General Questions

1) **Question:** Who is responsible for implementing the AHEC program requirements?
   
   **Answer:** The AHEC Program Office, also known as the grant recipient, in collaboration with the centers, is responsible for implementing the AHEC program requirements, including achieving the overarching program goals, reporting and adhering to the statutory requirements.

   Please see page 3 of the Funding Opportunity Announcement.

2) **Question:** What is practice transformation?
   
   **Answer:** Practice transformation is a high-level change in clinical and operational processes that aims to support new team-based models of healthcare delivery. Providers will need ongoing training and support to function within teams in their professional roles. Inter-professional team models are designed to provide better care coordination, and improved patient experiences and outcomes, at a lower overall cost of care.


   Please see page 46 of the Funding Opportunity Announcement.

3) **Question:** Can you provide more information on the one-stop delivery system under the Workforce Investment Act?
   
   **Answer**

   One-Stop Centers (also known as American Job Centers) are designed to provide a full range of assistance to job seekers under one roof. The One-Stop Center system is coordinated by the Department of Labor's Employment and Training Administration (ETA).

   ETA's web site provides a clickable map of web sites for each state and a list of state, regional, and local center contacts. You can also find a center by calling ETA's toll-free help line at (877) US-2JOBS (TTY: 1-877-889-5267).

   Please see page 9 of the Funding Opportunity Announcement.
4) **Question:** Both team-based care and team-based training appear within the funding opportunity announcement. Is there a difference and how are they related?  
**Answer:** Yes, there is a difference. *Team-based care* is an approach to health care delivery where a group of health professionals work together to accomplish a common goal, solve a problem, or achieve a specified result.¹ *Team-based training* reflects health workforce educational activities that prepare professionals to provide team-based care by emphasizing models of team-based care in training.²  

*Please see page 3 of the Funding Opportunity Announcement.*

5) **Question:** What is an allied health professional?  
**Answer:** An allied health professional is a health professional who (A) receives a certificate, an associate’s degree, a bachelor’s degree, a master’s degree, a doctoral degree, or post baccalaureate training, in a science relating to health care and; (B) shares in the responsibility for the delivery of health care services. See section 799B(5) of the Public Health Service Act. NOTE: registered nurses and physician assistants are not considered allied health professionals.  

*Please see page 6 of the Funding Opportunity Announcement.*

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Naylor MD, Coburn KD, Kurtzman ET, et al. *Inter-professional team-based primary care for chronically ill adults: state of the science.* Unpublished white paper presented at the ABIM Foundation meeting to Advance Team-Based Care for the Chronically Ill in Ambulatory Settings. 2010 March 24-25; Philadelphia, PA.


Eligibility & Application Requirements

6) **Question:** Should applicants include a map within the Project Abstract or Project Narrative?

**Answer:** Yes, applicants must include a map in either the Project Abstract or the Project Narrative section.

Please see pages 16-17 of the Funding Opportunity Announcement.

7) **Question:** May existing AHEC Programs re-distribute the geographical areas their centers serve?

**Answer:** Applicants determine geographic boundaries within their state as part of their proposal. Each center participating in the AHEC program must serve a different geographic area or population. AHEC legislation requires that each center designate an underserved area or population to be served by the center which is in a location removed from the main location of the teaching facilities of the schools participating in the program with such center and does not duplicate, in whole or in part, the geographic area or population served by any other center. ³

Please see page 8 of the Funding Opportunity Announcement.

8) **Question:** Are there specific activities that must be included in the planning period of the work plan?

**Answer:** The planning period of the work plan is used to ensure successful implementation of the guidelines set forth in the funding opportunity announcement. Specific activities that must be included focus primarily on establishing the AHEC Scholars Program and implementation of the new and/or revised program guidelines.

Please see page 2 of the Funding Opportunity Announcement.

9) **Question:** Are there any specific evidence-based practices we should refer to for this proposal?

**Answer:** HRSA highly encourages applicants to apply evidence-based practices and innovative models in developing their proposed approach. There are many resources available regarding evidence-based, promising practices, and innovative models in both the health workforce and educational pipelines.

Please see page 3 of the Funding Opportunity Announcement.

³ See Public Health Service Act section 751(d)(2)(C).
10) **Question:** Will the existing AHEC Programs that have centers in both Infrastructure Development (ID) and Point of Service Maintenance and Enhancement (POSME) phases have to complete two applications instead of one integrated application?

**Answer:** No. Existing AHEC Programs that have centers in both ID and POSME phases will only need to submit one (1) integrated application. Applicants must denote the centers (and their phases) that already exist and those that they are proposing throughout their application.

