

Licensed Midwifery (LM) Technical Assistance Guide

Song-Brown Program
Department of Health Care Access and Information (HCAI)
September 2025

About Song-Brown

- Song-Brown provides funding to education programs including:
 - Family Nurse Practitioner (FNP) and Physician Assistant (PA) training programs
 - Registered Nurse education programs
 - Primary Care residency programs (Family Medicine, Internal Medicine, Obstetrics/Gynecology, Pediatrics)
 - Licensed Midwifery (LM) and Certified Nursing Midwifery (CNM) training programs
- Song-Brown statutory priorities:
 - Graduating individuals who practice in medically underserved areas
 - Enrolling members of underrepresented groups in medicine to the program
 - Locating the program's main training site in a medically underserved area
 - Operating a main training site at which most of the patients are Medi-Cal recipients

Application Release Dates

Registration: **Open now**

Application release: **September 10, 2025**

Early submission review: **October 9, 2025**

Application deadline: **October 23, 2025**

Application opens and closes at **3:00 p.m.**

Before you Apply

- If your program requires approval to contract from a coordinating authority, please inform the authority of the terms and conditions contained in the Grant Agreement
- Applicants must agree to the terms and conditions before receiving funds
- HCAI will not make changes to the terms and conditions specified in the Grant Agreement
- Funds shall not supplant existing federal, state, or local funds

Information to Gather

- Authorized Grant Agreement and Payee Data record (STD 204) signatories
- Organization name and/or Doing Business As (DBA) name as listed in the IRS (W9) forms for your program
- Anticipated training site name and address for all sites
- Program expenditures
- Required documents
 - MEAC accreditation or MBC Approval Timeline
 - Planned schedule for securing accreditation or approval
 - Sustainability Letter
 - A letter from your organization that endorses your program and speaks to the sustainability of your program beyond Song-Brown funds awarded

Helpful Resources

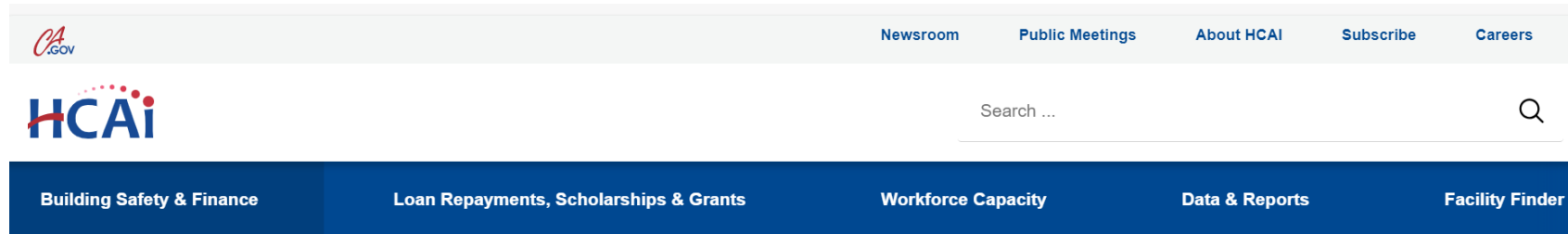
- [HCAI eApplication](#) (eApp)
- The LM Grant Guide, LM Scoring and Evaluation Process: [Licensed Midwifery \(LM\) – HCAI](#)
- Song-Brown Glossary: [Glossary \(ca.gov\)](#)

Electronic Application (eApp) Registration

System Requirements

- For the best experience, we recommend using Google Chrome or Microsoft Edge
- Internet Explorer is not supported

Creating an Account



Apply to HCAI Funding

Students, professionals, and organizations may be eligible for HCAI's scholarships, loan repayment programs, and grants. Check your eligibility, view our open applications, or sign in to start an application. Need help? [Contact Us](#)

