FY 2016 ADAP Emergency Relief Funds

Funding Opportunity Announcement: HRSA #16-080
DSHAP Mission

To provide leadership and support to States/Territories for developing and ensuring access to quality HIV prevention, health care and support services.
## Agenda

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<td>Heather Hauck</td>
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Announcements

Heather Hauck, Director
Division of State HIV/AIDS Programs
HIV/AIDS Bureau
Announcements

• 2016 Virtual Administrative Reverse Site Visit
• Ryan White All Grantee Meeting
• DHHS Adult & Adolescent HIV Treatment Guidelines

• Upcoming Technical Assistance Webinars:
  • Contracting with Medicaid & MCOs: Nov 16th
  • HRSA EHBs & RSR Reporting: Nov 18th
    • Please visit the TARGET Center for more information
Question and Answer Session
Funding Opportunity Announcement:
HRSA #16-080

FY 2016 New - Limited Competition
AIDS Drug Assistance Program (ADAP)
Emergency Relief Funds (ERF)
Objective

To provide pre-application technical assistance to applicants of the FY 2016 ADAP ERF Funding Opportunity Announcement.
Summary of Funding

- Approximately $75 million in ADAP ERF to fund up to 59 grantees
- Applicants may apply for a ceiling amount up to $11 million per year
- Project period of one (1) year starting April 1, 2016
- Application due date in grants.gov – December 15, 2015 11:59 p.m. EST
FY 2016 FOA Changes

There are few substantive changes from the FY15 FOA.

- Throughout the FOA, the use of ADAP ERF funds for cost-containment measures is tied specifically to ‘prevent, reduce, or eliminate ADAP waiting lists’.

- In the Background section, updated information on ACA and included new information on Integrated Data Sharing and Use.

- The Project Abstract is now specific to ADAP ERF.

- In the Project Narrative, “Evaluation and Technical Support Capacity” is no longer a section.

- In Section B of SF-424A the two budget categories have changed from “Waiting List” and Cost Containment” to “Medications/Insurance” and “Other Cost Containment”
Purpose

• For States/Territories that can demonstrate need for additional resources to prevent, reduce or eliminate ADAP waiting lists, including through cost-containment measures (for example, the provision of health insurance assistance).
Purpose

• States with an existing waiting list must use all funding awarded to remove clients from the waiting list.

• States/Territories that did not report an existing waiting list, must use funding awarded to prevent a waiting list through “cost-cutting” measure and/or “cost-saving” measures.
Purpose

**Cost-cutting measures:**
- Reductions in ADAP financial eligibility below 300% of FPL
- Capped enrollment
- Formulary reductions with respect to ARVs
- Restrictions with respect to ADAP insurance eligibility criteria

**Cost-saving measures:**
- Expanding insurance assistance
- Improved systems and procedures for back billing Medicaid
- Improved client recertification
- Strategies to increase enrollment in insurance through the marketplace
- Collection of rebates
HRSA has prioritized the following cost-containment strategies through its monitoring and technical assistance efforts:

- Purchase of insurance, collection of rebates, back billing of Medicaid, CMS data-sharing agreements for TrOOP expenditures, six-month re-certification, and controlling ADAP administrative costs.
Eligibility

All 50 states, the District of Columbia, and the Territories are eligible to apply if, between January 2011 - August 2015:

• the jurisdiction has reported an ADAP waiting list to HRSA

or

• has used the ADAP ERF funds to prevent, reduce or eliminate an ADAP waiting list.
Cost Sharing/Matching

• Cost Sharing/Matching is **NOT** required for this program.
Project Narrative

Follow the headings and subheadings in the HRSA template.

• Introduction:
  • Briefly describe how the State/Territory will utilize ADAP ERF funds in support of preventing, reducing or eliminating a waiting list, including through cost cutting or cost savings measures

• Project Abstract:
  • See section 4.1.ix of HRSA’s SF-424 Application Guide
  • Must also provide the information listed on page 7.
Needs Assessment

• **State/Territory’s HIV/AIDS Epidemiologic Data and ADAP Profile:**

  • The EPI profile from the Part B Base application will be provided to the Objective Review Committee and does not need to be included as part of this submission.

  • **ADAP Profile includes:**
    • Eligibility for ADAP ERF Funding
    • ADAP funding summary (for FY14 & 15)(now includes carryover funds)
    • Cost-cutting measures (for FY14 & 15)
    • Cost-saving measures (for FY14 & 15)(new this year)
    • Client Utilization Summary for (FY14 & 15)
    • Affordable Care Act (ACA) Summary
Needs Assessment

• Factors Affecting the State ADAP Capacity to Meet Need
  
  • Applicants are required this year to address at least 3 of the factors impacting their need for additional resources to prevent, reduce, or eliminate a waiting list and describe why the ADAP is unable to meet the need with existing resources.
Methodology

• ADAP Average Client Costs and Forecasting:
  
  • Applicants **must use** the instructions/structure provided in **Appendix A** to develop their projected average medication and insurance assistance cost per client
  
  • Projections are for the FY 2016 ADAP ERF budget period (April 1, 2016 – March 31, 2017)
  
  • States **must use** the average cost calculations from Appendix A in developing the proposed X09 budget and/or to project the impact of the proposed cost-containment measures.
  
