 CFR Part 51a.3 \*.

Funding Priorities and/or Preferences None.

**Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition \$140,000.

Estimated Number of Awards

4.

Estimated Project Period

1 Year.

Application Availability: 03/01/1999

#### **To Obtain This Application Kit**

CFDA Number: 93.110AC

Contact: 1–888–333–HRSA (4772). Application Deadline: 05/03/1999. Project Award Date: 06/1999. Contact Person: John P. Rossetti, jrossetti@hrsa.dhhs.gov, 1–301–443– 6600.

Oral Health Integrated Systems Development Grants

#### Authorization

Title V of the Social Security Act, 42 U.S.C. 701.

# Purpose

These are targeted issues grants with the intention of building a service and support system infrastructure at the State and Community levels to increase access to dental services for CHIP and Medicaid eligible children. The grants are to address the findings contained in the Office of Inspector General Report: Children's Dental Service Under Medicaid Access and Utilization. The grants will also serve as follow up to the HRSA/HCFA sponsored conference, Building Partnerships to Improve Access to Medicaid Oral Health Issues, to assist States to develop and implement comprehensive integrated public and private sector services and support systems for dental care to address the unmet oral health needs of this population.

# Eligibility

42 CFR Part 51a.3\*.

Funding Priorities and/or Preferences

A priority will be given to States or their designee who demonstrate participation in national oral health issues, e.g. HRSA/HCFA Partnership Conference.

**Review Criteria** 

Final criteria are included in the application kit.

Estimated Amount of this Competition \$150.000.

Estimated Number of Awards

3.

Estimated Project Period

4 Years.

Application Availability: 03/01/1999

## **To Obtain This Application Kit**

CFDA Number: 93.110AD Contact: 1–888–333–HRSA (4772). Application Deadline: 05/03/1999. Project Award Date: 06/1999. Contact Person: John P. Rossetti, jrossetti@hrsa.dhhs.gov, 1–301–443– 6600.

# Child Health Insurance Program Partnership

#### Authorization

Title V of the Social Security Act, 42 U.S.C. 701.

## Purpose

This grant program is built on recommendations from the National Conference on Community Systems Building and Services Integration as well as HRSA's mandate to foster development of systems of quality care in the community in support of the Children's Health Insurance Program (CHIP). The purpose of this program is to enable applicants to use their own unique networks, working in each State, across the nation, to encourage the development of local systems of quality care in the community in support of CHIP.

# Eligibility

42 CFR Part 51a.3\*.

Funding Priorities and/or Preferences

A funding priority will be given to applicants who propose community integrated systems of care to eliminate barriers to care. A priority will be given to applicants who demonstrate participation on a national level in community systems building and services integration.

**Review Criteria** 

Final criteria are included in the application kit.

Estimated Amount of This Competition \$800.000.

Estimated Number of Awards 8.

Estimated Project Period

4 Years.

Application Availability: 12/30/1998

# **To Obtain This Application Kit**

CFDA Number: 93.110AS

Contact: 1–888–333–HRSA (4772). Application Deadline: 02/22/1999. Projected Award Date: 05/1999. Contact Person: Joe Zogby, jzogby@hrsa.dhhs.gov, 1–301–443– 4393.

#### Border Health Initiative

Authorization

Title V of The Social Security Act, 42 U.S.C. 701.

# Purpose

The purpose of this effort will be to pilot new, replicate or expand existing programs which more effectively communicate information on eligibility for the State's CHIP with particular emphasis on accurate information concerning citizenship status to immigrant populations. The activity is intended as a partnership among border State governments, local governments, non-governmental organizations, and representatives of the cultural/ethnic/ racial groups to be targeted. All applicants must describe a dissemination plan to share, in collaboration with the appropriate HRSA field office, lessons learned and outcomes with other border states CHIP programs.

# Eligibility

42 CFR Part 51a.3\*.

Funding Priorities and/or Preferences

Funding priority will be given to projects who propose a community integrated systems of care which will eliminate barriers to care.

# Special Consideration

Special consideration will be given to applications which demonstrate the involvement of or at least the support of the State's Department of Health. All applicants must agree to work with their HRSA Field Office in sharing lessons learned with other border states.

# **Review Criteria**

Final criteria are included in the application kit

Estimated Amount of This Award \$300,000.

