DATA 2000 Waiver Training Payment Program

Overview

This page is for Federally Qualified Health Center (FQHC) and Rural Health Clinic (RHC) organizations who are applying for payment under the Drug Addiction Treatment Act of 2000 (DATA 2000) Waiver Training Payment Program.

This program aims to improve health care, including for rural populations, by promoting greater access to substance use disorder treatment through payments to FQHCs and RHCs for each eligible provider possessing a DATA 2000 waiver on or after January 1, 2019. This program is a collaboration of HRSA's Office of Planning, Analysis, and Evaluation; Federal Office of Rural Health Policy; Bureau of Primary Health Care; and the Substance Abuse and Mental Health Services Administration.

Eligible providers include only those who:

- Are a physician, physician assistant, nurse practitioner, certified nurse midwife, clinical nurse specialist, or certified registered nurse, anesthetist;
- First obtained a DATA 2000 waiver on or after January 1, 2019; and
- Are employed by or working under contract for the applying FQHC or RHC.

An eligible provider may be claimed only once by an eligible FQHC or RHC.

Applications must be submitted through HRSA's Electronic Handbooks, EHBs.* After submitting the application, HRSA will review the applications and disburse payments to eligible organizations.

This wiki page will walk you through the steps of submitting the application in the EHBs.

> ⚠ ***Note**
>
> FQHCs and RHCs will need a System for Award Management (SAM) account in order to to apply. For information on how to create a SAM account, visit SAM.gov. And for help on setting up a SAM account, you can watch this helpful video.
>
> FQHCs and RHCs will also need a HRSA Electronic Handbooks (EHBs) account in order to apply. To create an EHBs account, visit the EHBs Registration page. And for help on setting up an EHBs account, you can watch the helpful video on the Getting Started in the EHBs help page.

On this page

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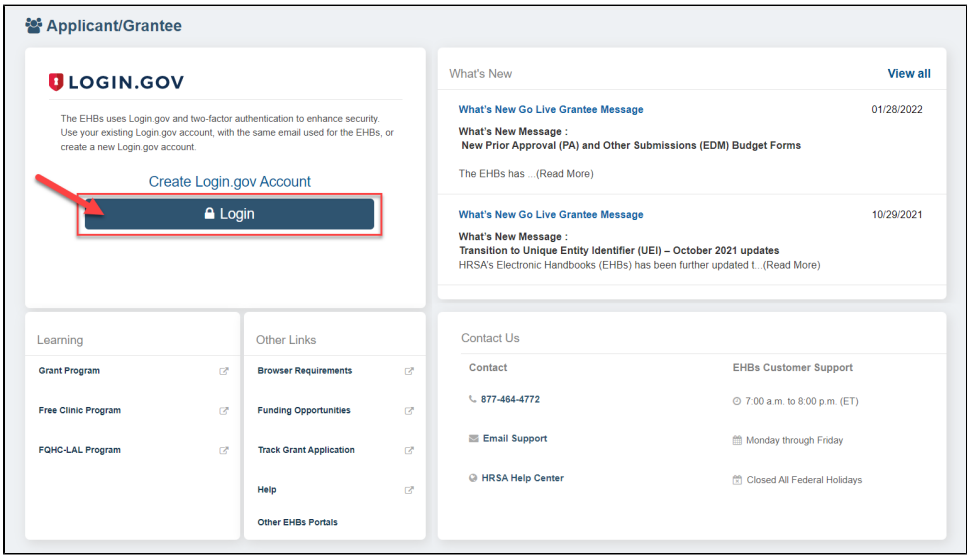
- Create New Application

