

ASPR Hospital Preparedness Program Notice of Funding Opportunity Informational Webinar (Option 2) Webinar Transcript

May 22, 2024

Call Transcript

00:00:03.190 --> 00:00:06.229

Moderator: I'll now hand it over to Jennifer Hannah to open today's call.

00:00:12.430 --> 00:31:18.670

Jennifer Hannah: Good evening, good afternoon, or good morning, depending on where you are joining us from today, and thank you for joining! My name is Jennifer Hannah and I'm the director of the Office of Health Care Readiness, or OHCR. It is my pleasure to be with all of you today as we discuss the Fiscal Year 2024 – 2028 Hospital Preparedness Program Cooperative Agreement Notice of Funding Opportunity, or the FY 2024 – 2028 HPP NOFO, which is now posted and accepting applications on Grants.gov. Next slide, please.

During this session, I will provide an overview of what you can expect in this period of performance, including requirements for the first budget period, or BP1. Afterwards, I will talk through the HPP NOFO application requirements and review process. At the end, we will have open time for questions. Next slide, please.

Once again, thank you for attending today's HPP NOFO informational call. We are excited about this upcoming period of performance and appreciate the opportunity to share some context on the process that got us to where we are today and answer any questions that you may have. We have worked hard and been intentional about the changes that you will see in this period of performance. The new NOFO is streamlined and outcomes focused. We designed each activity requirement intentionally to help you and your HCCs achieve the program's outcomes. With this streamlining, we expect to reduce recipient burden and increase HPP's impact. Next slide, please.

Before we begin, I'll take a moment to go over some logistics for today's call. As mentioned earlier, we have reserved time towards the end of today's call for Q&A. At any time during today's call, you may submit your questions using the Q&A feature. However, we will wait until the end to respond live to your questions. We will not be using the raised hand feature during today's presentation. Thank you to those who submitted questions ahead of time. We will also be addressing those during the Q&A, as time allows. Finally, as we mentioned, this call is being recorded, and a recording and transcript of today's call will be available soon on the HPP cooperative agreement guidance website. We will also distribute the presentation slides via email. Next slide.

I would like to spend the next few minutes highlighting some of the changes that you may expect as you review the FY 2024 – 2028 HPP NOFO. Next slide.

To address feedback received in the current period of performance, we made a few changes in the new NOFO that you may have noticed as you reviewed the document. Some of the high-level changes that you can expect, as listed in this slide, are: An overarching principle of the NOFO is that it is a whole community approach to health care readiness. The activities in the NOFO promote planning for all populations, including communities most impacted by disasters. These communities include at-risk individuals, populations experiencing structural inequities, and other populations disproportionately impacted by disasters in your jurisdiction. You can find

a full definition in the NOFO. Across all activities in this period of performance, you must describe how you will engage partners that represent or serve communities most impacted by disasters and address the specific health care needs of these communities. In this period of performance, we also made health care coalition membership requirements more flexible. We expect recipients to support their health care coalitions, or HCCs, to build membership based on their specific needs. You may see this, for example, in the shift away from core membership language. Instead, health care coalitions may choose members based on necessary expertise and the needs of their community. Those previously referred to as “core members” are still a part of the HCCs but are instead folded into a broader requirement. For example, while the FY 2019 – 2023 funding opportunity announcement, or FOA, has hospitals listed as core members, in the FY 2024 – 2028 period of performance you must at a minimum include a health care organization in your health care coalition's membership. This may include a hospital, but also could refer to a health system or health care facility. Please refer to the “Membership” activity in the NOFO for further details. Lastly, there are new requirements added in the NOFO to address emerging threats, such as a patient movement, plan, as well as extended downtime and cybersecurity assessments, plans, and exercises.

With these changes, ASPR is building on HPP's previous years of progress and prioritizing an all-hazards approach to address known and emerging threats, as well as outcomes, coordination, and flexibility. The HHS NOFO 100 pilot program also selected the Office of Health Care Readiness to participate in this program specifically for the HPP NOFO. The program's objective is to develop NOFOs across the Department of Health and Human Services that are more accessible for readers by using plain language and a user-centered, streamlined design. As part of this change, “you” in the NOFO refers to the HPP recipient, and “we” refers to ASPR. Next slide, please.

In this period of performance, we expect you and your health care coalitions to advance key outcomes through the cooperative agreement. The outcome areas are as follows: Establish and act on multi-year prior priorities. Outcomes include a health care delivery system ready to respond to a shifting threat landscape and community needs over multiple years, as well as continuous programmatic and administrative improvement on multi-year priorities.

Next, enhance and sustain health care coalitions. The outcome here is to have health care coalition governance, management, and operations that reflect community partnerships.

Another outcome area is coordination. This includes coordinated planning and decision making among health care delivery system partners and providing integrated health care response incident management.

Finally, continuity of health care service delivery is the last outcome area. Outcomes in this area include a resilient health care workforce as well as sufficient space, systems, staff, and resources to support patient movement and patient care delivery during response and recovery.

We designed the activities in the NOFO to advance cooperative agreement outcomes and support you and your health care coalitions to perform core functions. We will talk more deeply about core functions next. Next slide.

The NOFO includes core functions that you and your health care coalitions work together to perform to achieve the NOFO outcomes. Again, the activities in the NOFO will enable you and your health care coalitions to perform these core functions which in turn advance the program outcomes. There are nine core functions. The first four seen on this slide are:

- Assessment and risk mitigation to anticipate challenges and mitigate risk to support decision making that meets community or jurisdiction health care needs during a disaster or emergency.
- Information sharing to collect and share near real-time information to provide multidirectional health care situational awareness during an emergency or disaster.
- Specialty care, planning, and coordination, incorporating necessary expertise to support health care readiness planning as well as disaster and incident management.
- For the “respond” core function, we expect you and your health care coalitions to coordinate and support the implementation of plans, policies, and procedures among recipients, health care coalitions, health care coalition members, and their partners, to address patient care needs during an emergency or disaster.

Next slide.

- The next core function is equip, protect, and support the health care workforce by providing access to health care readiness resources, trainings, and exercises.
- Next is to facilitate resource, management and planning among recipients, health care coalitions, health care coalition members, and their partners to mitigate shortfalls, maintain operations, and sustain delivery of patient care services during an emergency or disaster.
- Training, exercise, and evaluation includes conducting trainings, exercises and evaluations that incorporate input from assessments, plans, policies and previous trainings and exercises to improve readiness and response processes.
- For the continuity and recovery core function, you and your health care coalitions should be able to support the improvement of processes and systems that promote continuity of health care operations and aid in recovery.
- Finally, the organizational development core function includes creating and carrying out strategies to sustain and grow health care coalitions and their partnerships.

