

State of Illinois Uniform Notice of Funding Opportunity (NOFO)
Summary Information

Awarding Agency Name	Public Health
Agency Contact	Rebecca Barnett (Rebecca.Barnett@illinois.gov)
Announcement Type	Initial
Type of Assistance Instrument	Grant
Funding Opportunity Number	GC-25
Funding Opportunity Title	Genetic Counseling
CSFA Number	482-00-0916
CSFA Popular Name	GC
Anticipated Number of Awards	20
Estimated Total Program Funding	\$5,100,000
Award Range	\$0 - \$750000
Source of Funding	State
Cost Sharing or Matching Requirements	No
Indirect Costs Allowed	Yes
Restrictions on Indirect Costs	No
Posted Date	03/20/2024
Application Date Range	03/20/2024 - 05/20/2024 : 5:00 PM
Grant Application Link	Please select the entire address below and paste it into the browser... https://idphgrants.com/
Technical Assistance Session	



Uniform Notice of Funding Opportunity (NOFO)

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1.	Awarding Agency	Illinois Department of Public Health
2.	Agency Contact:	Name: Rebecca Barnett Phone: 217-494-2393 Email: rebecca.barnett@illinois.gov
3.	Announcement Type:	<input checked="" type="checkbox"/> Initial announcement <input type="checkbox"/> Modification of a previous announcement
4.	Type of Assistance	Grant
5.	Agency Opportunity	N/A
6.	Funding Opportunity	Genetic Counseling
7.	CSFA Number:	482-00-0916
8.	CSFA Popular Name:	Genetic Counseling
9.	CFDA Number(s):	N/A
1	Number of	Up to 20
1	Estimated Total	\$1,700,000.00 per fiscal year: 2025, 2026, 2027
1	Single Award Range:	Up to \$250,000 per fiscal year
1	Funding Source:	<input type="checkbox"/> Federal or Federal pass-through
3.	Mark all that apply	<input checked="" type="checkbox"/> State <input type="checkbox"/> Private / other funding
1	Is Cost Sharing or	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
1	Indirect Costs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	Allowed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Restrictions on Indirect Costs?	If yes, provide the citation governing the restriction:
1	Posted Date:	3/20/2024
1	Application Date	Start Date: 3/20/2024
7.	Range:	End Date: 5/20/2024
	Leave the 'End Date' and 'End Time' empty if there is no deadline.	End Time: 5PM CST
1	Technical Assistance	Session Offered: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	Session:	Session Mandatory: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Date and time: 4/5/24, 1-2:00PM, CST
		Conference Info/Registration Link: TA Session Recording: https://illinois.webex.com/recording-service/sites/illinois/recording/8bdeb4bbd5a4103cbdf25a9e0688983f/playback

Agency-specific Content for the Notice of Funding Opportunity

A. Program Description

The purpose of the Genetic Counseling grant program is to increase the availability of statewide genetic services for Illinois' children and family members with heritable conditions or are at risk for genetic conditions/concerns.

This grant program continues to be supported by the Newborn Screening fund. Each year in Illinois, more than 600 babies are diagnosed through newborn screening, either by using a few drops of blood from the newborn's heel, or through special equipment to detect hearing loss or critical congenital heart disease. While there is no cure for most disorders detected through NBS, early and uninterrupted treatment may greatly lower the morbidity and/or mortality of these conditions. The Illinois Newborn Screening Program tracks children with out-of-range results to assure they receive clinical follow-up, diagnosis, treatment, and on-going care.

Newborn screening is a population-based program, serving the entire state of Illinois, and impacting every prospective and new parent. Therefore, it is imperative that the program work with partners and stakeholders to improve the awareness of newborn screening and genetics, strengthen the access to care and services for Illinois parents and families of affected children, and increase knowledge and access to prevention strategies for potentially preventable conditions.

In efforts to promote awareness, understanding, and access to genetic counseling services, applicants may apply for one or more of the following components.