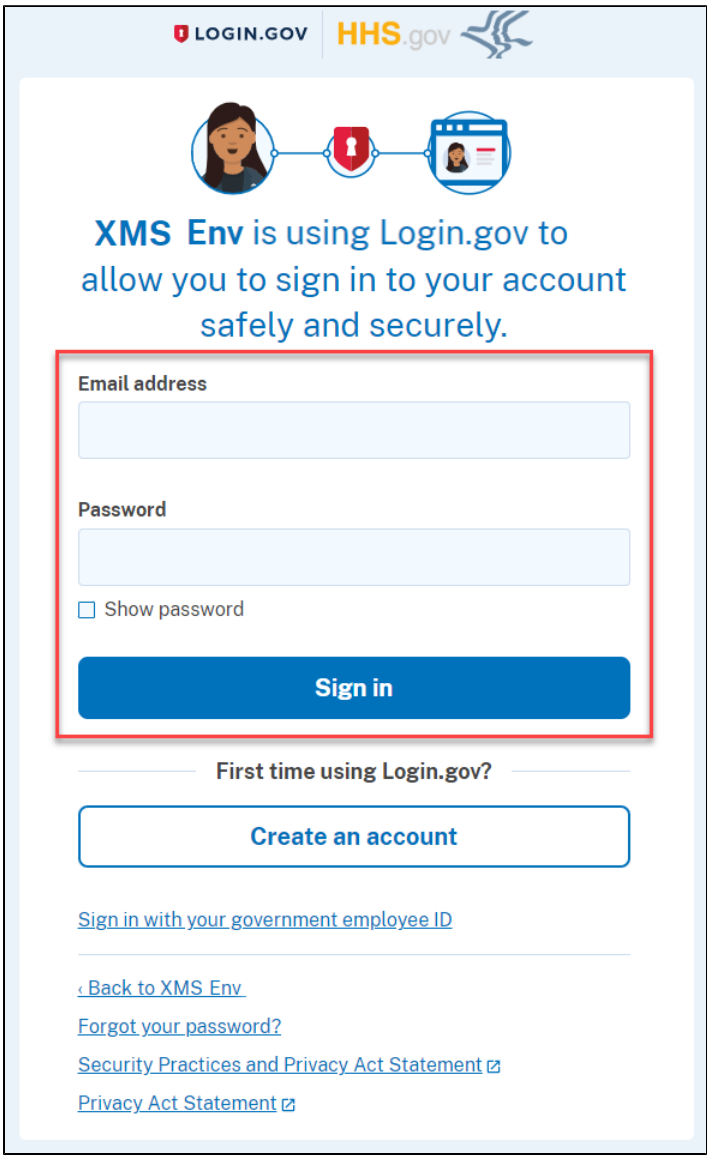
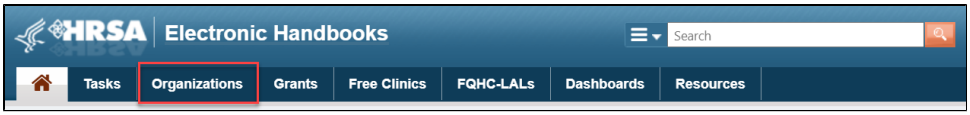
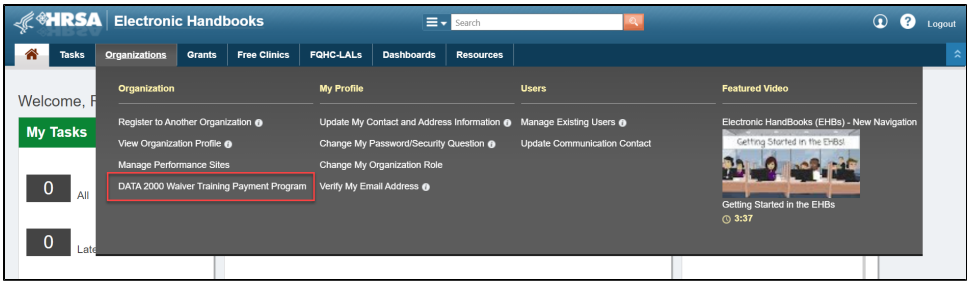
Additional Resources

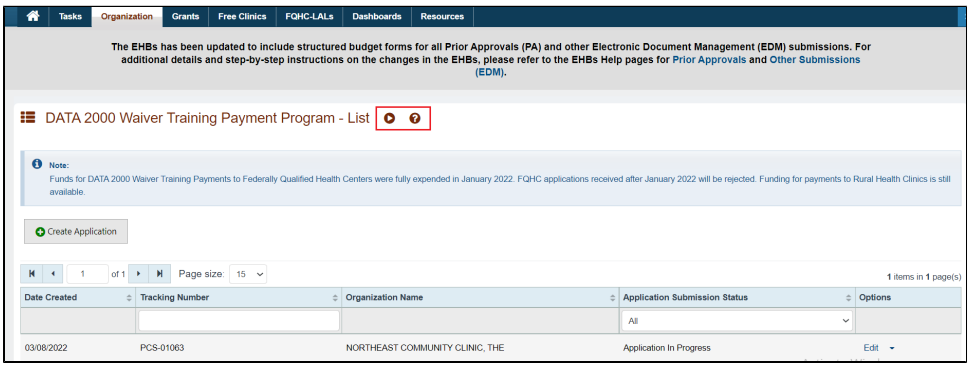
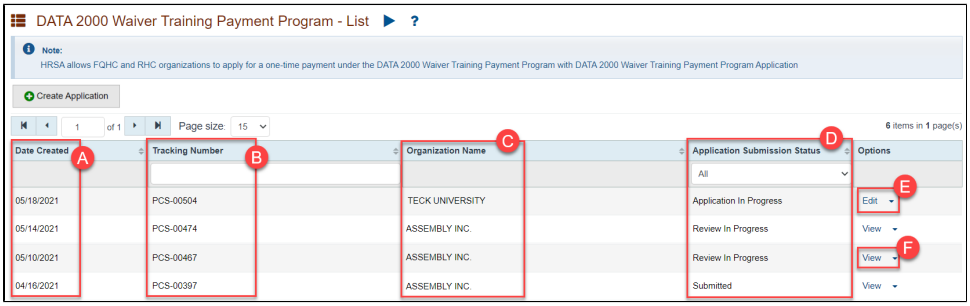
FAQs	DATA 2000 Waiver Training Payment Program FAQs
DATA2000WaiverTrainingPaymentProgramVideo	
SettingupaSAMaccountVideo	
GettingStartedintheEHBsVideo	