*Please see page 14 of the Funding Opportunity Announcement.*

11) **Question:** What is the difference between Attachment 2: Letters of Agreement and/or Description(s) of Proposal/Existing Contracts (project-specific) and Attachment 8: Letters of Support?

**Answer:** Attachment 2 includes specific documents that describe working relationships and formal partnerships between your organization and other entities and programs cited in the proposal. This includes Letters of Agreement, Memorandum of Agreement/Understanding (MOAs/MOUs) and/or existing or proposed contracts. Attachment 8 includes general letters of support for your project. At your discretion, you can include more than one letter. You may also provide sample letters with a list of additional letters that includes the name of the organization or department, the name and title of the individual who signed the letter (e.g., CEO or Chair), and indicates their commitment to the project, including resource commitments (in-kind services, dollars, staff, space, equipment, etc.).

*Please see pages 26-27, and 29 of the Funding Opportunity Announcement.*

12) **Question:** How will HRSA evaluate the waivers noted in the funding opportunity announcement?

**Answer:** HRSA will evaluate each waiver request in a similar manner on a case-by-case basis. Competitive applications requesting a waiver should include the following: (1) background information on why the waiver is needed; (2) relevant supporting documentation verifying background information (including prior waivers received); and (3) a transition plan for obtaining a status where the waiver is no longer needed.

*Please see pages 13, 14, 28-30, and 32 of the Funding Opportunity Announcement.*

**Funding**

13) **Question:** Are AHEC Programs allowed to fund college pipeline activities?

**Answer:** Yes. However, to alleviate any potential duplication of effort, HRSA strongly encourages the use of strategic partnerships to engage in existing undergraduate
pipeline activities and initiatives, such as the HRSA-funded Centers of Excellence (COE) and Health Career Opportunity Program (HCOP) as well as the Department of Education’s Upward Bound, Gaining Early Awareness and Readiness for Undergraduate Programs, TRIO Talent Search, and the College Access Challenge Grant programs, etc.

Please see page 6 of the Funding Opportunity Announcement.

14) **Question:** Can AHECs use the HRSA-recommended 10 percent of federal funds for pipeline activities to work with colleges rather than high school students?

**Answer:** No, the applicant cannot substitute college-pipeline activities for high school pipeline activities. AHEC recipients must support recruitment, training, interactive, and/or didactic activities developed for high school students (grades 9-12) focused on exposing youth to health careers, including public health, which is a statutory requirement. If applicants choose to support undergraduate students in their pipeline activities, no more than 10 percent of federal funds can be used.

Please see pages 4 and 9 of the Funding Opportunity Announcement.

15) **Question:** Can you clarify the funding match requirement?

**Answer:** The AHEC program has a matching requirement. Award recipients are required to provide documentation on recurring non-Federal contributions in cash or in-kind that includes direct or through a contribution from a state, county or municipal government, or private sector. (Note that at least 25 percent of the total required non-federal contributions shall be in cash.) Any amount that will be awarded by HRSA or in this case applied for by the AHEC recipients must match that amount equally (100%). Thus, the matching ratio for AHEC awards is 1-to-1 federal funds to non-federal contributions. However, if the recipient chooses to submit a higher match (non-Federal amount) than the required 1-to-1, HRSA will allow that amount. The recipient cannot submit a lower amount of match (non-Federal amount) without a waiver.

For example, if the federal funds requested (and awarded) is $100,000, then the required match is also $100,000. That means the total operating costs of the program (total federal plus non-federal) equals $200,000 (of which the required match is 50% of the total).

Please see pages 7-8 of the Funding Opportunity Announcement.

16) **Question:** Are stipends allowable for all AHEC Participants? What do stipends cover?

**Answer:** No. Stipends are only allowed for students who have been accepted into the AHEC Scholars Program. Stipends may be used to cover the cost of school-related supplies, travel and/or job-related supplies and needs, such as continuing education.

Please see page 33 of the Funding Opportunity Announcement for more information.
Key Personnel

17) Question: Must Project Directors serve on the admissions committee of the school of medicine (or nursing, if applicable)?

Answer: Yes, the Project Director must serve on the admissions committee of their school of medicine (or nursing, if applicable). The admissions committee of a health professions school has the unique ability to help shape the diversity and distribution of students accepted into school and subsequently build a health workforce that better meets the needs of rural and underserved communities. Applicants must demonstrate their commitment to academic-community partnerships and the overall mission of HRSA, the Bureau of Health Workforce and the AHEC Program. Applicants have the option of proposing staff who already meet the qualifications to serve on the admissions committee for Project Directors. Additionally, applicants can propose strategic approaches to meeting this requirement and provide a detailed justification along with documentation as to why the Project Director is unable to serve on the admissions committee. This information will be reviewed on a case-by-case basis. Please see page 12 of the Funding Opportunity Announcement.

