I.   OVERVIEW OF THE FUNDING OPPORTUNITY

Program Announcement for the Department of Defense

Defense Health Program

Congressionally Directed Medical Research Programs

Alcohol and Substance Abuse Disorders Research Program

Consortium Award

Announcement Type: Initial

Funding Opportunity Number: W81XWH-21-ASADRP-CA

Catalog of Federal Domestic Assistance Number: 12.420 Military Medical Research and Development

SUBMISSION AND REVIEW DATES AND TIMES

- **Pre-Application Submission Deadline:** 5:00 p.m. Eastern time (ET), August 18, 2021

- **Application Submission Deadline:** 11:59 p.m. ET, September 8, 2021

- **End of Application Verification Period:** 5:00 p.m. ET, September 13, 2021

- **Peer Review:** December 2021

- **Programmatic Review:** February 2022

This program announcement must be read in conjunction with the General Application Instructions, version 605. The General Application Instructions document is available for downloading from the Grants.gov funding opportunity announcement by selecting the "Package" tab, clicking "Preview," and then selecting "Download Instructions."

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II. DETAILED INFORMATION ABOUT THE FUNDING OPPORTUNITY

II.A. Program Description

Applications to the Fiscal Year 2021 (FY21) Alcohol and Substance Abuse Disorders Research Program (ASADRP) are being solicited by the U.S. Army Medical Research Acquisition Activity (USAMRAA) using delegated authority provided by United States Code, Title 10, Section 2358 (10 USC 2358). The execution management agent for this program announcement is the Congressionally Directed Medical Research Programs (CDMRP) at the U.S. Army Medical Research and Development Command (USAMRDC). The ASADRP was initiated in 2010 to explore integrated approaches to address alcohol and substance use disorders (ASUD) especially related to traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD) through multidisciplinary, team-based research efforts that translate basic knowledge into enhanced clinical pharmacological treatment protocols.

Appropriations for the ASADRP from FY10 through FY19 totaled $42.075 million (M). The FY21 appropriation is $4M.

The ASADRP is seeking applications for a Consortium Award (CA) to conduct multidisciplinary, team-based translational research efforts to identify promising compounds and conduct preclinical and clinical research to test potential medications or medication combinations in humans with ASUD and comorbid PTSD and other psychological disorders, and to explore precision medicine tools for matching patients to these medications. The goal of this research is to reduce the burden of ASUD in society, to include reducing the overall number of opioid-related overdose deaths.

The proposed research must be relevant to active-duty Service Members, Veterans, military beneficiaries, and/or the American public.

II.A.1. FY21 ASADRP Research Aims

The overall strategy of the ASADRP supports the following Research Aims:

Aim 1 – Discover: Testing new chemical entities and repurposing existing medications in preclinical and non-clinical models of ASUD with comorbid PTSD and other psychological disorders.

Aim 2 – Phase 1 First-in-Human Safety: Conduct clinical trials of potential medications that include assessment of medical safety and doses for potential efficacy in subjects with ASUD and comorbid PTSD and other psychological disorders.

Aim 3 – Phase 2 Efficacy: Conduct multiple site clinical trials to test preliminary efficacy and safety of potential medications or medication combinations in humans with ASUD and comorbid PTSD and other psychological disorders, and to also explore precision medicine tools for matching patients to these medications.

The Consortium funded by this award will align its research strategy to follow the ASADRP Research Aims and Focus Areas, which seek to accelerate the translation of contemporary basic science knowledge into enhanced clinical pharmacological treatment protocols for ASUD, including a regulatory strategy for U.S. Food and Drug Administration (FDA) compliance.

Applicants are strongly urged to read and consider the ASADRP Strategic Plan and Medications Under Study before preparing their applications.

II.A.2. FY21 ASADRP Focus Areas

The Consortium will align its research studies to address all the following Focus Areas:

- Improved formulations to treat opioid use disorder with comorbid substance use.

- Improved formulations to treat opioid use disorders with comorbid PTSD and other psychological disorders.

- New formulations and/or combinations of existing medications to improve treatment compliance, prevent relapse, and reduce risk of misuse.

- Stronger, longer-duration formulations to counteract opioid (including fentanyl analogs) overdose.

- Novel medications and immunotherapies to treat ASUD.

- New medication targets for the treatment of ASUD.

II.A.3. Award History

The ASADRP CA mechanism was first offered in FY14. Since then, 11 CA applications have been received, and 2 have been awarded, for a funding rate of 18%.

II.B. Award Information

The FY21 ASADRP Consortium Award will support the establishment of a Consortium whose purpose is to conduct multidisciplinary, team-based translational research efforts to identify promising compounds and conduct preclinical and clinical research to test potential medications or medication combinations in humans with ASUD and comorbid PTSD and other psychological disorders, and to explore precision medicine tools for matching patients to these medications. The goal of this research is to reduce the burden of ASUD in society, to include reducing the overall number of opioid-related overdose deaths.

The Consortium will build on the research previously supported by two ASADRP consortia: Institute for Translational Neuroscience and Pharmacotherapies for Alcohol and Substance Abuse. Information about the ASADRP can be found at https://cdmrp.army.mil/asadrp/default.

The Consortium will ultimately consist of a single management core as well as basic research and clinical trial sites. ***The Consortium participants will be jointly responsible for prioritizing,***

proposing, conducting, and analyzing basic research and clinical trials and developing a roadmap to translate basic science knowledge into enhanced clinical pharmacological treatment protocols for ASUD.

A single organization must apply to this program announcement as a Consortium Management Core (CMC) through a single application and may also serve as a future research and/or trial site. The award resulting from this program announcement will be issued as a cooperative agreement between the recipient (CMC) and the government. Awards to federal government organizations (to include intramural DOD organizations) will be executed through the Military Interdepartmental Purchase Request (MIPR) or Funding Authorization Document (FAD) process. The government will have substantial involvement in the Consortium through a Programmatic Panel and USAMRDC staff interactions with the Consortium. Award funds will be used to support the CMC's efforts as well as Consortium-associated studies at the to-be-determined basic research and clinical trial sites. The CMC will manage and fund the basic research and clinical trial sites through appropriate subawards or other instruments.

It is expected that within the first year of the award, a solicitation will be released by the awardee and at least two studies (basic research studies and/or clinical trials) will be selected and funded. Subsequent solicitations will follow the Consortium strategic plan. The Consortium is expected to be an ongoing, self-sustaining entity following the maximum award period of performance.

Award selection will depend upon evaluation of the organization of the Consortium, available capabilities, the proposed research strategy for basic research and clinical trials to be implemented, and the feasibility of the collective group to accomplish the overall award objectives. Applications should highlight the ability of the proposed CMC to establish research collaborations. During the performance period, the CMC and all basic research and clinical trial sites will be responsible for working collaboratively to identify new basic research projects and clinical trials for implementation by the Consortium. ***Clinical trials that include military and Veteran populations are encouraged.***

The following are significant features of the FY21 ASADRP CA:

- **Impact:** The application should describe the burden of ASUD, especially opioid dependency, and detail how outcomes of the Consortium effort will reduce the overall number of opioid and substance use-related deaths. The application should demonstrate a broad understanding of ASUD research and the ability to conduct multidisciplinary, team-based translational research efforts to identify promising compounds to accelerate effective treatments for ASUD into clinical applications.

- **Research Strategy:** The application should demonstrate how the Consortium will align its research strategy to follow the ASADRP Research Aims and address elements of all the Focus Areas.

- **Translation:** The application should demonstrate how the Consortium will develop a roadmap that translates promising basic science knowledge into enhanced clinical pharmacological treatment protocols for ASUD. The application should also include a

regulatory strategy for FDA compliance that facilitates rapid development and accelerates translation to larger phase 2 trials that would perhaps not otherwise be feasible without the consortium approach.

- **Relevance to Military Health:** The ASADRP seeks to support research that is relevant to the healthcare needs of military Service Members, Veterans, and their families, especially how the research supports Service Members who have family members that struggle with addiction. ***Relevance to military health will be considered in determining relevance to the mission of the Defense Health Program and FY21 ASADRP during programmatic review.*** The Consortium is ***encouraged*** to consider the following characteristics as examples that demonstrate relevance to military health:

  - Use of military or Veteran populations, biospecimens, data/databases, or programs in the proposed research.

  - Collaboration with Department of Defense (DOD) or Department of Veterans Affairs (VA) investigators.

  - Involvement of military consultants (Army, Air Force) or specialty leaders (Navy, Marine Corps) to the Surgeons General in a relevant specialty area.

  - Description of how the knowledge, information, products, or technologies gained from the proposed research could be implemented in a dual-use capacity to address a military need that also benefits the civilian population.

Consortium Organizational Structure

1. **Consortium Management Core**

   The CMC Principal Investigator (PI) must have at least 51% appointment at the CMC's institution and will serve as the Director of the Consortium, Chair of the Consortium Executive Committee (CEC), and be the primary liaison with the USAMRDC Grants Officer's Representative (GOR).

   The Consortium will consist of a single management core as well as basic research and clinical trial sites. The CMC will be responsible for developing and managing basic research and clinical trials to develop a roadmap to translate promising basic science knowledge into enhanced clinical pharmacological treatment protocols for ASUD. This roadmap should include a product-driven, regulatory strategy for FDA compliance to include building on research previously supported by the ASADRP. The CMC will provide the administrative, protocol development and review, regulatory, statistical, resource, and data management/storage functions necessary to facilitate rapid development of research that would perhaps not otherwise be feasible without the consortium approach.

   The CMC PI must have strong leadership experience in managing a collaborative, multi-institution research effort and must include a multidisciplinary team of exceptional subject matter experts who demonstrate a broad understanding of ASUD research, including knowledge of reducing the overall number of opioid-related overdose deaths.

The application should identify and describe the core facilities and functions that the CMC will provide to the Consortium participants (i.e., data management, statistical analysis, scientific communication, etc.).