- Component A: General Pediatric / Prenatal Genetic Counseling Services,
- Component B: Genetic Counseling Education and Promotion,
- Component C: Outreach Services and Support, and
- Component D: Biochemical Genetic Counseling

Component details and requirements are included on the 'Component Worksheet' available within the application, under 'Show Documents'.

The Illinois Department of Public Health places health equity as a top priority. Health equity is the "basic principle of public health that all people have a right to health". Health equity exists when all people can achieve comprehensive health and wellness despite their social position or any other social factors/determinants of health. Most health disparities affect groups marginalized because of socioeconomic status, race/ethnicity, sexual orientation, gender, disability status, geographic location, or some combination of these. People in such groups not only experience worse health but also tend to have less access to the social determinants or conditions (e.g., healthy food, good housing, good education, safe neighborhoods, disability access and supports, freedom from racism and other forms of discrimination) that support health.... Health disparities are referred to as health inequities when they are the result of the systematic and unjust distribution of these critical conditions. The department's efforts are committed to addressing health through an equity lens by empowering communities who have been historically marginalized and developing intervention strategies with the end goal of furthering health equity among all Illinoisans.

B. Funding Information

This award is utilizing ☐ federal pass-through, ☒ state and/or ☐ private funds.

Approximately \$1,700,000 total funding will be available for each of the following fiscal years, based on the appropriation of funds.

- FY2025 (July 1, 2024 – June 30, 2025)
- FY2026 (July 1, 2025 – June 30, 2026)
- FY2027 (July 1, 2026 – June 30, 2027)

C. Eligibility Information

Regardless of the source of funding (federal pass-through or State), all grantees are required to register with the State of Illinois through the Grant Accountability and Transparency Act (GATA) website, <https://gata.illinois.gov/>, complete a prequalification process, and be determined "qualified" as described in Section 7000.70. Registration and prequalification is required before an organization can apply for an award.

The entity is "qualified" to be an awardee if it:

1. has an active UEI (Unique Identity ID) number;
2. has an active SAM.gov account;
3. has an acceptable fiscal condition;
4. is in good standing with the Illinois Secretary of State, if the Illinois Secretary of State requires the entity's organization type to be registered. Governmental entities, school districts and select religious organizations are not required to be registered with the Illinois Secretary of State. Refer to the Illinois Secretary of State Business Services website: http://www.cyberdriveillinois.com/departments/business_services/home.html;
5. is not on the Illinois Stop Payment List;
6. is not on the SAM.gov Exclusion List;
7. is not on the Sanctioned Party List maintained by HFS.

1. Eligible Applicants

Genetic counseling centers who provide consultation, evaluation, diagnosis, and/or treatment services for Illinois residents.

2. Cost Sharing or Matching

N/A

3. Indirect Cost Rate

Eligible applicants may voluntarily identify indirect costs as a programmatic match, or in-kind, to allocate the entire grant award for direct costs.

Annually, each organization receiving an award from a State grantmaking agency is required to enter the centralized Indirect Cost Rate System and make one of the following elections for indirect costs to State and federal pass-through grants:

- I. Federal Negotiated Indirect Cost Rate Agreement (NICRA);
- II. Election of the de minimis rate of 10% of MTDC;
- III. Election not to charge indirect costs; or
- IV. Negotiate an indirect cost rate with the State of Illinois.

The awardee shall make one election or negotiate a rate that all State agencies must accept unless there are federal or State program limitations, caps or supplanting issues.

4. Other, if applicable

N/A

D. Application and Submission Information

1. Address to Request Application Package

Applications must be submitted via the Illinois Department of Public Health's Electronic Grants Administration and Management System (EGrAMS), accessible at idphgrants.com.

