



**Recipient Information**

- 1. Recipient Name**  
SANTA BARBARA, COUNTY OF  
Division Line: PCFH  
300 N San Antonio Rd  
Santa Barbara, CA 93110-1316
- 2. Congressional District of Recipient**  
24
- 3. Payment System Identifier (ID)**  
1956002833A5
- 4. Employer Identification Number (EIN)**  
956002833
- 5. Data Universal Numbering System (DUNS)**  
131851250
- 6. Recipient's Unique Entity Identifier**  
DTDJDKNXQ4Y7
- 7. Project Director or Principal Investigator**  
Dana Gamble  
Project Director  
dgamble@sbcphd.org  
(805)681-5171
- 8. Authorized Official**  
Douglas Metz  
douglas.metz@sbcphd.org  
(805)681-5252

**Federal Agency Information**

- 9. Awarding Agency Contact Information**  
Mona D. Thompson  
Grants Management Specialist  
Office of Federal Assistance Management (OFAM)  
Division of Grants Management Office (DGMO)  
mthompson@hrsa.gov  
(301) 443-3429
- 10. Program Official Contact Information**  
Von Bailey  
Director, NMWD  
Bureau of Primary Health Care (BPHC)  
vbailey1@hrsa.gov  
(301) 594-4309

**Federal Award Information**

- 11. Award Number**  
1 H8GCS47555-01-00
- 12. Unique Federal Award Identification Number (FAIN)**  
H8G47555
- 13. Statutory Authority**  
Paycheck Protection Program and Health Care Enhancement Act, Public Health and Social Services Emergency Fund (P.L. 116-139)
- 14. Federal Award Project Title**  
FY 2023 Expanding COVID-19 Vaccination
- 15. Assistance Listing Number**  
93.527
- 16. Assistance Listing Program Title**  
Affordable Care Act (ACA) Grants for New and Expanded Services Under the Health Center Program
- 17. Award Action Type**  
New
- 18. Is the Award R&D?**  
No

**Summary Federal Award Financial Information**

<b>19. Budget Period Start Date 12/01/2022 - End Date 05/31/2023</b>	
<b>20. Total Amount of Federal Funds Obligated by this Action</b>	\$265,765.00
20a. Direct Cost Amount	
20b. Indirect Cost Amount	
21. Authorized Carryover	\$0.00
22. Offset	\$0.00
23. Total Amount of Federal Funds Obligated this budget period	\$265,765.00
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>	<b>\$0.00</b>
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>	<b>\$265,765.00</b>
<b>26. Project Period Start Date 12/01/2022 - End Date 05/31/2023</b>	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$265,765.00

- 28. Authorized Treatment of Program Income**  
Addition
- 29. Grants Management Officer – Signature**  
Sarah Hammond on 12/02/2022

**30. Remarks**



Notice of Award  
Award Number: 1 H8GCS47555-01-00  
Federal Award Date: 12/02/2022

**Bureau of Primary Health Care (BPHC)**

**31. APPROVED BUDGET: (Excludes Direct Assistance)**

Grant Funds Only  
 Total project costs including grant funds and all other financial participation

a. Salaries and Wages:	\$0.00
b. Fringe Benefits:	\$0.00
c. Total Personnel Costs:	\$0.00
d. Consultant Costs:	\$0.00
e. Equipment:	\$0.00
f. Supplies:	\$0.00
g. Travel:	\$0.00
h. Construction/Alteration and Renovation:	\$0.00
i. Other:	\$265,765.00
j. Consortium/Contractual Costs:	\$0.00
k. Trainee Related Expenses:	\$0.00
l. Trainee Stipends:	\$0.00
m. Trainee Tuition and Fees:	\$0.00
n. Trainee Travel:	\$0.00
o. TOTAL DIRECT COSTS:	\$265,765.00
p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00
q. TOTAL APPROVED BUDGET:	\$265,765.00
i. Less Non-Federal Share:	\$0.00
ii. Federal Share:	\$265,765.00