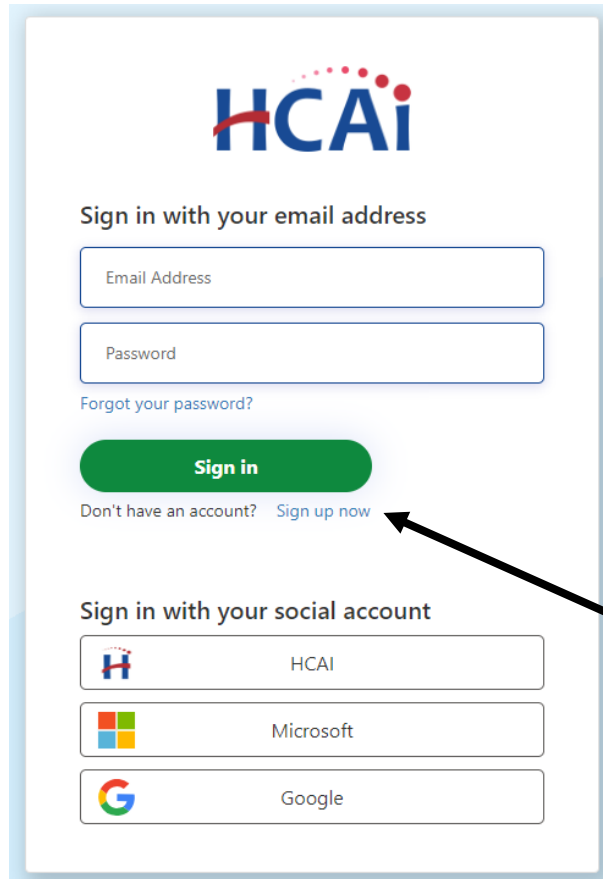
Check your eligibility

Sign in or Register

Our sign in experience has been changed to be more secure. If you are a returning user you may need to create a new account using the same email address as your previous account. [Learn more](#)

If you are a new applicant, register now – don't wait

Creating an Account, Continued



HCAi

Sign in with your email address

Email Address


Password


[Forgot your password?](#)


Sign in

Don't have an account? [Sign up now](#)

Sign in with your social account

 HCAi

 Microsoft

 Google


Our funding portal has a 2-step authentication process for new applicants, when setting up their account

Funding portal link:
[Apply to HCAI Funding](#)

Make sure to select the “Sign up now” link and enter the information as requested to receive a verification code via email

Setting up your Profile

Profile



Profile

My Security Settings

Change Password

Change Email

Your email has been confirmed successfully.


Select your user type (Choose all that are applicable):

☐ Healthcare Professional

☐ Student

☐ Organization

Select an organization from the search list below. If your organization is not listed, click on the **Request New Organization** button to submit a request for your organization to be added to the list.



