HCAi
Department of Health Care Access and Information

Family Nurse Practitioner (FNP) & Physician Assistant (PA) Technical Assistance Guide

Song-Brown Program

Department of Health Care Access and Information

August 2026

Agenda

- **Housekeeping and Introduction**
  Christopher Roina, Communications Unit Supervisor, Operations Unit
- **Welcome and Overview**
  Christopher Roina, Communications Unit Supervisor, Operations Unit
- **Song-Brown Family Nurse Practitioner and Physician Assistant (FNP/PA)**
  Justine Pascual, Program Officer
- **Questions and Answers**

  Christopher Roina, Communications Unit Supervisor, Operations Unit
- **Closing Remarks:**
  Christopher Roina, Communications Unit Supervisor, Operations Unit

Housekeeping and Introduction

Before we begin, just a few quick notes to help you get the most out of today's session:

1. **Platform:** This session is hosted on Zoom Webinar. Your controls are in the toolbar at the bottom of your screen.
2. **Questions:** We're using the Q&A feature for all comments and questions. Please type your input at any time. Use the "thumbs up" icon to upvote a question already asked that you would like answered as well.
3. **Recording:** Today's session is being recorded. The recording will be available on our website within 7-10 business days.

HCAI's Vision and Mission

Vision

A healthier California where all receive equitable, affordable, and quality health care.

Mission

HCAI expands equitable access to quality, affordable health care for all Californians by supporting high value delivery systems, resilient health facilities and workforces, and actionable health information and strategies.

About Song-Brown

- Song-Brown provides funding to education programs including:
  - Primary Care (Family Medicine, Internal Medicine, Obstetrics/Gynecology, Pediatrics)
  - Family Nurse Practitioners/Physician Assistants (FNP/PA)
  - Registered Nurses (RN)
  - Licensed Midwifery (LM) and Certified Nursing Midwifery (CNM) training programs
- Song-Brown provides financial incentives to programs to:
  - Graduate individuals who practice in medically underserved areas
  - Enroll members of underrepresented groups in medicine to the program
  - Locate the program's main training site in a medically underserved area
  - Operate a main training site at which the majority of the patients are Medi-Cal recipients

Application Key Dates

Key Events	Dates and Times
Application Opens	August 12, 2026, at 3:00 p.m.
Webinars	August 5, 2026, at 10:00 a.m. and August 19, 2026, at 2:00 p.m.
Application Early Submission	September 9, 2026, at 3:00 p.m.
Application Closes	September 23, 2026, at 3:00 p.m.
Award Notice	January 2027
Grant term:	June 30, 2027 – August 30, 2028

Before You Apply

- If your program requires approval to contract from a coordinating authority, inform the authority of terms and conditions contained in the Grant Agreement.
- Applicants must agree to the terms and conditions as outlined in the Grant Guide 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 to provide primary care services.

Changes for 2026

- Program directors can no longer add grant preparers to their profile. Program Directors must contact the Song-Brown staff to add grant preparers to their profile.
- An additional signatory will be required.
  - The additional signatory **cannot** be the applicant's Program Director.
  - The additional signatory **can** be the same individual as the grant agreement signatory and/or the payee data record signatory.
- This year's application will include a question asking whether someone in your organization is willing to participate in an interview with HCAI or a contracted HCAI partner.
- **We currently do not have available funds for Midwifery programs for this year.**

Information to Gather

- Grant Agreement, Payee Data record (STD 204), Additional signatories
- Organization name and/or Doing Business As (DBA) name as listed in the W-9 IRS forms for your program
- Must know the following information for the training site(s) with the most cumulative hours used in the last academic year (AY):
  - Facility Type
  - Name of training site
  - Full addresses (must be located within CA)
  - Include the number of cumulative hours
  - Payer mix information
- **Do not** include out-of-state training sites and/or those where primary care is not provided

Information to Gather, Continued

- Race/ethnicity and gender data for all current students
- Current practice site information for all graduates entered
- National Provider Identification (NPI) number for all graduates entered
- Any applicable attachments:
  - For FNP programs – Approval letter from the California Board of Registered Nursing (BRN)
  - For PA programs – Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) letter

Required Documents: FNP & PA

FNP Programs

- Approval letter
  - Upload the most recent program approval letter from the California Board of Registered Nursing (BRN).

PA Programs

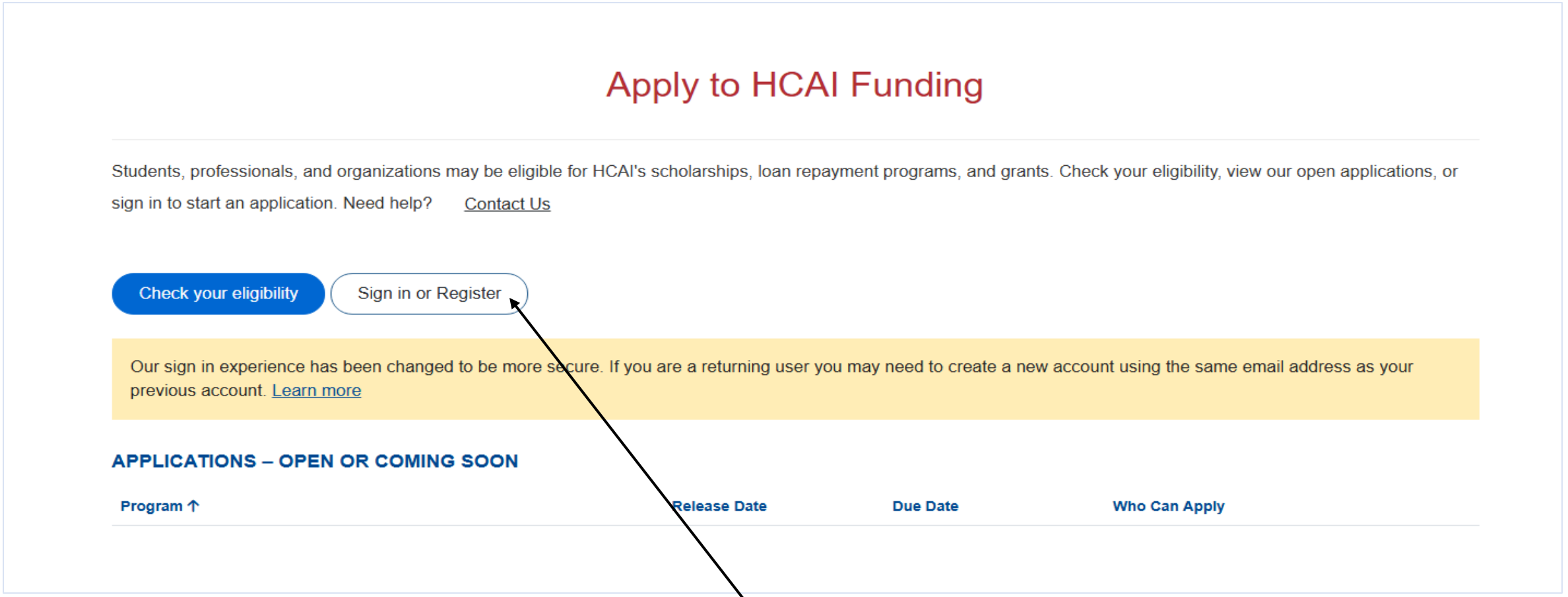
- Approval letter
  - Upload the most recent accreditation letter Review Commission on Education for the Physician Assistant (ARC-PA) letter.

Helpful Resources

1. Song-Brown Glossary
2. FNP and PA Grant Guide
3. Song-Brown Program Allowable Costs Guide

Electronic Application (eApp) Registration

Creating an Account



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

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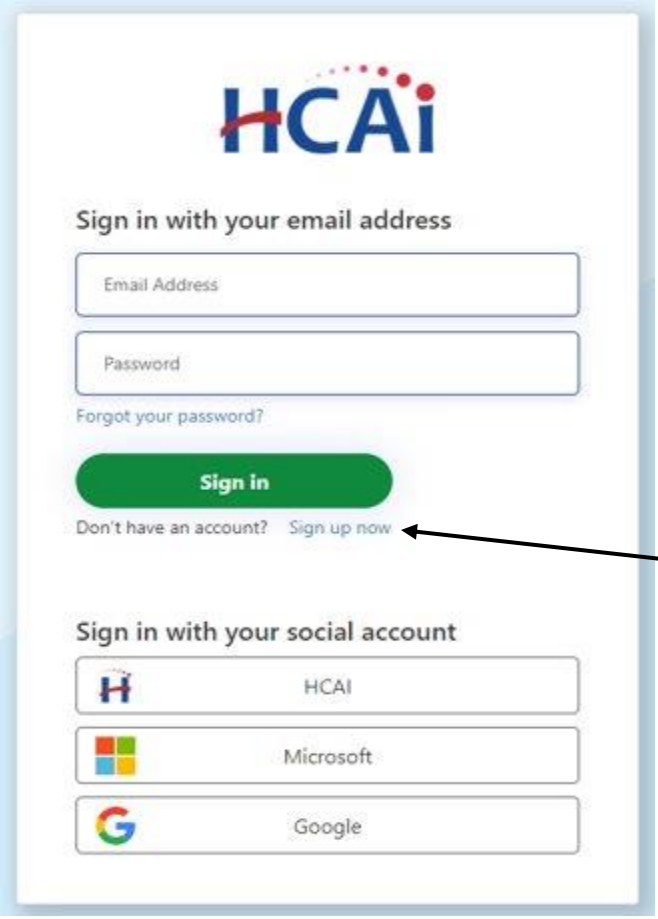
Creating an Account, Continued

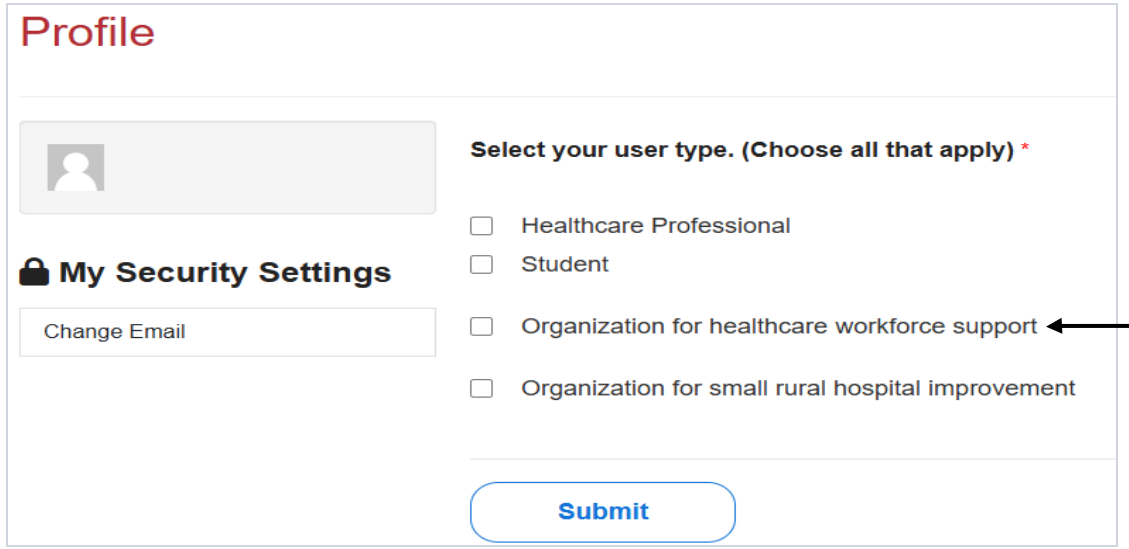


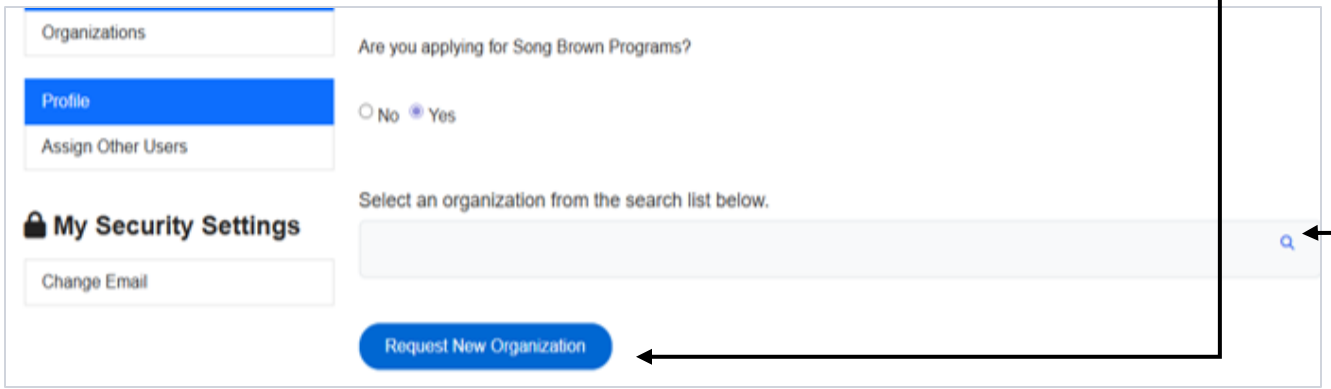
Our funding portal has a 2-step authentication process for new applicants when setting up their account.