Estimated Number of Awards

1 - 2.

Estimated Project Period

4 Years.

Application Availability: 02/02/1999

# **To Obtain This Application Kit**

CFDA Number: 93.110L

Contact: 1–888–333–HRSA (4772). Application Deadline: 05/03/1999. Projected Award Date: 6/1999. Contact Person: David Heppel,

dheppel@hrsa.dhhs.gov, 1–301–443– 2250.

Emergency Medical Services for Children (EMSC), Implementation Grants

## Authorization

Section 1910, Public Health Service Act as amended, 42 U.S.C. 300w–9.

## Purpose

Implementation grants will improve the capacity of a State's EMS program to address the particular needs of children. Implementation grants are used to assist States in integrating research-based knowledge and state-of-the-art systems development approaches into the existing State EMS, MCH, and CSHCN systems, using the experience and products of previous EMSC grantees. Applicants are encouraged to consider activities that: (1) address identified needs within their State EMS system and that lay the groundwork for permanent changes in that system; (2) develop or monitor pediatric EMS capacity; and (3) will be institutionalized within the State EMS system.

#### Eligibility

States and Accredited Schools of Medicine are eligible applicants.

Funding Priorities and/or Preferences None.

**Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of this Competition \$250,000.

Estimated Number of Awards

1.

Estimated Project Period

2 Years.

Application Availability: 01/01/1999

# To Obtain This Application Kit

CFDA Number: 93.127A Contact: 1–888–333–HRSA (4772). Application Deadline: 03/15/1999. Projected Award Date: 08/1999. Contact Person: Maria T. Baldi, mbaldi@hrsa.dhhs.gov, 1–301–443– 2250.

Emergency Medical Services For Children (EMSC), Partnership Grants

## Authorization

Section 1910, Public Health Service Act as amended, 42 U.S.C. 300w–9.

# Purpose

State partnership grants will fund activities that represent the next logical step or steps to take to institutionalize EMSC within EMS and to continue to improve and refine EMSC. Proposed activities should be consistent with documented needs in the State and should reflect a logical progression in enhancing pediatric capabilities. For example, funding might be used to address problems identified in the course of a previous implementation grant; to increase the involvement of families in EMSC; to improve linkages between local, regional, or State agencies; to promulgate standards developed for one region of the State under previous funding to include the entire State; to devise a plan for coordinating and funding poison control centers; or to assure effective field triage of the child in physical or emotional crisis to appropriate facilities and/or other resources.

#### Eligibility

States and Accredited Schools of Medicine are eligible applicants.

Funding Priorities and/or Preferences None.

#### **Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition \$600,000.

Estimated Number of Awards

6.

Estimated Project Period

2 Years.

Application Availability: 01/01/1999

# **To Obtain This Application Kit**

CFDA Number: 93.127C

Contact: 1–888–333–HRSA (4772). Application Deadline: 03/15/1999. Projected Award Date: 08/1999. Contact Person: Maria T. Baldi, mbaldi@hrsa.dhhs.gov, 1–301–443– 2250.

Emergency Medical Services For Children (EMSC), Targeted Issue Grants

# Authorization

Section 1910, Public Health Service Act as amended, 42 U.S.C. 300w–9.

# Purpose

Targeted issue grants are intended to address specific, focused issues related to the development of EMSC knowledge and capacity, with the intent of advancing the state-of-the-art, and creating tools or knowledge that will be helpful nationally. Proposals must have well-conceived methodology for analysis and evaluation. Targeted issue priorities have been identified based on the EMSC Five Year Plan. The targeted issue priorities are: cost-benefit analysis related to EMSC; implications of managed care for EMSC; evaluations of EMSC components; models for improving the care of culturally distinct populations; evaluation of systems for provision of emergency health care within day care and/or school settings; and evaluation of family-centered care models. Proposals may be submitted on emerging issues that are not included in the identified priorities. However, any such proposals must demonstrate relevance to the Plan and must make a persuasive argument that the issue is particularly critical.

# Eligibility

States and Accredited Schools of Medicine are eligible applicants.

Funding Priorities and/or Preferences None.

#### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$600,000.

Estimated Number of Awards

4.