Next slide.

This slide highlights the requirements for Budget Period 1, or BP1, which begins on July 1, 2024 and ends on June 30, 2025. Please note that some BP1 requirements are activities that simply need to be reviewed or updated from the previous period of performance, and you may need to develop materials for other activities fully. We developed this NOFO to be less burdensome for you and your health care coalitions, which included reviewing all the activity requirements to spread out deadlines over the period of performance for many of the BP1 requirements. You may also use materials developed in the previous period of performance as a basis, and/or review them for any updates before submitting. We also designed this intentionally to reduce the burden for you and your health care coalitions.

Finally, many of the activities that we require in Budget Period 1 are intentionally placed so that it lays the groundwork to inform and guide activities occurring later in the period of performance. For example, we require you to complete the strategic plan for FY 2024 – 2028 in BP1 so that this plan informs and guides you over the period of performance, streamlining planning in later years. While everything in this table is due during BP1, please note that the exact dates vary. Please refer to the timing and deadlines table in the NOFO for this specific information. Next slide.

Before moving to the application process, we want to provide an overview of the Recipient Level Direct Costs, or RLDC. As you may recall from the current period of performance, you may retain HPP funding for the management and monitoring of the HPP NOFO. This is known as RLDC. In the next period of performance, RLDC includes personnel performing administrative functions, fringe benefits, and travel for your administrative personnel. You may retain up to 15 percent of your funding award amount for RLDC. This threshold is the same as BP5 in the previous period of performance. You can calculate your RLDC by multiplying your funding award amount by 0.15. The sum of your costs for personnel performing administrative functions, fringe benefits, and travel for your administrative personnel cannot exceed this amount. When you calculate your RLDC, you cannot include the following costs:

- First, the cost of personnel who work fully for the coalition, or who perform non-administrative activities. Please note that if your personnel perform both administrative and non-administrative functions, the exclusion only applies to the part of their salary equivalent to time spent on non-administrative tasks.
- Second, and new to this period of performance, travel costs for up to two staff for each mandatory meeting. If you have travel costs for more than two staff, those should be included in RLDC calculations. Please note, your budget narrative must include all allocations for RLDC exclusions. We will expand on your budget narrative and what should be included in it for your application later in the presentation.
- Finally, similar to the previous period of performance, we have a RLDC waiver request process. Some recipients are exempt from the RLDC cap and do not need to submit a waiver request due to their unique nature. They are listed on the slide. Additional information on RLDC can be found in the NOFO. Next slide, please.

Now that we reviewed what you may expect from the upcoming period of performance and the goal of those changes, we will spend the next few minutes talking about the steps necessary to apply for this award. The five components of your application are: a project abstract, a project narrative, a budget narrative, attachments, and standard forms. We will review the components that you need to include in your application package. Please review the NOFO for more specific information on what to include for each of these components.

Recognizing the shorter application period for the FY 2024 – 2028 HPP NOFO, we are providing simplified versions for some of the application components to meet the 11:59pm ET June 18, 2024, application deadline. Please note what local time that is wherever you are located. Again, while we will respond to questions at the end, please feel free to begin asking any questions you may have in the Q&A while we cover the material. Next slide.

First, you must include an abstract that summarizes the proposed project. This should be a short component to summarize what is in the project narrative. The project abstract is limited to a maximum one-page limit. The screenshot on the left side of this slide is of the application checklist, which is in the NOFO document. We developed this checklist as a resource to help you prepare your application and check that you completed each component before submitting. Next slide.

Continuing with our application requirements, the project narrative can be a maximum of 20 pages. This is where you will address your proposed activities over the full period of performance. There are six parts to your project narrative listed on the slide. Please review the NOFO for further details on what is expected for each of these components. We will review

some changes for what you must submit with your initial submission later in the presentation. Next slide.

The next application requirement is a budget narrative. There is no page limit to this component of your application. Similar to the project narrative, we are making some of the application requirements for the budget narrative simpler given that you will be using funding planning numbers and because of the shorter application window. We will review those changes later in the presentation. Please note that we will share a budget and work plan template with you in the coming weeks. Next slide.

You are required to submit up to eight possible attachments with your application. Please note that some of these attachments are optional, including the RLDC waiver, a memorandum of agreement or understanding, and bona fide agent documentation, may or may not be applicable to you. We are also allowing submission of some of these forms with your Notice of Award, or NoA, response. I will review details on which forms this change applies to later in the presentation. Next slide.

Finally, your submission must include four standard forms, as listed on this page. Next slide.

We modified some of the HPP NOFO application requirements to reduce the burden of a full application package, given that applications are due on June 18. Application components with simplified requirements can be seen on this slide. We will review the details on what to include for each in just a moment. The components are the engagement and evaluation and performance measurement plan components of your project narrative, a detailed budget narrative, your budget period, or BP1, work plan, the Emergency Medical Service for Children support letter, and the RLDC waiver request and Memorandum of Agreement and Understanding, if applicable. Although we are making modifications at this stage for the application package, you are still required to respond to the full instructions outlined in the NOFO. If you elect to use simplified versions when putting together your HPP application package, you must include the additional needed information later when your Notice of Award response is due. Next slide.

In the project narrative's partner engagement section, you only need to provide an assurance statement in your application that you will address partner engagement in the Notice of Award response, and you will work with your health care coalitions and their members to engage partners across the health care delivery system to support a whole community approach for health care readiness. An assurance statement is a confirmation that you will complete the outlined activities. Please note that you will be expected to elaborate on the assurance statement and address all of what is listed in the NOFO, and on the right side of this slide, in your response to the Notice of Award. Next slide, please.

We are taking a similar approach to the evaluation and performance measurement plan section of your project narrative. Similar to the partner engagement segment, for your initial application package submission you only need to provide an assurance statement that you have a system in place for data collection and performance evaluation. Like with the partner engagement, you must address all components described in the NOFO with your Notice of Award response, which we also included here on the right side of the slide. Next slide please.