**33. RECOMMENDED FUTURE SUPPORT:**  
(Subject to the availability of funds and satisfactory progress of project)

YEAR	TOTAL COSTS
	Not applicable

**34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)**

a. Amount of Direct Assistance	\$0.00
b. Less Unawarded Balance of Current Year's Funds	\$0.00
c. Less Cumulative Prior Award(s) This Budget Period	\$0.00
d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	\$0.00

**35. FORMER GRANT NUMBER**

**36. OBJECT CLASS**  
41.51

**37. BHCNIS#**  
090830

**32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:**

a. Authorized Financial Assistance This Period	\$265,765.00
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	\$0.00
ii. Offset	\$0.00
c. Unawarded Balance of Current Year's Funds	\$0.00
d. Less Cumulative Prior Award(s) This Budget Period	\$0.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$265,765.00

**38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:**

a. The program authorizing statute and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.

**39. ACCOUNTING CLASSIFICATION CODES**

FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
23 - 398VAC1	93.527	23H8GCS47555	\$265,765.00	\$0.00	N/A	23H8GCS47555

## HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants3.hrsa.gov/2010/WebEPSEExternal/Interface/common/accesscontrol/login.aspx> to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

## Terms and Conditions

**Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.**

### Grant Specific Term(s)

1. As required by the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 109–282), as amended by section 6202 of Public Law 110–252, recipients must report information for each subaward of \$30,000 or more in Federal funds and executive total compensation, as outlined in Appendix A to 2 CFR Part 170. You are required to submit this information to the FFATA Subaward Reporting System (FSRS) at <https://www.fsr.gov/> by the end of the month following the month in which you awarded any subaward. The FFATA reporting requirements apply for the duration of the project period and so include all subsequent award actions to aforementioned HRSA grants and cooperative agreement awards (e.g., Type 2 (competing continuation), Type 5 (non-competing continuation), etc.). Subawards to individuals are exempt from these requirements. For more information, visit: <https://www.hrsa.gov/grants/ffata.html>.
2. All post-award requests, such as significant budget revisions or a change in scope, must be submitted as a Prior Approval action via the Electronic Handbooks (EHBs) and approved by HRSA prior to implementation. Grantees under "Expanded Authority," as noted in the Remarks section of the Notice of Award, have different prior approval requirements. See "Prior-Approval Requirements" in the DHHS Grants Policy Statement: <http://www.hrsa.gov/grants/hhsgrantspolicy.pdf>
3. The funds for this award are in a sub-account in the Payment Management System (PMS). This type of account allows recipients to specifically identify the individual grant for which they are drawing funds and will assist HRSA in monitoring the award. Access to the PMS account number is provided to individuals at the organization who have permissions established within PMS. The PMS sub-account code can be found on the HRSA specific section of the NoA (Accounting Classification Codes). Both the PMS account number and sub-account code are needed when requesting grant funds. **Please note that for new and competing continuation awards issued after 10/1/2020, the sub-account code will be the document number.**

You may use your existing PMS username and password to check your organizations' account access. If you do not have access, complete a PMS Access Form (PMS/FFR Form) found at: <https://pmsapp.psc.gov/pms/app/userrequest>. If you have any questions about accessing PMS, contact the PMS Liaison Accountant as identified at: <http://pms.psc.gov/find-pms-liaison-accountant.html>