18) Question: How much flexibility is allowed regarding the 0.5 FTE evaluator requirement? For example, is it acceptable to form a team of evaluators to meet the 0.5 FTE evaluator requirement and is the 0.5 FTE evaluator needed during the planning year?

Answer: HRSA anticipates that applicants will propose strategic approaches and provide compelling justification for their approach. Reviewers and HRSA staff will review these approaches on a case-by-case basis. Applicants should keep in mind that evaluation is a critical component of the FY17 AHEC Program and the application review. A final evaluation plan with evaluation tools/protocols and agreements must be submitted to HRSA by the end of the first annual budget. Please see pages 5, 12, 20, and 40 of the Funding Opportunity Announcement.

Core Topic Areas

19) Question: Must the six core topic areas be included in the health professions school or program’s approved curriculum or degree plan for students participating in AHEC-funded activities?

Answer: No. The core topic areas do not have to be addressed in the health profession’s approved curriculum or degree plan. However, the core topic areas must be addressed as a component of the applicant’s proposed AHEC Scholars Program and AHEC-facilitated community-based experiential training opportunities. Please see page 3 of the Funding Opportunity Announcement.
**AHEC Scholars Program**

20) **Question:** Is there flexibility with the 15-25 new student cohort per center requirement?  
**Answer:** No. The range of AHEC Scholars is based upon the total number of students needed to demonstrate a return on investment and impact of the program for evaluation purposes. The AHEC Program Office is responsible for ensuring the overall number of participants in the AHEC Scholars program. The number of centers funded by the AHEC Program Office determines the total number of students for each cohort each academic year of the project period.

For example, an AHEC Program funded for five (5) centers is expected to have a multidisciplinary cohort of 75-125 new students each academic year of the project period.

Please see pages 2 and 5-7 of the Funding Opportunity Announcement.

21) **Question:** Will HRSA approve a Scholars Program curriculum offering a total of 40 hours per year with a mix of clinical/experiential and didactic training relevant to student needs and stage of training rather than the minimum of 80 hours per year (40 plus 40) required by the FOA?  
**Answer:** No. The AHEC Scholars Program must include the 40 clinical hours and the 40 didactic training hours per year as set forth in the FOA. The AHEC Scholars Program will supplement the student’s existing health professions programs and provide specialized training in rural/underserved areas/populations and the core topic areas. This allows flexibility to meet the student needs and stage of training. For instance, the 40 clinical hours are completed within the existing curriculum or degree plan, and when that is not possible a 40-hour group collaborative project and/or simulation activities, etc. may be used to satisfy that requirement.

Please see pages 5-7 of the Funding Opportunity Announcement.

22) **Question:** Will HRSA allow applicants to meet the AHEC Scholars Program requirement through an AHEC’s existing program that supports the AHEC Scholars Program objectives in the FOA, but may differ in some respects from the requirements described in the FOA? For example, would HRSA accept an AHEC Scholars Program that allows undergraduates in pre-health professional tracks to participate in the AHEC Scholars Program?  
**Answer:** Applicants with an existing program that meets the requirements of the AHEC Scholars Program as set forth in the FOA and do NOT currently receive HRSA or other federal funds to support that program may use the conceptualization of that program as their framework for the HRSA-branded AHEC Scholars Program. However,
all FOA requirements still apply. AHEC Scholars must be enrolled in a health professions program.

Please see pages 4 and 5-7 of the Funding Opportunity Announcement.

23) Question: How can students enrolled in a certificate program of less than two years participate as an AHEC Scholar?
Answer: The HRSA Program Office may approve disciplines, particularly allied health workforce programs where the duration of the program is less than two years, for inclusion on a case-by-case basis after award. Please refer to footnote on page 6 of the Funding Opportunity Announcement.

Please see pages 5-7 of the Funding Opportunity Announcement.

24) Question: Does each center of an AHEC Program have to manage a cohort of AHEC Scholars each year?
Answer: The grant recipient or AHEC Program Office is responsible for ensuring the overall number of participants in the AHEC Scholars program. The number of centers funded by the AHEC Program Office determines the total number of students for each cohort each academic year of the project period. The centers support these efforts. Highly competitive applicants will exercise their discretion on how their centers are utilized, including the number of participants a given center hosts and/or manages. Highly competitive applicants will include information in their project narrative regarding their approach (e.g., how many participants there will be at their centers and whether the number of participants will vary by center location if they differ).
For example, an AHEC Program funded for five (5) centers is expected to have a multidisciplinary cohort of 75-125 new students each academic year of the project period. The number of students could vary by AHEC center.

Please see page 6 of the Funding Opportunity Announcement.