The CMC is expected to:

○ Establish a Consortium organizational structure.

○ Designate a Consortium Research Project Manager, who will oversee and support the efforts of the Research Coordinators at each of the basic research and clinical trial sites. The Consortium Research Project Manager will be responsible for coordinating and facilitating animal and clinical protocol approval, and monitoring accrual and study activities across all sites.

○ Ensure that the Consortium adheres to the planned timeline and milestones for overall study execution.

○ Manage a communications plan and real-time communications with the basic research and clinical trial sites.

○ Be responsible for establishing procedures for releasing a competitive call for basic research and clinical trial proposals and be responsible for coordinating all aspects of proposal receipt and review including external independent scientific peer review. It is expected that within the first year of the award, a solicitation will be released and at least two studies will be selected and awarded. Subsequent solicitations will follow the Consortium strategic plan.

○ Manage procedures to ensure that all sites maintain compliance with local Institutional Review Boards (IRBs) and the USAMRDC Office of Research Protections (ORP) Human Research Protection Office (HRPO) for the proper conduct of clinical studies and the protection of human subjects; or to the local Institutional Animal Care and Use Committees (IACUCs) and the USAMRDC ORP Animal Care and Use Review Office (ACURO) for animal studies.

○ Manage Consortium-developed quality assurance and quality control mechanisms for study monitoring, including, but not limited to:

    – On-site monitoring program (to include safety).

    – Management plan for the handling, distribution, and banking of specimens and imaging products generated from Consortium studies.

    – Registration, tracking, and reporting of participant accrual.

    – Timely medical review, rapid reporting, and communication of adverse events as well as establishment of a safety committee to provide timely analysis of adverse events.

    – Interim evaluation and consideration of measures of outcome.

○ To support future studies that involve human subjects research, implement statistical execution plans/support for all Consortium clinical studies that can address the following:

– Develop statistical model(s) and data analysis plan with respect to the study objectives and endpoints as appropriate for the type of studies required.

– Establish study variables required and describe how they will be measured, including a description of appropriate controls and the endpoints to be tested, and the reliability and validity of assessment measures, if applicable.

– Develop methods required that will be used to recruit a sample cohort from the accessible population (e.g., convenience, simple random, stratified random).

– Develop human subject-to-group assignment process required (e.g., randomization, block randomization, stratified randomization, age-matched controls, alternating group, or other procedures), if applicable.

– Identify specific actions to accomplish the group assignment (e.g., computer assignment, use of table of random numbers).

○ To support future studies that involve human subjects research, implement human subject recruitment and safety procedures for all Consortium clinical studies that address the following:

– Study Population: Identify the target population to whom the study findings will be generalized and the nature, approximate number, and pertinent demographic characteristics of the accessible population at the study site (population from whom the sample will be recruited). The research team's access to the proposed study population and the inclusion and exclusion criteria for the proposed studies should be considered. Inclusion/exclusion criteria should take into consideration the specific risk profile of the studies to be conducted and the standard of care for that patient population.

– Inclusion of Women and Minorities in Study: Consistent with the Belmont Report, "Ethical Principles and Guidelines for the Protection of Human Subjects," and congressional legislation, special attention is given to inclusion of women and/or minorities in studies funded or supported by the USAMRDC. This policy is intended to promote equity both in assuming the burdens and in receiving the benefits of human subjects research. Justification should be requested if women and/or minorities will be excluded from the clinical research/trial. ***Studies of diverse populations to identify potential measures of patient outcomes are encouraged.***

– Recruitment Plan: The methods for identification of potential human subjects for the proposed studies. The recruitment plan should take into consideration a description of the recruitment process (who will identify potential human subjects, who will recruit them, and what methods will be used to recruit them), the compensation plan if the human subjects will be compensated for participation in the study, and the recruitment and advertisement materials.

– Informed Consent Plan: The plan for obtaining informed consent from human subjects for the proposed studies. The informed consent plan for the proposed studies should take into consideration:

- Who is responsible for explaining the study, answering questions, and obtaining informed consent to ensure that human subjects' questions will be addressed during the consent process and throughout the trial.

- The timing and location of the consent process.

- Issues relevant to the mental capacity of the potential human subject (e.g., altered capacity due to administration of any mind-altering substances such as tranquilizers, conscious sedation or anesthesia, brain injury, stress/life situations, or human subject age), if applicable.

- How privacy and time for decision making will be provided and whether or not the potential human subject will be allowed to discuss the study with anyone before making a decision.

- The need for obtaining ongoing consent or for re-assessing capacity over the course of a long-term study, describing any relevant procedures to assure continued consent.

- The plan for the consent of the individual's Legally Authorized Representative (LAR) to be obtained prior to the human subject's participation in the study (if applicable). State law defines who may act as the LAR. The local IRB of record should be consulted for guidance regarding who can serve as LAR for research at the study site.

- Screening Procedures: Evaluations (e.g., laboratory procedures, history, or physical examination) that are required to determine eligibility/suitability for study participation and the diagnostic criteria for entry.

- Note that some screening procedures may require a separate consent or a two-stage consent process. Informed consent must be obtained prior to initiation of any procedures for the purpose of determining eligibility.

– Risks/Benefits Assessment:

- Foreseeable risks: Identification of all study risks. Study risks include any risks that the human subject is exposed to as a result of participation in the clinical study or trial. Consider psychological, legal, social, and economic risks as well as physical risks. If the risks are unknown, this should be stated. If applicable, any potential risk to the study personnel should be identified.

- Risk management and emergency response:

  - Safety measures to minimize and/or eliminate risks to human subjects and study personnel or to manage unpreventable risks. Include safeguards and planned responses such as dose reduction or stopping criteria based on toxicity grading scales or other predetermined alert values.

  - Plan for provision of emergency care or treatment for an adverse event for study-related injuries, to include who will be responsible for the cost of such care.

  - Special precautions to be taken by the human subjects before, during, and after the study (e.g., medication washout periods, dietary restrictions, hydration, fasting, and pregnancy prevention).

  - Special care (e.g., transportation due to side effects of study intervention impairing ability to drive) or equipment (e.g., thermometers, telemedicine equipment) needed for human subjects enrolled in the study.

- Potential benefits of the studies to the human subject, a specific community, or society.

○ Manage the regulatory strategy for FDA compliance leading to potential product development and licensing. Ensure that all investigators are FDA-registered to use Investigational New Drugs (INDs); and manage procedures for ensuring compliance with FDA requirements for investigational agents and devices.

○ Manage standardization and, when appropriate, centralized review of imaging, histopathology, neuropsychological, and other data through committees and scientific core facilities.

○ Manage Consortium-developed comprehensive data collection and data management systems that address the needs of all basic research and clinical trial sites in terms of access to data, data security, data integrity measures, and data sharing. Data collection and management should include the components listed below:

– Unique identifiers or specific code system to be used to identify human subjects, if applicable.

– Confidentiality:

  - Measures taken to protect the privacy of human subjects and maintain confidentiality of study data. Strategies to protect the privacy and confidentiality of study records, particularly those containing identifying information, should be addressed.

  - Access to study records, data, and specimens, including an acknowledgment that representatives of USAMRDC are eligible to review study records.

- Requirements for reporting sensitive information (if applicable) to state or local authorities.

- Where data (both electronic and hard copy) will be stored, who will keep the data, how the data will be stored, and the length of time data will be stored.

- How data will be reported and how it will be assured that the documentation will support a regulatory filing with the FDA, if applicable.

- Whether or not the results of screening and/or study participation will be shared with human subjects or their primary care provider, to include results from any screening or diagnostic tests performed as part of the study.

- How information, data, and research resources generated under awards funded by this program announcement will be made available to the research community (which includes both scientific and consumer advocacy communities) and to the public at large.

○ Manage Consortium-developed laboratory evaluations, which should include the components listed below:

- Specimens to be collected, schedule, and amount.

- Evaluations that will be made for study purposes. How the results of laboratory evaluations will be used to meet the objectives of the study (or to monitor safety of human subjects).

- Specimen storage, to include location of storage, how long specimens will be stored, any special conditions required, labeling, and disposition.

- Laboratories performing evaluations and special precautions. If transport of samples is required, provisions for ensuring proper storage during transport.

○ Manage costs to support the basic research and clinical trial sites, including provision of personnel, equipment, and materials required to conduct approved basic research and clinical studies.

○ Manage Consortium-related intellectual and material property issues among organizations participating in the Consortium.

○ Manage Consortium-developed procedures for the timely publication of major findings and other public dissemination of data.

○ Coordinate the preparation of annual briefings to the In-Progress Review (IPR) Panel, Consortium Steering Committee (CSC) Panel, and USAMRDC in person, by teleconference and/or by video teleconference.

- Develop, organize, and submit quarterly written progress reports, annual reports, and a final written comprehensive report to the USAMRDC. These reports must outline accrual and retention statistics, any problems with study execution, plans for remediation, and actions to disseminate study results.

Additional competencies of the CMC may be identified and justified as being essential to the success of the Consortium.

2. **Consortium Executive Committee**

The CMC will appoint members to the CEC, which will be comprised of the CMC PI, the Consortium Research Project Manager, the research site PIs, and additional ad hoc subject matter expert representatives. The CEC will be responsible for soliciting research proposals making programmatic recommendations to the CSC, and guiding basic research and clinical trials to test promising compounds. The CEC will develop relationships with pharmaceutical companies that offer a path to obtaining FDA approval to support a future New Drug Application (NDA) filing and eventual phase 3 testing. It is recommended that a commercial partner be obtained as early as possible in the medication development process. The CMC will coordinate the regulatory strategy for FDA compliance, in collaboration with the industry sponsor, leading to potential product development and licensing. The CMC staff will be responsible for facilitating and coordinating these processes. ***All studies considered for funding will undergo a two-tier review to include external independent scientific review and further review by the CEC, which will provide an Order of Merit List of studies recommended for funding to the ASADRP CSC.*** The CEC, through the CMC PI, will be expected to maintain regular contact with a USAMRDC GOR/CDMRP Science Officer.