We recognize that you will be working with planning numbers, and those planning numbers that are included in the funding table within the NOFO are the same as your Budget Period 5 award amounts from the previous period of performance. So those are the numbers you're going to be

working with for your initial application. The FY 2024 funding information will be available to inform your Notice of Award response. With this in mind, we ask that you please use the simplified budget narrative template included with the NOFO on Grants.gov. Provide the cost categories, amounts, and short descriptions based on your planning award amounts from the funding table in the NOFO. Please note that you must use the final FY 2024 award amount to submit an updated budget narrative with your Notice of Award response that reflects all of the criteria listed in the NOFO. This includes showing the line-item's budget detail followed by justification that describes why you need the cost, how you arrived at the cost, and any calculations needed to understand each spending category. Next slide, please.

Several of the application attachments can be submitted with your Notice of Award response rather than the application package. They are the RLDC waiver request, if applicable, the Emergency Medical Services for Children (or EMSC) support letter, and the memorandum of agreement or understanding, if applicable. Please note that you must include an assurance statement that you will address and provide the FY 2024 budget period 1 work plan with the Notice of Award response to document how you plan to carry out and meet the NOFO requirements. Next slide please.

In this slide, you can see a recap of everything we just covered that you must submit with your application for it to be considered complete. Please note the application requirements with a bolded and italicized statement next to them on the checklist. We are providing the option of submitting a simplified version of these application requirements. For the partner engagement, evaluation, and performance measurement plan and FY 2024 Budget Period 1 work plan, you must submit an assurance statement. For the budget narrative, you must submit the simplified budget narrative. As a reminder, you must provide additional detail to meet the full application requirements outlined in the NOFO with your Notice of Award response if you choose to submit the simplified components in your application package that's due on June 18. We will make these slides available following today's session to use as you put together your application. Next slide.

After the application period closes on June 18, ASPR will conduct three types of reviews to evaluate the applications received: an initial review, a merit review, and a risk review. First, we will review your application to make sure it meets basic requirements. We will not consider applications from organizations that do not meet all eligibility criteria, or that are submitted after the June 18 deadline. After the initial review, we will conduct a merit review, which is a technical review of eligible applications. In the merit review, ASPR evaluates applications based on three criteria: approach, evaluation and performance measurement, and the applicant's organizational capacity to implement the approach. For a full description of what we review during this step, please refer to "Merit review" in the NOFO under Step Four: Learn About Review and Award. Finally, we will review your ability to carefully manage federal funds during the risk review, using SAM.gov responsibility/qualification to check your history for all awards likely to be over \$250,000. After completing these steps, we will send out Notice of Awards, and those are expected no later than July 1, 2024. Next slide please.

We will provide a notification of your final award amount through Grants.gov with a link to your Notice of Award. The Notice of Award is the only official award document, and it includes the final amount of the award, the important dates, and the terms and conditions that recipients need to follow. Until receiving the Notice of Award, you do not have permission to start work. You can expect to receive the Notice of Award by no later than July 1, 2024. As a reminder, you must submit a Notice of Award response with the detailed work plan, budget narrative, and

additional details outlined earlier in this presentation, and programmatic and grants management conditions. Please note that your Notice of Award response is due 30 days after the receipt of the award. Next slide please.

Now that we've covered the application components and review process, I would like to share a few helpful tips as you get ready to apply. First, please register with SAM.gov and make sure your registration is active. Do not wait until the last minute to submit your application. Steps on the process may take longer than you expect. For example, your SAM.gov registration can potentially take 72 hours to become active. Problems can also occur with online applications that could result in ineligibility. To get ahead of any potential holdups, apply with time to spare. Additionally, technical assistance will be available to you during the application window. Please reach out to your Field Project Officers, or FPOs, with any questions. Finally, you will receive confirmation when you submit your application through Grants.gov. Please ensure that you receive this confirmation. Next slide please.

In addition to the HPP NOFO, we are creating two additional reference materials with information regarding the cooperative agreement. These documents are forthcoming and will be distributed via email. The first document is a Summary of Changes, which provides an overview of changes between the HPP FOA and the new NOFO. This resource includes a detailed table showing which documents from your FOA you may wish to use as a starting point for corresponding FY 2024 – 2028 NOFO requirements. The second document is a frequently asked questions, or FAQ, sheet, which addresses commonly asked questions that you may have about the new HPP NOFO. Please feel free to review these documents as you are able. They are available to support you as you complete your application. In addition to these resources, you can reach out to your FPO with any questions or for technical assistance as needed. Next slide please.

Now that we've reviewed the application requirements, I will answer questions that you may have. Please type your questions into the Q&A feature in Zoom, and I will try my best to answer as many questions as possible within the time that we have. As a reminder this webinar is being recorded and will be made publicly available.

00:31:04.950 --> 00:31:18.670

Jennifer Hannah: Thank you, everyone. As I said, the floor is open for questions. Please submit your questions using the Q&A icon at the bottom of the Zoom meeting.

00:31:42.770 --> 00:32:19.570

Moderator: Jennifer, I'm not seeing any additional questions coming in. Sounds like it was quite a thorough presentation. Jeremy, we see part of your question here. We will make the questions and answers available as a part of the transcript if that's what your question was getting to. Jennifer, one question for you here. What is the thought process behind the Readiness Assessment and the Readiness Plan being due so early?

00:32:22.410 --> 00:33:23.950

Jennifer Hannah: Great question. As stated during the presentation, our rationale for setting this assessment and many of the planning elements and components within Budget Period 1 and very early in Budget Period 2 is to best position you, or to better position you, to be able to develop your work plan for the continuation award for Budget Period 2. As you know, the budget periods tend to overlap. And, as you saw, some of the assessment requirements and some of

the other planning requirements are due on December 31 of this year. By setting those requirements early within Budget Period 1, you will be positioned and ready to get out of the gate and be prepared to develop your work plan for the subsequent budget period.

00:33:26.490 --> 00:33:35.150

Moderator: Perfect. We've got a follow-up question here about the Q&A, wondering if the Q&A from the earlier session today will be available as well.

00:33:37.030 --> 00:33:48.229

Jennifer Hannah: What we're planning to do is that when we share the transcript and the recording with you is to consolidate and combine the Q&A from both sessions.

00:33:50.820 --> 00:33:54.969

Moderator: Another question here. Any new updates regarding the funding amounts?

00:33:55.660 --> 00:34:27.419

Jennifer Hannah: We don't have the final award amounts. Our goal is to release those as soon as we complete running the funding formula and get that cleared through our internal approval processes and clearance processes. And as I said, the final award amounts, of course, will be in your Notice of Award that you receive. It is our hope that we will be able to share with you those final award amounts in the funding table before the July 1 start date.