Funding portal link:
Apply to HCAI Funding

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

Setting up Your Profile

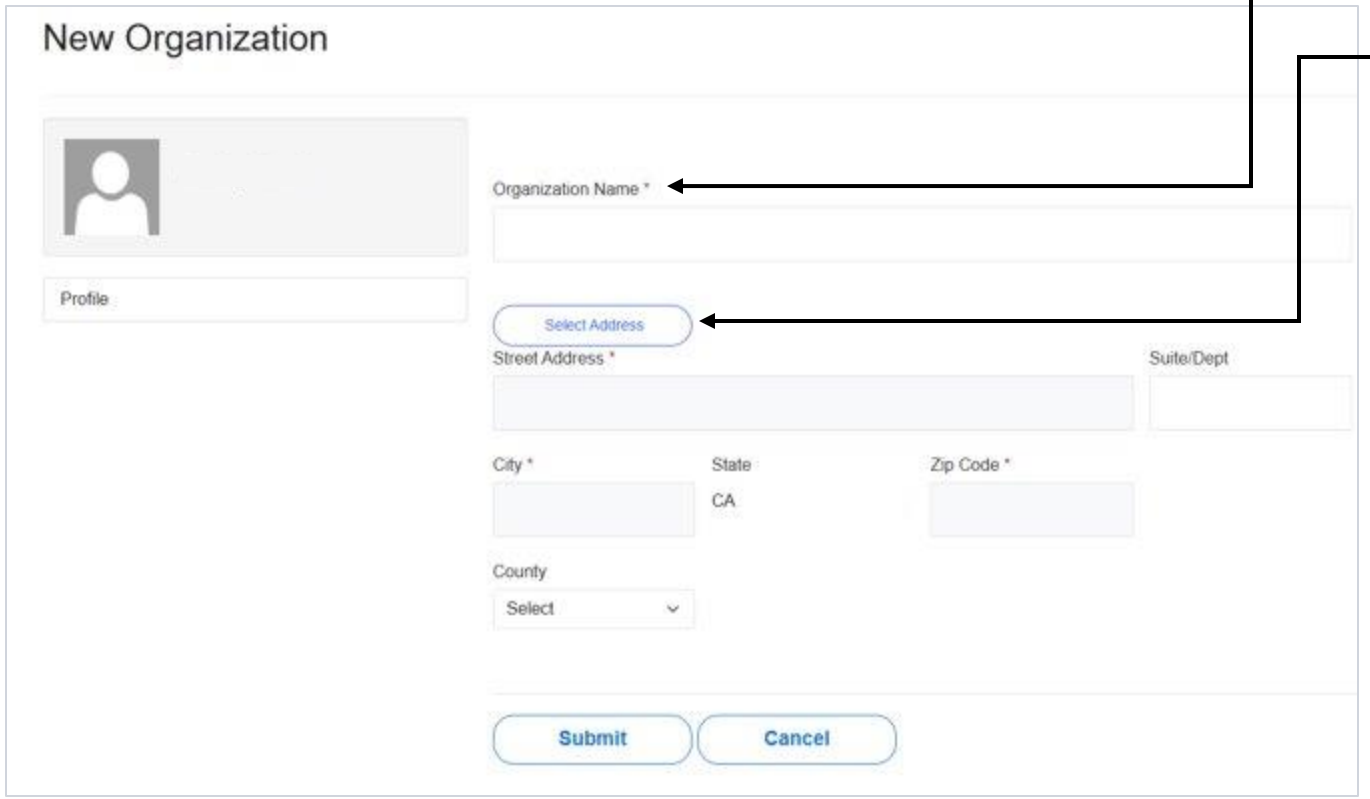




1. Check the "**Organization for healthcare workforce support**" box to gain access to the Song-Brown applications (do not check the "Healthcare Professional" box).
2. Click the magnifying glass to search for a pre-existing organization.
3. Click "**Request New Organization**" to submit a new organization 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.*

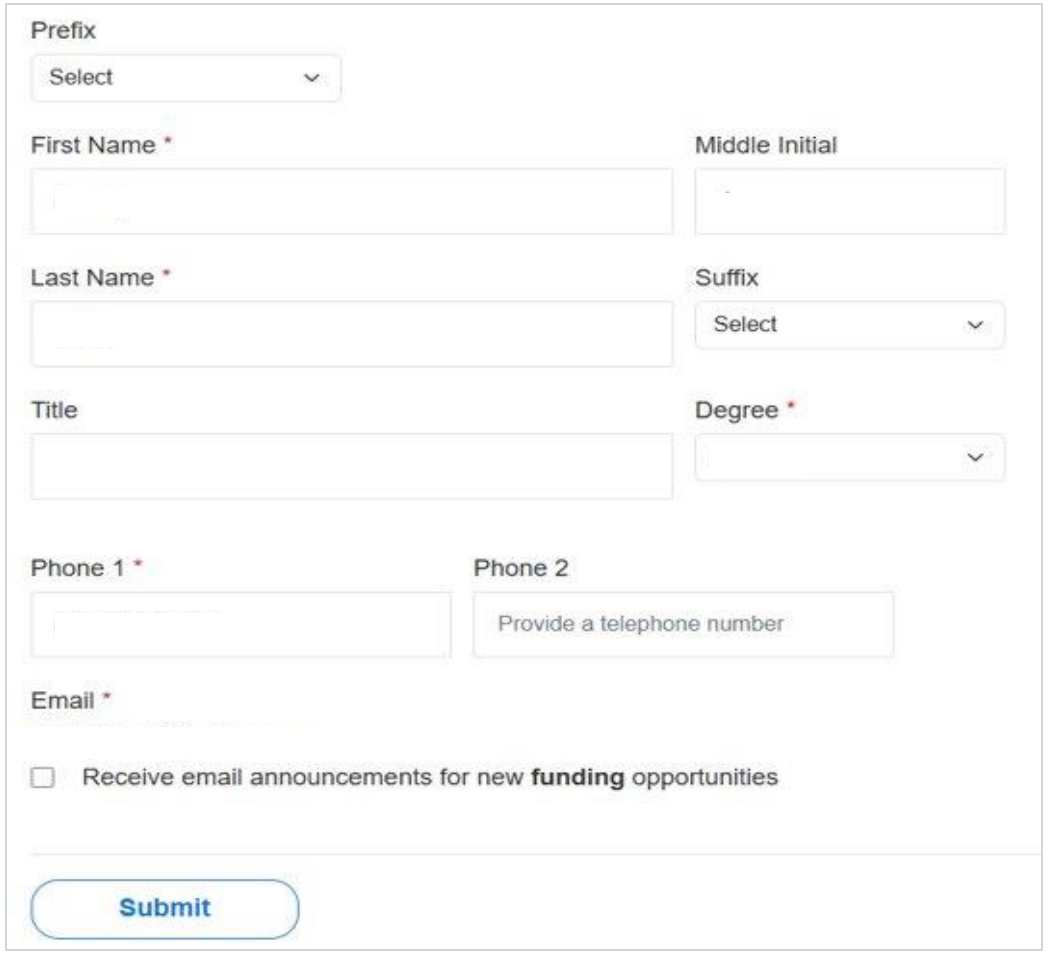
Adding a New Organization



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.*

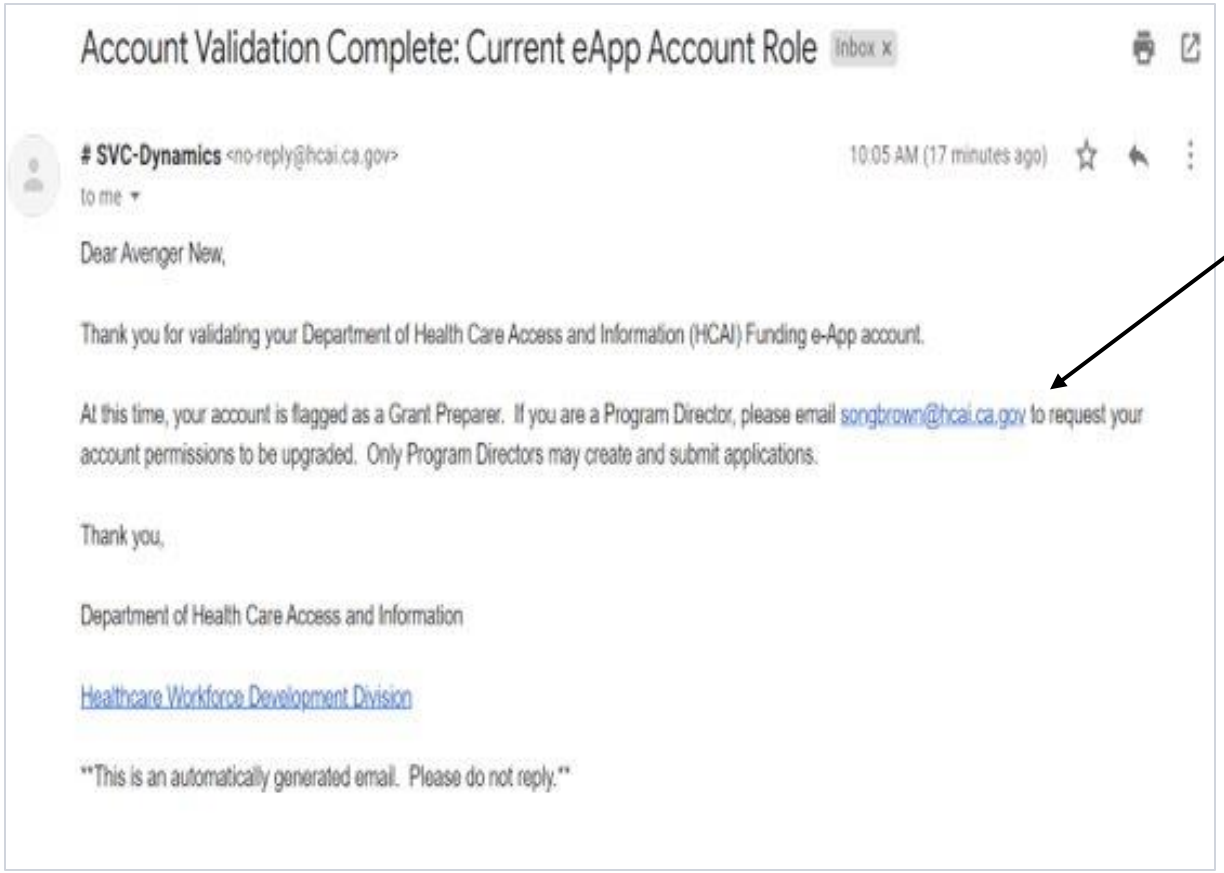
Completing Your Profile



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/incorrect information may delay your registration.*

Account Roles



Account Validation Complete: Current eApp Account Role Inbox x

SVC-Dynamics <no-reply@hcai.ca.gov> 10:05 AM (17 minutes ago)

to me

Dear Avenger New,

Thank you for validating your Department of Health Care Access and Information (HCAI) Funding e-App account.