Since high-speed internet access is not yet universally available for downloading documents or accessing the electronic application, and applicants may have additional accessibility requirements, applicants may request paper copies of materials by contacting:

Rebecca Barnett
Illinois Department of Public Health
535 W Jefferson St, 2nd Fl
Springfield, IL 62761
Phone 217-494-2393; Fax 217-557-5396
Hearing Impaired (TTY) 1-800-547-0466

2. Content and Form of Application Submission

Applications must be submitted via the Illinois Department of Public Health's Electronic Grants Administration and Management System (EGrAMS), accessible at idphgrants.com. The applicant must complete and upload program-specific attachments, located in the "Miscellaneous" section of the application.

3. Unique Entity Identifier (UEI) and System for Award Management (SAM)

Each applicant, unless the applicant is an individual or Federal or State awarding agency that is exempt from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the Federal or State awarding agency under 2 CFR § 25.110(d)), is required to:

- i. Be registered in SAM before submitting its application. If you are not registered in SAM, this link provides a connection for SAM registration: <https://sam.gov/SAM/>
- ii. provide a valid UEI in its application; and
- iii. continue to maintain an active SAM registration with current information at all times during which it has an active Federal, Federal pass-through or State award or an application or plan under consideration by a Federal or State awarding agency.

The State awarding agency may not make a Federal pass-through or State award to an applicant until the applicant has complied with all applicable UEI and SAM requirements and, if an applicant has not fully complied with the requirements by the time the State awarding agency is ready to make a Federal pass-through or State award, the State awarding agency may determine that the applicant is not qualified to receive a Federal pass-through or State award and use that determination as a basis for making a Federal pass-through or State award to another applicant.

4. Submission Dates and Times

See 17 on Page 1 of this NOFO.

Applications must be submitted via the Illinois Department of Public Health's Electronic

Grants Administration and Management System (EGrAMS), accessible at idphgrants.com. Applications must be received by 5:00 PM CST on May 20, 2024.

5. Intergovernmental Review, if applicable

N/A

6. Funding Restrictions

All grant funds must be used for the sole purposes set forth in the grant proposal and application and must be used in compliance with all applicable laws. Grant funds may not be used as matching funds for any other grant program unless specifically allowed under grant program guidelines. Use of grant funds for prohibited purposes may result in loss of grant award and/or place the grantee at risk for repayment of those funds used for the prohibited purpose. Regardless of the source of funding (federal pass-through or State), all grant-funded expenses must be compliant with Cost Principles under Subpart E of 2CFR200 unless an exception is noted in federal or State statutes or regulations.

Allowability

Allowable – All grant funds must be used for items that are necessary and reasonable for the proper and efficient performance of the grant and may only be used for the purposes stated in the grant agreement, work plan, and budget. Items must comply with all applicable state and federal regulations.

Allocable – Grant-funded costs must be chargeable or assignable to the grant in accordance with relative benefits received. The allocation methodology should be documented and should be consistent across funding sources for similar costs.

Reasonable – The amounts charged for any item must be reasonable. That means the nature and amount of the expense does not exceed what a prudent person under the same circumstances would expend; and that the items are generally recognized as ordinary and necessary for the performance of the grant.

Allowed Uses

Funding may be used for the following:

Prior Approval ONLY

With prior approval, funding may be used for the following:

Funding Use Prohibitions

Funding may NOT be used for the following:

Unallowable or prohibited uses of grant funds include, but are not limited to the following:

1. Political or religious purposes
2. Contributions or donations
3. Fundraising or legislative lobbying expenses
4. Payment of bad or non-program related debts, fines or penalties
5. Contribution to a contingency fund or provision for unforeseen events
6. Research
7. Incentives, including but not limited to t-shirts, bags, backpacks, hats, pencils, rulers, coloring books, stress balls, Band-Aid holders, mugs and cookware
8. Entertainment, food, alcoholic beverages and gratuities