  • This year, the forecasting is categorized on the 1) Purchase of Medications or Insurance Assistance and 2) Other Cost-Cutting or Cost-Saving Measures.
Methodology

ORC Reviewers will review and determine:

• Whether the average client cost calculation submitted by applicants follow instructions provided;

• Whether the calculations are correct and reflected in the applicant’s plan and budget request; if incorrect, the error will be identified along with its impact on the applicant’s average client cost calculations;

• If applicable, whether or not the applicant based budget request on the number of individuals on the State’s waiting list.
Work Plan

Planned Services & Work Plan:

• The work plan should complement the implementation plan submitted for the most current RYWHAP Part B Base (X07) application.

• Applicants are strongly encouraged to use the sample work plan format found on the TARGET Center (link provided in the FOA)

• Submit as Attachment 1.
Planned Services & Work Plan:

• The Implementation Plan estimated costs should be based on the Average Monthly Client Medication Cost and/or Average Monthly Client Cost for Insurance Assistance for ADAP ERF budget period (April 1, 2016 – March 31, 2017)

The Work Plan section of the project narrative now includes two questions (Anticipated Impact of ADAP ERF and Monitoring) that were previously part of the Evaluation and Technical Support Capacity section.
Resolution of Challenges

• Impact of ACA implementation on the ADAP

• State/Territory actions to ADAP Challenges
  • Improved program efficiencies
  • Improved ability to enroll clients in other payer sources
  • Reallocation of resources
  • Increased rebates and discounts
Organizational Information

• ADAP Oversight/Administration
  • Management/Administration of the ADAP
  • Organizational chart (Attachment 5)

• Compliance with Reporting Requirements
  • How will the State/Territory meet reporting requirements
Budget

• See instructions in section 4.1.iv HRSA’s SF-424 Application Guide

• In Section B of SF-424A the budget categories are “Medications/Insurance” and “Other Cost Containment” (this is a change from FY15)

• Please note: ERF funds cannot be used for planning and evaluation or CQM
Summary of Attachments

Attachment 1  Work Plan
Attachment 2  Staffing Plan and Job Descriptions for key personnel (if applicable)
Attachment 3  Biographical Sketches of key personnel (if applicable)
Attachment 4  Agreements and Compliance Assurances
Attachment 5  ADAP Organizational Chart
Attachment 6 - 15 Other Relevant documents
• HRSA requires applicants for this funding opportunity announcement to apply electronically through Grants.gov.

• Applicants must download the SF424 application package associated with this funding opportunity following the directions provided at Grants.gov.

• Application due date in grants.gov –

  December 15, 2015 11:59 p.m. EST
Application Format Requirements

• The total size of all uploaded files may not exceed the **equivalent of 40 pages** when printed by HRSA. The 40-page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support.

• Attachments must be clearly labeled (see list of attachments on page 16 of FOA).
## Application Review Information

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<td><strong>1</strong> NEED</td>
<td>Section IV’s Introduction and Needs Assessment</td>
<td><strong>25</strong> points</td>
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<td><strong>2</strong> RESPONSE</td>
<td>Section IV’s Methodology, Work Plan and Resolution of Challenges</td>
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<td><strong>3</strong> IMPACT</td>
<td>Section IV’s Work Plan</td>
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<td><strong>4</strong> RESOURCES/CAPABILITIES</td>
<td>Section IV’s Organizational Information and the Staffing Plan and Bio Sketches, if applicable</td>
<td><strong>15</strong> points</td>
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<td><strong>5</strong> SUPPORT REQUESTED</td>
<td>Section IV’s Budget and Budget Narrative, and Organizational Information</td>
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Agency Contacts

• Program issues and/or technical assistance regarding this funding announcement may be obtained by contacting:
  
  Heather Hauck, Tel: 301-443-6745
  Fax: 301-443-3143, Email: hhauck@hrsa.gov

• Business, administrative, or fiscal issues related to this funding opportunity announcement by contacting:
  
  Karen Mayo, Tel: (301) 443-3555
  Fax: (301) 594-4073, E-mail: KMayo@hrsa.gov
Application Assistance

• Applicants may need assistance when working online to submit their application forms electronically. Applicants should always obtain a case number when calling for support. For assistance with submitting the application in Grants.gov, contact Grants.gov 24 hours a day, seven days a week, excluding Federal holidays at:

   Grants.gov Contact Center
   Telephone: 1-800-518-4726
   E-mail: support@grants.gov
   iPortal: http://grants.gov/iportal
Question and Answer Session
Thank You