At this time, your account is flagged as a Grant Preparer. If you are a Program Director, please email songbrown@hcai.ca.gov to request your account permissions to be upgraded. Only Program Directors may create and submit applications.

Thank you,

Department of Health Care Access and Information

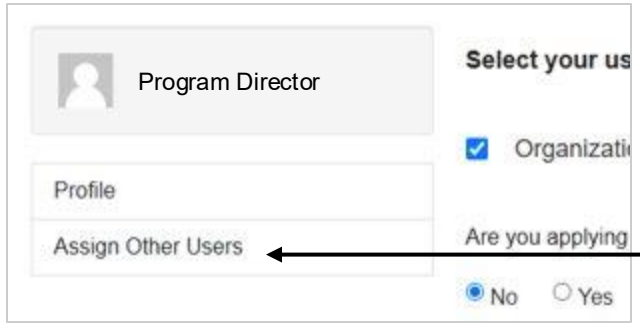
Healthcare Workforce Development Division

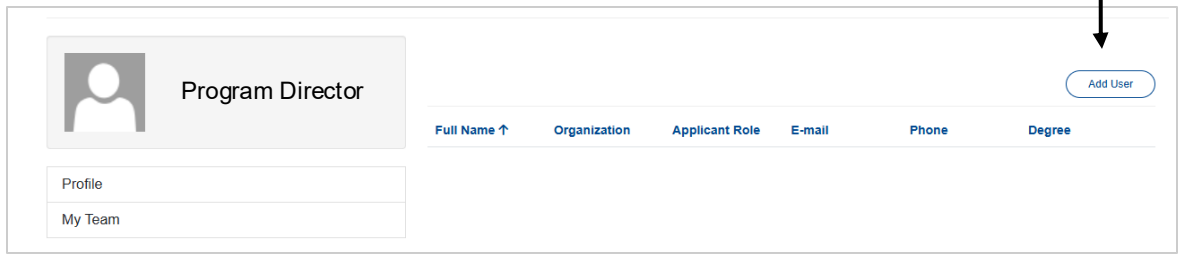
"This is an automatically generated email. Please do not reply."

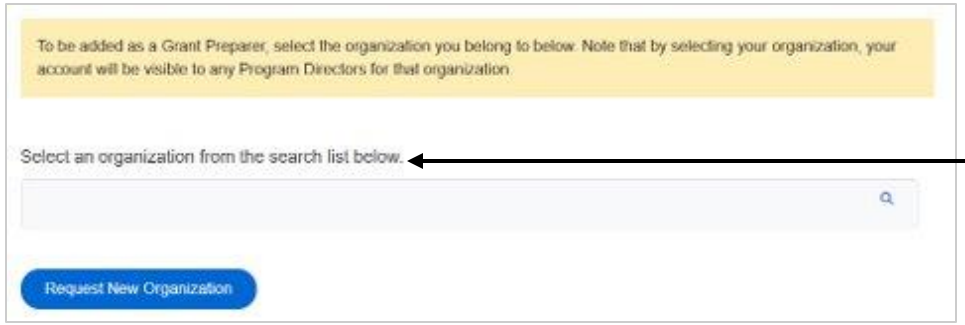
1. All newly created accounts are assigned the "**Grant Preparer**" role.
2. If you are the Program Director, email SongBrown@hcai.ca.gov to request the "**Program Director**" role.
3. Only accounts with the "**Program Director**" role may initiate and submit applications.
4. Once Song-Brown staff approves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

Note: *Program Directors may initiate, view, edit, submit applications, payment certifications and final reports.*

Assigning Other Users



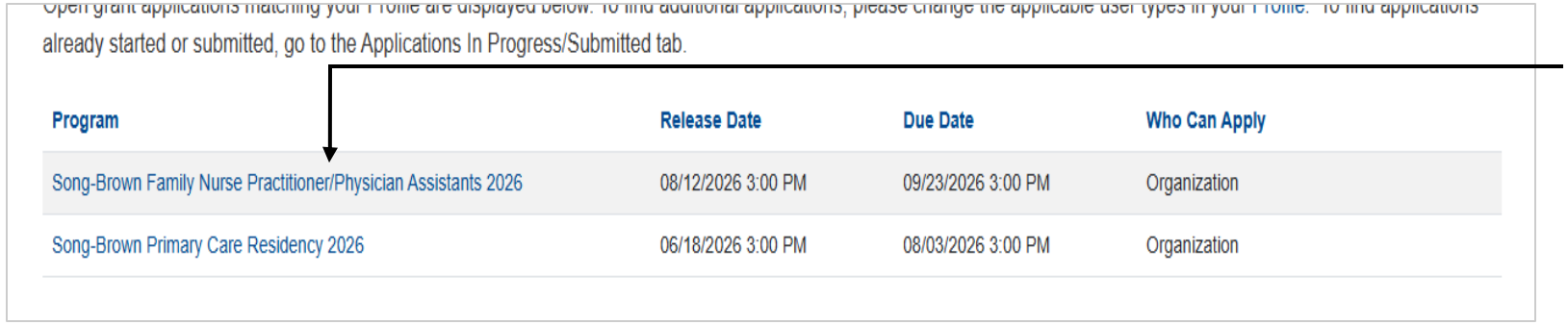




1. In the program director profile, select "**Assign Other Users.**"
2. Select "**Add User**" to select any user that has the same organization attached to their profile.
3. Grant preparers must select the same organization when creating or updating their profile as the program director to be added to the program director profile.
4. Program directors can have multiple grant preparers.

Note: *After a program director initiates a grant application, the grant preparer can complete all pages of the application but* ***cannot*** *submit the application.*

Apply Here



1. Navigate to the "**Apply Here**" page on the main menu.
2. Select the "**Song-Brown Family Nurse Practitioner/Physician Assistant 2026**" 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 of each page.

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.

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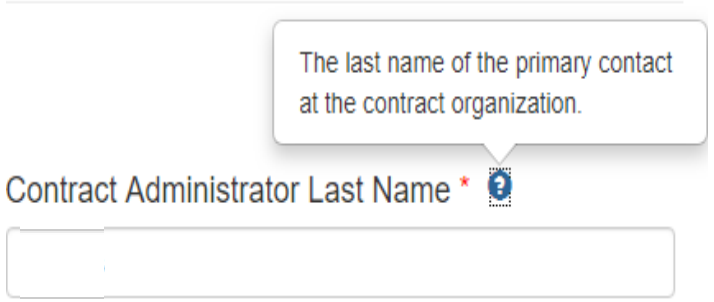
Useful Information, Continued

Asterisks

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

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.



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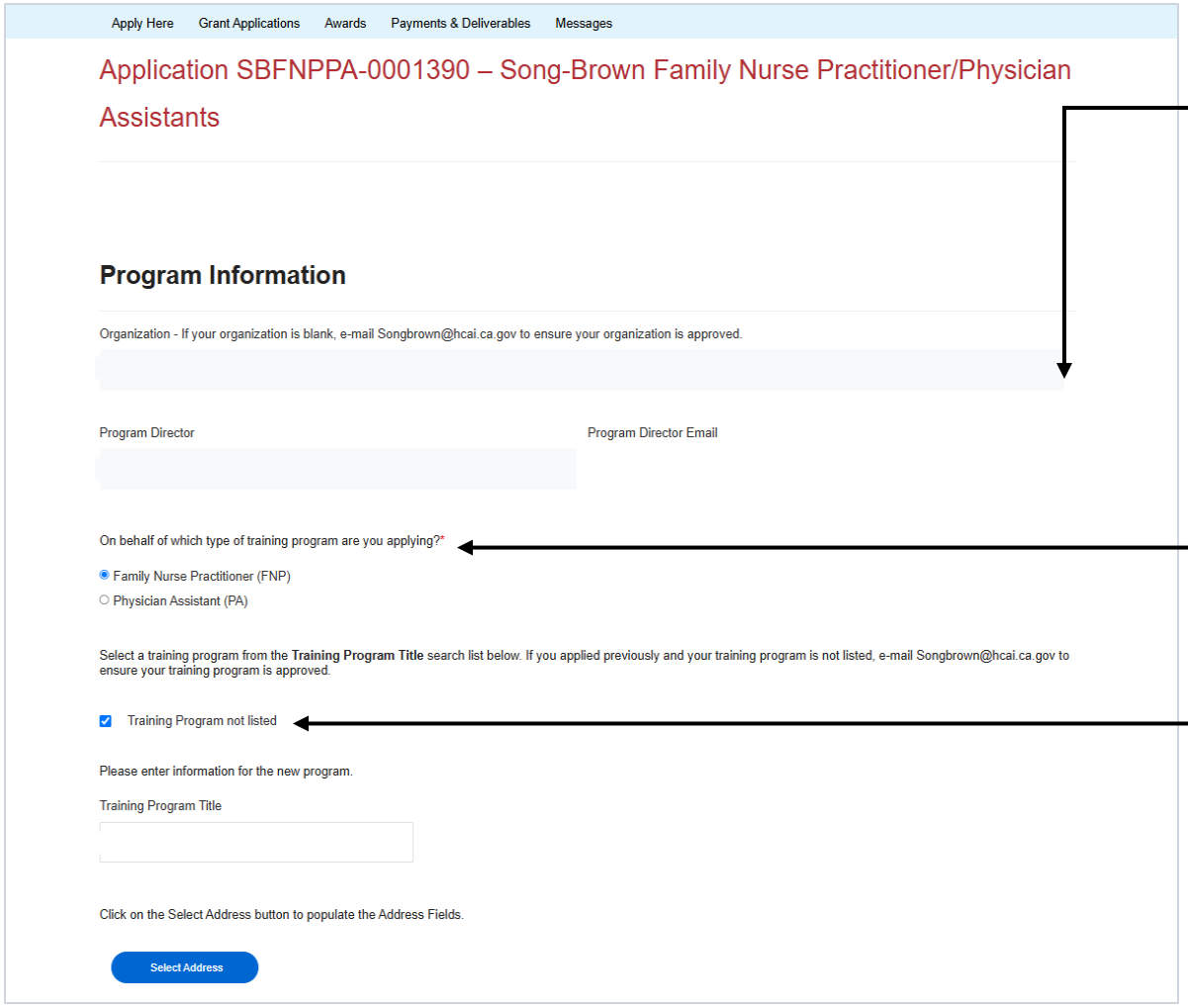
FNP & PA
Application Walk-through

