SAMHSA Division of Grants Management TOR No-Cost Extension Webinar June 23, 2021

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Important Change – HHS Checklist

Please Note: Effective October 1, 2020, SAMHSA discontinued the inclusion of the **HHS Checklist** in the grant application kit.

This applies to all SAMHSA applications: responses to Notice of Funding Opportunity (NOFO, formerly FOA), post-award amendments, continuations, and supplement applications.

See Removal of HHS Checklist from the SAMHSA Grant Application Kit for more information on how to properly fill out the application in response to these changes: https://www.samhsa.gov/grants/applying/hhs-checklist-removal





No-Cost Extension (NCE)

What is a No-Cost Extension?

A no-cost extension (NCE) allows a grantee to request additional time to extend the period of performance end date of a grant in order to complete the overall goals and performance outcomes originally approved in the award.

Grantees may request a one-time extension of up to 12 months if additional time beyond the established project end date is required to assure adequate completion of the original scope of work with funds already made available.

An extension may be granted for a federally supported project based on one of the following reasons

- (1) To ensure completion of the originally approved project scope or objective, and/or
- (2) To permit an orderly phase-out of a project's currently approved activities

The fact that funds remain at the expiration date of the project is not in and of itself sufficient justification for an extension. Conversely, if grant funds have been fully expended, an extension should not be requested/approved.



Required Documents

Basic Required Documents:

- ✓ Cover Letter
- ✓ SF424 Form (Completed within eRA)
- ✓ SF 424A Form (Budget Summary Information; Completed within eRA)
- ✓ Budget Narrative Justification (Detailed line-item)
- ✓ Project Narrative

IMPORTANT: All post award amendments must be submitted through the eRA system. You must have an eRA Commons account to submit your request.





Cover Letter

Cover Letter Requirements:

- ✓ Must be on letterhead.
- ✓ Must include the grant award number.
- ✓ Must be signed by the authorized representative and program director.
- ✓ Must include an explanation as to why project goals were not completed during the award project period.
- ✓ Must include the amount of additional time needed for the NCE, not to exceed 12 months.
- ✓ Must identify the remaining program goals to be accomplished during the NCE period.
- ✓ Must identify the estimated amount of remaining funding that will be used during the NCE.





SF-424 Form

- ✓ Completed as fillable form in eRA Commons.
- ✓ Box 2: Select "Revision" and select "No-Cost Extension" from dropdown
- ✓ Box 4: Enter the Commons ID for the PD role affiliated with your organization.
- ✓ Box 5b: Enter your federal award identifier: (i.e. H79TI022222-02)
- ✓ Box 18a: Enter the total amount of Federal funds being requested for use during the NCE period. Complete the other sections in box 18 accordingly.





SF-424A Budget Summary Form

- ✓ Completed as fillable form in eRA Commons.
- √ The SF 424a Budget Summary Form is the budget information for the NCE requested amount.
- ✓ Section A Budget Summary Federal Requested NCE amount only. Match not required.
- ✓ Section B -Budget Categories: k. TOTALS Total (5) MUST equal SECTION A -Budget Summary: 5.Totals Total (g).





SF-424A Budget Summary Form – Section B

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	Ť	GRANT PROGRAM, FUNCTION OR ACTIVITY								Total	
o. Object Glass Gategories		(1)						(4)		(5)	
		Stop Act Grant									
a. Personnel	\$	7,040.00	\$		\$		\$		\$	7,040.00	
b. Fringe Benefits		1,570.00								1,570.00	
c. Travel		932.00								932.00	
d. Equipment		0.00								0.00	
e. Supplies		662.00								662.00	
f. Contractual		2,000.00								2,000.00	
g. Construction		0.00								0.00	
h. Other		14,876.00								14,876.00	
i. Total Direct Charges (sum of 6a-6h)		27,080.00							\$	27,080.00	
j. Indirect Charges		1,625.00							\$	1,625.00	
k. TOTALS (sum of 6i and 6j)	\$	28,705.00	\$		\$		\$		\$	28,705.00	
7. Program Income	\$		\$		\$		\$		\$		

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Standard Form 424A (Rev. 7- 97) Prescribed by OMB (Circular A -102) Page 1A

Budget Narrative Templates

Budget template → <u>SAMHSA PDF Budget Template</u> - NEW (Optional)

This budget template can be uploaded under "Budget Narrative" tab when working on the post award amendment.

The following documents provide guidance on using the budget template:

- Key Features of the Budget Template
- <u>Budget Review Checklist</u> use this checklist to review your Detailed Budget and Narrative Justification before submission to SAMHSA.

