



**FY 2021 National Hypertension Control Initiative Supplemental Funding for Health Centers (NHCI-HC)
Example Budget Narrative and Personnel Justification Table**

Example Budget Narrative

Upload a document that presents the proposed federal and non-federal costs by object class category for each of the three years. Include a federal cost total for each category. Federal costs are the costs that will be covered by your NHCI-HC award. Non-federal costs are covered by any other funding source. The federal cost grand total (Year 1 through 3) must equal the total federal request on the SF-424 Section A that you complete in HRSA Electronic Handbooks (EHBs). Provide a description that clearly explains and justifies each cost. Refer to the list of the unallowed costs in the submission guidance available on the [NHCI-HC technical assistance webpage](#).

	Year 1		Year 2		Year 3		CATEGORY TOTAL
Object Class Category	Federal	Non-Federal	Federal	Non-Federal	Federal	Non-Federal	Federal (Years 1 through 3)
PERSONNEL							
Physician	\$19,230	\$205,770	\$19,230	\$205,770	\$19,230	\$205,770	\$57,690
Clinical Pharmacist	\$10,000	\$90,000	\$10,000	\$90,000	\$10,000	\$90,000	\$30,000
Community Health Worker	\$6,250	\$18,750	\$5,000	\$20,000	\$2,500	\$22,500	\$13,750
Case Manager	\$7,500	\$67,500	\$7,500	\$67,500	\$7,500	\$67,500	\$22,500
Dietician	\$9,000	\$81,000	\$9,000	\$81,000	\$9,000	\$81,000	\$27,000
TOTAL PERSONNEL							\$150,940
FRINGE BENEFITS							
FICA @ X.XX%							
Health Insurance @ X%							



	Year 1		Year 2		Year 3		CATEGORY TOTAL
Object Class Category	Federal	Non-Federal	Federal	Non-Federal	Federal	Non-Federal	Federal (Years 1 through 3)
Dental @ X%							
Unemployment Insurance @ X%							
Workers Compensation @ X%							
Disability @ X%							
TOTAL FRINGE BENEFITS							
EQUIPMENT <i>Any equipment requests must align with the Equipment List Form(s). The total federal costs (year 1 + year 2 + year 3) may not exceed \$150,000.</i>							
EHR upgrade to add new clinical workflows and clinical decision supports, and facilitate information exchange in support of Hypertension diagnosis and control activities (1 @ \$10,000)	\$10,000	\$0	\$0	\$0	\$0	\$0	\$10,000
TOTAL EQUIPMENT							\$10,000
SUPPLIES							
Bluetooth-enabled Self-Measured Blood Pressure (SMBP) monitoring devices for 75% of patients with hypertension (300 units x \$63 per unit)	\$18,900	\$0	\$0	\$0	\$0	\$0	\$18,900



	Year 1		Year 2		Year 3		CATEGORY TOTAL
Object Class Category	Federal	Non-Federal	Federal	Non-Federal	Federal	Non-Federal	Federal (Years 1 through 3)
Outreach brochure production (\$X.XX per brochure)							
Patient education materials (\$X.XX per participant)							
TOTAL SUPPLIES							
CONTRACTUAL							
Health IT Specialist/Data Analyst	\$7,000	\$63,000	\$7,000	\$63,000	\$7,000	\$63,000	\$21,000
TOTAL CONTRACTUAL							\$21,000
OTHER							
Staff Recruitment – newspaper and Internet posting	\$250	\$500	\$0	\$0	\$0	\$0	\$250
TOTAL OTHER							\$250
INDIRECT COSTS <i>Include only if your organization has a negotiated indirect cost rate or has previously claimed a de minimus rate of 10% of modified total direct costs</i>							
X.XX% approved indirect rate							
TOTAL INDIRECT COSTS							
TOTAL FEDERAL BUDGET							



Example Personnel Justification Table

Include a Personnel Justification Table in your Budget Narrative attachment. Provide personnel costs for all direct hire personnel and contractors to be supported by NHCI-HC funding. Before calculating personnel costs, annual salaries must be adjusted to not exceed the [Executive Level II salary](#), currently set for \$197,300. This salary rate limitation also applies to sub-awards/sub-contracts under a HRSA grant. If you will adjust any personnel costs between year 1 and year 2, or year 2 and year 3, provide separate tables for each year; otherwise, provide only a table for year 1.

**Year 1 Proposed Personnel
January 1, 2021 to December 31, 2021**

Name	Position Title	Base Salary	Adjusted Annual Salary	FTE to Support NHCI-HC Project	Federal Amount Requested
J. Smith	Physician	\$225,000	\$197,300	0.10	\$19,730
R. Doe	Clinical Pharmacist	\$100,000	No adjustment	0.10	\$10,000
P. Jones	Community Health Worker	\$25,000	No adjustment	0.25	\$6,250
A. Martin	Case Manager	\$75,000	No adjustment	0.10	\$7,500
L. Taylor	Dietician	\$90,000	No adjustment	0.10	\$9,000
T. Schmidt	Health IT Specialist/IT Data Analyst	\$70,000	No adjustment	0.10	\$7,000
TOTAL				0.75 FTE	\$59,480



**Year 2 Proposed Personnel (only required if differs from year 1)
January 1, 2022 to December 31, 2022**

Name	Position Title	Base Salary	Adjusted Annual Salary	FTE to Support NHCI-HC Project	Federal Amount Requested
J. Smith	Physician	\$225,000	\$197,300	0.10	\$19,730
R. Doe	Clinical Pharmacist	\$100,000	No adjustment	0.10	\$10,000
P. Jones	Community Health Worker	\$25,000	No adjustment	0.20	\$5,000
A. Martin	Case Manager	\$75,000	No adjustment	0.10	\$7,500
L. Taylor	Dietician	\$90,000	No adjustment	0.10	\$9,000
T. Schmidt	Health IT Specialist/IT Data Analyst	\$70,000	No adjustment	0.10	\$7,000
			TOTAL	0.70 FTE	\$58,230



**Year 3 Proposed Personnel (only required if differs from year 2)
January 1, 2023 to December 31, 2023**

Name	Position Title	Base Salary	Adjusted Annual Salary	FTE to Support NHCI-HC Project	Federal Amount Requested
J. Smith	Physician	\$225,000	\$197,300	0.10	\$19,730
R. Doe	Clinical Pharmacist	\$100,000	No adjustment	0.10	\$10,000
P. Jones	Community Health Worker	\$25,000	No adjustment	0.10	\$2,500
A. Martin	Case Manager	\$75,000	No adjustment	0.10	\$7,500
L. Taylor	Dietician	\$90,000	No adjustment	0.10	\$9,000
T. Schmidt	Health IT Specialist/IT Data Analyst	\$70,000	No adjustment	0.10	\$7,000
			TOTAL	0.60 FTE	\$55,730