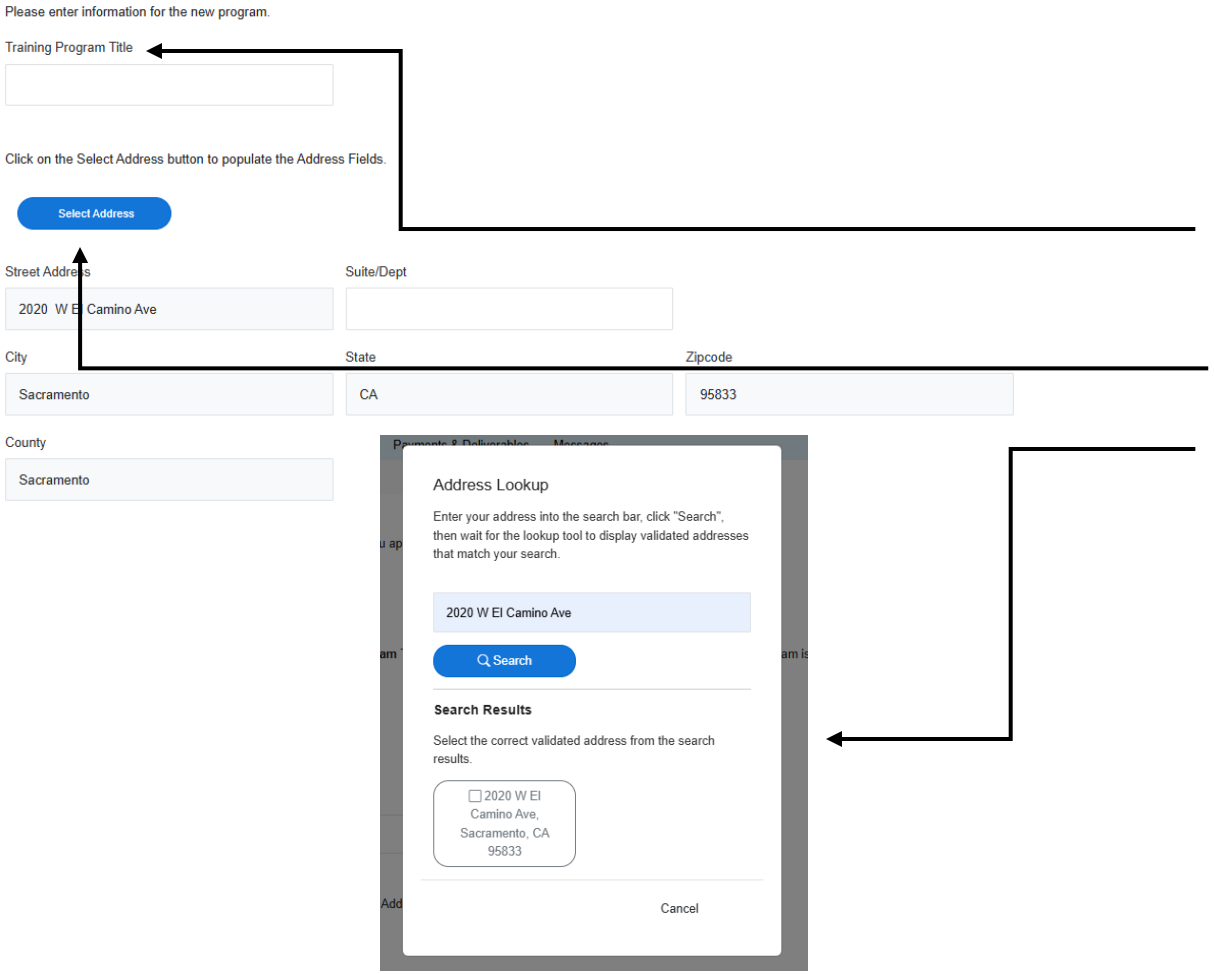
Program Information



1. Your program information will pre-populate with information you entered in your "**Profile**" page.
2. Select the "**Training Program Type**" you want to apply for.
3. Select a "**Training Program Title**" from a list of training programs by clicking on the magnifying glass.
4. If your training program is not listed, check the box "**Training Program not listed**".

Note: *Most training programs are in the system, unless they are new. Use the search function before submitting a new training program name for approval.*

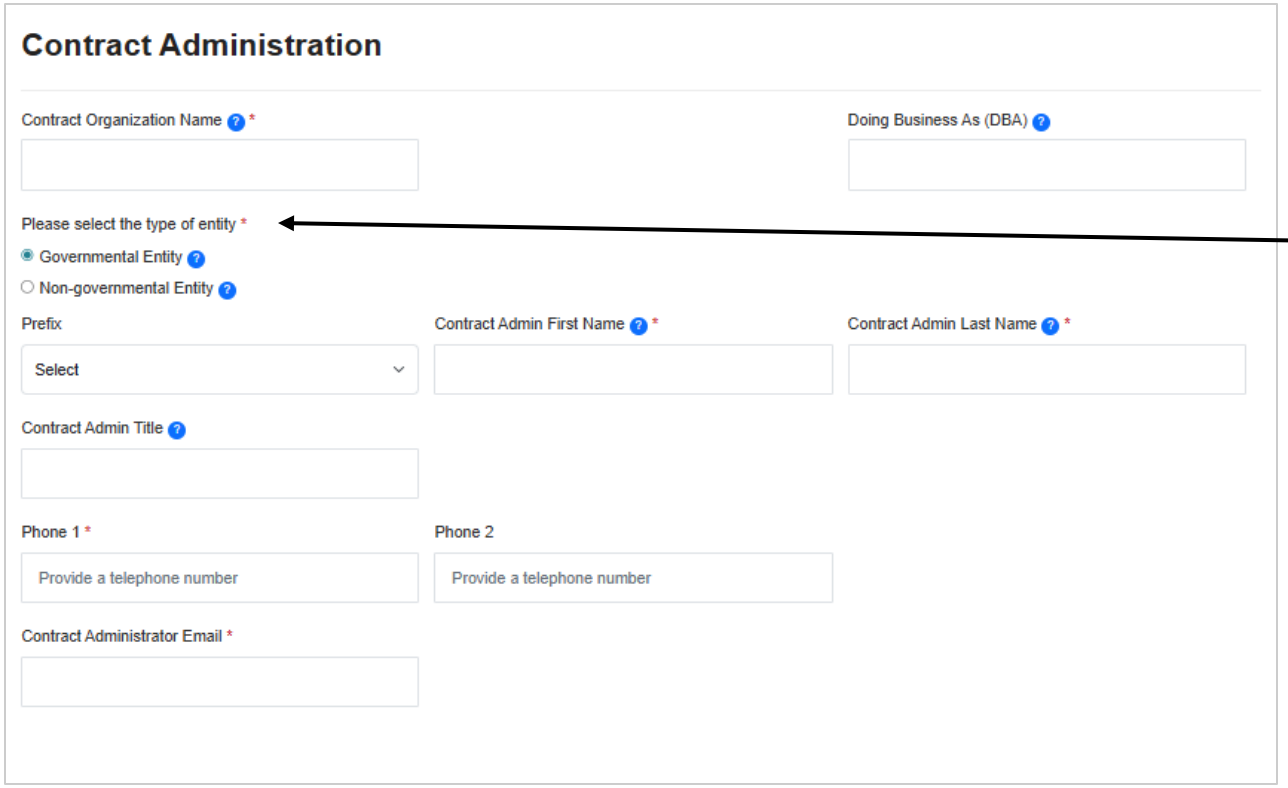
Program Information: Address



1. After checking the "**Training Program not listed**" box, new fields will appear below.
2. Type in the program name under "**Training Program Title**".
3. Click the "**Select Address**" button.
4. A new window opens and allows you to enter and search for an address.
5. Click the confirmed address and it will auto-populate the address fields on the page.

Note: *You will see this address validation feature throughout the application.*

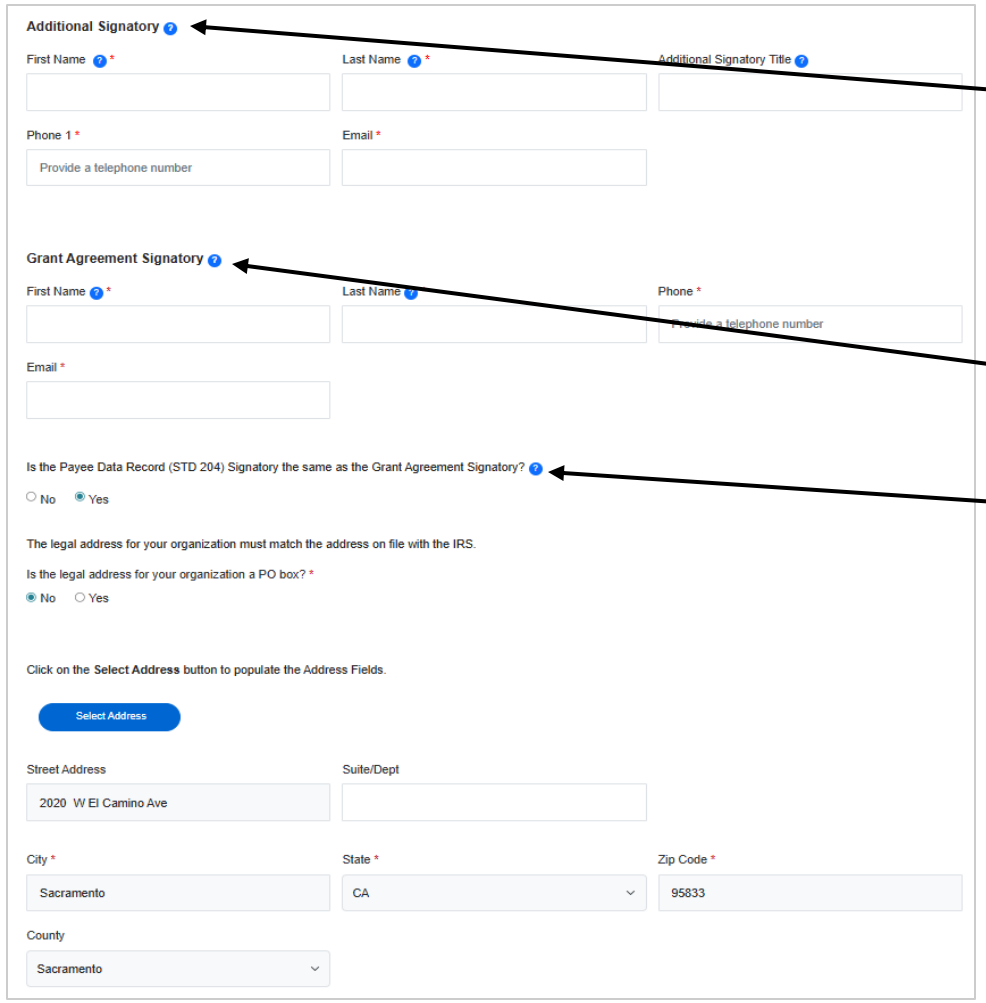
Contract Administration



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**" must identify the contractor organization as a Governmental or Non-Governmental Entity.
3. "**Contract Administrator**" is the main administrator for the grant.