9. Membership fees, interest or financial payments, or other fines or penalties
10. Purchase or improvement of land or purchase, improvement or construction of a building
11. Lease of facility space
12. Equipment in excess of 5 percent of the grant award
13. Expenditures that may create conflict of interest or the perception of impropriety
14. Audit expenses
15. Exhibit fees of any kind
16. Subscription costs
17. Association dues
18. Expenses for credentialing (e.g., CHES certification, CGC)
19. Physician salaries in excess of 10 percent of the grant award
20. Airfare
21. Out-of-state travel costs

Additional Funding Guidance

7. Other Submission Requirements

If the applicant encounters technical difficulties with EGrAMS, the applicant may contact: Rebecca Barnett at rebecca.barnett@illinois.gov or 217-494-2393 or IDPH Grants Support E-mail: DPH.GrantReview@illinois.gov

E. Application Review Information

Applications will be reviewed for content, work plan activities, budget proposals and required application supplemental material.

1. Criteria

This grant is competitive. All applications received will undergo a merit-based review by the IDPH grant committee consisting of two or more reviewers.

Applicants may reference and/or consider the following guidelines when completing the online application to demonstrate the ability to meet the program goals.

- Need (data, facts, and/or evidence supporting the program purpose)
- Capacity (ability to execute the grant project requirements)
- Quality (well-articulated and in alignment with program requirements)
- Clearly defined Scope of Work
- Specific, Measurable, Attainable, Realistic, and Timely (SMART) objectives
- Justifiable Budget

The IDPH grant committee will score applications using the following criteria with priority given to genetic counseling centers serving children and families in underserved areas.

Scoring guide:

1. Scope of Work Section (28 pts)
2. Work Plan Section (27 pts)
3. Health Equity Checklist (35 pts)
4. Budget Section (5 pts)
5. Miscellaneous: Component Worksheet and Personnel Duties Plan (5 pts)

Health-Equity Based Review

A significant portion of the application review will be based on how the application abides with the following areas:

- A. Addressing all components of the IDPH Health Equity Checklist
- B. Reference the Health Equity Definition
- C. Incorporation of key definitions from the IDPH Health Equity Checklist
- D. Reference to culturally and linguistically appropriate services
- E. Focus on the Social Determinants of Health

Health Equity Checklist

Applying this checklist to all IDPH grant applications will assist and guide applicants to review their existing practices and provide a structure for them to modify their practices in a way that promotes health equity. The Health Equity Checklist walks entities through considerations for assessing health equity by posing 7 questions and action steps to engage disparately impacted populations and to assess the short and long-term impacts of health inequities within these communities.

The Health Equity Checklist is worth **35 points** unless otherwise noted above.

Health Equity Definition

The proposed program should aim to reduce health disparities and health inequities where they exist. Differences in the incidence and prevalence of health conditions and health status between groups are commonly referred to as **health disparities**. **Health equity**, then, as understood in public health literature and practice, is when everyone has the opportunity to ‘attain their full health potential’ and no one is ‘disadvantaged from achieving this potential because of their social position or other socially determined circumstance.’¹ This definition is taken from IDPH’s Health Equity Checklist. Given that social disparities are rooted in institutional structuring, quality and controls of the underlying infrastructure and resource sectors that support the community members, it is imperative that participating entities engage in a structured inquiry that identifies unmet social determinants of health that communities of color are enmeshed within which have resulted in population-based disparities. Understanding health equity is essential for all participating agencies to engaged in intervention strategies, reflect on social determinants of health, and promote health equity in research, development, practice, and evaluation.

Incorporation of Key Definitions from IDPH Health Equity Checklist

The Health Equity Checklist from IDPH includes key terminology to incorporate. These terms will help guide the awardees in developing strategies that are shared across other public health organizations. These key definitions address health inequities in research and practice. Incorporating health equity terms into the lexicon will not only improve communications between communities but will also help engage diverse stakeholders. This is a step towards shifting the paradigm on how to approach and view

¹ Illinois Department of Public Health. (2020). Health Equity Checklist. Retrieved from https://docs.google.com/document/d/1GZTg7_RdnC8XRahQ1trcLTnsHD6k5OAX6Pbg1LUk7qI/edit?usp=sharing

health. Please address the Health Equity checklist as a referral to terms that are used most frequently to discuss health disparities, health equity and minority health. The detailed list of the key definitions can be found in the [Health Equity Checklist](#).