Estimated Project Period

2 Years.

Application Availability: 01/01/1999

# To Obtain This Application Kit

CFDA Number: 93.127D

Contact: 1–888–333–HRSA (4772). Application Deadline: 03/15/1999. Projected Award Date: 08/1999. Contact Person: Maria T. Baldi,

mbaldi@hrsa.dhhs.gov, 1–301–443– 2250.

Emergency Medical Services for Children (EMSC), Native American Project

Authorization

Section 1910, Public Health Service Act as amended, 42 U.S.C. 300w–9.

#### Purpose

Projects will stimulate the development and enhancement of EMSC for Native Hawaiians and Alaska Natives. Applicants are encouraged to consider activities that: (a) identify needs of Native Hawaiian and Alaska Native populations; (b) develop or monitor pediatric EMS capability, especially as it relates to provisions of services to isolated populations; and, (c) develop and evaluate special projects designed to address problems related to emergency medical care for Native Hawaiian and Alaska Native populations, including prevention, prehospital care, hospital services, rehabilitation, and linkages with primary care.

## Eligibility

State governments and accredited schools of medicine are eligible applicants.

Funding Priorities and/or Preferences

A funding priority will be given to Alaska and Hawaii State governments or accredited schools of medicine.

### **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$500.000.

Estimated Number of Awards

2.

Estimated Project Period

2 Years.

Application Availability: 01/01/1999

To Obtain This Application Kit

CFDA Number: 93.127G

Contact: 1–888–333–HRSA (4772). Application Deadline: 03/15/1999. Projected Award Date: 08/1999. Contact Person: Jean Athey, jathey@hrsa.dhhs.gov, 1–301–443–2250.

*Traumatic Brain Injury (TBI) State Implementation Grants* 

#### Authorization

Section 1242 of The Public Health Service Act, 42, U.S.C. 300d-42.

## Purpose

The purpose of this grant program is to improve health and other services for people who have sustained a traumatic brain injury (TBI). Implementation grants provide funding to assist States in moving toward Statewide systems that assure access to comprehensive and coordinated TBI services.

#### Eligibility

State governments are eligible applicants.

Funding Priorities and/or Preferences None.

Matching Requirement

The State is required to contribute, in cash, not less than \$1 for each \$2 of Federal funds provided under the grant.

**Review Criteria** 

Final criteria are included in the application kit.

Estimated Amount of This Competition \$1.600.000.

Estimated Number of Awards

8.

Estimated Project Period

3 Years.

Application Availability: 01/01/1999

# To Obtain This Application Kit

CFDA Number: 93.234A

Contact: 1-888-333-HRSA (4772). Application Deadline: 03/01/1999. Projected Award Date: 08/1999. Contact Person: Mark E. Nehring, mnehring@hrsa.dhhs.gov, 1-301-443-3449.

Traumatic Brain Injury (TBI) State Planning Grants

## Authorization

Section 1242 of The Public Health Service Act, 42, U.S.C. 300d–42.

# Purpose

The purpose of this grant program is to improve health and other services for people who have sustained a traumatic brain injury (TBI). The State planning grant program provides funds to assist States in establishing infrastructure as a prerequisite to implementation activities which will move States toward Statewide systems that assure access to comprehensive and coordinated TBI services.

#### Eligibility

State governments are eligible applicants.

Matching Requirement

The State is required to contribute, in cash, not less than \$1 for each \$2 of Federal funds provided under the grant.

Funding Priorities and/or Preferences

None.

**Review Criteria** 

Final criteria are included in the application kit.

Estimated Amount of This Competition \$400,000.

Estimated Number of Awards 6.

.

Estimated Project Period

2 Years.

Application Availability: 01/01/1999

# **To Obtain This Application Kit**

CFDA Number: 93.234B

Contact: 1–888–333–HRSA (4772). Application Deadline: 03/01/1999. Projected Award Date: 08/1999. Contact Person: Mark E. Nehring,

mnehring@hrsa.dhhs.gov, 1–301–443–3449.

Improving Screening for Alcohol Use During Pregnancy

# Authority

Section 301, Public Health Service Act, 42 U.S.C. [241].

## Purpose

The purpose of this program is to support a three year demonstration program targeting identification of the most effective methods to increase provider screening for alcohol and/or illicit drug use during pregnancy.

# Eligibility

Eligible organizations are public or private nonprofit organizations.