3. **Basic Research and Clinical Trial Sites**

The Consortium shall present a plan for incorporating basic research and clinical trial sites necessary to effectively support the Consortium goals. ***The plan should include criteria that will be used to evaluate, select, and monitor progress/performance of select studies and sites, including prioritizing, proposing, conducting, and analyzing basic research and clinical trials to develop a roadmap to translate promising basic science knowledge into enhanced clinical pharmacological treatment protocols for ASUD, including a regulatory strategy for FDA compliance.*** The research sites may include military and VA locations, and it is preferred that the sites have experience working with military and Veteran populations*. **It is expected that within the first year of the award at least two studies will be selected and funded.*** The following are factors that should be considered, as applicable, when selecting studies:

- Lead site PIs' commitment to and experience in ASUD research. It is expected that each site will demonstrate sufficient depth in expertise and leadership to account for any unforeseen change in the lead site PIs.

- Designation of a lead site PI and development of a succession plan upon request in case of departure of the site PI; the site PI must agree to adhere to the Consortium management plan and participate fully in the CEC.

○ Designation of a research coordinator, who will interact with the research coordinators of other research sites and the Consortium Research Project Manager, to expedite and guide animal and clinical protocols through regulatory approval processes and when applicable, coordinate accrual and study activities.

○ Ability to develop proposals in accordance with the Consortium management plan for consideration for funding by the ASADRP or CEC during the performance period of the award.

○ Evidence of multidisciplinary clinical and/or laboratory expertise within the institution that could serve as the basis for the development of clinical protocols by the Consortium.

○ Ability to collaborate with other Consortium basic research and clinical trial sites.

○ Demonstration of adequate resources for coordinating with the CMC and other sites.

○ Evidence of institutional commitment to using facilities and resources in the conduct of Consortium studies, as required.

○ Demonstration of adequate resources and expertise in ASUD patient recruitment and processing, including specimen collection.

○ Ability to access a suitable patient population that will support a meaningful outcome for the study.

○ Ability to enroll military and Veteran participants in Consortium-sponsored studies.

○ Inclusion of a clearly articulated statistical analysis plan, appropriate statistical expertise on the research team, and a power analysis reflecting sample size projections that will clearly answer the objectives of the study.

○ Commitment to implement procedures established by the CMC to meet local IRB and USAMRDC ORP HRPO requirements for the conduct of clinical trials and the protection of human subjects.

○ Adherence to federal data sharing requirements and appropriate utilization of topic-specific common data elements (CDEs), and sharing of data with the CMC.

○ Implementation of procedures established by the CMC for data collection methodology and strategies.

○ Demonstration of adequate resources and expertise for data management, and maintenance of data security/confidentiality in accordance with the Consortium standard operating procedures (SOPs)/other procedures established by the CMC.

○ Compliance with Consortium-developed quality assurance and quality control procedures, as appropriate, including:

– Participation in an on-site monitoring program to be managed by the CMC.

- Implementation of the Consortium-developed management plan for acquisition and aggregation of protocol-specified specimens, biological fluids, and relevant data to the appropriate laboratories for testing and/or storage.

- Submission of appropriate data and materials to allow for verification and review of protocol-related procedures (e.g., pathology, imaging techniques, surgical methods, and therapeutic use).

○ Ability to be a resource for the conduct of laboratory projects as appropriate.

○ Implementation of procedures established by the CMC for ensuring compliance with FDA requirements for investigational agents and devices, as appropriate.

- Description of the planned indication for the product label including an outline of the regulatory strategy and development plan required to support that indication.

- Demonstration of documented availability of and access to the drug/compound, device, and/or other materials needed. The quality of the product should be commensurate with FDA manufacturing standards applicable to the type and phase of product being developed (i.e., Quality System Regulation, Good Manufacturing Practices).

○ Participation in Consortium-developed procedures for the timely publication of major findings.

○ Participation in Consortium-developed procedures for resolving intellectual and material property issues among organizations participating in the Consortium.

○ Participation in the preparation of written and oral briefings to the IPR Panel, Programmatic Panel, and USAMRDC to be held either in the Washington DC metropolitan area, by teleconference, and/or by video teleconference.

○ Assistance with the preparation of quarterly written progress reports, annual reports, and a final comprehensive report.

○ Preparations for a site visit audit, if requested by the government.

Additional competencies for the basic research and clinical trial sites may be identified and justified as being essential to the success of the Consortium.

4. Responsibilities of all Consortium Participants

All Consortium participants must adhere to the Consortium procedures established by the CMC. A Consortium management plan that describes the responsibilities of the CMC to include a plan to address underperforming sites and a succession plan for any unforeseen change in the lead PI must be developed by the Consortium no later than 12 months after the award date. The Consortium management plan will also include a plan for the CEC composition and responsibilities.

5. **Strategic Research Plan**

The CMC PI must provide a strategic research plan that supports the ASADRP Research Aims and Focus Areas to include Consortium aims and objectives. The plan should include the scientific rationale behind the Consortium approach to achieve the aims and objectives. *The plan should include a description of the types of studies that will be solicited and how these will translate basic science knowledge into enhanced clinical pharmacological treatment protocols for ASUD, to include reducing the overall number of opioid-related overdose deaths, using a product-driven, regulatory strategy for FDA compliance and building on research previously supported by the ASADRP.* The plan should project the number, types, and scope of basic research projects and clinical studies the Consortium expects to execute during the performance period of the award. The strategic plan should outline a feasible timeline that aligns milestones and deliverables with the Consortium aims and objectives. *It is expected that within the first year of the award, a solicitation will be released by the Consortium and at least two studies will be selected and funded. Subsequent solicitations will follow the Consortium strategic plan.*

6. **Consortium Steering Committee**

The CSC is composed of federal and non-federal subject matter experts. The role of the CSC will be to provide programmatic oversight and recommendations to the CMC and CSC, to inform the CEC about evolving ASADRP priorities and gaps, and to conduct programmatic review of CEC-recommended study proposals. The CSC will be responsible for recommending studies to be funded and may recommend future studies and/or Focus Areas to the Consortium.

The types of awards made under the program announcement will be assistance agreements. An assistance agreement is appropriate when the federal government transfers a "thing of value" to a "state, local government," or "other recipient" to carry out a public purpose of support or stimulation authorized by a law of the United States instead of acquiring property or service for the direct benefit and use of the U.S. government. An assistance agreement can take the form of a grant or cooperative agreement. The level of involvement on the part of the DOD during project performance is the key factor in determining whether to award a grant or cooperative agreement. If "no substantial involvement" on the part of the funding agency is anticipated, a grant award will be made (31 USC 6304). Conversely, if substantial involvement on the part of the funding agency is anticipated, a cooperative agreement will be made (31 USC 6305), and the award will identify the specific substantial involvement. Substantial involvement may include, but is not limited to, collaboration, participation, or intervention in the research to be performed under the award. The award type, along with the start date, will be determined during the negotiation process.

The anticipated total costs budgeted for the entire period of performance for an FY21 ASADRP Consortium Award will not exceed **$10.575M, of which only $3.525M is currently available**. The ASADRP Consortium Award will be funded initially with allocations from the FY21 ASADRP congressional appropriation ($3.525M). Refer to Section II.D.5, Funding Restrictions, for detailed funding information.

Awards will be made no later than September 30, 2022. For additional information refer to [Section II.F.1, Federal Award Notices](#).

The CDMRP expects to allot approximately $3.525M of FY21 funds (initial funding), and additional $3.525M per option of FY22 and FY23 funds, subject to Programmatic Panel review, approval of the Grants Officer, and receipt of congressional appropriations, totaling $10.575M, to fund approximately one Consortium Award application. Funding of applications received is contingent upon the availability of federal funds for this program as well as the number of applications received, the quality and merit of the applications as evaluated by scientific and programmatic review, and the requirements of the government. Funds to be obligated on any award resulting from this funding opportunity will be available for use for a limited time period based on the fiscal year of the funds. It is anticipated that awards made from this FY21 funding opportunity will be funded with FY21, FY22, and FY23 funds, if appropriated, which will expire for use on September 30, 2027, 2028, and 2029, respectively. The period of performance for the entire project is not to exceed 5 years.

Investigational New Drug (IND)/Investigational Device Exemption (IDE) Applications: If a clinical trial involves the use of a drug that has not been approved by the FDA for the proposed investigational use, evidence that an IND application that meets all requirements under the Code of Federal Regulations Title 21, Part 312 (21 CFR 312) has been submitted or will be submitted to the FDA within 60 days of subaward(s) is required. If the investigational product is a device, evidence that an IDE application that meets all requirements under 21 CFR 812 has been submitted or will be submitted to the FDA within 60 days of the subaward, or that the device is exempt from an IDE, is required. The government reserves the right to withdraw funding to the subaward(s) if the IND or IDE application has not been submitted to the FDA within 60 days of the DOD award date or if the documented status of the IND or IDE has not been obtained within 6 months of the subaward(s) date. The goal is to inform study design, sample size, and dosing for future clinical trials.

Funded clinical trials are required to file the study in the **National Institutes of Health (NIH) clinical trials registry,** https://www.clinicaltrials.gov. Refer to the General Application Instructions, Appendix 1, Section C, for further details.

Multi-Institutional Research: Multi-institutional research that combines the resources of two or more organizations is encouraged. Applicants are encouraged to collaborate with the National Institute of Alcohol Abuse and Alcoholism (NIAAA), National Institute of Drug Abuse (NIDA), and VA for consultation, guidance, and expertise on the design, conduct, and analysis of relevant clinical studies evaluating potential medications for treatment of ASUD. Depending upon the relevance of proposed FY21 ASADRP Consortium Award studies and availability of funds, the NIAAA, NIDA, and VA may consider contributing support to fund additional sites to expand upon the population being studied or adding an additional arm to conduct a comparison study involving behavioral interventions.