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

Contract Administration, Continued



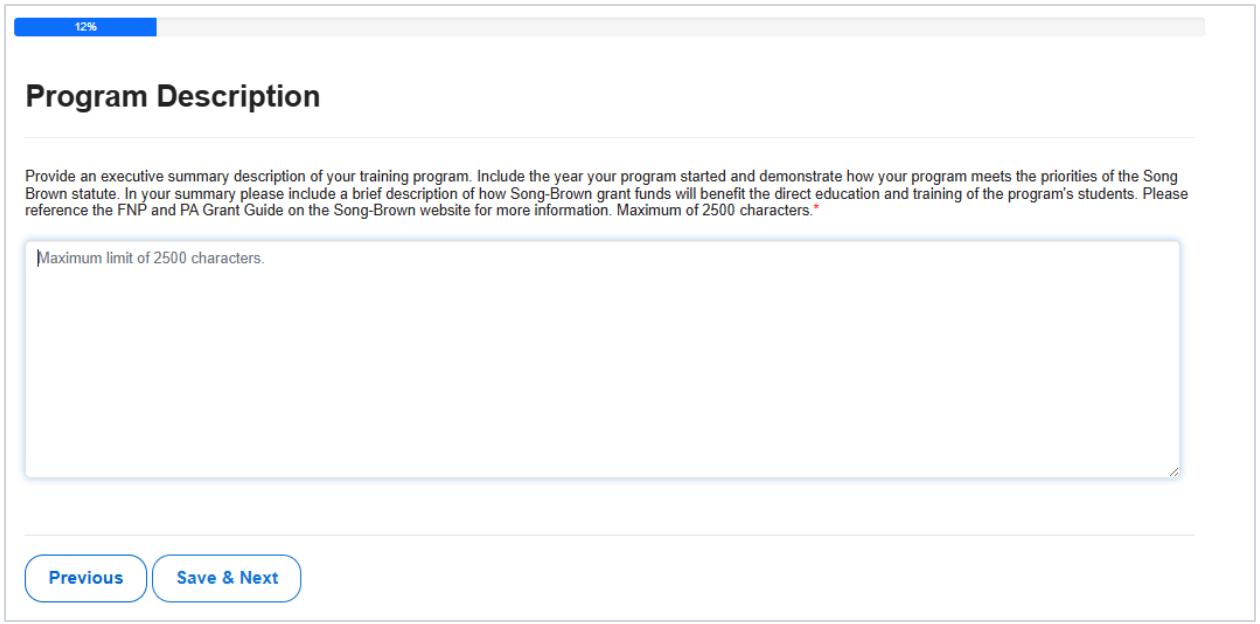
1. "**Additional Signatory**" is a new requirement starting this year. Examples of an additional signatory could include the organization's Designated Institutional Officer, Department Chair, Chief Medical Officer or another contact with contracting authority.
2. "**Grant Agreement Signatory**" must be an individual with institutional authority to enter into a grant agreement.
3. If your STD 204 signatory is different from you Grant Agreement Signatory, select "**No**".
   - "**STD 204 Signatory**" must be an authorized signatory.
4. PO box option available for the 204 category.

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.*

Contract Administration, Continued

Contract Administrator	Program Director	Grant Preparer	Grant Agreement Signatory	STD 204 Signatory	Additional Signatory
The primary contracting contact at the organization.	The Program Director certifies any expenditures related to the grant agreement, signs all quarterly certifications and submits all required reports.	An authorized representative assisting in completing the Song-Brown grant application.	Has the authority to legally execute the grant agreement.	The authorized signatory for the Payee Data Record (STD 204).	Provides additional institutional approval. ***Cannot** be the assigned Program Director.
Examples: - Contract Analyst - Staff affiliated with Sponsored Projects and Research - Administrative support roles	Examples: - Project Director - Dean/Associate Dean - Institutional Grant Administrator	Examples: - Contract Analyst - Staff affiliated with Sponsored Projects and Research - Administrative support roles	Examples: - Contracting Officer - Provost - Dean - President of the University	Examples: - Contracting Officer - Accounting Officer - Accounting/Financial Director	Examples: - Contracting Officer - Provost - Dean - President of the University - University Representative

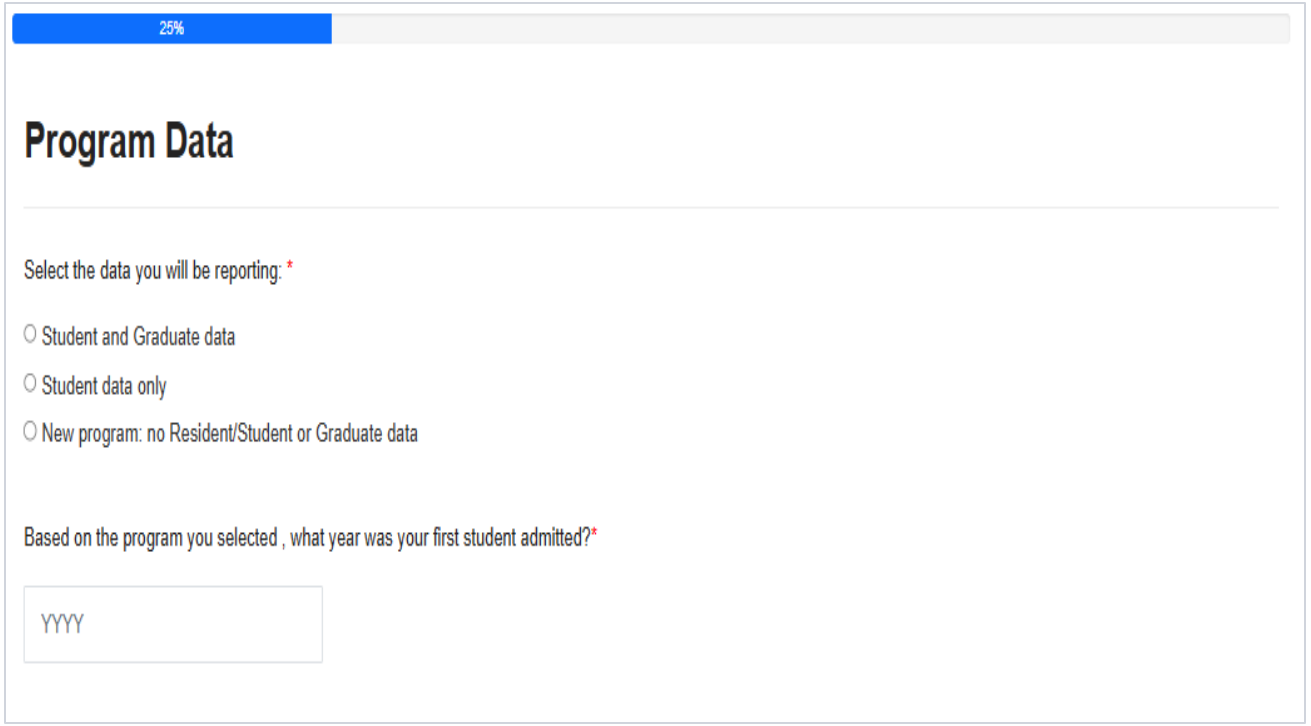
Program Description



1. Provide requested program description information.
2. You have a **maximum** limit of 2,500 characters.
3. After completing this page, save and proceed by clicking "**Save & Next**".

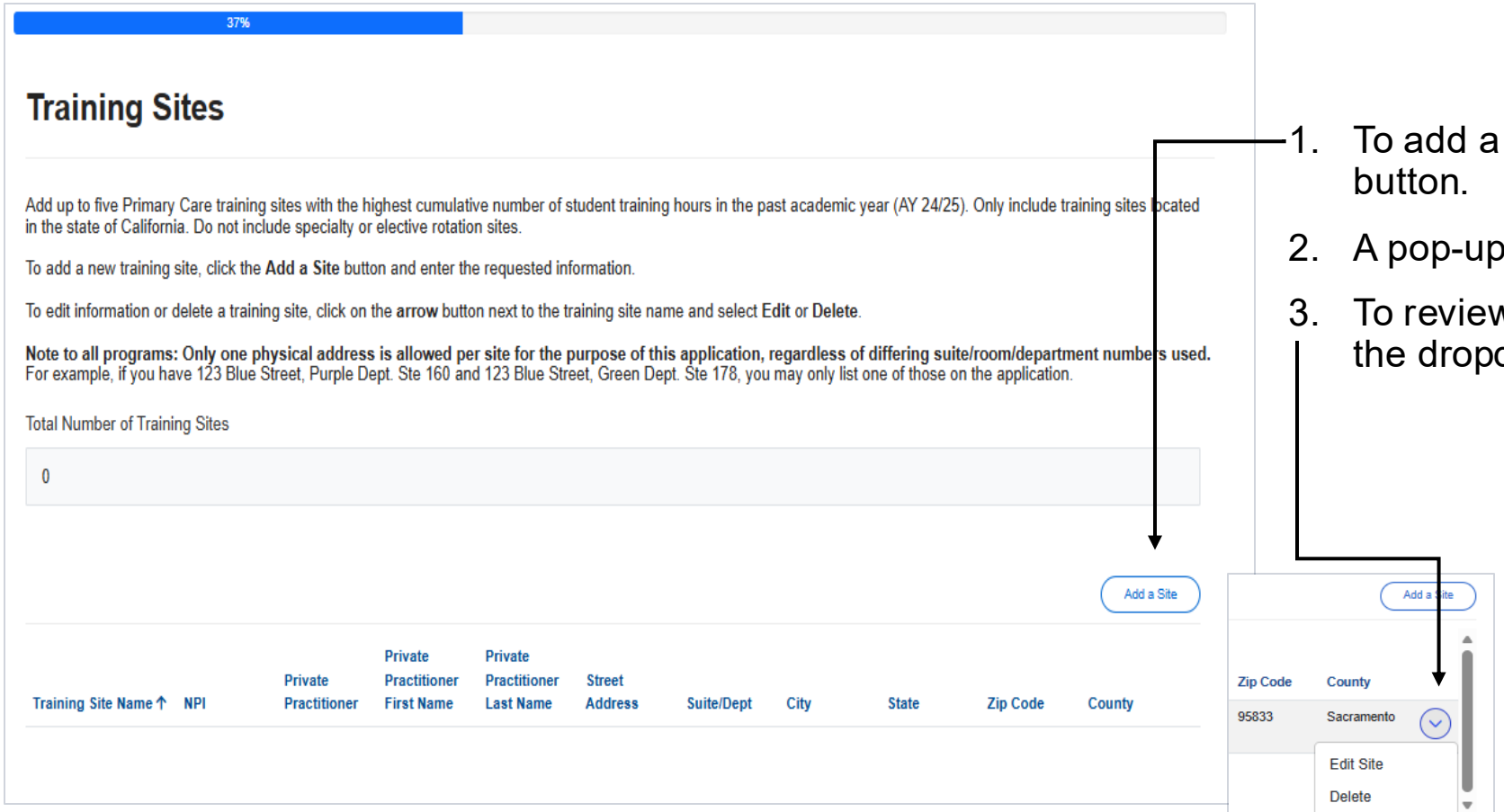
Note: *If you exceed the character limit, you will receive a pop-up message. If you copy and paste text from another document, text will cut off at 2,500 characters. Double-check the information you enter and make sure everything is captured.*

Program Data



1. If you have any 23/24 and/or 24/25 graduates, select "**Student and Graduate data**".
2. "**Student data only**" should only be selected if you have no 23/25 and 24/25 graduates.
3. Select "**New program; no Resident/Student or Graduate data**" if there is no data.

Training Sites



1. To add a training site(s), click the "**Add a Site**" button.
2. A pop-up window will display.
3. To review, edit, or delete training sites, select the dropdown list for that line using the arrow.