### Program Specific Term(s)

1. This notice of award provides one-time funding for a 6-month period of performance to support health centers to increase access to, confidence in, and demand for updated COVID-19 vaccines within their service areas, with an emphasis on activities in the first 3 months of award.  
Eligible health centers are limited to (1) entities that currently receive Health Center Program (H80) grant funding, and (2) federally qualified health centers as described in section 1861(aa)(4)(B) of the Social Security Act (42 U.S.C. 1395x(aa)(4)(B)) that previously received American Rescue Plan Act (ARP) funding (L2C). The authority for these awards is the [Paycheck Protection Program and Health Care Enhancement Act](#), P.L. 116-139, Division B, Title I. HRSA determined your award amount using the following formula: (1) \$47,650, plus (2) \$9 per patient reported in the 2021 Uniform Data System (UDS).  
For purposes of this opportunity, when you draw down award funding, you are accepting these terms and all the terms and conditions of the award, and must comply with all requirements including the terms, conditions, and all applicable statutes, regulations, and policies. Non-compliance with these terms or other applicable requirements is grounds for HRSA to take actions pursuant to 45 CFR § 75.371 (Remedies for non-compliance) which may include repayment of all or part of the award.  
The availability of the ECV funds is dependent on your continued status as a current Health Center Program (H80) award recipient or your continued status as a designated look-alike under Section 1861(aa)(4)(B) of the Social Security Act.  
**Note:** This one-time funding is under the Paycheck Protection Program and Health Care Enhancement Act and is not under the authority of section 330 of the Public Health Service Act (42 U.S.C. 254b). Receipt of these funds does not confer Health Center Program award recipient status under Section 330.

2. ECV funding may support the following allowable vaccine-related activities (in alignment with your Health Center Program scope of project):
- **Outreach and Education:** Increase vaccine confidence and demand by performing vaccine-related outreach to promote health center and community-based vaccination efforts and locations for vaccination, and to provide COVID-19 vaccine education, including through distribution of in-person and online education materials and through formal and informal opportunities for health center providers and staff to share information and respond to questions about vaccines. HRSA encourages health centers to work with community- and faith-based organizations to help amplify and extend reach of these education and outreach efforts, including in multiple languages and through direct engagement with communities.
  - **Working with Community Partners:** Increase confidence in and access to COVID-19 vaccinations by working with established or new community partners (e.g., Women Infants and Children (WIC), Head Start, and other early childhood partners; community-based organizations that focus on, for example, older adults or other targeted sub-populations, housing, food security, employment, education, behavioral health services). HRSA encourages health centers to conduct vaccine confidence campaigns, planning for and hosting community vaccine clinics, which may be hosted by community partners or at partner sites, but where health centers provide vaccination-related services independently of those community partners. HRSA also encourages health centers to work with community- and faith-based organizations to host events and develop and deliver messaging tailored to community needs.
  - **Vaccine Administration:** Administer updated COVID-19 vaccinations at permanent and temporary health center service sites or other locations, including through mobile, drive-up, walk-up, or community-based vaccination events and routine patient appointments (e.g., well-child visits). Updated COVID-19 vaccine events may also be used to administer COVID-19 primary series and/or other (e.g., influenza) vaccines. All vaccine administration activities should be carried out in alignment with CDC, state/jurisdiction, and other public health guidance, as well as the requirements of the Health Center Program.
  - **Enabling Services:** Facilitate access to COVID-19 vaccination by expanding health center enabling services (e.g., transportation, translation, interpretation), including coordinating these services with community- and faith-based organizations.
  - **Personnel:** Hire and/or contract additional health center providers, clinical staff, and other personnel (e.g., community health workers, patient/community education specialists, others) as needed to support related activities, including COVID-19 vaccination, outreach and education, and coordination of messaging, events, and other activities with community- and faith-based organizations.
  - **Hours and Availability:** Extend health center operating hours, mobile and home services, street outreach, and off-site vaccination locations to expand opportunities for COVID-19 vaccination.
  - **Training:** Train health center workforce on patient-centered, culturally affirming strategies to increase COVID-19 vaccination, vaccine confidence, and address social and other barriers to COVID-19 vaccination access.
  - **Supplies:** Purchase COVID-19 vaccination supplies, materials, and signage to promote vaccination events and to support outreach efforts, tailored messaging, and other communications to increase vaccine confidence.
3. These one-time funds should be used for activities that supplement and do not supplant planned activities that are using other funds to increase access to, confidence in, and demand for updated COVID-19 vaccines.
4. ECV funds may not be used to reimburse expenses or losses that have been reimbursed from other sources or that other sources are obligated to reimburse. You may not use this funding for: costs not aligned with the ECV purpose and allowable activities; costs already paid for by any other federal award, such as H80, H8F, and L2C funding; costs that are reimbursed or compensated by other federal or state programs; equipment purchases, including electronic health record (EHR) systems; construction and alteration/renovation projects; and facility or land purchases. Award funds may not be used to pay the salary of an individual at a rate in excess of [Executive Level II](#), which is currently \$203,700. This amount reflects an individual's base salary including bonuses and overtime, but not including fringe and any income that an individual may be permitted to earn outside of the duties to your organization. For more information about allowable expenses, see [45 CFR part 75](#) and the [HHS Grants Policy Statement](#) (HHS GPS). The requirements of [45 CFR part 75](#) apply to this award.