Participating institutions must be willing to resolve potential data sharing, intellectual and material property issues and to remove any barriers that may interfere with achieving high levels of cooperation to ensure successful completion of this award.

Partnerships with industry are also encouraged along with experience working with military and Veteran populations.

Research Involving Human Anatomical Substances, Human Subjects, or Human Cadavers: All DOD-funded research involving new and ongoing research with human anatomical substances, human subjects, or human cadavers must be reviewed and approved by the USAMRDC ORP, HRPO, prior to research implementation. This administrative review requirement is in addition to the local IRB or Ethics Committee (EC) review. Local IRB/EC approval at the time of submission is *not* required. ***Allow a minimum of 2 to 3 months for HRPO regulatory review and approval processes***. Refer to the General Application Instructions, Appendix 1, and the Human Research Protections Office Resources and Overview document available on the electronic Biomedical Research Application Portal (eBRAP) "Funding Opportunities & Forms" web page (https://ebrap.org/eBRAP/public/Program.htm) for additional information.

If the proposed research is cooperative (i.e., involving more than one institution), a written plan for single IRB review arrangements must be provided at the time of application submission or award negotiation. The lead institution responsible for developing the master protocol and master consent form should be identified and should be the single point of contact for regulatory submissions and requirements.

A clinical trial is defined as a research study in which one or more human subjects are prospectively assigned to one or more interventions (which may include placebo or other control) to evaluate the effects of the interventions on biomedical or behavioral health-related outcomes.

Clinical research is defined as: (1) patient-oriented research. Research conducted with human subjects (or on material of human origin such as tissues, specimens, and cognitive phenomena) for which an investigator (or colleague) directly interacts with human subjects. Excluded from this definition are in vitro studies that utilize human tissues that cannot be linked to a living individual. Patient-oriented research includes: (a) mechanisms of human disease, (b) therapeutic interventions, (c) clinical trials, and (d) development of new technologies; (2) epidemiologic and behavioral studies; and (3) outcomes research and health services research. *Note:* Studies that meet the requirements for IRB Exemption 4 are not considered CDMRP-defined clinical research. IRB Exemption 4 refers to research involving the collection or study of existing de-identified specimens or data, if these sources are publicly available.

Use of DOD or VA Resources: If the proposed research involves access to active-duty military patient populations and/or DOD or VA resources or databases, the application must describe the access at the time of submission and include a plan for maintaining access as needed throughout the proposed research. Refer to Section II.D.2.b.ii, Full Application Submission Components, for detailed information. Refer to the General Application Instructions, Appendix 1, for additional information.

Rigors of Experimental Design: All projects should adhere to a core set of standards for rigorous study design and reporting to maximize the reproducibility and translational potential of preclinical research. The standards are described in Landis, S.C., et al. A call for transparent

reporting to optimize the predictive value of preclinical research, *Nature* 2012, 490:187-191 (www.nature.com/nature/journal/v490/n7419/full/nature11556.html). While these standards are written for preclinical studies, the basic principles of randomization, blinding, sample-size estimation, and data handling derive from well-established best practices in clinical studies.

Research Involving Animals: All DOD-funded research involving new and ongoing research with animals must be reviewed and approved by the USAMRDC ORP ACURO, in addition to the local IACUC of record. IACUC approval at the time of submission is *not* required. *Allow at least 3 to 4 months for ACURO regulatory review and approval processes for animal studies.* Refer to the General Application Instructions, Appendix 1, for additional information.

Common Data Elements and Data Sharing: The ASADRP strongly encourages the applicant to incorporate CDE measures from the Core and Specialty collections, which are available in the Mental Health Research Collection (Psychiatric, Psychosocial, Alcohol, Tobacco, and other substances as well as Substance Abuse and Addiction) of the PhenX Toolkit https://www.phenxtoolkit.org/index.php into all studies involving human subjects as applicable. For TBI populations, the ASADRP strongly encourages the applicant to incorporate CDE measures from the National Institute of Neurological Disorders and Stroke (NINDS) https://www.commondataelements.ninds.nih.gov/.

If the project includes TBI research, the PI may be required to make TBI data generated via an award available to the research community by depositing de-identified research data and TBI CDE measures into the Federal Interagency TBI Research (FITBIR) Informatics System (https://fitbir.nih.gov).

II.C. Eligibility Information

II.C.1. Eligible Applicants

II.C.1.a. Organization: All organizations, including foreign organizations, foreign public entities, and international organizations, are eligible to apply.

Government Agencies Within the United States: Local, state, and federal government agencies are eligible to the extent that applications do not overlap with their fully funded internal programs. Such agencies are required to explain how their applications do not overlap with their internal programs.

As applications for this program announcement may be submitted by extramural and intramural organizations, these terms are defined below.

Extramural Organization: An eligible non-DOD organization. Examples of extramural organizations include academic institutions, biotechnology companies, foundations, federal government organization other than the DOD, and research institutes.

Intramural DOD Organization: A DOD laboratory, DOD military treatment facility, and/or DOD activity embedded within a civilian medical center. *Intramural Submission: Application submitted by a DOD organization for an intramural investigator working within a DOD*

laboratory or military treatment facility or in a DOD activity embedded within a civilian medical center.

USAMRAA makes awards to eligible organizations, not to individuals.

II.C.1.b. Principal Investigator

- Independent intramural (DOD) and extramural investigators at all academic levels (or equivalent) are eligible to submit applications.

- Eligible investigators must apply through an organization.

- An intramural investigator is defined as a DOD military or civilian employee working within a DOD laboratory or military treatment facility, or working in a DOD activity embedded within a civilian medical center. Submissions from intramural (DOD) organizations are allowed and encouraged for this program announcement. Applicants submitting through their intramural organizations are reminded to coordinate receipt and commitment of funds through their respective resource managers. *If an investigator at an intramural organization is named as a collaborator on an application submitted through an extramural organization, the application must include a letter from the collaborator's Commander or Commanding Officer at the intramural organization that authorizes the collaborators involvement.*

An investigator may be named as a CMC PI on only one FY21 ASADRP Consortium Award application.

An eligible PI, regardless of ethnicity, nationality, or citizenship status, must be employed by, or affiliated with, an eligible organization.

The CDMRP encourages all PIs to participate in a digital identifier initiative through Open Researcher and Contributor ID, Inc. (ORCID). Registration for a unique ORCID identifier can be done online at https://orcid.org/.

II.C.2. Cost Sharing

Cost sharing/matching is not an eligibility requirement.

II.C.3. Other

Organizations must be able to access **.gov** and **.mil** websites in order to fulfill the financial and technical deliverable requirements of the award and submit invoices for payment.

For general information on required qualifications for award recipients, refer to the General Application Instructions, Appendix 3.

Refer to Section II.H.2, Administrative Actions, for a list of administrative actions that may be taken if a pre-application or application does not meet the administrative, eligibility, or ethical requirements defined in this program announcement.

II.D. Application and Submission Information

Submission of applications that are essentially identical or propose essentially the same research project to different funding opportunities within the same program and fiscal year is prohibited and will result in administrative withdrawal of the duplicative application(s).

Extramural Submission:

- Pre-application content and forms must be accessed and submitted at eBRAP.org.

- Full application packages must be accessed and submitted at Grants.gov.

Intramural DOD Submission:

- Pre-application content and forms must be accessed and submitted at eBRAP.org.

- Full application packages must be accessed and submitted at eBRAP.org.

Note: Applications from an intramural DOD organization or from an extramural federal government organization may be submitted to Grants.gov through a research foundation.

II.D.1. Address to Request Application Package

eBRAP is a multifunctional web-based system that allows PIs to submit their pre-applications electronically through a secure connection, to view and edit the content of their pre-applications and full applications, to receive communications from the CDMRP, and to submit documentation during award negotiations and period of performance.

Contact information for the CDMRP Help Desk and the Grants.gov Contact Center can be found in Section II.G, Federal Awarding Agency Contacts.

II.D.2. Content and Form of the Application Submission

Submission is a two-step process requiring both *pre-application* (eBRAP.org) and *full application* (eBRAP.org or Grants.gov) as indicated below. The submission process should be started early to avoid missing deadlines. There are no grace periods. Full application submission guidelines differ for extramural (Grants.gov) and intramural (eBRAP.org) organizations (refer to Table 1, Full Application Guidelines).

The application title, eBRAP log number, and all information for the PI, Business Official(s), performing organization, and contracting organization must be consistent throughout the entire pre-application and full application submission process. Inconsistencies may delay application processing and limit or negate the ability to view, modify, and verify the application in eBRAP. If any changes need to be made, the applicant should contact the CDMRP Help Desk at help@eBRAP.org or 301-682-5507 prior to the application submission deadline.

II.D.2.a. Step 1: Pre-Application Submission Content

During the pre-application process, eBRAP assigns each submission a unique log number. This unique eBRAP log number is required during the full application submission process.

To begin the pre-application process, first select whether the submitting organization is extramural or intramural, then confirm your selection or cancel. **Incorrect selection of extramural or intramural submission type will delay processing.**

If an error has been made in the selection of extramural versus intramural and the pre-application submission deadline has passed, the PI or Business Official must contact the CDMRP Help Desk at help@eBRAP.org or 301-682-5507 to request a change in designation.

All pre-application components must be submitted by the PI through eBRAP (https://eBRAP.org/).

The applicant organization and associated PI identified in the pre-application should be the same as those intended for the subsequent application submission. If any changes are necessary after submission of the pre-application, the applicant must contact the CDMRP Help Desk at help@eBRAP.org or 301-682-5507.