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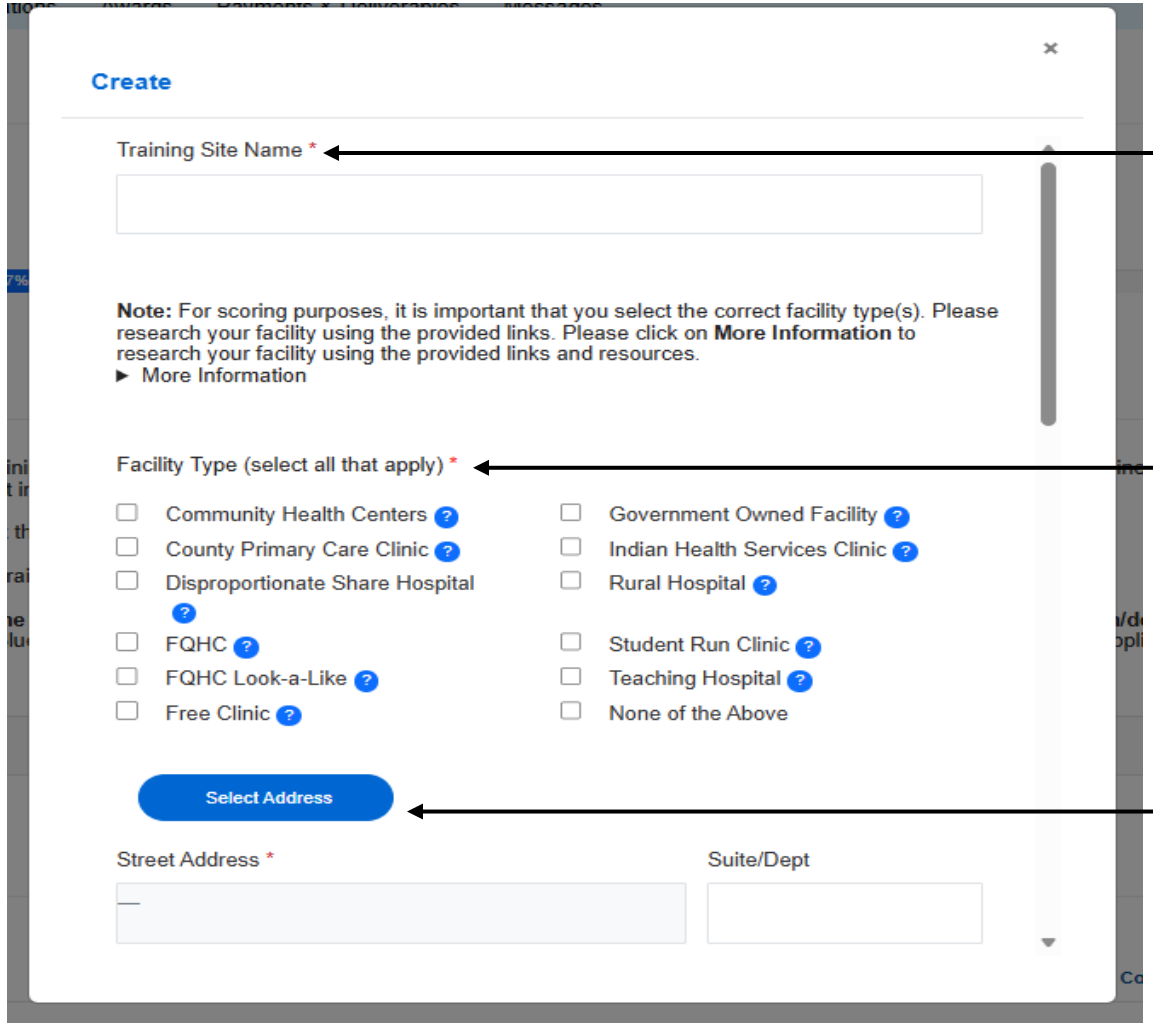
Training Sites: Facility Type



1. Enter the training site name.
2. Select the "**Facility Type**" of your training site.
3. Enter the training site address.

Note: *Use the HCAI Geo website to confirm the facility type for each training site.*

- *Training sites can be designated as multiple facility types.*

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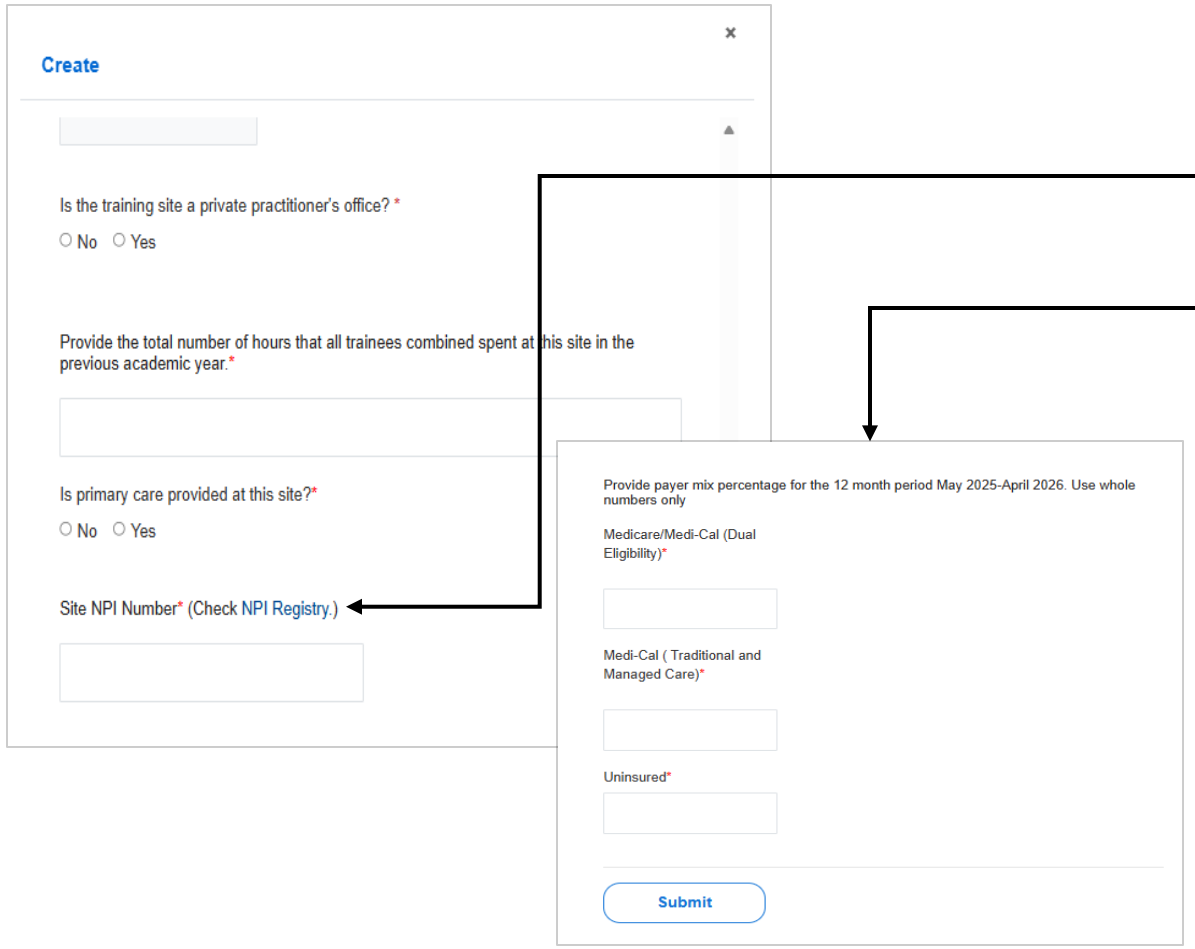
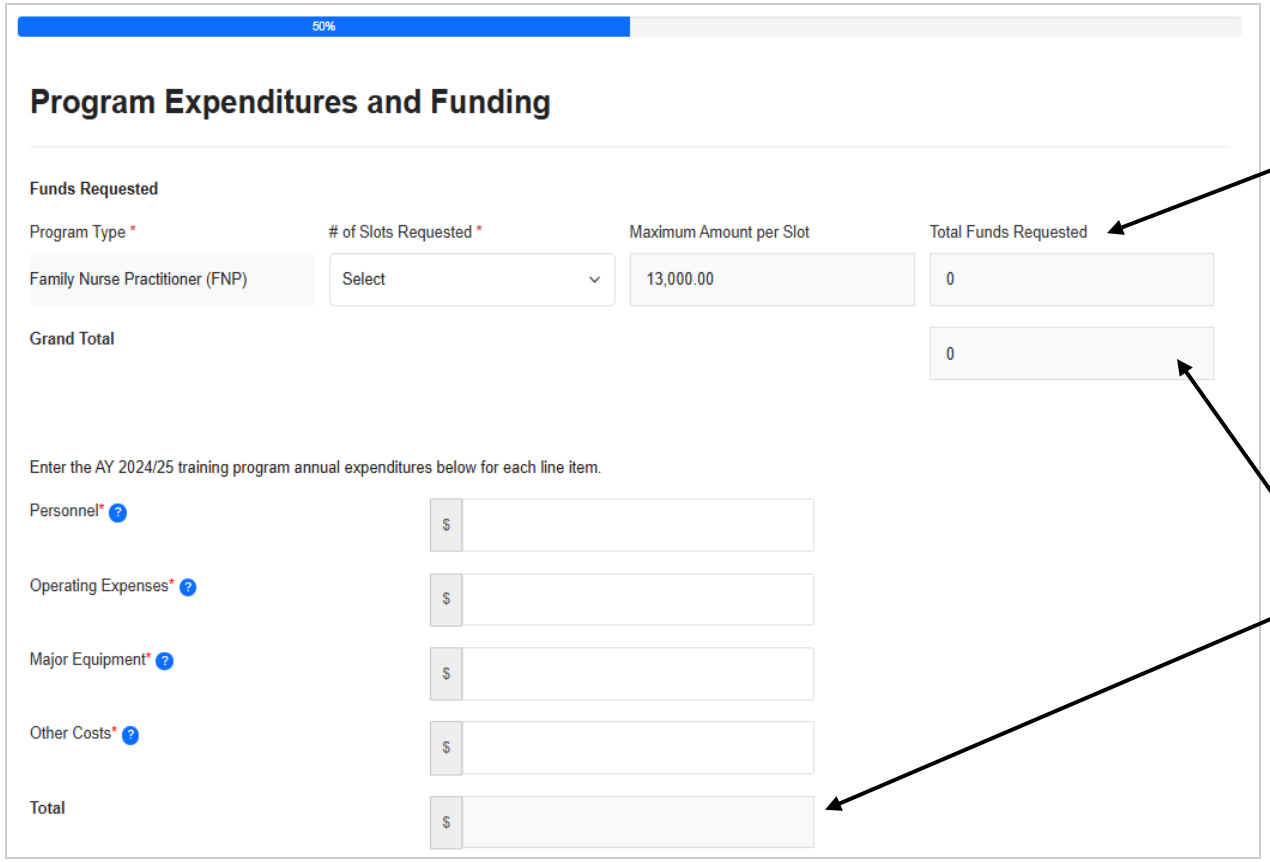
Training Sites, Continued



1. Complete all required fields.
2. Click on the link to find the NPI number of the training site.
3. Payer mix information is asking to provide a percentage of the last 12 months.
   - May 2025 – April 2026
4. After completing all the required fields, click the "Submit" button.