00:34:29.739 --> 00:34:53.259

Moderator: Another question here. Referring to the Directors of Public Health Preparedness, or DPHP, call yesterday, it was mentioned that the work plan narrative would not be needed by June 18, and assurance statements were due. This person wants to make sure that they are correct in understanding that they do need to submit a work plan, but that they can include assurance statements for two sections.

00:34:54.020 --> 00:35:56.670

Jennifer Hannah: For the Budget Period 1 work plan, you do not have to submit it with your application. You're not required to submit the budget period 1 work plan with the application that's due on June 18. You can include an assurance statement that states simply that you will submit your detailed budget period 1 work plan based on the requirements that are included in the NOFO when the Notice of Award response is due. So, all that we're asking you to do is submit an assurance statement that you will submit that budget period 1 work plan with the Notice of Award response. That's the only thing that's required for the work plan submission with the application.

00:35:58.950 --> 00:36:05.689

Moderator: Next question we have is wondering if there is a new formula.

00:36:05.690 --> 00:36:57.519

Jennifer Hannah: For the most part the funding formula will be the same. And of course, we are refreshing the data for that. At the same time, we are looking at other data sets that might inform the risk component of the formula. But for the most part, the formula is remaining the same. But we know that there will be changes with the award amounts, as you can imagine, with changes

to risk and population. With those various inputs, it is expected that recipients will see a change in their award amounts from the previous budget period within Budget Period 1.

00:37:06.640 --> 00:37:16.470

Moderator: There's another question here that Virginia is typing out an answer to. But, Jennifer, perhaps you can speak to where all the supplemental documents and templates can be found.

00:37:17.760 --> 00:38:27.909

Jennifer Hannah: So specifically, if you're looking for the simplified budget justification that is located on Grants.gov. Regarding other templates that may have been referenced in the NOFO, for those things that are going to be due in Budget Period 1, we are working on the supplemental guidance and those templates, and our goal is to be able to provide you those at the beginning of the budget period, or within the budget period, based upon when those deadlines are set. We are planning to share with you the Budget Period 1 budget narrative and work plan template before the beginning of the budget period, or rather before July 1, so that you can start looking at that and working through that, which will require and include much more detail than the simplified budget narrative. And as I've already stated, you're not required to submit the Budget Period 1 work plan with the application.

00:38:30.960 --> 00:38:55.500

Moderator: We have another question here, Jennifer, that has to do with timing. If ASPR doesn't get contracts to states until July 1, the question is about, how can states get contracts to HCCs in a timely fashion? This person is wondering if they could get a letter from ASPR, stating that HCCs can start work on July 1 and be reimbursed.

00:38:57.480 --> 00:39:15.580

Jennifer Hannah: This one, I think, we're going to have to take back and have a discussion with Grants Management. In times past, typically, we have not provided letters to allow that work to begin. Letters will not be provided to allow states establish HCC contracts pre-award.

00:39:22.630 --> 00:39:37.430

Moderator: Another question we have that was submitted in advance of the webinar is asking if there will be additional supplemental guidance on new exercise requirements, reporting requirements, and application templates.

00:39:38.200 --> 00:40:18.080

Jennifer Hannah: Yes. We are working on supplemental guidance internally as well as with some of our ASPR partners to help us with developing many of the templates and many of the other types of guidance that are listed there, because we know that we just provided you with the more surface level guidance that was in the NOFO. But we will be providing you with supplemental guidance that will provide you with additional details for how to develop many of the components for the activities.

00:40:20.940 --> 00:40:31.020

Moderator: Another question submitted in advance of the webinar. What are the major changes since the last five-year period? What replaces "Developing Surge Plans"?

00:40:32.780 --> 00:41:20.619

Jennifer Hannah: In reading the NOFO, you will see that the Medical Surge Support Plan is still a requirement. But we're not asking you to develop new plans. What we're asking you to do is to review your current plans, and if there are new components or new elements of that, we ask that you include those and update your existing plans. So, while there are new plans - the Cybersecurity Plan, the Extended Downtime Plan - there are a number of plans that you can use your existing plans. We're asking you to just review them, update them, and then submit those versus having completely all new plans.

00:41:24.170 --> 00:41:34.019

Moderator: One more question that was submitted in advance. Could you share further clarification as to what "you" means in the narrative? Is "you" recipient responsibilities?

00:41:34.310 --> 00:41:47.070

Jennifer Hannah: Yes, as part of plain language and the NOFO 100 process, "you" refers to the recipient, and "we" refers to ASPR.

00:41:58.900 --> 00:42:29.030

Moderator: A question that just came in. During a recent present presentation, there is a chart of plans, assessments, and other deliverables with reporting timelines included. This person says, it seems to me it was suggested that Richard Hunt had drafted it and supported the new NOFO. They had hoped to see it as part of the presentation tonight and are wondering if that might be made available in short order, or if it will be held until after the Notice of Awards.

00:42:29.030 --> 00:42:56.389

Jennifer Hannah: The deliverables and timelines in a timetable is included within the Notice of Funding Opportunity. It was not developed by Rick Hunt, but please read the NOFO closely, because all of the deliverables, products, and submission requirements are outlined within the NOFO.

00:43:05.650 --> 00:43:14.180

Moderator: A few more questions from the pre-conference. Will we use a platform like PERFORMS or CDC's Ready CAAMP to build the work plan and budget?

00:43:14.950 --> 00:43:43.019

Jennifer Hannah: No, you will develop your work plan, your budget, and all of your documents for the application. You will develop those offline, and then you will upload those into Grants.gov. We are not using PERFORMS, and we do not have an alternate IT system or solution in place for the development of the application. So, you will develop your application and upload everything into Grants.gov.

00:43:46.780 --> 00:43:59.220

Moderator: Another question that was submitted in advance. Would you please explain further the responsibilities between grant recipients and HCCs? As in when [the NOFO] said, 'you and your HCCs must.'

00:44:02.230 --> 00:45:16.899

Jennifer Hannah: So, the expectation for the entire NOFO is that you (you being the recipient) and your health care coalitions will work closely on all of the requirements. In some instances, the recipient is the lead, and in other instances, the health care coalition is the lead, but the point and the bottom line is that we want to see that connectivity and that coordination between the two, as well as with the health care coalition members and their partners as well. So, I believe, that the requirements as outlined within the NOFO are clear. As I said, when we say 'you,' we are talking about the recipient. So, where we say 'you and your health care coalitions' in some instances, we refer to you with having oversight of your health care coalitions, ensuring that they meet those requirements. If there's anything specific that is unclear, please reach out to your Field Project Officer.