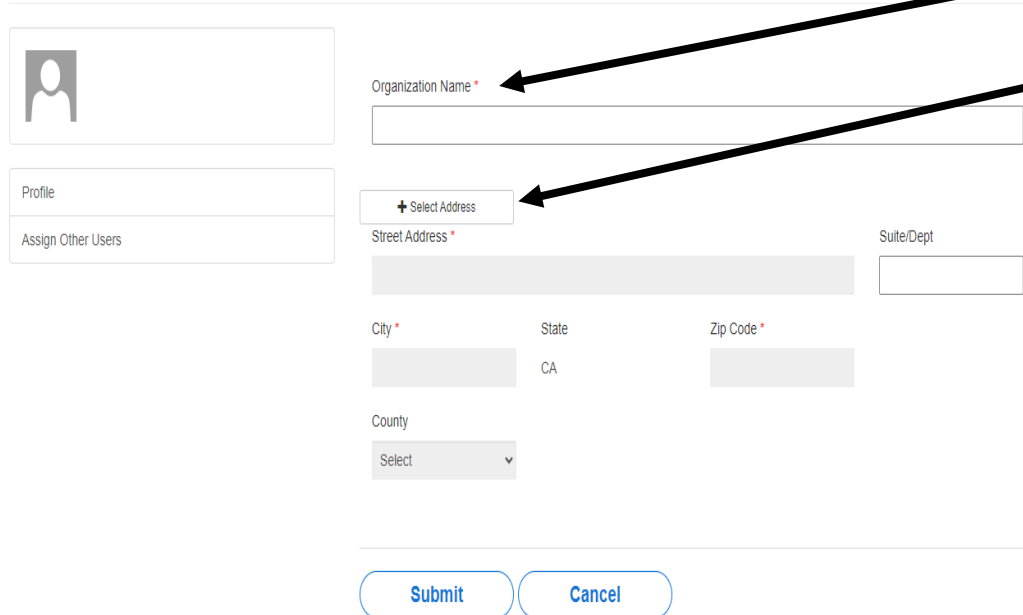
Request New Organization

1. Check the “**Organization**” box to gain access to Song-Brown LM applications (do not check the “HealthCare Professional” box)
2. Click the magnifying glass to search for a pre-existing organization
3. Click “Request New Organization” to submit a new organization for approval
4. Once you have selected or submitted an organization, it will populate the search field

Note: Most organizations are in the system. Use the search function before submitting a new organization name for approval

Adding a New Organization

New Organization



The screenshot shows a web form titled "New Organization". On the left, there is a sidebar with a profile icon and two buttons: "Profile" and "Assign Other Users". The main form area contains the following fields and controls:

- Organization Name ***: A text input field with an arrow pointing to it from step 1 of the instructions.
- + Select Address**: A button with an arrow pointing to it from step 2 of the instructions.
- Street Address ***: A text input field.
- Suite/Dept**: A text input field.
- City ***: A text input field.
- State**: A dropdown menu with "CA" selected.
- Zip Code ***: A text input field.
- County**: A dropdown menu with "Select" as the current selection.
- Submit** and **Cancel**: Two buttons at the bottom of the form.

1. Enter the “Organization Name”
2. Click the “+Select Address” button
3. A new window will open and allow you to enter and search for an address
4. Click the confirmed address and it will auto-populate the address fields on the page

Note: Song-Brown staff will review the new organization request within 5 business days. ***Ensure that the organization name is accurate.*** During this time, you may still begin an application