Funding Priorities and/or Preferences

Preference will be given to State/ Territorial MCH Title V Agencies or tribal health agencies. There may be only one application per State.

## **Review Criteria**

Final criteria are included in the application kit.

Estimated Amount of This Competition \$300,000.

Estimated Number of Awards

1 - 2.

Estimated Project Period

3 Years.

Application Availability: 01/15/1999

## **To Obtain This Application Kit**

CFDA Number: 93.926G Contact: 1–888–333–HRSA (4772). Application Deadline: 04/01/1999. Projected Award Date: 06/1999. Contact Person: Ellen Hutchins, ehutchins@hrsa.dhhs.gov, 1–301–443– 5720.

*Healthy Start Initiative: Eliminating Racial/Ethnic Disparities in Perinatal Health* 

#### Authorization

Section 301, Public Health Service Act, 42 U.S.C. [241].

# Purpose

To enhance a community's service system to address significant disparities in perinatal health indicators. Funding would be made available to up to five community projects which have existing active consortium of stakeholders who can reduce barriers and improve the local perinatal system of care so as to eliminate the existing disparities. These sites must have or plan to implement/ adapt the Healthy Start models of consortium, case management, outreach, and enhanced clinical services. In addition, they must demonstrate established linkages with key State and local services and resource systems, such as Title V, Title XIX, Title XXI, WIC, Enterprise Communities/ Empowerment Zones, federally funded Community and Migrant Health Centers, and Indian/Tribal Health Services. For this competition, "Community" is broadly defined so that a Statewide or multi-county project serving racial/ ethnic groups (e.g., Hmongs, Mexican Hispanics, etc.) would be eligible.

## Eligibility

Eligible applicants are public or nonprofit organizations.

# Funding Priorities and/or Preferences

Preference will be given to public or private nonprofit organizations, or tribal or other organizations applying on behalf of an existing community-based consortium, which have infant mortality reduction initiatives already underway; communities with significant racial/ ethnic disparities in perinatal indicators for the past three years for which data is available; border communities; and communities in States with no other Federal Healthy Start projects.

Special Consideration

Current Healthy Start grantees can apply for geographic project areas not covered in their current approved grant/ cooperative agreement. Applications for project areas/communities located within currently funded Federal Healthy Start project areas will not be accepted.

# **Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition \$5,000,000.

Estimated Number of Awards

5-7.

Estimated Project Period

2 Years.

Application Availability: 01/15/1999

### **To Obtain This Application Kit**

CFDA Number: 93.926E Contact: 1–888–333–HRSA (4772). Application Deadline: 04/01/1999. Projected Award Date: 06/1999. Contact Person: Maribeth Badura, mbadura@hrsa.dhhs.gov, 1–301–443– 0543.

Healthy Start Initiative: Infrastructure/ Capacity Building Projects

#### Authorization

Section 301, Public Health Service Act, 42 U.S.C. [241].

# Purpose

The purpose of this program is to build infrastructure/capacity in targeted communities/areas of the State where racial disparities in perinatal indicators exist, including among Hispanics, American Indians, Alaska Natives, Asian/Pacific Islanders, and immigrant populations, particularly those living in border counties. Funding would be made available to up to 13 communities to support the development of local plans to fill gaps in and/or expansion of data systems to identify and monitor perinatal outcomes, training of personnel and strengthening of local reporting systems, establishment of networks and links to other systems, assistance in needs assessment, consortium/coalition development.

## Eligibility

Public or private nonprofit organizations are eligible to apply for this program. Funding Priorities and/or Preferences

Funding priorities will be given to communities with significant racial/ ethnic disparities in perinatal indicators for the past three years for which data is available; communities applying as or on behalf of an existing communitybased consortium, which have infant mortality reduction initiatives already underway; and States with (national) border counties.

Special Consideration

Current Healthy Start grantees can apply for geographic project areas not covered in their current approved grant/ cooperative agreement. Applications for project areas/communities located within currently funded Federal Healthy Start project areas will not be accepted.

**Review Criteria** 

Final criteria are included in the application kit.

Estimated Amount of This Competition

\$2,000,000.

Estimated Number of Awards

Up to 13.

Estimated Project Period

1 Year.

Application Availability: 01/15/1999

#### **To Obtain This Application Kit**

CFDA Number: 93.926F

Contact: 1–888–333–HRSA (4772). Application Deadline: 04/01/1999. Projected Award Date: 06/1999. Contact Person: Donna Hutten, dhutten@hrsa.dhhs.gov, 1–301–443– 0543.