You are required to have the necessary policies, procedures, and financial controls in place to ensure that your organization complies with all legal requirements and restrictions applicable to the receipt of federal funding, including, but not limited to, restrictions on use of funds for lobbying, executive salaries, gun control, and abortion. Like those for all other applicable grants requirements, the effectiveness of these policies, procedures, and controls is subject to audit.

5. You may draw down funds prior to the approval of your ECV Award Submission to meet immediate cash needs to increase access to, confidence in, and demand for updated COVID-19 vaccines. If you draw down funds before your ECV Award Submission is approved, your submitted budget must include and clearly indicate costs that were drawn down from the date of award until submission of the budget to HRSA. Approval is not guaranteed, and you incur costs prior to the approval of your submission at your own risk.
6. You may rebudget ECV funding without prior approval except as noted in this paragraph. You do not need prior approval to rebudget ECV funds if the proposed use of funding aligns with the ECV allowable uses of funds and your Health Center Program scope of project, avoids ineligible uses of funding as outlined in this notice of award, and complies with [45 CFR part 75](#) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards. If the amount of the costs to be rebudgeted exceeds 25% of the total federal award or

shifts funds to a line item in your approved budget that previously had no federal funds, you must submit a prior approval rebudgeting request for review and approval by HRSA.

7. HRSA's expectation is that these funds will be prioritized for use in the first 3 months of the 6-month period of performance. If you anticipate that you will not expend the federal funding available through this award by the period of performance end date, you must submit a separate Extension Without Funds (no cost extension) prior approval request to HRSA. You must request an extension through [HRSA's Electronic Handbooks \(EHBs\)](#) no sooner than 2 months prior to the ECV period of performance end date. You may not use this one-time extension to expend unused funds for any other purpose or activity beyond those listed on this notice of award. All extension requests are subject to HRSA approval. Contact your Grants Management Specialist with questions.
8. If you cannot use all or part the funding in accordance with the terms of this award for the allowable uses of funds, you must relinquish all or part of the award back to HRSA. If you choose to relinquish all or part of your award, contact the grants management specialist noted on page 1 of this notice of award as soon as possible to discuss the process to relinquish your award.
9. You are expected to monitor and use available COVID-19 guidance and resources, such as those available at the Centers for Disease Control and Prevention [COVID-19 webpage](#) and [CDC COVID-19 Vaccination Program](#). For health center-specific resources and more information, see [COVID-19 Information for Health Centers and Partners](#) and the [Health Center Resource Clearinghouse](#).
10. Your ECV project must be implemented in alignment with your Health Center Program scope of project. You are responsible for ensuring that your Health Center Program scope of project is accurate and includes service, site, and/or activity changes necessary to implement your ECV activities. This includes: (1) Form 5A: Services Provided, (2) Form 5B: Service Sites, and (3) Form 5C: Other Activities/Locations. For additional information, see the [Scope of Project webpage](#) and [Considerations for Health Center Scope of Project and the COVID-19 Public Health Emergency](#).
11. ECV award recipients are prohibited from using federal funds to provide abortions, except in cases of rape or incest, or when a physician certifies that the woman has a physical disorder, physical injury, or physical illness that would place her in danger of death unless an abortion is performed.
12. The non-federal share of the project budget includes all program income sources such as fees, premiums, third party reimbursements, and payments that are generated from the delivery of services, and from other revenue sources such as state, local, or other federal grants or contracts; private support; and income generated from fundraising, and donations/contributions.  
  