Navigating to the DATA 2000 Waiver Training Payment Program Page

1 Log in to the EHBs through the Applicant/Grantee portal: https://grants.hrsa.gov/2010/webEPSInternal/EHBHome.aspx

2	Then, click **Login** to access your account. **Note:** If you do not have a Login.gov account, click Create Login.gov Account and set up your Login.gov account. For more information about loggin EHBs Login Process help pages. 

3	Enter your Login.gov email address, password, and click **Sign In**. Then follow the prompts to complete two-factor authentication and access the EHI 
4	Hover over the **Organizations** tab in the top navigation bar in the EHBs. 
5	Click on **DATA 2000 Waiver Training Payment Program** from the drop-down list. 

6	You will land on the DATA 2000 Waiver Training Payment Program – List page where you can see all your organization's applications for this progra Use the **buttons** next to the page title to view help materials for the program, such as the help video, wiki help page, and FAQ. **Helpful tip!** You can see all your organization's applications for this program, even if someone else in the organization created the application. 
7	On the list page you can view information about each application. A. The left side of the row lists the **Date Created** for the application. B. Each application also contains a **Tracking Number**. Use the text box to search for a specific tracking number. C. You can view the **Organization Name** tied to each application. D. The **Application Submission Status** allows you to easily see where each application is in the process: Application in Progress, Submitted by status using the drop-down list. E. Click on **Edit** in the Options column to open and make edits to the application before it is submitted. F. Click on **View** in the Options column to open and view a read-only version of the application. 

Create New Application

8	To create a new application, click **Create Application.**	
9	If you are only associated with one organization in the EHBs, you will land directly on the application.	

10 If you are associated with multiple organizations, you will land on the Choose Organization page where you can select the organization for which you organization and you will land on the application page.

11 The **DATA 2000 Waiver Training Payment Program – Application for Payment** page contains the full application to complete for this program.

The application is divided into four parts:

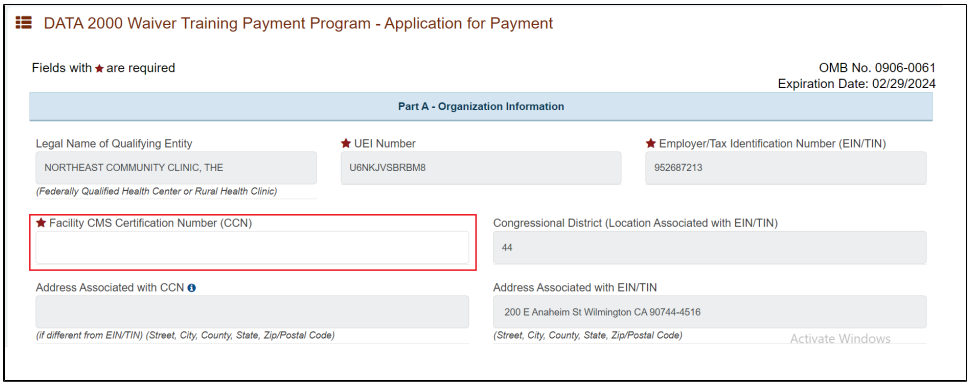
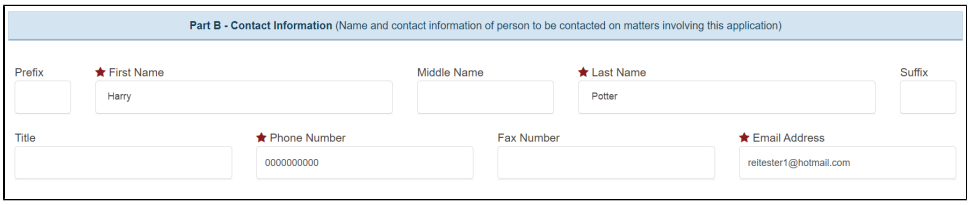
A. Part A – Organization Information