#### **HRSA's Other Program Announcements**

Faculty Loan Repayment Program (FLRP)

# Authorization

Section 738(a) of The Public Health Service Act, 42 U.S.C. 293b.

# Purpose

The FLRP encourages expansion of disadvantaged/minority representation in health professions faculty positions. The program provides loan repayment, in amounts not to exceed \$20,000 for each year of service, for individuals from disadvantaged backgrounds who agree to serve as members of the faculties of eligible health professions and nursing schools. Each recipient of loan repayment must agree to serve as a faculty member for at least two years.

#### Eligibility

An individual is eligible to compete for participation in the FLRP if the individual is from a disadvantaged background and: (1) has a degree in medicine, osteopathic medicine, dentistry, nursing, or another health profession; (2) is enrolled in an approved graduate training program in one of the health professions listed above, or (3) is enrolled as a full-time student in the final year of training, leading to a degree from an eligible school.

Eligible schools include schools of medicine, osteopathic medicine, dentistry, veterinary medicine, optometry, podiatric medicine, pharmacy, public health, allied health, nursing and graduate programs in behavioral and mental health.

Funding Priorities and/or Preferences

Special consideration will be given, to the extent to which the individual meets the intent of the program, to expand disadvantaged/minority representation in health professions faculty positions.

#### **Review Criteria**

The final criteria are included in the application kit.

Estimated Amount of This Competition \$800,000.

Estimated Number of Awards 25.

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Estimated Project Period

Not less than 2 Years.

Application Availability: 01/02/1999

## **To Obtain This Application Kit**

CFDA Number: 93.923

Contact: 1–888–333–HRSA (4772). Application Deadline: 06/30/1999. Projected Award Date: 09/1999. Contact Person: Shirley Zimmerman, szimmerman@hrsa.dhhs.gov, 1–301– 443–1700.

Scholarships For Disadvantaged Students (SDS)

#### Authorization

Section 737 of The Public Health Service Act, 42 U.S.C. 293a.

## Purpose

The SDS program contributes to the diversity of the health professions student and practitioner populations. The program provides funding to eligible health professions and nursing schools to be used for scholarships to students from disadvantaged backgrounds who have financial need for scholarships and are enrolled, or accepted for enrollment, as full-time students at the eligible schools.

# Eligibility

Schools of allopathic medicine, osteopathic medicine, dentistry, optometry, pharmacy, podiatric medicine, veterinary medicine, public health, nursing, chiropractic, graduate programs in behavioral and mental health, physician assistants, and allied health are eligible to apply. An applicant must provide assurances that preference in providing scholarships will be given to students for whom the costs of attending the schools would constitute a severe financial hardship, and to former recipients of Exceptional Financial Need and Financial Assistance for Disadvantaged Health Professions Students Scholarships.

Funding Priorities and/or Preferences

A priority will be given to schools based on the proportion of graduating students going into primary care, the proportion of underrepresented minority students, and the proportion of graduates going into medically underserved communities.

**Review** Criteria

Final criteria are included in the application kit.

Estimated Amount of This Competition \$37,000,000.

Estimated Number of Awards

1000.

**Estimated Project Period** 

1 Year.

Application Availability: 03/19/1999

#### **To Obtain This Application Kit**

CFDA Number: 93.925 Contact: 1-301-443-4776. Application Deadline: 05/14/1999. Projected Award Date: 09/1999. Contact Persons: Angela Lacy (alacy@hrsa.dhhs.gov), Andrea Castle

(acastle@hrsa.dhhs.gov), 1–301–443– 1700.

Nursing Education Loan Repayment Program

#### Authorization

Section 846(h) of The Public Health Service Act, 42 U.S.C. 297.

#### Purpose

Under the Nursing Education Loan Repayment Program (NELRP), registered nurses are offered the opportunity to enter into a contractual agreement with the Secretary, under which the Public Health Service agrees to repay up to 85 percent of the nurse's indebtedness for nursing education loans. In exchange, the nurse agrees to serve for a specified period of time in certain types of health facilities identified in statute.