00:45:23.120 --> 00:45:31.610

Moderator: A question that was just submitted. How is it determined if the recipient or the HCC will be the lead? It's not clear.

00:45:33.200 --> 00:45:51.469

Jennifer Hannah: So, as I said the language states in there 'you,' you are working with your health care coalition. But please reach out to your assigned Field Project Officer and they can walk through each one of those requirements with you.

00:45:54.470 --> 00:46:01.140

Moderator: Another question that was submitted in advance. Who is responsible for the submission of the Training and Exercise Plan?

00:46:04.410 --> 00:46:27.160

Jennifer Hannah: The recipient is responsible for submitting everything that's associated with the NOFO. In some instances, the health care coalition may be developing some of the activities, but ultimately the recipient is responsible for submitting those.

00:46:29.290 --> 00:46:38.749

Moderator: And the final question that was submitted in advance: are there limitations or criteria for combining exercises other than meeting all objectives?

00:46:40.350 --> 00:46:55.540

Jennifer Hannah: No, I mean certainly if you can combine your exercises, just make sure that you are addressing all of the components of the exercise and the criteria; then certainly you can combine those exercises.

00:47:02.910 --> 00:47:04.130

Moderator: All right. I'm not seeing any additional new questions in the chat. If you have a question, please feel free to submit it now. Okay, looks like we were able to answer everyone's questions. Jennifer, back over to you.

00:47:49.280 --> 00:50:21.319

Jennifer Hannah: Great thank you. And thanks everyone for all of your questions. As stated, we will share all of the slides with everyone following the sessions. For the earlier question that asked about the questions that were asked from the previous session, we will, in the

transcription, be providing consolidated questions and answers as a part of that transcription. And I believe that we can go to the next slide. Thank you.

So, this slide is just a just a reminder for everyone that the application, submission, information, and requirements can be found in the following sections of the HPP NOFO - step four learn about review and award, and also step five for submitting your application. You can go to Grants.gov, go to grant search and search for the opportunity number to find the NOFO, as well as the application package containing all forms that you need to reply. Please read all instructions in the HPP NOFO and review the application screening criteria. Applications are due at 11:59 PM EST on June 18th. Remember if you encounter any difficulties submitting the application through Grants.gov, please contact the Grants.gov support center and the telephone number and email for that support center are listed here.

Next slide, please. This is just our stay connected with ASPR. But again, I want to thank you again for joining us. We look forward to our continued collaboration in the new HPP NOFO period of performance to enhance the nation's healthcare delivery system readiness and response. So, thank you everyone. Have a wonderful evening, wonderful afternoon, or wonderful morning, depending on where you are joining us from. But thank you again, everyone, and reach out to your Field Project Officer if you need any assistance, and we look forward to receiving your applications. Thank you.

End of Informational Call Transcript

Additional Q&A from Informational Webinars

Will a template be released for the Budget Period 1 Detailed Work Plan that is required as part of the submission?

- Yes. A template for the detailed work plan and budget will be released shortly.

Do we have a sense of what “shortly” means when we say templates will be released shortly? This is specifically for the work plan and budget narrative.

- For the work plan and budget template, shortly means no later than within the next couple of weeks, and possibly earlier. We are making final edits to confirm that it has all of the NOFO components.

In the previous project period, we had to associate every budget item to a capability, objective, and activity. I don't see that in the NOFO - can you confirm this is no longer required?

- A template for the detailed work plan and budget will be released shortly. This template will require recipients and HCCs to associate activities and outputs with the supported high-level outcome and core function(s).

Will HCCs be required to complete work plans, and if so, when would the due date be, and will a template be provided? Also, will a template for the HCC budgets be provided?

- Yes. HCC work plans and budgets are required 30 days following execution of the subaward (see BM4).

Are we required to use the budget template?

- You are not required to use the template, but you do need to include the required elements/cost categories that are included within the template.

If we have developed a budget narrative with all of the pertinent information, can that be used?

- Yes, that can be used. Keep in mind that the budget narrative that you may have already developed is based on the planning numbers, so you will need to submit a revised or updated budget narrative after you receive your Notice of Award with the final award amounts.

Given that July is traditionally a vacation month, is there any advice you could offer to us now? Because right now we're at 60 days from the due date for the NOFO conditions of award. From a practicality perspective, what advice could you give us about how we can begin to address the work plan now?

- Start reading the NOFO very thoroughly. Also start thinking about those activities and how they are tied to, or would be associated with, the outcomes. Start working with your FPOs and planning how you're going to coordinate with your health care coalitions as well. The beauty of this particular NOFO, especially as it relates to the Budget Period 1, as you may have read in the NOFO, is that Budget Period 1 is focused primarily on doing assessments and planning, because we want you to be able to take the time that's needed to do the assessments and do the plans. Then, in those later years, you'll be able to use those plans really as your springboard in order to develop your work plans in the subsequent years. We will expedite getting out those templates for you, so that you can begin working on those now rather than later and causing potential further delays in getting started with the awards.

Will the Integrated Preparedness Plan (IPP) be submitted in coordination with the PHEP schedule? Note that our schedules are slightly different with ours being due in December of this year, and with PHEP being scheduled or due at the end of Budget Period 1.

- We will need to take this into consideration and follow up.

Having the Medical Response and Surge Exercise (MRSE) requirement as a functional full-scale exercise annually diminishes the ability to test for hazards that would not result in a 20 percent surge. Is there any flexibility that can be made for this requirement?

- We are updating the MRSE requirements and supporting materials to align with the 2024-2028 NOFO. Additionally, we are updating the surge requirement based on feedback and real-world response surge information. These updates will be available soon (beginning of BP1).

Can you provide in writing the summary of simplified application requirements so we can get this to our budget office?

- That was included in the slide deck sent via email on May 23, 2024.

What is the distinction you would like us to complete between downtime planning and exercising and cyber security exercise and planning?

- We know that cyber security as well as other types of critical infrastructure disruptions and failures can result in extended downtime.

Will there be full expectations of a patient movement plan issued at some point?

- Yes. The same is true for technical assistance and information will be provided for those that will be participating in those federal patient movement exercises as applicable.

When will readiness assessment materials be available?

- We are currently working on many of the assessment and plan templates, in addition to supplemental guidance. We will work to provide those things that are due in Budget Period 1 to you at the beginning of the budget period, or shortly after the budget period begins.