Completing your Profile

Prefix
Select ▼

First Name *
ZZZFresh

Middle Initial

Last Name *
PrinceZZZ

Suffix
Select ▼

Title

Degree *
N/A ▼

Phone 1 *
(555) 555-5555

Phone 2
Provide a telephone number

Email *
kaztinynaval08@gmail.com

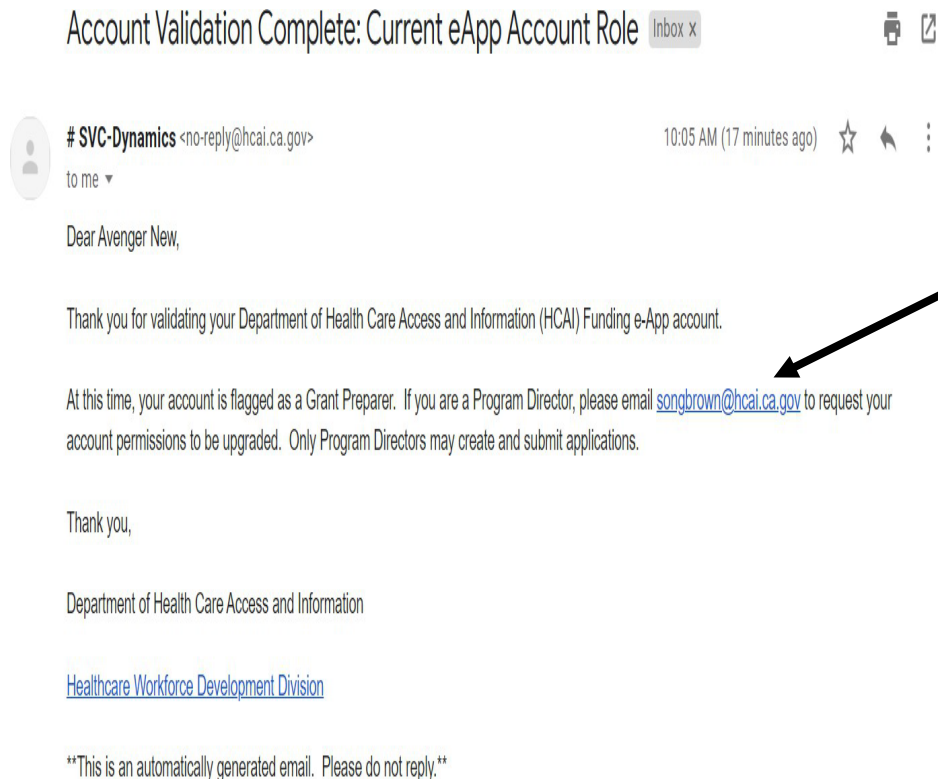
☐ Receive email announcements for new funding opportunities

Submit

1. Enter all required fields. When finished click the “Submit” button
2. If there are no errors on the page, you will receive a message stating your profile has been updated successfully

Note: *Incomplete information may delay your registration*

Account Roles



1. All newly created accounts are assigned the “Grant Preparer” role
2. If you are the LM Program Director, email SongBrown@hcai.ca.gov to request the “Program Director” role
3. Only accounts with the "Program Director" role may initiate and submit applications
4. Once Song-Brown staff approves your request you will receive a follow-up email confirming the approval

Note: Program Directors may initiate, view, edit, submit applications, pay certifications and Final Reports

Assigning Other Users

Assign Other Users

Full Name	Organization	Applicant Role	E-mail	Phone	Degree
There are no records to display.					

1. Program Directors have an additional tab on their “Profile” page called “Assign Other Users”
2. Navigating to this page from your “Profile” page allows you to add users who can view and edit applications only
3. Click the “Add User” button to give registered Grant Preparers access to your application

Note: Only Program Directors can submit a completed application

Apply Here



Apply Here

Grant Applications

Awards

Payments & Deliverables

Messages

Open grant applications matching your Profile are displayed below. To find additional applications, please change the applicable user types in your Profile. To find applications already started or submitted, go to the Applications In Progress/Submitted tab.

Program	Release Date	Due Date	Who Can Apply
Health Careers Exploration Program 2025	08/15/2025 8:00 AM	10/17/2025 5:00 PM	Organization
Song-Brown Certified Nurse Midwifery 2025	08/12/2025 3:00 PM	09/24/2025 3:00 PM	Organization
Song-Brown Family Nurse Practitioner/Physician Assistants 2025	08/12/2025 3:00 PM	09/24/2025 3:00 PM	Organization

1. Navigate to the “Apply Here” page on the main menu
2. Select the “Song-Brown Licensed Midwifery 2025” link and click the apply button when you are ready to begin

Helpful Tips

Useful Information

Navigating the application

Use the “Previous” and “Save & Next” buttons found at the bottom left



Saving your application

Each time you click “Save & Next” in the application your progress is saved. Navigate to the “Grant Applications” page to resume your application



Useful Information, Continued

Asterisks


The red asterisks indicate which fields require a response before proceeding to the next page

Training Program Title *

Tooltips

Throughout the application you may see a blue circle with a question mark at the end of a question, title, or sentence. Click on these icons for additional information

The last name of the primary contact at the contract organization.

Contract Administrator Last Name * 

LM New Application Walk-through

Program Information

Program Information *

Organization- If your organization is blank, e-mail Songbrown@hcai.ca.gov to ensure your organization is approved

Program Director

Program Director Email

Are you Midwifery Education Accreditation Council (MEAC) Accredited?