## Eligibility

Applicants must have completed all of their training requirements for registered nursing and be licensed prior to beginning service. Individuals eligible to participate must: a) have received, prior to the start of service, a baccalaureate or associate degree in nursing, a diploma in nursing, or a graduate degree in nursing; b) have unpaid educational loans obtained for nurse training; c) be a citizen or national of the U.S.; d) have a current unrestricted license in the State in which they intend to practice; and e) agree to be employed for not less than two years in a full-time clinical capacity in an Indian Health Service health center; a Native Hawaiian health center, a public hospital (operated by a State, county, or local government); a health center funded under Section 330 of the Public Health Service Act (including migrant, homeless, and public housing health centers), a rural health clinic (Section 1861 (aa)(2) of the Social Security Act); or a public or nonprofit private health facility determined by the Secretary to have a critical shortage of nurses.

Funding Priorities and/or Preferences

In making awards under this Section, preferences will be given to qualified applicants: (1) who have the greatest financial need and (2) who agree to serve in the types of health facilities described above that are located in geographic areas determined by the Secretary to have a shortage of and need for nurses.

#### **Review Criteria**

Awards are determined by formula.

Estimated Amount of Competition

\$2,251,000.

Estimated Number of Awards

200.

#### Project Award Date: 09/1999

*Contact:* (301) 594–4400, (301) 594–4981 (FAX), 1–800–435–6464.

Application Availability: 11/01/98. Application Deadline: 06/30/1999. CFDA Number: 93.908.

*Contact Person:* Sharley Chen, 4350 East-West Highway, 10th Floor, Bethesda, Maryland 20814, schen@hrsa.dhhs.gov.

# The Year 2000 Approaches, Are You Ready?

Are you ready for the new millennium? What about your computer systems—are they ready for the year 2000?

The Health Resources and Services Administration (HRSA) has been working diligently over the past year, and will continue to work through the year 2000, to ensure that our service to you is not affected by computer problems. HRSA's five mission critical computer systems will be fully operational into the year 2000.

<sup>1</sup>You've heard the "gloom-and-doom" predictions. Let us assure you—HRSA is prepared.

The year 2000 computer problem is an important concern for all health care providers. As a HRSA grantee, you are not only responsible for the services you provide, but also for the programmatic, administrative and financial functions that support these services. As a result, you must take all steps necessary to ensure your computer systems function properly into the year 2000.

The problem is simple—many computers use two digits to record the date. As a result, they may be unable to recognize the year 2000 when it arrives. These computers may, on January 1, 2000, recognize "00" not as 2000 but as 1900. If left uncorrected, this problem may cause computers to stop running or to generate incorrect calculations, comparisons or data sorting. In addition to computer systems, this "year 2000 problem" may affect software applications, databases and other equipment such as electronic devices that rely on embedded microchips.

Visit HRSA's World Wide Web site at www.hrsa.dhhs.gov/ to learn more about the agency's year 2000 activities. Information on other Federal agency activities may be found at the General Services Administration's web site, www.itpolicy.gsa.gov, or on the President's Council on Year 2000 Conversion site at www.y2k.gov.

# Look for HRSA at the Following Meetings/Conferences

*Event:* Prevention '99 (16th Annual National Preventive Medicine Meeting sponsored by the Association of Teachers of Preventive Medicine and the American College of Preventive Medicine).

Dates: March 18-21, 1999.

Location: Washington, DC. HRSA POC: Steven Merrill (301) 443– 2865. *Event:* National Association of County and City Health Officials Annual Meeting.

Dates: July 14–17, 1999.

Location: Dearborn, MI.

*HRSA POC:* Steven Merrill (301) 443–2865.

*Event:* National Association of Local Boards of Health.

Dates: July 1999 (dates TBD).

Location: Salt Lake City, UT.

*HRSA POC:* Steven Merrill (301) 443–2865.

Event: National Conference of State Legislatures 25th Annual Meeting. Dates: July 24–28, 1999. Location: Indianapolis, IN. HRSA POC: Linda Redmond (301)

443-4568.

*Event:* Association of State and Territorial Health Officials Annual Meeting.

Dates: September 28–October 1, 1999. Location: Savannah. GA.

*HRSA POC:* Steven Merrill (301) 443–2865.

**Note:** Don't forget to check the **Federal Register** for grant announcements that may appear after the HRSA Preview is issued.

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