For the requirements regarding HCC Cybersecurity Assessment and Extended Downtime Health Care Delivery Impact Assessment, can you clarify, is the intent to assess the agency that leads/administers the HCC to administer and assess for every member of the HCC?

- We were very deliberate to make sure that our requirements were being placed at the right level. When we say the health care coalition, this refers to the coalition as an entity, not each individual member. We are not asking you to do that for each individual health care coalition member.

If the Hazard Vulnerability Analysis (HVA) for 2023-2024 was completed before July 1, 2024, can it be used for the December 31, 2024, deadline?

- We recommend that if you have a plan that you have used previously, please review that plan to make sure that it is still current before submitting something that was previously developed. We want to make sure that any previous plans or previous assessments that you were using (that are still current and address your current priorities) are still available. Keep in mind the additional requirements, such as making sure that they are representative of those communities that are impacted by disasters or emergency.

In the Project Narrative, Objectives and Activities section, we need to describe top jurisdictional strategic priorities for the period of performance. However, the strategic plan is due halfway through BP1, which says states should collaborate with HCCs to develop the strategic priorities. Can you clarify how states should address strategic priorities in the application – can they change during the development of the strategic plan?

- They most certainly can. They can change. And then, keeping in mind that your strategic priorities also may be identified when you're developing those assessments, prior to developing the strategic plan, as well as the health care coalition readiness plan.

Are communication drills required in BP1? They're not in the list of required activities or benchmarks?

- In lieu of the previous communication drills, the information sharing component of that exercise will be captured in the MRSE.

Will the Summary of Simplified Application Requirements be sent out formally by ASPR? Our grants department views what is in the NOFO as the official requirements for submission and therefore will need a written document stating these simplified changes.

- We will be including this within the slide deck. Please let us know if that will suffice, or if you need that in a different format. The summary of simplified application requirements was included in the slide deck sent via email on May 23, 2024.

What is the intent of the Strategic Advisory Committee? We already do this inclusive of all HCCs (example, strategic planning for the next 5 years was done in March 2023, and we hold quarterly business meetings in person with them). Does something like this meet the intent of this requirement?

- There is a certain different look and feel to a strategic advisory committee. Make sure that it is inclusive of what we outlined within in the NOFO. It's not a one-size-fits-all.

Project Narrative / Evaluation and Performance Measurement Plan – do you advise states to include additional process and outcome measures, or just focus on Performance Measure data?

- It will include both. That is not a requirement of the current application because we have not provided you with the performance measures upon which you can build that out. We will capture some of that information as well as you develop your work plans. In the past, and currently as well, we ask you to provide us with what activities you will be conducting and also address what some of the outcomes would be.

For the application items NOT due June 18th, will we receive something in writing on exactly when these elements are due; will this be available before the NoA so we can plan accordingly?

- They will be due with your response once you receive your Notice of Award. Typically, with the receipt of your Notice of Award and within the terms and conditions, there are programmatic conditions. That's where we will be including that information and requesting that information for you to include in your response to the Notice of Award, which typically is 30 days after the receipt of the award.

Do you expect the full detailed application to be due 30 days after we receive the NOA (even if received earlier or later than 7/1), or on July 30th no matter what? Hoping we can start planning now since we're now about 60 days out from that deadline.

- Yes. We will provide detailed instructions and due dates in the terms and conditions of the Notice of Award. Typically, submission requirements via the Notice of Award are 30 days; however, we will work with recipients on a case-by-case basis.

To echo others, a crosswalk and template would be most helpful. Additionally, are HHCs workplans/budgets a required document/attachment? If not, suggestions on how their information should be captured and included?

- We will follow up and provide you with additional information.

Can you please review what components are required for June 18 in the project narrative?

- For the project narrative due June 18, we want you to include your purpose, background, objectives and activities, and the organizational capacity.

When should the jurisdictions expect updated performance measures?

- We anticipate that we will have those performance measures available near the beginning of the budget period. It may not be exactly on July 1 because we want to make sure that these are the right measures. They also will need to go through internal review and clearance processes. We will also develop an implementation guide that will provide additional information for the expanded information for those performance measures.

Will templates be provided for all the assessments required to be completed by December 31? When can these be expected?

- Any templates that will be provided, or additional guidance for developing those, will be provided near the beginning of the Budget Period.

What is the rationale for December 31 deadlines?

- The December 31 deadlines are to position the recipients, as well as the health care coalitions, to complete subsequent requirements. When the continuation applications are due for Budget Period 2 in early 2025, you will already have information from your assessments, your strategic plan, and the health care readiness plan. You will then be able to use those plans and the information that you've captured in your assessments to develop your work plans for the Budget Period 2 continuation award.

Will the updated project narrative due date be delayed until after the performance measures are released if they're not released before the Notice of Award?

- The updated project narrative will not be delayed, but if we have to revisit the deadline for the evaluation and performance measure plan, we will do that. For those other components that we talked about for the project narrative, especially related to the partner engagement, we will still expect you to be able to submit that after you receive your Notice of Award. I think we will know within the next few weeks where we are with the timing of the of the performance measures, where we can then provide you with additional information regarding the timeline for the performance measure and evaluation plan, if it still needs to be included as part of the Notice of Award response, or if that component will be further delayed based upon when the performance measures will be released.

With the sunseting of the Coalition Assessment Tool, or the CAT, will jurisdictions report on behalf of their HCCs, or will HCCs still have the ability to report directly, and jurisdictions have the ability to pull materials form the new reporting system?

- For the current Budget Period 5, you will continue to use Coalition Assessment Tool. Within the new period of performance and with the new Notice of Funding Opportunity, we are still working toward identifying what the new IT solution will be, and how the Coalition Assessment Tool will be incorporated, and how it will be functioning. So additional information will be forthcoming exactly about how that will operate.

Is the distinction between the work plan and the objectives and activities required for the June 18 narrative? Can you clarify if recipients should just submit a blank document in Grants.gov by June 18?

- For the objectives and activities that are included as a part of the project narrative that is really your overarching project and activities that you're planning to address for the entire five-year period of performance. For the June 18 submission, related to the detailed work plan for Budget Period 1, you can simply upload a document that has an assurance statement. This statement will indicate that you will submit the detailed budget period 1 work plan with the Notice of Award response and that you will address the requirements of the detailed budget period 1 work plan.

Will there be full expectations of Patient Movement Plan issued at some point? The mentions of the required plans don't go into great detail, and this plan, specifically is a hot topic in our state and it was decided that this is a local regional issue because our state is Home Rule. Now, is the NOFO saying that we have to have a state plan, or would regional HCC plans suffice?