Note: For the PDF template to function as designed, it must be downloaded to your computer and opened directly in Adobe Acrobat or Reader, instead of with your browser.

Previous Budget Template -> Sample Budget and Justification (no match required) - SAMHSA





Project Narrative

Project Narrative is a summary of the project (amended version of the original project narrative). The project narrative should include:

- ✓ The strategies/interventions, project goals and measurable objectives, including the number of people to be served in the no-cost extension period.
- ✓ Explanation of program status to date.
- ✓ Elaborate on how the extension will allow for the completion of the originally approved project/program, and permit an orderly phase-out of a project/program objectives.
- ✓ May include incomplete activities from approved supplemental and carryover award funding.





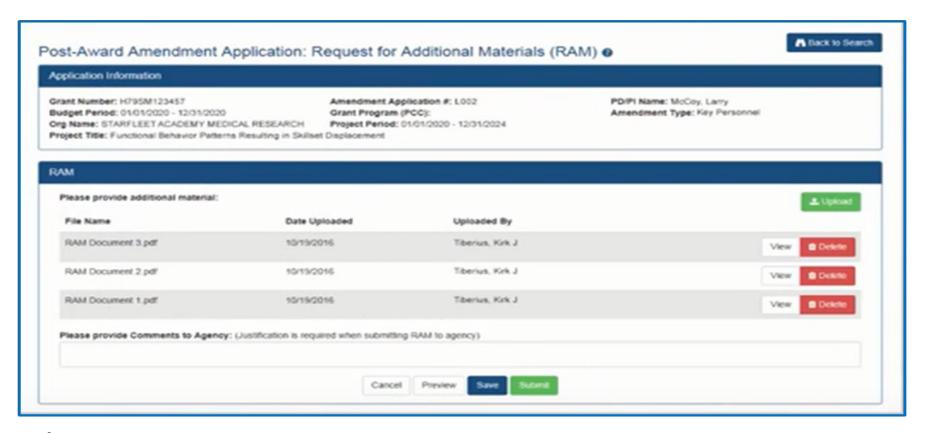
Authorized Representative- AOR Credentials

- On the final step of application submission, the Signing Official (SO) will need to enter the Grants.gov AOR credentials. These are <u>not</u> the same as the Commons User ID and password.
- To verify if you have the Authorized Representative AOR role and that is it active, log in to Grants.gov https://apply07.grants.gov/apply/login.faces and select "My Account" -- "Manage Profile."
- If you do have the role and are unable to submit please try performing a password reset in Grants.gov.
- If you have any questions about the AOR credentials, please contact Grants.gov directly: support@grants.gov, 1-800-518-4726. Please be sure to state that you need the AOR credential information, not the Grants.gov login.





FAQs: Submitting a RAM Response



For more information go to:

- Video How to Respond to a SAMHSA Request for Additional Materials: Post Award Amendment and Continuation Applications
- <u>Document Submitting additional materials in response to a Request for Additional Materials (RAM) Reference Sheet</u>





NCE Overview

- ✓ NCE is requested if additional time is needed to ensure completion of the originally approved project/program, and to permit an orderly phase-out of a project/program objectives.
- ✓ NCE is a one-time extension of up to 12 months (may not exceed 12 months).
- ✓ NCE must be submitted no later than 60 days prior to the Project Period end date. By no later than 7/31/2021.
- ✓ Requests for additional funding or changes to the project scope /objectives will not be approved as part of the NCE.
- ✓ We will NOT approve any extension request if the primary purpose of the extension is to permit the use of unobligated funds.
- ✓ Requests must be submitted through eRA Commons.
- ✓ If no NCE is submitted, the Project Period end date is 9/29/2021, and grantee should prepare for closeout.





NCE Resources

- SAMHSA Post Award Amendment Page <u>https://www.samhsa.gov/grants/grants-management/post-award-amendments#no-cost-extension</u>
- Video on how to submit a Post Award Amendment request: <u>Video</u>
- Reference Sheet (PDF | 261 MB): a quick guide on how to initiate post award amendment applications and access in-progress post award amendment applications from inside the eRA system.





Contact Us

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eRA Service Desk

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Web Support: https://grants.nih.gov/support/index.html

Submit a Web Ticket: https://public.era.nih.gov/commonshelp

(preferred method of contact)

Toll-Free: 1-866-504-9552

Phone: 301-402-7469 (Press 6 for SAMHSA Grantees)

Hours: Mon-Fri, 7 a.m. to 8 p.m. EST (closed on federal holidays)





Thank You!

Questions?







Thank you

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www.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) ● 1-800-487-4889 (TDD)