☐ No ☒ Yes

Are you seeking Medical Board of California (MBC) approval?

☐ No ☒ Yes

Please enter information for the new program.

Training Program Title *

Click on the Select Address button to populate the Address Fields.

+ Select Address

Street Address

Suite/Apt/Dept

City

State

Zipcode

County

1. Your program information will pre-populate with information you entered in your “Profile” page
2. If you are currently Midwifery Education Accreditation Council (MEAC) accredited, select “Yes”
 - If you selected “Yes” to the MEAC question, you must be seeking Medical Board of California approval
3. If you are seeking MEAC accreditation, you will select “No” and continue with the application
4. Enter your training program title and address

Contract Administration

Contract Administration

Contract Organization Name * ⓘ Doing Business As (DBA) ⓘ

Please select the type of entity *

☐ Governmental Entity ⓘ ☐ Non-governmental Entity ⓘ

Prefix

Contract Administrator First Name * ⓘ Contract Administrator Last Name * ⓘ

Title ⓘ

Phone 1 * Phone 2

Contract Administrator Email *

Grant Agreement Signatory ⓘ

First Name * ⓘ Last Name * ⓘ

Phone * Email *

1. “Contract Organization Name” and “Doing Business As (DBA)” must match what you report to the Internal Revenue Service (IRS)
2. “Please select the type of entity” identify the contractor organization as a Governmental or Non-governmental Entity
3. “Contract Administrator” is the main administrator for the grant
4. “Grant Agreement Signatory” must be an individual with authority to enter into a grant agreement

Note: Do not enter a DBA if your IRS W9 does not have a DBA listed

Contract Administration: STD 204 Signatory

Is the Payee Data Record (STD 204) Signatory the same as the Grant Agreement Signatory? ⓘ

☒ No ☐ Yes

Payee Data Record (STD 204) Signatory ⓘ

First Name *

Last Name *

Phone *

Provide a telephone number

Email *

The legal address for your organization must match the address on file with the IRS.

Is the legal address for your organization a PO box? *

☒ No ☐ Yes

Click on the **Select Address** button to populate the Address Fields.

+ Select Address

Street Address

2020 W El Camino Ave

Suite/Apt/Dept

City *

Sacramento

State *

CA

Zip Code *

95833

County

Sacramento

Should payments be sent to a different address than what is on file with the IRS?

☒ No ☐ Yes

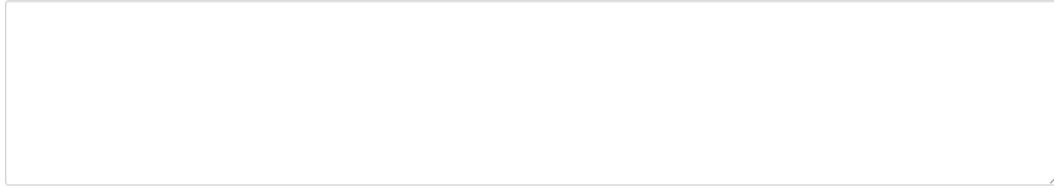
1. If your STD 204 signatory is different from your Grant agreement signatory, select "NO"
2. "STD 204 Signatory" name must be an authorized signatory
3. PO box option available for the 204 category
4. Enter the address that is on your W9 IRS forms
5. If payments should be sent to a different address, select "Yes"

Note: Verify this information with your finance or contracts office to ensure this information is correct. Providing incorrect information will delay your grant agreement should you be awarded

Program Description

Program Description

Provide an executive summary description for the new training program. Include how your program will meet the priorities of the Song-Brown statute. Please reference the Licensed Midwifery grant guide on the Song-Brown website for more information. Maximum of 2500 characters. *

[Previous](#)[Save & Next](#)