Note: ***"Payer Mix"*** *is required for all listed training site(s).* ***"Payer Mix"*** *does not have to equal 100% but must be in whole numbers only.*

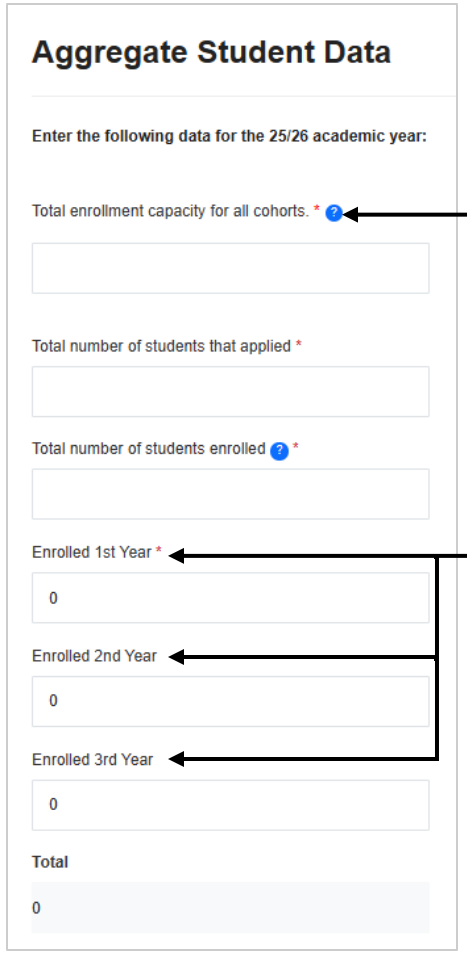
Program Expenditures and Funding



- Complete all required fields.
- "**Total Funds Requested**" is auto calculated based on the "**# of Slots Requested**" and the maximum amount per slot.
  - Maximum Slots: 14
  - Maximum Amount per Slot: $13,000
- Enter your total expenditures for each category from AY 25/26.
- The "**Total**" training program expenditures must be equal to or greater than the "**Total Funds Requested**".

Note: *You do not need to enter information into the greyed fields. These fields will auto-populate with information.*

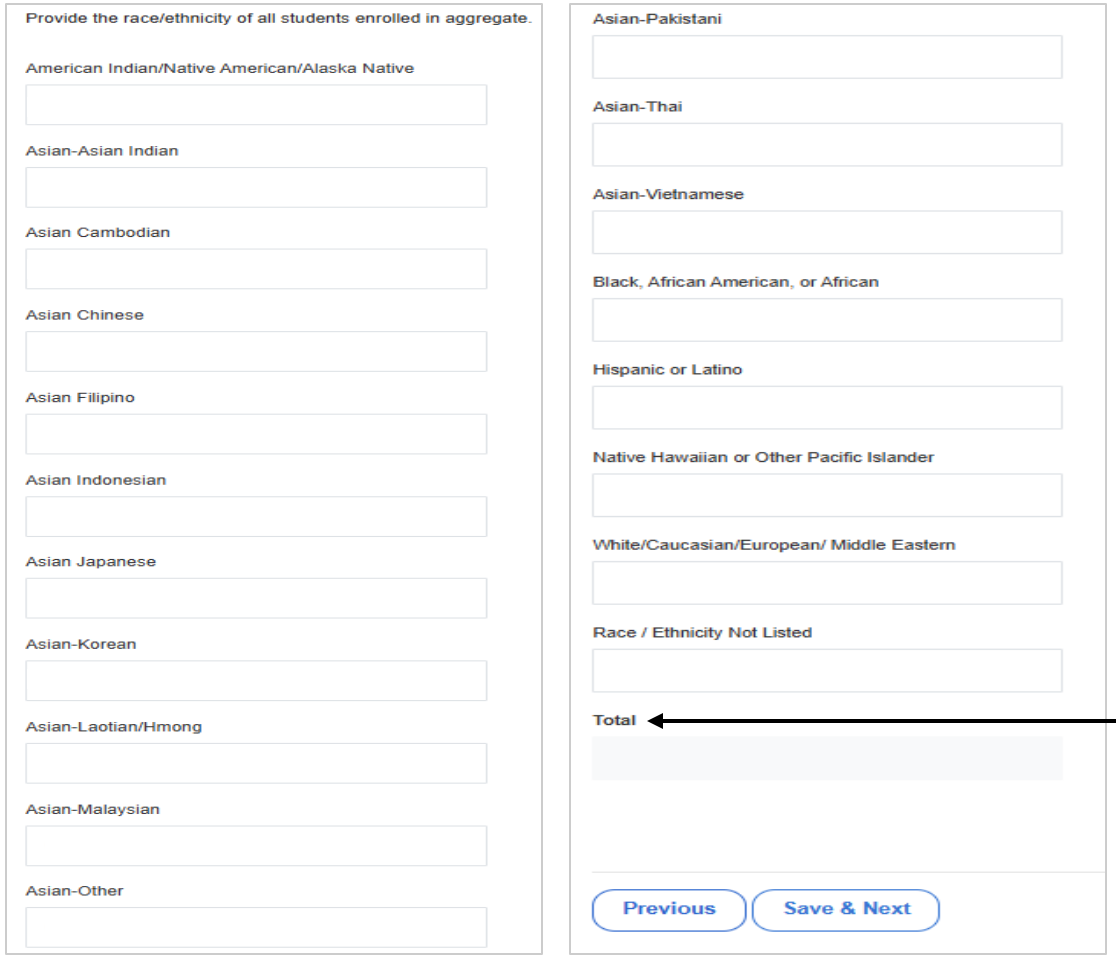
Aggregate Student Data



1. Provide the total number of enrollment capacity for all cohorts based on your accreditation body or college.
2. Provide the total number of students enrolled for 1st-3rd year students.
3. The total number of students **cannot** be more than the total enrollment capacity.

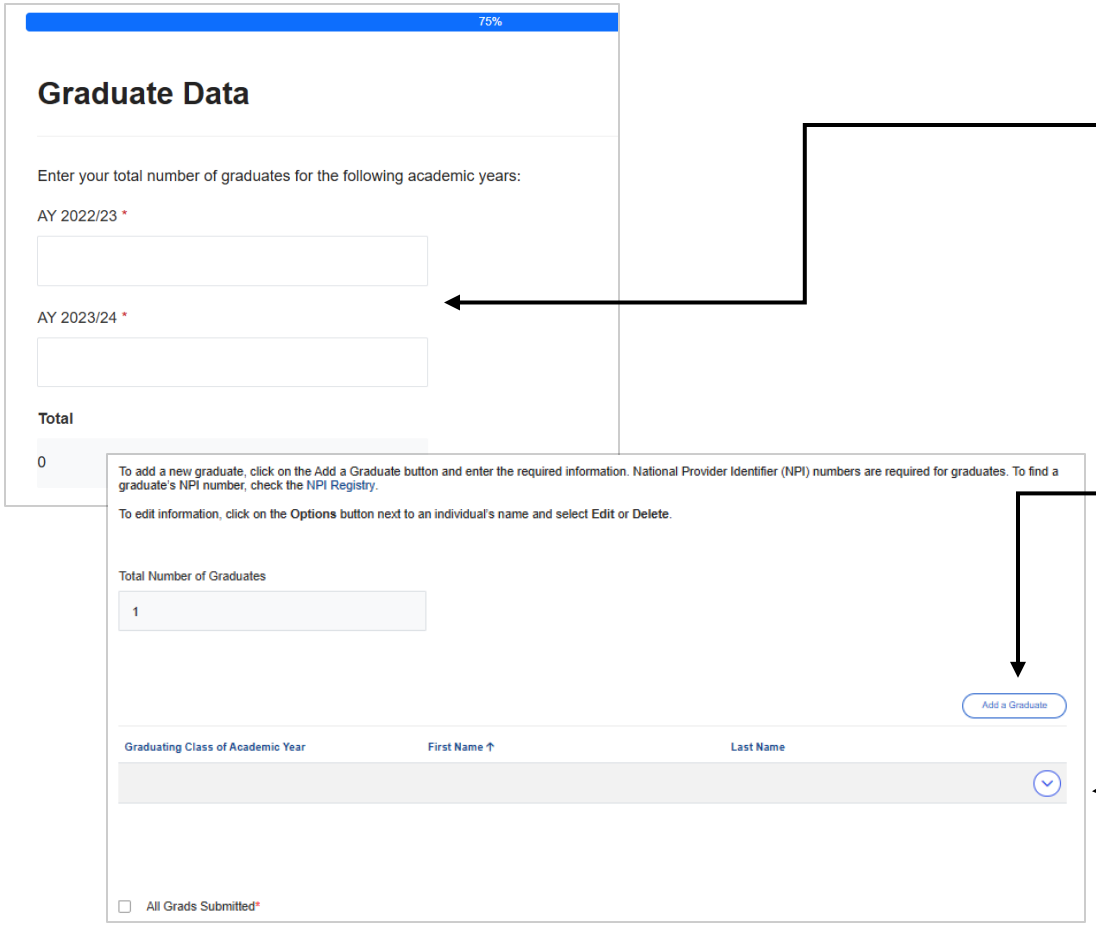
Note: *Please enter data for the 25/26 academic year.*

Aggregate Student Data, Continued



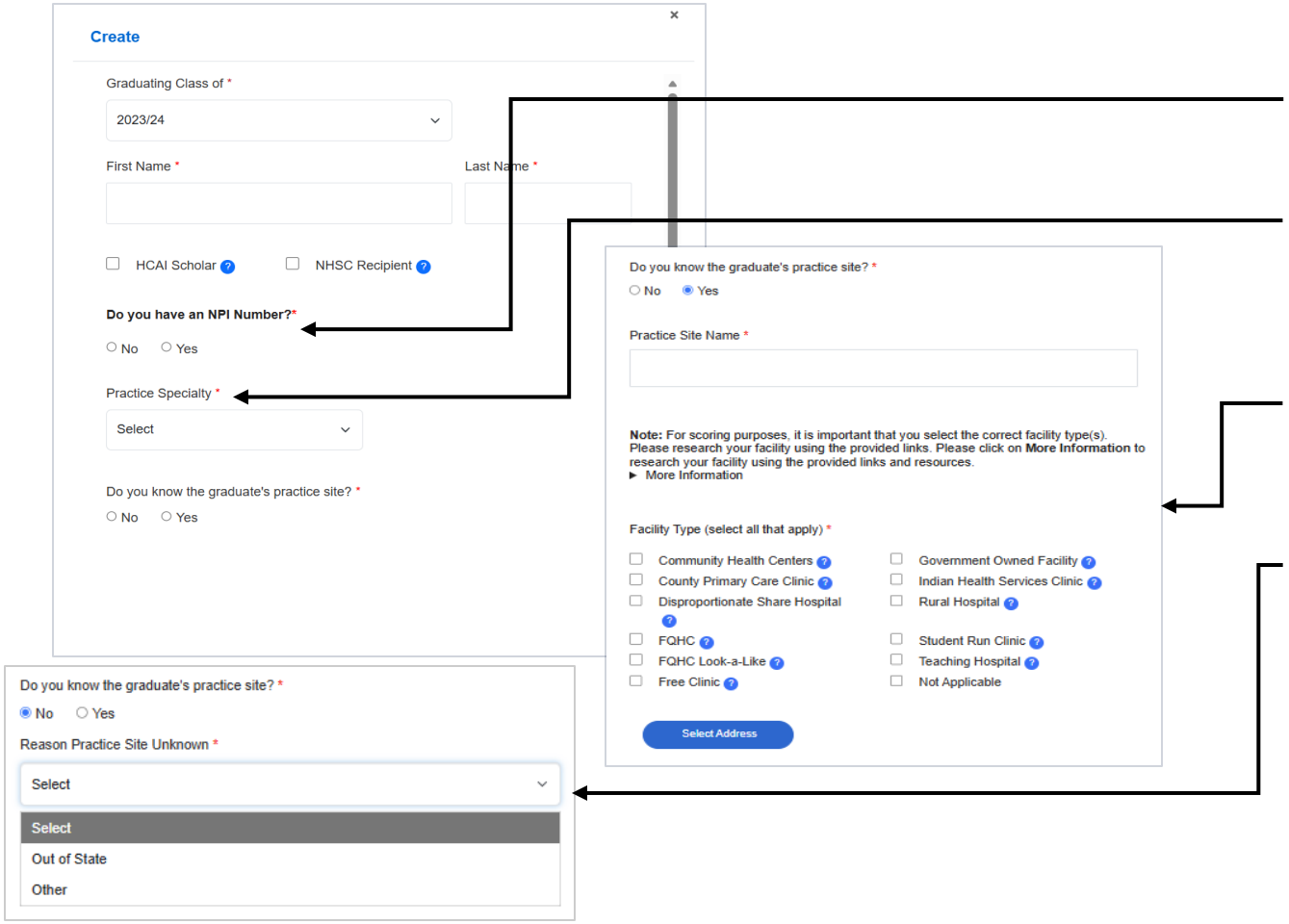
1. Provide the number of students for each race and ethnicity.
2. The total must match the total number of enrolled students.