25) Question: Is there a required ratio of students from multiple disciplines in each cohort of AHEC Scholars?
Answer: No, there is no required ratio. However, each cohort must include students from multiple disciplines (e.g., medicine, nursing, social work, public health, and other allied health workforce programs).

Please see pages 5-7 of the Funding Opportunity Announcement.

26) Question: Should recruiting underserved/minority students be our primary focus and the mix of health professions be secondary? Or vice versa?
Answer: The strategic priorities for the AHEC Program are diversity, distribution, and practice transformation. Highly competitive applicants should propose a plan that will address all three priorities.

Please see pages 5-7 of the Funding Opportunity Announcement.

27) Question: Are housing expenses for participants in the AHEC Scholars Program other than travel-related lodging allowable in the budget?
Answer: Yes

Please see pages 6, 26-27 and 32-33 of the Funding Opportunity Announcement.

28) Question: Does the AHEC Scholars Program require that partners sign a Memorandum of Understanding (MOU) or agreement saying that they will hire these students upon graduation?
Answer: No, hiring Scholars is not a requirement.

Please see pages 5-7 of the Funding Opportunity Announcement.

29) Question: Are the AHEC Scholars’ clinical experiences counted and reported as community-based experiential training?
Answer: No. The AHEC Scholars clinical experiences will be counted and reported separately from the community-based experiential trainings.

Please see pages 6-7 of the Funding Opportunity Announcement.

Community-Based Experiential Training

30) Question: Do community-based experiential training sites have to be BOTH rural AND underserved areas?
Answer: No. Community-based experiential training can occur in either rural or underserved areas.

Please see page 7 of the Funding Opportunity Announcement.

31) Question: What about community-based training experiences in rural areas with doctors in solo practices? They do not meet the requirement that “each training experience must be team-based”.

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Answer: Community-based experiential training in solo practices in rural areas is allowable. Highly competitive applicants will demonstrate how they will ensure these students are exposed to interprofessional learning opportunities, either in a didactic or experiential format.

Please see pages 6-7 of the Funding Opportunity Announcement.

32) Question: Is the formal didactic component addressing one or more of the Core Topic Areas required while the student is completing his/her clinical rotation?
Answer: Yes. The formal didactic component must be provided before the experiential training is reported to HRSA.

Please see pages 6-7 of the Funding Opportunity Announcement.

33) Question: Are the required didactic hours outside of a student’s normal academic activities?
Answer: Yes. The AHEC Scholars Program will supplement the student’s existing health professions programs and provide specialized education and training in rural/underserved areas/populations and the core topic areas.

Please see pages 6-7 of the Funding Opportunity Announcement.

34) Question: Could an elective course developed for academic credit (which addresses priorities listed in the FOA) be utilized as hours towards the didactic requirement?
Answer: Yes.

Please see page 6-7 of the Funding Opportunity Announcement.

Existing AHECs

35) Question: Regarding the maximum one-year planning period for the AHEC POSMEs noted on page 2 of the FOA, if an entity is an existing AHEC grantee already in the POSME Phase, is it eligible for that one-year planning period?
Answer: Yes, as long as they are still eligible to apply for the POSME phase.

Please see page 2 of the Funding Opportunity Announcement.

36) Question: If an existing AHEC proposal for an expansion center is denied, is the entire application for funding automatically denied?
Answer: No. If an applicant’s request for a center expansion is denied, the entire application for funding will not be automatically denied.
37) **Question:** Can existing AHEC Programs add a new AHEC Center?  
**Answer:** Yes, existing AHEC Programs can make a request to expand their number of AHEC centers. Applicants must delineate the proposed expansion within their application. The AHEC Program must provide a strong and compelling justification for the expansion.

Please see page 18 of the Funding Opportunity Announcement.

38) **Question:** If there are multiple AHEC Program Offices in our state, are we required to complete a statewide evaluation? Does a joint needs assessment serve as rationale for each program’s individual proposal?  
**Answer:** Yes, in states where multiple AHEC Program Offices exist, the Program Offices must work collaboratively to develop a joint needs assessment and **ONE** statewide evaluation of all AHEC Program activities. To ensure that consistent evaluation tools and protocols are used throughout the state, letters of agreement are required for states anticipating multiple AHEC Program offices/award recipients.

If available, information from the joint needs assessment may serve as rationale and justification for each individual applicant. Each applicant in states where multiple Program Offices exist must describe their collaborative effort to develop a statewide evaluation plan and their role and responsibility in its development and implementation. Letters of Agreement are required among these applicants. If a joint needs assessment is not completed prior to the application deadline, then it must be included in the evaluation plan and denoted in the letters of agreement.

Please see page 5 of the Funding Opportunity Announcement.