1. Provide an executive summary description for the new training program, including how your program will meet Song-Brown statutory priorities
2. You have a maximum limit of 2,500 characters
3. After completing this page, click “Save & Next”

Note: *If you exceed the character limit, you will receive a pop-up message. If you copy and paste text from another document, text will cut off at 2,500 characters. Double-check the information you enter and make sure everything is captured*

Strategies Question 1

Strategies 1 of 5

Select the strategies you will use to recruit licensed midwifery students. Select all that apply.*

☒ Establishes partnerships with community-based organizations serving educational institutions for purposes of recruitment and increasing access and exposure to prospective licensed midwifery students

Explain how you plan to achieve this strategy. Describe your documentation supporting this strategy. Maximum of 2500 characters.

☒ Utilizes an established pathway or pipeline program

Explain how you plan to achieve this strategy. Describe your documentation supporting this strategy. Maximum of 2500 characters.

☒ Hosts events tailored, in part or in whole, specifically for prospective licensed midwifery students

Explain how you plan to achieve this strategy. Describe your documentation supporting this strategy. Maximum of 2500 characters.

☒ Conducts individualized outreach to prospective licensed midwifery students before, during, and after the application process

Explain how you plan to achieve this strategy. Describe your documentation supporting this strategy. Maximum of 2500 characters.

☒ Attendance at academic, health, and career fairs in Areas of Unmet Need (AUN)

Explain how you plan to achieve this strategy. Describe your documentation supporting this strategy. Maximum of 2500 characters.

☒ Other

Since you selected Other, describe any additional recruitment strategies not listed above. Maximum of 2500 characters.

1. Provide responses for each strategy question, 1-5
2. Multiple responses can be selected per strategy question
3. Each selected strategy question will prompt a narrative for further explanation
4. After completing each page, click “Save and Next”

Strategies Questions 2 and 3

Strategies 2 of 5

Select the strategies you will use to admit licensed midwifery students. Select all that apply.*

- ☐ Incorporates holistic review into the admissions process, to include individual applicant experiences and attributes indicative of licensed midwifery students
- ☐ Accounts for applicant socioeconomic status in review process
- ☐ Ensures a diverse selection committee to mitigate implicit bias in the selection process
- ☐ Other
- ☐ None of the above

Strategies 3 of 5

Select the strategies you will use to support licensed midwifery students. Select all that apply.*

- ☐ Create and maintain a mentorship program available to all licensed midwifery students that strives to pair students with staff/faculty members with shared lived experience
- ☐ Institution has a documented zero tolerance policy for discrimination and related discrimination reporting systems
- ☐ Implicit bias/anti-racism training is required for all faculty, program staff, applicant reviewers, and decision makers
- ☐ Other
- ☐ None of the above

Strategies Questions 4 and 5

Strategies 4 of 5

Select the program strategies you will use to encourage your students to practice in Areas of Unmet Need (AUNs). Select all that apply.*

- ☒ Use targeted recruitment strategies to prioritize students coming from AUNs
- ☐ Provide employment assistance opportunities to encourage graduates to commit to patient-focused/clinical-focused practice in AUNs
- ☐ Provide employment assistance leading to graduate employment in AUNs
- ☐ Include a required, patient-focused/clinic-focused curriculum intended to build health equity knowledge and competencies
- ☐ Other
- ☐ None of the above


Strategies 5 of 5

Select the strategies you will incorporate to implement culturally responsive care training into the program's curriculum. Select all that apply. *

- ☒ Hire bilingual staff with language fluency
- ☐ Hire program leaders representative of the students
- ☐ Provide students training in cultural competency
- ☐ Teach professionalism that incorporates multi-cultural social etiquette and social norms representative of licensed midwifery students
- ☐ Have students participate in community outreach activities in AUNs (e.g., going to high schools in AUNs)
- ☐ Other
- ☐ None of the above

Anticipated Training Sites: Adding and Reviewing Sites

Training Sites

What is your program's current percentage of total clinical hours spent in Areas of Unmet Need (AUNs)? * 

Do you have any training sites to report? *

☐ No ☒ Yes

To add a new California-based training site, click the Add a Site button and enter the requested information. Do not include any sites located outside of the state of California.