PIs with an ORCID identifier should enter that information in the appropriate field in the "My Profile" tab in the "Account Information" section of eBRAP.

The pre-application consists of the following components, which are organized in eBRAP by separate tabs (refer to the General Application Instructions, Section II.B, for additional information on pre-application submission):

- **Tab 1 – Application Information**

  Submission of application information includes assignment of primary and secondary research classification codes, which may be found at https://ebrap.org/eBRAP/public/Program.htm. Applicants are strongly encouraged to review and confirm the codes prior to making their selection.

- **Tab 2 – Application Contacts**

  Enter contact information for the PI. Enter the organization's Business Official responsible for sponsored program administration (the "person to be contacted on matters involving this application" in Block 5 of the Grants.gov SF424 Research & Related Form). The Business Official must be either selected from the eBRAP list or invited in order for the pre-application to be submitted.

  Select the performing organization (site at which the PI will perform the proposed work) and the contracting organization (organization submitting on behalf of the PI, which corresponds to Block 5 on the Grants.gov SF424 Research & Related Form), and click on "Add Organizations to this Pre-application." The organization(s) must be either selected from the eBRAP drop-down list or invited in order for the pre-application to be submitted.

It is recommended that applicants identify an Alternate Submitter in the event that assistance with pre-application submission is needed.

- **Tab 3 – Collaborators and Key Personnel**

  Enter the name, organization, and role of all collaborators and key personnel associated with the application.

  FY21 ASADRP Programmatic Panel members should not be involved in any pre-application or application. For questions related to panel members and pre-applications or applications, refer to Section II.H.2.c, Withdrawal, or contact the CDMRP Help Desk at help@eBRAP.org or 301-682-5507.

- **Tab 4 – Conflicts of Interest**

  List all individuals other than collaborators and key personnel who may have a conflict of interest in the review of the application (including those with whom the PI has a personal or professional relationship).

- **Tab 5 – Pre-Application Files**

  Letter of Intent (LOI) (one-page limit): Provide a brief description of how the Research Consortium will address the ASADRP Research Aims and Focus Areas. LOIs are used for program planning purposes only (e.g., reviewer recruitment) and will not be reviewed during either the peer or programmatic review sessions.

- **Tab 6 – Submit Pre-Application**

  This tab must be completed for the pre-application to be accepted and processed.

II.D.2.b. Step 2: Full Application Submission Content

The CDMRP cannot make allowances/exceptions to its policies for submission problems encountered by the applicant organization using system-to-system interfaces with Grants.gov.

Each application submission must include the completed full application package for this program announcement. The full application package is submitted by the Authorized Organizational Representative through Grants.gov (https://www.grants.gov/) for extramural organizations or through eBRAP (https://ebrap.org/) for intramural organizations. See Table 1 below for more specific guidelines.

II.D.2.b.i. Full Application Guidelines

Extramural organizations must submit full applications through Grants.gov. Applicants must create a Grants.gov Workspace for submission, which allows the application components to be completed online and routed through the applicant organization for review prior to submission. Applicants may choose to download and save individual PDF forms rather than filling out webforms in Workspace. A compatible version of Adobe Reader **must** be used to view,

complete, and submit an application package consisting of PDF forms. If more than one person is entering text into an application package, the *same version* of Adobe Reader software should be used by each person. Check the version number of the Adobe software on each user's computer to make sure the versions match. Using different versions of Adobe Reader may cause submission and/or save errors – even if each version is individually compatible with Grants.gov. Refer to the General Application Instructions, Section III, and the "Apply For Grants" page of Grants.gov (https://www.grants.gov/web/grants/applicants/apply-for-grants.html) for further information about the Grants.gov Workspace submission process. Submissions of extramural applications through eBRAP may be withdrawn.

Do not password protect any files of the application package, including the Project Narrative.

Table 1. Full Application Submission Guidelines

Extramural Submissions	Intramural DOD Submissions
Application Package Location	
Download application package components for W81XWH-21-ASADRP-CA from Grants.gov (https://www.grants.gov) and create a Grants.gov Workspace. Workspace allows online completion of the application components and routing of the application package through the applicant organization for review prior to submission.	Download application package components for W81XWH-21-ASADRP-CA from eBRAP (https://ebrap.org).
Full Application Package Components	
SF424 Research & Related Application for Federal Assistance Form: Refer to the General Application Instructions, Section III.A.1, for detailed information.	**Tab 1 – Summary:** Provide a summary of the application information. **Tab 2 – Application Contacts:** This tab will be pre-populated by eBRAP; add Authorized Organizational Representative.

Descriptions of each required file can be found under Full Application Submission Components:
 	
• Attachments
• Research & Related Personal Data
• Research & Related Senior/Key Person Profile (Expanded)
• Research & Related Budget
• Project/Performance Site Location(s) Form
• Research & Related Subaward Budget Attachment(s) Form
	Tab 3 – Full Application Files: Upload files under each Application Component in eBRAP. Descriptions of each required file can be found under Full Application Submission Components:
	
	    • Attachments
	    • Key Personnel
	    • Budget
	    • Performance Sites
	
	Tab 4 – Application and Budget Data: Review and edit proposed project start date, proposed end date, and budget data pre-populated from the Budget Form.

Extramural Submissions	Intramural DOD Submissions
Application Package Submission	
Create a Grants.gov Workspace. Add participants (investigators and Business Officials) to Workspace, complete all required forms, and check for errors before submission. **Submit a Grants.gov Workspace Package.** An application may be submitted through Workspace by clicking the "Sign and Submit" button on the "Manage Workspace" page, under the "Forms" tab. Grants.gov recommends submission of the application package **at least 24-48 hours prior to the close date** to allow time to correct any potential technical issues that may disrupt the application submission. *Note:* If either the Project Narrative or the budget fails eBRAP validation or if the Project Narrative or the budget needs to be modified, an updated Grants.gov application package must be submitted via Grants.gov as a "Changed/Corrected Application" with the previous Grants.gov Tracking ID *prior to* the application submission deadline. *Do not password protect any files of the application package, including the Project Narrative.*	**Submit package components to eBRAP (https://ebrap.org).** **Tab 5 – Submit/Request Approval Full Application:** After all components are uploaded and prior to the full application submission deadline, enter your password in the space provided next to "Enter Your Password Here" and press the "Submit Full Application" button. eBRAP will notify your Resource Manager/Comptroller/Task Area Manager or equivalent Business Official by email. *Do not password protect any files of the application package, including the Project Narrative.*
Application Verification Period	
The full application package submitted to Grants.gov may be viewed and modified in eBRAP until the end of the application verification period. During the application verification period, the full application package may be modified *with the exception of the Project Narrative and Research & Related Budget Form*.	After eBRAP has processed the full application, the organizational Resource Manager/ Comptroller/Task Area Manager or equivalent Business Official and PI will receive email notification of this status and will be able to view and modify application components in eBRAP. During the application verification period, the full application package may be modified *with the exception of the Project Narrative and Research & Related Budget Form*. Your Resource Manager/ Comptroller/Task Area Manager or equivalent Business Official should log into eBRAP to review and to approve prior to the application verification deadline.

Extramural Submissions	Intramural DOD Submissions
Further Information	
Tracking a Grants.gov Workspace Package. After successfully submitting a Workspace package, a Grants.gov Tracking Number is automatically assigned to the package. The number will be listed on the "Confirmation" page that is generated after submission. Refer to the General Application Instructions, Section III, for further information regarding Grants.gov requirements.	Refer to the General Application Instructions, Section IV, for further information regarding eBRAP requirements.

The full application package must be submitted using the unique eBRAP log number to avoid delays in application processing.

II.D.2.b.ii. Full Application Submission Components

- **Extramural Applications Only**

  SF424 Research & Related Application for Federal Assistance Form: Refer to the General Application Instructions, Section III.A.1, for detailed information.

- **Extramural and Intramural Applications**

  Attachments:

  Each attachment to the full application components must be uploaded as an individual file in the format specified and in accordance with the formatting guidelines listed in the General Application Instructions, Appendix 4.

  For all attachments, ensure that the file names are consistent with the guidance. Attachments will be rejected if the file names are longer than 50 characters or have incorrect file names that contain characters other than the following: A-Z, a-z, 0-9, underscore, hyphen, space, and period. In addition, there are file size limits that may apply in some circumstances. Individual attachments may not exceed 20 MB, and the file size for the entire full application package may not exceed 200 MB.

  ○ **Attachment 1: Project Narrative (20-page limit): Upload as "ProjectNarrative.pdf".** The page limit of the Project Narrative applies to text and non-text elements (e.g., figures, tables, graphs, photographs, diagrams, chemical structures, drawings) used to describe the project. Inclusion of URLs that provide additional information to expand the Project Narrative and could confer an unfair competitive advantage is prohibited and may result in administrative withdrawal of the application.

Describe the proposed project in detail using the outline below.

– **Background:** Describe how the Consortium organizational structure and research strategy will implement a multidisciplinary, team-based translational research effort to identify promising compounds and conduct preclinical and clinical research to test potential medications or medication combinations in humans with ASUD and comorbid PTSD and other psychological disorders, and to explore precision medicine tools for matching patients to these medications. The goal of this research is to reduce the burden of ASUD in society, to include reducing the overall number of opioid-related overdose deaths. Explain how the Consortium will build on the research previously supported by the ASADRP. Present the ideas and reasoning behind the Consortium. Describe previous experience most pertinent to the proposed effort. *Cite relevant literature and preliminary data*.

– **Personnel:** State the qualifications of the PI and key personnel to perform management of the Consortium including, but not limited to, the following:

  ▪ Provide an organizational chart identifying key members of the study team including institution/center/department.

  ▪ Describe how well the CMC PI demonstrates collaborative leadership experience in managing a collaborative, multidisciplinary team of researchers and how they have a broad understanding of ASUD research, including knowledge of the current state of ASUD research with respect to the military context. Describe the background and expertise of the PI and other key Consortium personnel and their ability to plan, prioritize, solicit proposals, and provide oversight and coordination of basic research projects and clinical trials that will be supported by the Consortium.