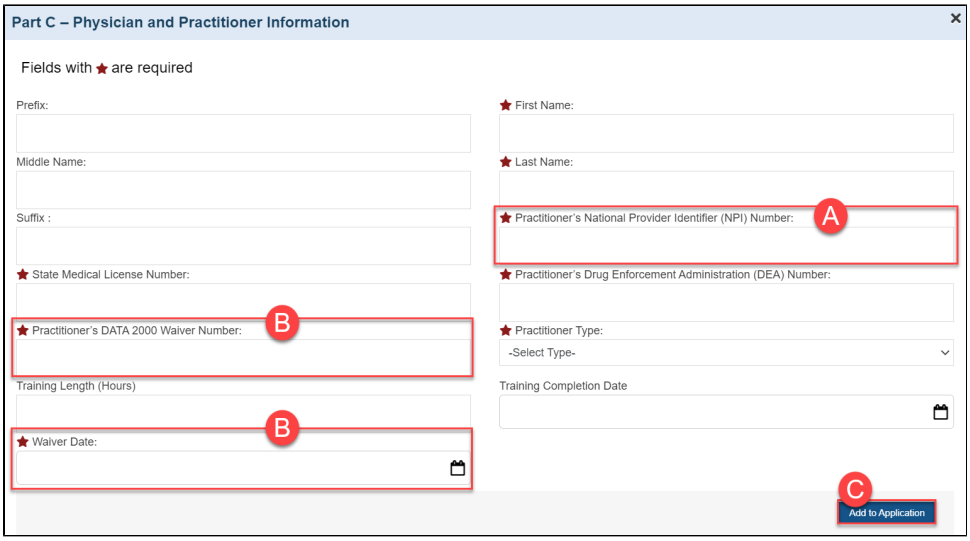
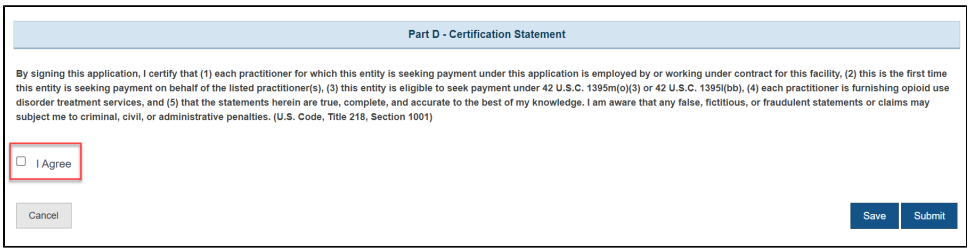
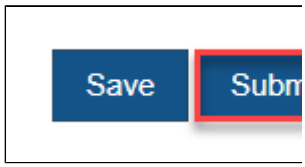
B. Part B – Contact Information

C. Part C – Physician and Practitioner Information

D. Part D – Certification Statement

E. Be sure to **click Save** as you work through the application so you do not lose your work.

12	The **Part A – Organization Information** section prepopulates most of the fields based on the information entered when the organization was registe needed to the organization, you will need to make the changes in SAM.gov. Be sure to enter the **Facility CMS Certification Number (CCN),** as this is new information needed for this application. **Helpful tip!** The CCN was previously known as the Medicare/Medicaid Provider Number, OSCAR Provider Number, Medicare Identification Numbe on the CCN, please visit https://www.cms.gov/regulations-and-guidance/guidance/transmittals/downloads/r29soma.pdf. 
13	The **Part B – Contact Information** section prepopulates based on the name, phone number, and email from the EHBs for the user that created the changes to any of the fields if the contact information needs to be updated. 
14	Use the **Part C – Physician and Practitioner Information** section to enter the information for each Physician or Practitioner from your organization **Physician/Practitioner button** to start or add additional Physicians or Practitioners. If more than one Physician/Practitioner from your organization completed the training, complete a separate form for each person by clicking

15	Complete all of the required fields on the Physician/Practitioner form. A. The Practitioner's National Provider Identifier (NPI) Number is verified with the 'NPPES NPI Registry' registry to ensure it matches. **Note:** Only those Physicians/Practitioners who are registered with NPI are eligible for the certification and waiver. B. The Practitioner's DATA 2000 Waiver Number and Waiver Date are verified by the reviewer after the application is submitted. **Note:** The waiver date must be after January 1, 2019 to be eligible. C. Click the **Add to Application** button after entering all the information for the Physician/Practitioner. 
16	Before submitting the application, be sure to read the information in the **Part D – Certification Statement** section and click the checkbox next to "I A 
17	Once your application is complete, click **Submit** at the bottom of the page.