- We will take a closer look at that, and we will follow up. However, we will provide you with supplemental guidance, specific guidance regarding those plans as well as any assessments that we did not provide detailed information within the NOFO.

Will After Action Reports/Improvement Plans be tied to outcomes and core functions versus capabilities or other items?

- They will be tied to the core functions and the outcomes, but also keeping in mind that especially related to the health care coalitions that the 2017 – 2022 Health Care Preparedness and Response Capabilities are still current and still apply to health care coalitions as well.

Can jurisdictions and HCCs provide feedback on the new reporting tool or be a part of its development?

- I'm certain that we will have some user acceptance testing, and also be able to gather and glean some input from recipients as well as health care coalitions.

The project narrative cannot be completed to quality without defined performance measures. Am I understanding that we may be submitting three different versions of our narrative, one partially developed for the June 18th deadline, another after Notice of Award release, inclusive of partner engagement, and a third version after the performance measures are released?

- For the project narrative for this June 18 submission, we ask you to submit everything with the exception of the performance measure and evaluation plan, as well as the partner engagement section. Following the Notice of Award, you only need to provide us with the detailed information regarding your plans for the partner engagement and the

performance measure evaluation plan. If the performance measures are delayed, and we will certainly communicate that, then we may delay or change the deadline for the performance measure and evaluation plan.

Is the HHS emPOWER program still incorporated into performance measures as it was in the prior project period?

- Currently, the HHS emPOWER Program will not be included in the performance measures.

What is the likelihood that budgets will change? This is very concerning, as we start to coordinate and work with health care coalitions, fiduciaries, and sub-recipients, and leave a big question on budgets as we move into the Budget Period or Fiscal Year.

- This is similar to how we have released our budgets in previous years. We did not want to further delay the Notice of Funding Opportunity for the final award amounts. Therefore, we issued the Notice of Funding Opportunity with the planning award amounts and then we'll provide you with the final award amounts once those are finalized. You can anticipate that there will be some changes to the final award amounts, keeping in mind that our funding is based on a statutorily mandated funding formula. Based upon the data inputs into that funding formula, there will be changes. Over the past few years, we had a discretionary modifier that held fast so that no one would experience any losses due to the COVID-19 response. Since COVID is no longer in place, we expect that you will see some changes to your budgets.

When and where will we find a copy of the transcript, Q&As, and slide show?

- We will send the FAQs, the slides, and a summary of changes via email within a few days. We will work with the ASPR Office of Public Affairs to post the transcript and recording on the on the HPP website.

Will HCCs still be utilizing the CAT for reporting to ASPR?

- The CAT will not be around after Sept 30, 2024.

When would the Grants.gov application be changed to add an "Other Attachments" feature? This is needed to attach items like Indirect Cost agreements.

- ASPR Grants Management updated the application on May 22, 2024.

To somewhat summarize, the new CoAg (at least for BP1) will be a two-part application process: 1) due June 18 is a scaled back state (recipient) application to serve as the vehicle to release the NoAs and 2) after July 1 to obtain more traditional programmatic workplans, efforts, deliverables, etc. Correct?

- That is correct. We want to ensure that Notices of Award go out by July 1 for everyone. As we have the final budget still upcoming, we're using this opportunity to give recipients more time for those pieces that historically take more time.

What platform will be used moving forward? Are we no longer using PERFORMS?

- For the initial application, you will use Grants.gov. Once Notices of Award are issued, we will be using GrantSolutions as the system of record. We will provide additional guidance if an additional system or process will be used for submission of programmatic deliverables, documentation, or work products.

Regarding RLDC costs, if a body works 50% of the time directly supporting an HCC(s) and 50% of the time performing administrative duties, can 50% of the salary be excluded from the RLDC cap?

- Yes. "If your personnel perform both administrative and non-administrative activities, you must exclude the portion of their salary that is equivalent to the amount of their time spent on non-administrative activities. You must include the portion of their salary spent on administrative activities in your RLDC." See pages 48 and 49 of the NOFO for more information.

Can you highlight which elements of the application need to have a full 5-year description approach by the June 18 deadline? E.g., simplified budget is ONLY for BP1, right?

- The project abstract and project narrative should summarize and address the entire five-year period of performance. The budget narrative information (including the simplified budget) is only for BP1.

With the sunseting of the CAT, will jurisdictions report on behalf of their HCCs or will HCCs still have the ability to report directly, and jurisdictions have the ability to pull materials from the new reporting system?

- For current BP - continue to have HCCs report in the CAT. For the new performance period, HCCs will report to recipients, and they will report in the interim as we determine if there will be a new reporting system.

Can you clarify the responsibilities of the grant recipient versus the HCC's? A table with deliverable responsibility and due date would be helpful.

- Recipients are responsible for the successful completion of all cooperative agreement requirements. It is expected that recipients and HCCs work together collaboratively to develop, update, and carry out all required health care readiness activities throughout the five-year period of performance.

In the NOFO, it is still very vague and unclear at what level certain work should be done (recipient vs HCC), clarification would be appreciated as we must set expectations for our HCCs for the upcoming performance period. How is it determined if the recipient or the HCC will be the lead... it's not that clear.

- In the 2024-2028 NOFO, the improved flexibility means that, as much as possible, we provided high level guidance on what you and your HCC(s) must do as part of this cooperative agreement. How you and your HCC(s) carry out these activities may vary depending on the needs of your jurisdiction, HCC membership, and community. We expect recipients and their HCC(s) to work together to complete cooperative agreement activities but have provided them the flexibility to decide *how*. Some activities, like the MRSE, will have HCCs as the lead with recipient as support. Others, like the Patient Movement Plan, may have the recipient as the lead and HCCs expected to participate in the development.

When can jurisdictions expect the new National Health Care Preparedness and Response Capabilities?

- The National Health Care Preparedness and Response Capabilities are currently in the HHS/ASPR clearance process and will be released once approved by ASPR leadership.

According to the NOFO, the MRSE must be an operations-based functional or full-scale exercise and performed every budget period. Is this correct?

- Yes.

If we have developed a budget narrative with all of the pertinent information, can that be used?

- Yes.

We are looking at the NOFO/funding opportunity page on Grants.gov and do not see the abbreviated/simplified budget template posted on this public facing site. Is it not posted yet? Apologies if you already answered this.