  ▪ Describe the extent to which the PI and other key Consortium personnel possess the multidisciplinary subject matter expertise to support ASUD research and the ASADRP Research Aims and Focus Areas. This expertise should include (1) managing the regulatory strategy for FDA compliance for all future sites that will be supported by the Consortium and (2) ensuring that all sites supported by the Consortium maintain compliance with local IRBs and the USAMRDC ORP HRPO for the proper conduct of clinical studies and the protection of human subjects or to the local IACUCs and the USAMRDC ORP ACURO if there is a potential for animal studies.

  ▪ Describe how the PI's and other key Consortium personnel records of accomplishments demonstrate their understanding of working with military and Veteran populations.

– **Research Strategy:** Describe the strategic research plan that includes the Consortium aims and objectives. The plan should include the scientific rationale behind the Consortium approach to achieve the aims and objectives, including, but not limited to, the following:

- Describe how the Consortium will address the ASADRP Research Aims and Focus Areas using a multidisciplinary team-based translational research approach. Describe the types of studies and how the CMC will solicit them to address the Focus Areas; describe how these studies will contribute to accelerating promising findings to enhanced clinical pharmacological treatment protocols for ASUD to include building on research previously supported by the ASADRP.

- Describe how the regulatory strategy for FDA compliance will be developed. The plan should project the number, types, and scope of basic research projects and clinical studies the Consortium expects to execute during the performance period of the award. The plan should outline a feasible timeline that aligns milestones and deliverables with the Consortium aims and objectives. It is expected that within the first year of the award, a solicitation will be released by the Consortium and at least two studies will be selected and awarded. Subsequent solicitations will follow the Consortium strategic plan.

- Describe how the Consortium plans to manage animal studies and clinical research to include quality assurance, compliance with USAMRDC ORP, and quality control mechanisms for study monitoring.

- Describe how the Consortium plans to management the sharing of research data.

- Describe the appropriateness of the populations for the proposed studies, and the feasibility of accessing the populations. If a non-military population will be used for the proposed research project, explain how the population simulates the targeted population (i.e., Service Members or Veterans).

- Describe the strategy for the inclusion of women and minorities appropriate to the objectives of the study, including a description of the composition of the proposed study population in terms of sex/gender, racial, and ethnic group, and an accompanying rationale for the selection of subjects.

- Describe how the Consortium will resolve potential problems and address alternative approaches.

- **Attachment 2: Supporting Documentation: Combine and upload as a single file named "Support.pdf".** Start each document on a new page. If documents are scanned to PDF, the lowest resolution (100 to 150 dpi) should be used. The Supporting Documentation attachment should not include additional information such as figures, tables, graphs, photographs, diagrams, chemical structures, or drawings. These items should be included in the Project Narrative.

  There are no page limits for any of these components unless otherwise noted. Include only those components described below; inclusion of items not requested or viewed as an extension of the Project Narrative will result in the removal of those items or may result in administrative withdrawal of the application.

–   **References Cited:** List the references cited (including URLs, if available) in the Project Narrative using a standard reference format that includes the full citation (i.e., author[s], year published, title of reference, source of reference, volume, chapter, page numbers, and publisher, as appropriate).

–   **List of Abbreviations, Acronyms, and Symbols:** Provide a list of abbreviations, acronyms, and symbols.

–   **Facilities, Existing Equipment, and Other Resources:** Describe the facilities and equipment available for performance of the proposed project and any additional facilities or equipment proposed for acquisition at no cost to the award. Indicate whether or not government-furnished facilities or equipment are proposed for use. If so, reference should be made to the original or present government award under which the facilities or equipment items are now accountable. There is no form for this information.

–   **Publications and/or Patents:** Include a list of relevant publication URLs and/or patent abstracts. If articles are not publicly available, then copies of up to five published manuscripts may be included in Attachment 2. Extra items will not be reviewed.

–   **Letters of Organizational Support (if applicable; 1-page limit per letter):** Provide a letter (or letters, if applicable) signed by the Department Chair or appropriate organization official, confirming the laboratory space, equipment, and other resources available for the project. Letters of support not requested in the program announcement, such as those from members of Congress, do not impact application review or funding decisions.

–   **Letters of Collaboration (if applicable; 1-page limit per letter):** Provide a signed letter from each collaborating individual or organization that will demonstrate that the PI has the support or resources necessary for the proposed work. If an investigator at an intramural organization is named as a collaborator on an application submitted through an extramural organization, the application must include a letter from the collaborator's Commander or Commanding Officer at the intramural organization that authorizes the collaborator's involvement.

–   **Intellectual Property:** Information can be found in Code of Federal Regulations, Title 2, Part 200.315 (2 CFR 200.315), "Intangible Property."

   ▪   **Intellectual and Material Property Plan (if applicable):** Provide a plan for resolving intellectual and material property issues among participating organizations.

–   **Data and Research Resources Sharing Plan:** Describe how data and resources generated during the performance of the project will be shared with the research community. Refer to the General Application Instructions, Appendix 2, Section K, for more information about the CDMRP expectations for making data and research resources publicly available.

- **Use of DOD Resources (if applicable):** Provide a letter of support signed by the lowest-ranking person with approval authority confirming access to active-duty military populations and/or DOD resources or databases.

- **Use of VA Resources (if applicable):** Provide a letter of support from the VA Facility Director(s) or individual designated by the VA Facility Director(s), such as the Associate Chief of Staff for Research and Development (ACOS/R&D) or Clinical Service Chief, confirming access to VA patients, resources, and/or VA research space. For VA PIs, if the VA non-profit corporation is not identified as the applicant institution for administering the funds, include a letter from the VA ACOS/R&D confirming this arrangement and identifying the institution that will administer the funds associated with the proposed research.

- **Inclusion Enrollment Report:** Provide a plan for the inclusion of women and minorities appropriate to the objectives of the study with the proposed enrollment distributed on the basis of sex/gender, race, and ethnicity. The suggested Inclusion Enrollment Report format is a one-page fillable PDF form, which can be downloaded from eBRAP at https://ebrap.org/eBRAP/public/Program.htm.

○ **Attachment 3: Technical Abstract (one-page limit): Upload as "TechAbs.pdf".** The technical abstract is used by all reviewers. Abstracts of all funded research projects will be posted publicly. ***Do not include proprietary or confidential information.*** Use only characters available on a standard QWERTY keyboard. Spell out all Greek letters, other non-English letters, and symbols. Graphics are not allowed.

- **Background:** Describe how the Consortium organizational structure and research strategy will address the ASADRP Focus Areas. Present the ideas and reasoning behind the proposed effort.

- **Impact:** Summarize the potential impact of the Consortium toward the goals of ASUD research, including knowledge of how to reduce the overall number of opioid-related overdose deaths, and the ability to conduct multidisciplinary, team-based translational research efforts to identify promising compounds to accelerate effective treatments for ASUD into clinical applications.

○ **Attachment 4: Lay Abstract (one-page limit): Upload as "LayAbs.pdf".** The lay abstract is used by all reviewers. Abstracts of all funded research projects will be posted publicly. ***Do not include proprietary or confidential information***. ***Do not duplicate the technical abstract.*** Use only characters available on a standard QWERTY keyboard. Spell out all Greek letters, other non-English letters, and symbols. Graphics are not allowed.

- Describe the organizational structure and research strategy of the Consortium in a manner that will be readily understood by readers without a background in science or medicine.

– Describe how the Consortium will enhance the understanding of ASUD, including knowledge of how to reduce the overall number of opioid-related overdose deaths.

▪ What populations will it help, and how will it help them? (Include currently available statistics for the related population of concern.)

▪ What is the projected timeline needed to identify promising compounds and field effective treatments for ASUD?

▪ How will the Consortium enhance the development of ASUD clinical pharmacological treatment protocols and be beneficial to Service Members, their families, and Veterans, as well as the general public?

○ **Attachment 5: Statement of Work (three-page limit): Upload as "SOW.pdf".** The suggested SOW format and examples specific to different types of research projects are available on the eBRAP "Funding Opportunities & Forms" web page (https://ebrap.org/eBRAP/public/Program.htm). Recommended strategies for assembling the SOW can be found at https://ebrap.org/eBRAP/public/Program.htm.

For the Consortium Award mechanism, refer to the "***Suggested SOW Strategy Generic Research***" document for guidance on preparing the SOW and use the blank SOW format titled "Suggested SOW Format". The SOW must be in PDF format prior to attaching.

The SOW should include a list of major tasks that support the proposed Consortium operations (initial period of performance plus up to two options). The SOW should describe only the work for which funding is being requested by this application and, as applicable, should also:

– Include the name(s) of the key personnel and contact information for the CMC.

– Include initial year CMC and Consortium activities for planning, solicitation, execution, and support of a minimum of two research projects and/or clinical trials. These will be funded using allocations from the FY21 ASADRP congressional appropriation.

– Include activities for up to two options with corresponding budgets, including additional basic research projects and/or clinical trials to be solicited and associated with the CMC and other Consortium activities. Funding for these option years (if exercised) is contingent upon receipt of future congressional FY22 and FY23 appropriations and adequate performance.

– Include timelines (if applicable) projected for regulatory approvals relevant to human subjects research (e.g., IND/IDE applications) by the FDA or other government agency.

– Include the number (and type, if applicable) of research subjects (animal or human) and/or human anatomical samples projected for basic research projects and/or clinical trials. Refer to the General Application Instructions, Appendix 1, for additional information regarding regulatory requirements.

Exercising the options for additional funding (if available) will be dependent on funding availability, and the Consortium presenting written reports and oral briefings to the CSC and USAMRDC that demonstrate progress and alignment of the Consortium with the goals of the ASADRP. Exercise of an option is at the unilateral discretion of the government.