The description of "Authorized Treatment of Program Income" under the "Addition" alternative, as cited elsewhere in this notice of award, is superseded by the requirements in section 330(e)(5)(D) of the PHS Act relating to the use of nongrant funds. Under this statutory provision, health centers shall use nongrant funds, including funds in excess of those originally expected, "as permitted under section 330," and may use such funds "for such purposes as are not specifically prohibited under section 330 if such use furthers the objectives of the project."  
  
Under 45 CFR § 75.351(a), subrecipients (entities that receive a subaward from a pass-through entity for the purpose of carrying out a portion of a Federal award received by the pass-through entity) are responsible for adherence to applicable Federal program requirements specified in the Federal award.
13. Charges to Federal awards for salaries and wages must be based on records that accurately reflect the work performed under each award. These records must reflect the total activity for which the employee is compensated, not to exceed 1 FTE across all Federal awards ([45 CFR 75.430\(i\)\(1\)](#)). You shall maintain appropriate records and cost documentation including, as applicable, documentation described in 45 CFR § 75.302 – Financial management and 45 CFR § 75.361 through 75.365 – Record Retention and Access, to substantiate the charging of salaries and other project activities costs. You shall promptly submit copies of such records and cost documentation upon the request of HHS, and you agree to fully cooperate in all audits that HHS, the HHS Inspector General, or the Pandemic Response Accountability Committee conducts to ensure compliance with these terms and conditions.
14. Throughout the ECV period of performance, you must respond to the HRSA [Health Center COVID-19 survey](#), which tracks COVID-19 testing and vaccination data, and the impact of COVID-19 on operations, patients, and staff. The COVID-19 survey also supports the Health Center COVID-19 Dashboard that provides an overview of COVID-19 vaccinations. Failure to respond regularly to the Health Center COVID-19 survey may result in HRSA placing additional terms, conditions, and/or reporting requirements on your award, including the requirement that all draw downs of ECV award funds from the Payment Management System have prior approval from HRSA.
15. Within 90 days of the end of the period of performance, you must submit a final report into the HRSA Electronic Handbooks (EHBs). Reports will document completed activities and use of ECV funds, and may request additional information such as issues and barriers experienced while implementing projects. Details about the final reporting will be posted to the [ECV technical assistance webpage](#) when available.

## Standard Term(s)

1. Your organization is required to have the necessary policies, procedures, and financial controls in place to ensure that your organization complies with all legal requirements and restrictions applicable to the receipt of federal funding, per HRSA [Standard Terms](#) (unless otherwise specified on your Notice of Award), and [Legislative Mandates](#). The effectiveness of these policies, procedures, and controls is subject to audit.

## Reporting Requirement(s)

### 1. Due Date: Within 30 Days of Award Release Date

Within 30 days of award release date, you must submit the following post-award application documents: (1) SF-424A Budget Form, (2) Budget Narrative, and (3) Activity List. Instructions to support your application submission, an Activity List template, and information for joining a Q&A webinar to address your submission questions are available at the [ECV technical assistance webpage](#).

### 2. Due Date: Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 90 days after end of reporting period.

The recipient must submit, within 90 days after budget period end date, an annual Federal Financial Report (FFR). The report should reflect cumulative reporting within the project period of the document number. **All FFRs must be submitted through the Payment Management System (PMS)**. Technical questions regarding the FFR, including system access should be directed to the PMS Help Desk by submitting a ticket through the self-service web portal ([PMS Self-Service Web Portal](#)), or calling 877-614-5533.

**Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.**

## Contacts

### NoA Email Address(es):

Name	Role	Email
Douglas Metz	Authorizing Official, Point of Contact	douglas.metz@sbcphd.org
Dana Gamble	Program Director	dgamble@sbcphd.org
Suzanne Jacobson	Business Official	suzanne.jacobson@sbcphd.org

Note: NoA emailed to these address(es)

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (<https://pms.psc.gov/>).