Graduate Data



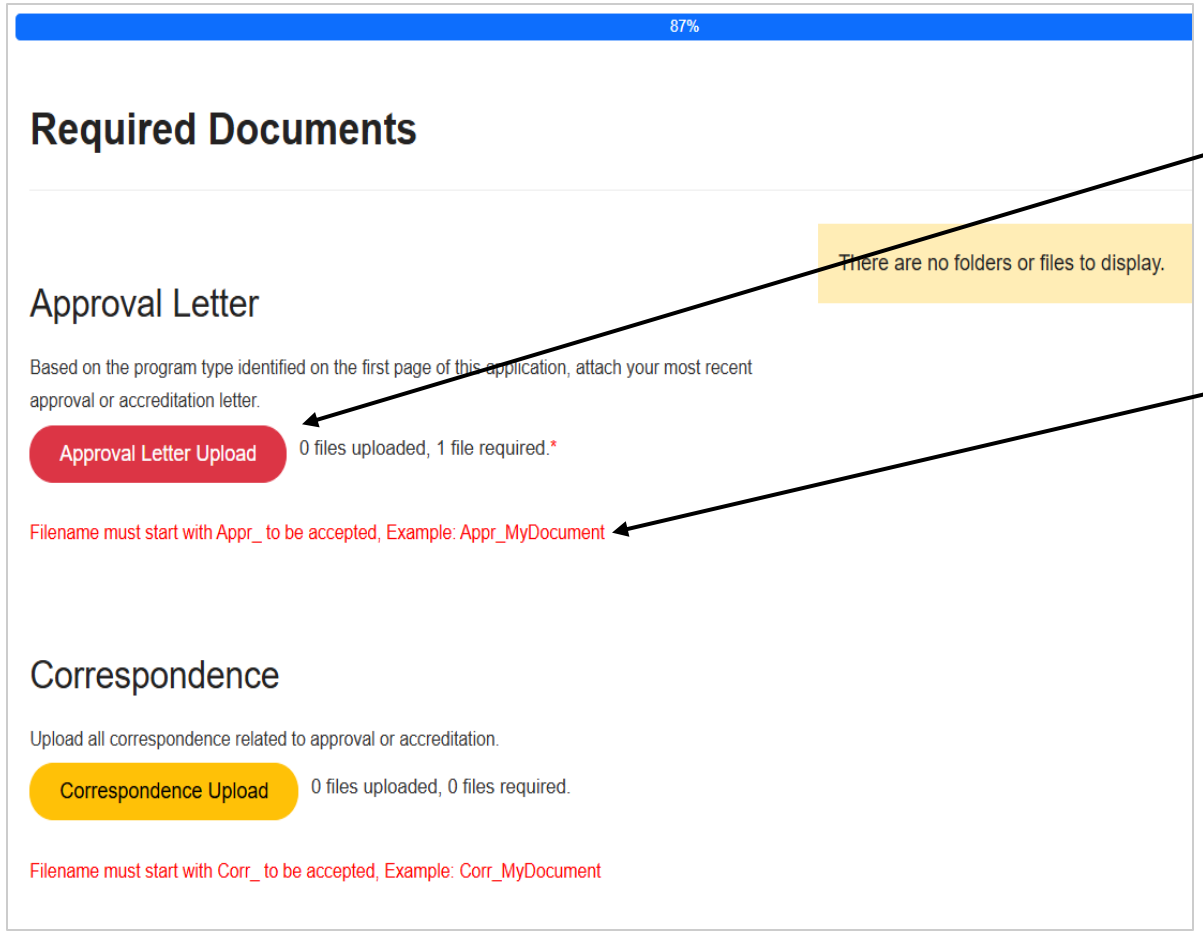
1. Enter graduate data for each academic year requested.
2. Graduate data needs to match the number of graduates entered.
3. To add graduate data, click the "**Add a Graduate**" button.
4. A pop-up will display.
5. To review, edit, or delete graduates, select the dropdown list for that line using the arrow.

Graduate Data, Continued



1. If you know the graduate's NPI number, select "**Yes**".
   - Enter the graduate's 10-digit NPI number.
2. Select their practice specialty.
3. You must add practice site information for all graduates that are practicing in California.
4. If you know your graduate's practice site in California, please provide the practice site information.
5. If you are not sure of their practice site or they are practicing outside of California select "**No**".
   - Select "**Out of State**" if they are practicing outside of California.
   - Select "**Other** " for any other reason.

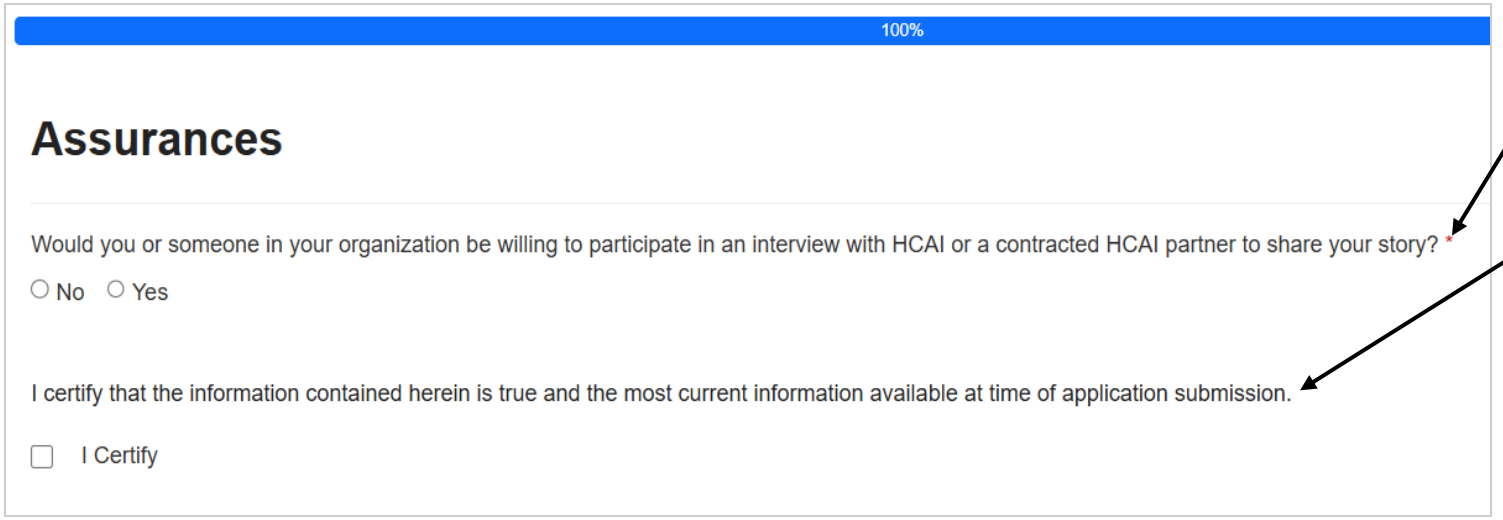
Required Documents



1. The red button on this page indicates required documents.
2. Click on the "**Approval Letter Upload**" to upload your required document.
3. The document must begin with "**Appr_** " for it to be accepted.
4. Once the document is successfully uploaded, the box will turn green signifying that you may continue.

Note: *You may delete an uploaded document by clicking the down-arrow next to the desired entry.*

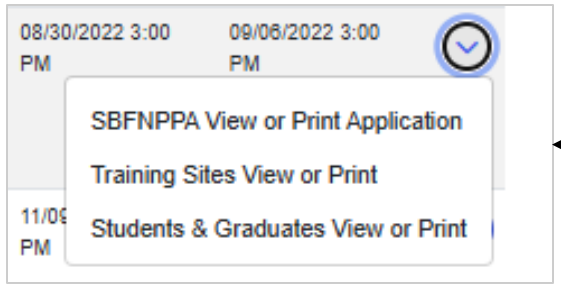
Assurances



1. Answer the new interview question, your response will not affect your score.
2. Read the certification statement and check the box if you agree.
3. Click the “Submit” button.

Note: *Once you submit your application you cannot make further edits.*

Viewing and Printing Your Application



Once you submit your application you can view and print your application by selecting the "**Options**" dropdown on the "Grant Applications" page.

Common Application Errors

- Applicant did not enter any data for residents or graduates, even though the applicant has residents and/or graduates.
- Applicant did not provide the correct contract organization name. This name needs to match what is reported to the IRS (what shows on your W9).
- Applicant did not provide the correct grantee and 204 signatories or information is incorrect.
- Applicant did not provide the additional agreement signatory.
- Applicant added a training program and did not search for previously used training program.

FNP and PA
Scoring Explanation

Application Evaluation Criteria

	Criteria	Points	eApp Page
1	Percent of graduates in Areas of Unmet Need.	25	Graduate Data
2	Percent of main training sites in Areas of Unmet Need. (Up to 5 training sites with the most cumulative hours)	25	Training Sites
3	Average payer mix of main training sites. (Up to 5 training sites with the most cumulative hours)	25	Training Sites
	Grand Total	75	

- The "Points" column reflects the maximum number of points you can receive for each criteria and the grand total
- The "eApp Page" column indicates where the information for each criteria will be entered in the application

Application Evaluation Criteria: Percentage Examples

- Program β Example:
  - Criteria 1: Percent of graduates in Areas of Unmet Need
    - Total number of graduates: 50
    - Graduates practicing in Areas of Unmet Need: 20
    - Percent of graduates practicing in Areas of Unmet Need: 40%
    - Total points awarded for Criteria 1: 0.4 x 25 = 10 points
  - Criteria 2: Percent of main training sites in Areas of Unmet Need
    - Training sites provided by Program β: 4
    - Training sites in Areas of Unmet Need: 3
    - Percent of training sites in Areas of Unmet Need: 75%
    - Total points awarded for Criteria 3: 0.75 x 25 = 18.75 points

Application Evaluation Criteria: Payer Mix Example

- Criteria 3: Average Payer Mix of main training sites
  - Program β has 3 main training sites
  - Their payer mix breakdown is as follows:

	Site 1	Site 2	Site 3
Medicare/Medical (Dual Eligibility)	30%	20%	40%
Medical (Traditional & Managed Care)	15%	15%	22%
Uninsured	15%	20%	15%
Totals	**60%**	**55%**	**77%**

  - Average = (.60 + .55 + .77) / 3 = .64
  - Total points awarded for Criteria 3 = .64 x 25 = 16 points
- **Total points scored for Program β is 10 + 18.75 + 16 = 44.75 points out of 75 points**

Email questions to: SongBrown@HCAI.ca.gov

Questions & Answers

Chris Roina, Communications Supervisor, HCAI

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Phone (916) 326-3700

Email SongBrown@hcai.ca.gov

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Thank You!

For further questions, please email SongBrown@hcai.ca.gov