For more information on Health Equity terminology from the Association of State and Territorial Health Officials (ASTHO).²

Culturally and Linguistically Appropriate Services

Due to the diversity of Illinois residents, there must be an aim to implement the National Standards for Culturally and Linguistically Appropriate Services (National CLAS Standards) set by the Department of Health and Human Services.³ The National CLAS Standards is intended to improve health outcomes, advance healthcare quality and eliminate health inequities. In order to address current and past discrimination, maltreatment, and cultural barriers, the programs should strive to ensure that all services and resources are provided in a manner that is equitable to the underserved, underrepresented, socially disadvantaged due to race, ethnicity, sexual or gender identity, and/or disability. All activities and interventions should be designed to align with the health equity framework.

Focus on Social Determinants of Health

The program must address the Social Determinants of Health. Social Determinants of health are the conditions where people are born, live, learn, work, play and worship. The reality of these conditions and the distribution of life-enhancing resources have major impacts on the health, longevity, and the quality of life for Illinois residents. Efforts in addressing social determinants of health will provide a health equity framework for program development.⁴ In addition, there must be a focus on health through collaboration with Non-Health Sectors.

2. Review and Selection Process

This grant is competitive. A merit-based review will be scored by the Department grant committee consisting of two or more reviewers. Scoring is based on the evaluation criteria listed above.

Applicants must use the health equity checklist questions to identify both the short and long-term impacts to health equity, health inequalities and health inequities of the proposed intervention strategy.

Merit-Based Review Appeal Process

For competitive grants, only the evaluation process is subject to appeal. Evaluation scores or funding determinations/outcomes may not be contested and will not be considered by the Department's Appeals Review Officer.

To submit an appeal, the appealing party must:

- Submit the appeal in writing and in accordance with the grant application document through IDPH's Merit-Based Review Appeal Request Form available here:
<https://app.smartsheet.com/b/form/ed4d113385de41feb38964a8005ce72b>

² Association of State and Territorial Health Officials (ASTHO). (2018). Guidance for Integrating Health Equity Language Into Funding Announcements February 2018. Retrieved from <https://www.astho.org/Health-Equity/Guidance-for-Integrating-Health-Equity-Language-Into-Funding-Announcements/>

³ U.S. Department of Health and Human Services. (2018). The National CLAS Standards. Retrieved from <https://www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>

⁴ U.S. Department of Health and Human Services. (2020). Social Determinants of Health. Retrieved from <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>

- Appeals must be received within 14 calendar days after the date that the grant award notice was published.
- Appeals must include the following information:
 - The name and address of the appealing party
 - Identification of the grant
 - A statement of reasons for the appeal
 - If applicable, documents or exhibits to support statement of reason

The IDPH Appeals Review Officer (ARO) will consider the grant-related appeals and make a recommendation to the appropriate Deputy Director as expeditiously as possible after receiving all relevant, requested information.

- The ARO must review the submitted Appeal Request Form for completeness and acknowledge receipt of the appeal within 14 calendar days from the date the appeal was received.
- The ARO will utilize an Appeal Review Tool to consider the integrity of the competitive grant process and the impact of the recommendation.
- The appealing party must supply any additional information requested by the agency within the time period set in the request.
- The ARO shall respond to the appeal within 60 days or supply a written explanation to the appealing party as to why additional time is required.

Documentation of the appeal determination shall be sent to the appealing party and must include the following:

- Standard description of the appeal review process and criteria
- Review of the appeal
- Appeal determination
- Rationale for the determination
- In addition to providing the written determination, the grant-making office may do the following:
 - Document improvements to the evaluation process given the findings and re-review all submitted applications.
 - Document improvements to the evaluation process given the findings and implement improvements into the following year's grant evaluation process.
 - Provide written notice to the appealing party as to how the identified actions will be remedied.