- The PDF for the simplified budget template is available here:
<https://www.grantsolutions.gov/gs/preaward/previewPublicAnnouncement.do?id=111199>

The NOFO indicates the submission for both the Patient Movement Plan and Allocation of Scarce Resource Plan may be chosen by recipients but based on the Readiness plan (due 12/31/24). Does this mean they too must be completed in BP1, or can we pick a future BP to complete and should both plans be completed in the same BP, or can we space them out? Example: Readiness Plan BP1, Patient Movement BP3, Scarce Resource Plan BP4.

- The Readiness Plan(s) is/are due by December 31st, annually, and should be used to inform and update jurisdictional priorities, work plans, and budgets, in addition to the development of other plans such as the PM Plan and the Allocation of Scarce Resource Plan. Based on your jurisdictions' multi-year priorities, we are allowing recipients to choose when, over the course of the five-year period of performance, they will complete these plans.

Would there be value to complete some of the delayed requirements with the application to reduce NOA response requirements? Or will there be additional instructions for the delayed requirements we should stand by for?

- There will be special conditions to include instructions and submission dates provided in the terms and conditions of the Notice of Award.

If we decide to submit the Detailed Budget Period 1 Workplan with the application on June 18, will we be required to resubmit the workplan on the template that ASPR releases?

- It will be important that the content is correct and accurate based on the detailed work plan template. Also keep in mind that if you provide a detailed work plan, you may need to revisit it once we receive the final award numbers. We do want your work plan to be based on and tied to your budget.

Can you describe what you will be looking for in the work plan? For example, how will it be structured. What level of detail will you be looking for?

- The work plan template will be provided in the coming weeks. It will be organized in the same manner as the Activities listed in the NOFO.

If the NOA is not released by July 1, will the start date still be July 1st?

- The Notices of Award will be executed by July 1st.

Can we combine patient movement exercise and MRSE?

- Yes, as long as all of the objectives of both are included/met.

So the published budgets in the NOFO aren't confirmed?

- That is correct, these are the planning numbers.

Can we submit our full budget by 6/18, if it's ready?

- Although you can submit a full budget using the planning numbers in the funding table in the NOFO, you will need to submit a revised budget using the final award amount in the Notice of Award. Instructions will be included in the Notice of Award terms and conditions.

Will there be a template for the strategic plan? Can you elaborate on what you are looking for in the Strategic Plan?

- Details on developing your strategic plan can be found on pages 24 and 25 of the NOFO. In addition to the six focus areas identified, your project officer and ASPR TRACIE can provide additional technical assistance on strategic planning. At this time, we have not determined if a formal template will be provided.

I appreciate the performance measures. Would you please make a simple checklist of items required for the cooperative agreement (i.e., MRSE, communications exercise etc.)?

- A simplified list of all required activities can be found on pages 45-47 of the NOFO. Additionally, a list of all required benchmarks can be found on pages 42-43 of the NOFO.

When will this recording, and slide show be available and where will it be uploaded to?

- We will have the slides and recording posted on the ASPR website as soon as they are cleared by ASPR for public release. Updates will be provided via the ASPR Health Care Readiness Bulletin. The transcript and recording will be available on <https://aspr.hhs.gov/HealthCareReadiness/Pages/ASPR-Health-Care-Readiness-Programs-Webinars.aspx>.

Will templates be provided for all the assessments required to be completed by 12/31/2024? When can these be expected?

- We are actively finalizing many of the supplemental tools and templates. They will be prioritized and released as soon as possible.

The simpler budget narrative and work plan due with the application are just for Budget Period 1, correct?

- That is correct. Please note ASPR is requesting the submission of an assurance statement regarding the detailed Budget Period 1 work plan. The detailed Budget Period

For the RLDC, does this include contractual, supplies, equipment costs at the state/recipient level? The NOFO only outlines RLDC including personnel, fringe, and travel.

- The RLDC does not include contractual, supplies, and equipment costs.

Will the font size and margins requirement of the budget narrative as defined in the NOFO carry over apply to the simplified budget as well?

- No.

Can you please confirm the SF424, SF424A, and Budget should only be completed by using the planned funding amount for BP1 and not the full five-year period of performance?

- That is correct. For the initial application due June 18, 2024, please use the planning numbers. The detailed budget will need to use the final budget numbers for BP1.

Since the CAT is being phased out, will development of new reporting tools make sure to include input from HCCs in rural/frontier regions where connectivity and/or technology access may be a challenge?

- Yes, we are very concerned about ensuring rural/frontier HCC voices are heard.

As an HCC - if I don't have a contract from my state recipient can I start working on July 1st without the contract and be assured that we can be reimbursed for that time & expenses prior to a fully executed contract?

- Pre-award costs are not authorized. We strongly recommend you coordinate with the primary recipient to discuss any concerns regarding contracts and reimbursement. The recipient can work directly with their assigned FPO and Grants Management Specialist.

For activities in the NOFO that do not specifically have BP requirements, are those open to the recipient to decide when they are due? Or the HCCs?

- That is correct. For activities without a specific BP requirement, we are allowing you to determine when those best fit for you. For example, we ask that recipients and their HCC(s) define the submission deadline for the Patient Movement Plan when they develop their Readiness Plan. The deadline determined should be informed by strategic priorities determined in their Strategic Plan for FY 2024 – 2028.

I heard yesterday during the DPHP call that the work plan narrative would not be needed by June 18, and assurance statements would do but am I correct in understanding that we do need to submit a work plan, but that we can include assurance statements for two sections?

- That is correct. You do not need to submit a detailed FY 2024 BP1 work plan by the June 18 application deadline. However, you must provide an assurance statement that you will address and provide the FY 2024 BP1 work plan with the Notice of Award response to document how you plan to carry out and meet the NOFO requirements.

There is a lot of new information being presented to us on this call. Will there be future webinars soon where we can get more clarification once we can analyze what has been shared today with the NOFO?

- FPOs will be reaching out to recipients and will be available for questions. If we cannot answer them, we will chase it down to get the answer.

If the state does not receive the contracts by July 1, how can the HCCs receive the contract after in a timely fashion? Can we get a letter from ASPR stating HCCs can start work on July 1?

- The Notice of Award is typically released on July 1st, which is on time. As the budget period/project period starts on that date, we cannot ask for contracts to begin before the award of the cooperative agreement is made.

During a recent presentation there was a chart of plans, assessments, and other deliverables with reporting timelines included. Is it going to be made available in short order, or will it be held until after the NoAs?

- Please see page 45 of the NOFO.