COMMUNITY HEALTH ADMINISTRATION (CHA)

RFA# CHA_TCLS_7/17/2020
Tobacco Cessation & Health Systems Change

Frequently Asked Questions

PROJECT

1. **Are workplans required for both Year 1 and Year 2 or only Year 1?**
   Applicants should submit a work plan with the application for Year 1 only.

2. **Can partner organizations be reimbursed for tobacco cessation services?**
   Yes, however, priority for cessation services should be to DC Quitline using e-referrals. Applicants may choose to supplement with other tobacco cessation services that are sustainable after the life of the grant.

3. **Could we include a component where a partner conducting tobacco cessation classes refers potentially eligible patients from outside our health system lung cancer for screening?**
   No. Screening referrals originating outside the health system would not be considered part of the grant. The purpose of this grant is to implement workflow process changes and quality improvement within a health system to identify patients who are tobacco users and refer them to appropriate treatment services and lung cancer screening (if indicated).

4. **Is community outreach support included in this RFA?**
   This grant is specific to health systems change and does not include community outreach.

5. **Can patients be recruited from specialty care centers as well as primary care centers?**
   Yes.

6. **Is a referral for patients from Maryland and Virginia to the Quitline through Electronic Health Record (EHR) integration allowed?**
   Yes.

BUDGET

7. **Are budgets for both Year 1 and Year 2 or only Year 1 required with this application?**
   Applicants should submit the budget and budget justification (or narrative) with the application for Year 1 only.

8. **Is the budget of $150,000 inclusive of direct and indirect costs or is the $150,000 limit for direct costs only?**
   The $150,000 budget per year is inclusive of indirect costs.

9. **Is there a salary cap to be used?**
   No.

10. **Can funds from year 2 be spent on EHR (Electronic Health Record) modifications?**
    Funds for EHR modifications are limited to Year 1.

11. **Is a subcontract needed for the Quitline to integrate EHR?**
    No.

12. **How do we budget for EHR modification and Quitline integration without an estimate of the cost?**
    EHR modifications are limited to Year 1 of the grant. Applicants should consider budgeting the maximum allowable (20% of the grant award) for that purpose.

APPLICATION

13. **Are there writeable budget and work plan templates available?**
    Yes, they are posted with this FAQ.

14. **Are the staff/project personnel CVs included in the 50-page limit of the application?**
    No

15. **What Medicaid certifications are required with this application?**
    The most recent certification or recertification required to maintain eligibility as a Medicaid provider.

16. **Who should sign the list of the board of directors?**
    See section Assurances & Certifications, page 15.

17. **Can both health systems awarded a grant engage the same partner organization as a subgrantee?**
    There is no restriction on an organization being a subgrantee to two grantees.