○ **Attachment 6: Impact Statement (one page limit): Upload as "Impact.pdf."**

  – Describe how the Consortium will improve the understanding of ASUD research, including knowledge about how to reduce the overall number of opioid-related overdose deaths, and the ability to conduct multidisciplinary, team-based translational research efforts to identify promising compounds to accelerate effective treatments for ASUD into clinical applications.

    This should be written with a broad audience in mind, including readers without a background in science or medicine.

○ **Attachment 7: Translation Plan (two-page limit): Upload as "Translation.pdf."** Provide information on how the Consortium will develop a roadmap that translates promising basic science knowledge into enhanced clinical pharmacological treatment protocols for ASUD, and includes a regulatory strategy for FDA compliance that facilitates rapid development and accelerates translation to larger phase 2 trials that would perhaps not otherwise be feasible without the consortium approach. The translation plan should include the components listed below:

  – A description of the schedule and milestones for bringing the anticipated research outcomes to the next level of development.

  – A description of collaborations with industry and other institutions (if applicable) that will be used to provide continuity of development.

  – Details of the funding strategy that will be used to bring the outcomes to the next level of development or commercialization (e.g., specific potential industry partners, specific funding opportunities to be pursued).

  – A description of how the Consortium will manage intellectual property ownership, and address impact of any intellectual property issues on future product development and subsequent government access to products supported by this program announcement. Demonstrate access to all intellectual property rights necessary for development and commercialization, and provide evidence that the government has the ability to access such products or technologies.

  – Describe the desired end-stage technical maturity of the proposed studies and how the research strategy accelerates effective treatments for ASUD into clinical applications.

  – A description of how the Consortium will become an on-going, self-sustaining entity after completion of the award.

- ○ **Attachment 8: Relevance to Military Health Statement (one-page limit): Upload as "MilRelevance.pdf".** Describe how the proposed research is relevant to the healthcare needs and welfare of military Service Members, Veterans, and their families in a way that is consistent with the program's goals. If active-duty military, military families, and/or Veteran population(s) will be used in the proposed research project, describe the population(s), the appropriateness of the population(s) for the proposed study, and the feasibility of using the population. If a non-military population will be used for the proposed research project, explain how the population simulates the targeted population (i.e., Armed Forces, their family members, and/or the Veteran population). If applicable, show how the proposed research project aligns with DOD and/or VA areas of research interest listed in [Appendix 2](#).

- ○ **Attachment 9: Representations, if applicable (extramural submissions only): Upload as "RequiredReps.pdf".** All extramural applicants must complete and submit the Required Representations template available on eBRAP (https://ebrap.org/eBRAP/public/Program.htm). For more information, see the General Application Instructions, Appendix 5, Section B, Representations.

- ○ **Attachment 10: Suggested Collaborating DOD Military Facility Budget Format, if applicable: Upload as "MFBudget.pdf".** If a military facility (Military Health System facility, research laboratory, medical treatment facility, dental treatment facility, or a DOD activity embedded with a civilian medical center) will be a collaborator in performance of the project, complete a separate budget, using "Suggested Collaborating DOD Military Facility Budget Format", available for download on the eBRAP "Funding Opportunities & Forms" web page (https://ebrap.org/eBRAP/public/Program.htm), including a budget justification, for each military facility as instructed. The costs per year should be included on the Grants.gov Research & Related Budget Form under subaward costs. Refer to the General Application Instructions, Section III.A.8, for detailed information.

- **Extramural and Intramural Applications**

  To evaluate compliance with Title IX of the Education Amendments of 1972 (20 USC 1681[a] et seq.), the DOD is collecting certain demographic and career information to be able to assess the success rates of women who are proposed for key roles in applications in science, technology, engineering, and/or mathematics (STEM) disciplines. To enable this assessment, each application must include the following forms completed as indicated.

  Research & Related Personal Data: For extramural submissions (via Grants.gov), refer to the General Application Instructions, Section III.A.3, and for intramural submissions (via eBRAP), refer to the General Application Instructions, Section IV.A.2, for detailed information.

  Research & Related Senior/Key Person Profile (Expanded): For extramural submissions (via Grants.gov), refer to the General Application Instructions, Section III.A.4, and for intramural submissions (via eBRAP), refer to the General Application Instructions, Section IV.A.3, for detailed information.

- ○ PI Biographical Sketch (5-page limit): Upload as "Biosketch_LastName.pdf". The suggested biographical sketch format is available on the "Funding Opportunities & Forms" web page (https://ebrap.org/eBRAP/public/Program.htm) in eBRAP. The NIH Biographical Sketch may also be used. All biographical sketches should be submitted in uneditable PDF format.

- ○ PI Previous/Current/Pending Support (no page limit): Upload as "Support_LastName.pdf".

  - – For extramural submissions, refer to the General Application Instructions, Section III.A.4 for detailed information.

  - – For intramural submissions, refer to the General Application Instructions, Section IV.A.3, for detailed information.

- ○ Key Personnel Biographical Sketches (5-page limit each): Upload as "Biosketch_LastName.pdf".

  - – Include biographical sketch of the Consortium Research Project Manager.

- ○ Key Personnel Previous/Current/Pending Support (no page limit): Upload as "Support_LastName.pdf".

Research & Related Budget: For extramural submissions (via Grants.gov), refer to the General Application Instructions, Section III.A.5, and for intramural submissions (via eBRAP), refer to the General Application Instructions, Section IV.A.4, for detailed information.

Budget Justification (no page limit): Upload as "BudgetJustification.pdf". The budget justification for the entire period of performance must be uploaded to the Research & Related Budget after completion of the budget for Period 1.

Project/Performance Site Location(s) Form: For extramural submissions (via Grants.gov), refer to the General Application Instructions, Section III.A.6, and for intramural submissions (via eBRAP), refer to the General Application Instructions, Section IV.A.5, for detailed information.

- • **Extramural Applications Only**

Research & Related Subaward Budget Attachment(s) Form (if applicable): Refer to the General Application Instructions, Section III.A.7, for detailed information.

- ○ **Extramural Subaward:** Complete the Research & Related Subaward Budget Form through Grants.gov. (Refer to the General Application Instructions, Section III.A.7, for detailed information.) Verify subaward budget(s) and budget justification forms are present in eBRAP during the application verification period. If these components are missing, upload them to eBRAP before the end of the application verification period.

○ **Intramural DOD Collaborator(s):** Complete the "Suggested Collaborating DOD Military Facility Budget Format" and upload to Grants.gov attachment form as Attachment 10. (Refer to the General Application Instructions, Section IV.A.4, for detailed information.) Each Intramural DOD Collaborator should include costs per year on the Grants.gov Research & Related Budget Form under subaward costs.

II.D.3. Dun and Bradstreet Data Universal Numbering System (DUNS) Number and System for Award Management (SAM)

Applicant organizations and all sub-recipient organizations must have a DUNS number to submit applications to Grants.gov. The applicant organization must also be registered in the Entity Management functional area of the SAM with an "Active" status to submit applications through the Grants.gov portal. Verify the status of the applicant organization's Entity registration in SAM well in advance of the application submission deadline. Allow several weeks to complete the entire SAM registration process. If an applicant has not fully complied with the requirements at the time the federal awarding agency is ready to make a federal award, the federal awarding agency may determine that the applicant is not qualified to receive a federal award and use that determination as a basis for making a federal award to another applicant. Refer to the General Application Instructions, Section III, for further information regarding Grants.gov requirements.

Announcement of Transition to SAM-Generated Unique Entity Identifier (UEI): Through April 2022, a transition from DUNS to the SAM-generated UEI will occur. Refer to the General Application Instructions, Section III.1, DUNS Number, for more information on the transition and timing.

II.D.4. Submission Dates and Times

All submission dates and times are indicated in Section I, Overview of the Funding Opportunity. Pre-application and application submissions are required. The pre-application and application submission process should be started early to avoid missing deadlines. There are no grace periods. Failure to meet either of these deadlines will result in submission rejection.

Applicant Verification of Full Application Submission in eBRAP

For Both Extramural and Intramural Applicants: eBRAP allows an organization's representatives and PIs to view and modify the full application submissions associated with them. Following retrieval and processing of the full application, eBRAP will notify the organizational representatives and PI by email to log into eBRAP to review, modify, and verify the full application submission. eBRAP will validate full application files against the specific program announcement requirements, and discrepancies will be noted in an email to the PI and in the "Full Application Files" tab in eBRAP. eBRAP does not confirm the accuracy of file content. Application viewing, modification, and verification in eBRAP are strongly recommended, but not required. It is the applicant's responsibility to review all application components and ensure proper ordering as specified in the program announcement. ***If either the Project Narrative or the budget fails eBRAP validation or needs to be modified, an updated full application package must be submitted prior to the application submission deadline. The Project Narrative and Research & Related Budget Form cannot be changed after the***

application submission deadline. Other application components may be changed until the end of the application verification period. Verify that subaward budget(s) and budget justification forms are present in eBRAP during the application verification period. If these components are missing, upload them to eBRAP before the end of the application verification period. After the end of the application verification period, the full application cannot be modified.

Extramural Submission: The full application package submitted to Grants.gov may be viewed and modified in eBRAP until the end of the application verification period. During the application verification period, the full application package, *with the exception of the Project Narrative and Budget Form,* may be modified.

Intramural DOD Submission: After eBRAP has processed the full application, the organizational Resource Manager/Comptroller/Task Area Manager or equivalent Business Official and PI will receive email notification of the status and will be able to view and modify application components in eBRAP. During the application verification period, the full application package, *with the exception of the Project Narrative and Budget Form*, may be modified. The Resource Manager/Comptroller/Task Area Manager or equivalent Business Official should log into eBRAP to review and to approve the application package prior to the application verification deadline.