Appeals resolutions may be deferred pending a judicial or administrative determination when actions concerning the appeal have commenced in a court of administrative body.

3. *Anticipated Announcement and State Award Dates, if applicable.*

May 2024

Anticipated Announcement Date (if known): [Click or tap to select a date.](#)

Anticipated Program Start Date: 7/1/2024

Anticipated Program End Date: 6/30/2027

F. Award Administration Information

1. State Award Notices

The grant application will be reviewed after grant application deadline. Grant award notification will be May 2024.

A Notice of State Award (NOSA) shall be issued to the finalists who have successfully completed all grant award requirements and have been selected to receive grant funding.

The NOSA will specify the funding terms and specific conditions resulting from applicable pre-award risk assessments.

The Illinois Department of Public Health (IDPH) is exempt from utilizing the standard NOSA issued on the GATA Grantee Portal. Successful applicants will receive an email notification from EGrAMS and must review the funding terms and specific conditions in the grant agreement and accept utilizing an electronically signature. Both the electronic signature in EGrAMS and a physical signature on the grant agreement must be completed by an authorized representative of the grantee organization and submitted to IDPH.

A Notice of Denial shall be sent to the applicants not receiving awards via EGrAMS.

2. Administrative and National Policy Requirements

None

All grantees receiving one or more federally-funded subawards from IDPH equal to or greater than \$30,000 must provide compensation information within EGrAMS prior to issuance of an award.

Grantees will not be able to sign grant agreements or amendment agreements until this requirement is complete. Annual completion of this requirement is necessary for multiyear grants.

3. Reporting

Grantees are required to submit quarterly performance and fiscal reporting in EGrAMS. Failure to submit required reports in a timely manner will result in delays with approval of reimbursements. **For the State Fiscal Years 2025, 2026, 2027**, grantees will ensure quarterly reports are submitted in EGrAMS by the following due dates.

- Quarter 1 Reports Due: October 31 of each year (2024 – 2026)
- Quarter 2 Reports Due: January 31 of each year (2025 – 2027)
- Quarter 3 Reports Due: April 30 of each year (2025 – 2027)
- Quarter 4 Reports Due: July 31 of each year (2025 – 2027)

G. State Awarding Agency Contact(s)

Grants Manager: Rebecca Barnett, Rebecca.Barnett@illinois.gov, 217-494-2393

Alternate Contact: Joan Ehrhardt, Joan.Ehrhardt@illinois.gov, 217-606-1292

H. Other Information, if applicable

Other Websites:

- Grant Accountability and Transparency Act (GATA) Grantee Portal, <http://www.grants.illinois.gov>
- Illinois Department of Public Health's EGrAMS, <https://idphgrants.com/>
- [EGrAMS Instructional Guide: Application Entry and Submission](#)

IDPH Help Desk Contacts:

- EGrAMS Help Desk: DPH.GrantReview@illinois.gov
- GATA Help Desk: DPH.Staffhelpdesk@illinois.gov

Mandatory Forms -- Required for All Agencies

1. Uniform State Grant Application – Available at idphgrants.com for eligible applicants
2. New to EGrAMS, click [HERE](#) to see how to Get Started
3. Project Narrative (included in EGrAMS application)
4. Budget (included in EGrAMS application)
5. Budget Narrative (included in EGrAMS application)

Other program-specific mandatory forms:

The following **required documents** are available under “Show Documents” within the application. Upload each completed document under the “Miscellaneous” tab.

- Component Worksheet
- Organization Current W-9
- Personnel and Duties Plan
- Subcontractor Disclosure Form, if applicable

Additional **reference materials** are available under “Show Documents” within the application.

- Application Instructional Guide
- Logic Model
- Technical Assistance Webinar, scheduled 4/5/24, the recording will be available on the NOFO, under “Show Documents” when this session is complete.
- Budget Glossary