To edit information, click on the drop down button next to a the training site line item and select Edit or Delete.

Note to all programs: Only one physical address is allowed per site for the purpose of this application, regardless of differing suite/room/department numbers used.

For example, if you have 123 Blue Street, Purple Dept. Ste 160 and 123 Blue Street, Green Dept. Ste 178, you may only list one of those on the application.

Total Number of Training Sites

1

Training Sites

										Add Site
Training Site Name	NPI	Private Practitioner	Private Practitioner First Name	Private Practitioner Last Name	Street Address	Suite/Dept	City	State	Zip Code	County
⬆										

1. If you have training sites, click “Yes” to enter your training sites

2. To add a training site(s), click the “Add a Site” button

3. A pop-up window will display

4. To review, edit, or delete training sites, select the dropdown list for that line using the arrow

Anticipated Training Sites: Training Site Information

Create

x

Training Site Name *

Is the training site a private practitioner's office? *

☐ No ☐ Yes

+ Select Address

Street Address

Suite/Dept ⓘ

City

State

Zip Code

County

Site NPI Number (Check NPI Registry) ⓘ

1. Enter the training program name and address
2. Click on the link to find the NPI number of the training site

Program Expenditures and Funding

Program Expenditures and Funding

Requested funding must be used only for the following expenditures: personnel, facility expenses, major equipment over \$500, and consultant costs. Receipts will be required as proof of these expenditures when you submit your program accreditation documents.

How much funding are you requesting?*



[Previous](#)

[Save & Next](#)

1. Provide how much funding you are requesting based on your expected expenditures and what you are eligible to apply for
 - Maximum available award is \$500,000
2. Click "Save and Next" when done

Required Documents

Required Documents

MEAC Accreditation or MBC Approval Timeline

Please upload your timeline (planned schedule for securing Midwifery Education Accreditation Council accreditation or Medical Board of California approval).

Timeline Upload ✓ 1 file uploaded, 1 file required.*

Filename must start with LtrTime_ to be accepted. Example: LtrTime_MyDocument

Sustainability Letter

Attach a letter from your organization that endorses your program and speaks to the sustainability of your program beyond Song-Brown Awards awarded.

Sustainability Letter Upload 0 files uploaded, 1 file required.*

Filename must start with LtrSus_ to be accepted. Example : LtrSus_MyDocument

Name ↑	Modified
LtrTime_.docx (18 KB)	less than a minute ago
	<input type="button" value="v"/>

1. The red button on this page indicates required documents
2. Click on the “Timeline Upload” to upload your approval or accreditation timeline
 - The document must begin with “LtrTime_ ” for it to be accepted
3. Click on “Sustainability Letter Upload” to upload your letter of program sustainability endorsement letter from your institution
 - The document must begin with “LtrSus_ ” for it to be accepted
4. Once the document is successfully uploaded, the box will turn green signifying that you may continue
5. You can delete files using the drop down

Assurances

Assurances

I certify that the information contained herein is true and the most current information available at time of application submission.

☒ I Certify

You are about to submit your application. You may not edit or delete your application from the system after submission.

Previous

Submit

1. Read the statement
2. Agree to the statement by checking the "I Certify" box
3. Click the "Submit" button

Note: Once you submit your applications you cannot make further edits

Note: Only Program Directors may submit an application. Grant preparers will not see the "Submit" button

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#HealthFacilities #HealthInformation

Sign up for our Newsletter!



<https://hcai.ca.gov/mailling-list/>

Contact Us!



Phone (916) 326-3700



Email SongBrown@hcai.ca.gov

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#HealthFacilities #HealthInformation