For All Submissions: Verify that subaward budget(s) with budget justification are present in eBRAP during the application verification period. If these components are missing, upload them to eBRAP before the end of the application verification period.

II.D.5. Funding Restrictions

A single award to the CMC applicant will be made to support the FY21 ASADRP Consortium Award. The CMC will provide funding support for the selected basic research and clinical trial sites as openly competed sub-awards or other appropriate contracting instrument. The CMC will clearly delineate Consortium infrastructure costs and research costs. Budget out-years should be projected based on the proposed costs of the anticipated studies, with appropriate escalation factors included. Following award, a budget for each study will be negotiated by the awardee once study selections are made.

The maximum period of performance is **5** years.

The anticipated total costs budgeted for the entire period of performance will not exceed $10.575M (**Initial Funding** plus 2 **Options**).

Initial Funding: The applicant may request up to **$3.525M** in total costs (direct and indirect) corresponding to the FY21 ASADRP congressional appropriation for the period of performance (up to 5 years) to cover CMC costs and Consortium activities, as well as costs for at least two studies in the first year of performance. The total for this funding must not exceed **$3.525M** in total costs. If indirect cost rates have been negotiated, indirect costs are to be budgeted in accordance with the organization's negotiated rate. No budget will be approved by the government exceeding **$3.525M** total costs or using an indirect cost rate exceeding the organization's negotiated rate.

Optional Funding: In addition to the initial award funding above, the applicant may request two options of up to **$3.525M** in total costs, for each of the two anticipated FY22 and FY23 ASADRP congressional appropriations, to fund additional basic research projects and/or clinical trials, associated CMC costs, and Consortium activities. Funding for these options (if exercised) is contingent upon receipt of future congressional appropriations and adequate performance. The cooperative agreement will contain options with corresponding budgets. The overall Consortium budget should contain separate items for the CMC and research costs for studies to be funded with the optional funding.

No project shall be initiated until the SOW and budget are approved by the USAMRDC Grants Officer. None of the funds for research projects may be utilized in other budget categories except with the express written approval of the Grants Officer.

Exercising the options for additional funding (if available) will be dependent on funding availability, and the Consortium presenting written reports and oral briefings to the CSC and USAMRDC that demonstrate progress and alignment of the Consortium with the goals of the ASADRP. Exercise of an option is at the unilateral discretion of the government.

Costs for a clinical trial study must be included within a single funding option and cannot depend on future appropriations.

Regardless of the period of performance proposed, the applicant may not exceed the maximum allowable total costs. Indirect costs shall be proposed in accordance with the organization's negotiated rate agreement.

All direct and indirect costs of any subaward or contract must be included in the total direct costs of the primary award.

For this award mechanism, direct costs must be requested for:

- Travel costs for the PI and site PIs to present project information or disseminate project results at an **IPR** meeting per year during the period of performance. For planning purposes, it should be assumed that the meeting will be held in the National Capital Area. These travel costs are in addition to those allowed for annual scientific/technical meetings.

May be requested for (not all-inclusive):

- Salary

- Research-related subject costs

- Clinical research costs

- Equipment

- Research supplies

- Support for multidisciplinary collaborations, including travel

- Costs for up to two investigators to travel to one scientific/technical meetings per year in addition to the required IPR meeting described above.

For extramural awards with an intragovernmental component, direct transfer of funds from an extramural award recipient to a DOD or other federal agency is not allowed except under very limited circumstances. Funding to intramural DOD and other federal agencies will be managed through a direct funds transfer. Intramural applicants are responsible for coordinating through their agency's procedures the use of contractual or assistance funding awards or other appropriate agreements to support extramural collaborators.

Refer to the General Application Instructions, Section III.A.5, for budget regulations and instructions for the Research & Related Budget. *For federal agencies or organizations collaborating with federal agencies, budget restrictions apply as are noted in the General Application Instructions, Section III.A.5.*

II.D.6. Other Submission Requirements

Refer to the General Application Instructions, Appendix 4, for detailed formatting guidelines.

II.E. Application Review Information

II.E.1. Criteria

II.E.1.a. Peer Review

To determine technical merit, all applications will be evaluated according to the following **scored criteria**, which are of equal importance:

- **Personnel**

  - To what extent the proposed CMC PI is experienced in managing a collaborative, multidisciplinary team of researchers and whether they have subject matter experts with the appropriate expertise to address the ASADRP Research Aims and Focus Areas.

  - How well the proposed CMC PI demonstrates collaborative leadership experience and a broad understanding of ASUD research, including knowledge of the current state of ASUD research with respect to the military context.

  - How well the background and expertise of the CMC PI and other key Consortium personnel demonstrate their ability to plan, prioritize, solicit proposals, and provide oversight and coordination of basic research projects and clinical trials supported by the Consortium.

  - To what extent the proposed CMC PI and other key Consortium personnel demonstrate their multidisciplinary subject matter expertise to support ASUD research.

- ○ To what extent the proposed CMC PI and other key Consortium personnel demonstrate their subject matter expertise to manage the regulatory strategy for FDA compliance for all sites to be supported by the Consortium.

- ○ To what extent the proposed CMC PI and other key Consortium personnel demonstrate their subject matter expertise to ensure that all sites to be supported by the Consortium maintain compliance with local IRBs and the USAMRDC ORP HRPO for the proper conduct of clinical studies and the protection of human subjects or, if there is a potential for animal studies, to the local IACUCs and the USAMRDC ORP ACURO.

- ○ Whether the composition and levels of effort of the CMC PI and other key Consortium personnel are appropriate to ensure success of this project.

- ○ Whether the proposed CMC PI and other key Consortium personnel's records of accomplishment demonstrate their understanding of working with military and Veteran populations.

- **Research Strategy**

  - ○ How well the Consortium addresses the ASADRP [Research Aims](#) and [Focus Areas](#) using a multidisciplinary team-based approach.

  - ○ To what extent the types of studies and method of solicitation will contribute to accelerating promising findings to enhanced clinical pharmacological treatment protocols for ASUD to include building on research previously supported by the ASADRP.

  - ○ To what extent the strategic plan outlines a feasible timeline that aligns milestones and deliverables with the Consortium aims and objectives and whether the Consortium can initiate at least two studies within the first year of the award and subsequent studies in the two options.

  - ○ How well FDA regulatory strategy for the proposed studies ensures compliance with FDA requirements.

  - ○ How well the Consortium has outlined a plan to manage animal studies and clinical research to include quality assurance, compliance with USAMRDC ORP, and quality control mechanisms for study monitoring.

  - ○ How well the Consortium has outlined a plan for the inclusion of women and minorities the proposed studies.

  - ○ How well the Consortium has outlined a plan for management and sharing of research data.

  - ○ How appropriate the subject populations are for the Consortium to access for the proposed research.

- ○ How well the Consortium acknowledges potential problems and addresses alternative approaches.

- ○ Whether the research can be completed within the proposed period of performance.

- **Impact**

  - ○ To what extent the Consortium will reduce the burden of ASUD, especially opioid dependency leading to a reduction in the overall number of opioid and substance use-related overdose deaths.

  - ○ To what extent the Consortium demonstrates an understanding of ASUD research and the ability to conduct multidisciplinary, team-based translational research efforts to identify promising compounds that will accelerate effective treatments for ASUD into clinical applications.

- **Translation Plan**

  - ○ To what extent the Consortium roadmap translates promising basic science knowledge into enhanced clinical pharmacological treatment protocols for ASUD, and includes a regulatory strategy for FDA compliance that facilitates rapid development and accelerates translation to larger phase 2 trials that would perhaps not otherwise be feasible without the consortium approach.

  - ○ How the schedule and milestones for bringing the anticipated research outcomes to the next level of development are achievable.

  - ○ Whether collaborations with industry and other institutions (if applicable) exist that will be used to provide continuity of development.

  - ○ Whether the funding strategy described to bring the anticipated research outcomes to the next level of development (e.g., specific potential industry partners, specific funding opportunities to be applied for) and/or commercialization is reasonable and realistic.

  - ○ How well the Consortium identifies intellectual property ownership (if applicable), describes an appropriate intellectual and material property plan among participating organizations, and addresses any impact of intellectual property issues for the proposed Consortium research studies to include access to all intellectual property rights necessary for development and commercialization, and subsequent government access to products or technologies supported by this program announcement.

  - ○ Whether the research strategy accelerates effective treatments for ASUD into clinical applications.

  - ○ A description of how the Consortium will become an on-going, self-sustaining entity after completion of the award.

In addition, the following **unscored** criteria will also contribute to the overall evaluation of the application:

- **Budget**

  - Whether the **total** costs exceed the allowable total costs as published in the program announcement.

  - Whether the budget is appropriate for the proposed research.

- **Environment**

  - How the scientific environment is appropriate for the proposed effort.

  - How well the research requirements are supported by the availability of and accessibility to facilities and resources (including military Service Members, military-controlled study materials, and military databases, if applicable).

- **Application Presentation**

  - To what extent the writing, clarity, and presentation of the application components influence the review.

II.E.1.b. Programmatic Review

To make funding recommendations and select the application that, individually or collectively, will best achieve the program objectives, the following criteria are used by programmatic reviewers:

- Ratings and evaluations of the peer reviewers

- Relevance to the mission of the Defense Health Program and FY21 ASADRP, as evidenced by the following:

  - Adherence to the intent of the award mechanism

  - Relative fit into the overall ASADRP portfolio composition

  - Relative impact

  - Relative feasibility

II.E.2. Application Review and Selection Process

All applications are evaluated by scientists, clinicians, and consumers in a two-tier review process. The first tier is **peer review**, the evaluation of applications against established criteria to determine technical merit, where each application is assessed for its own merit, independent of other applications. The second tier is **programmatic review**, a comparison-based process in which applications with high scientific and technical merit are further evaluated for

programmatic relevance. Final recommendations for funding are made to the Commanding General, USAMRDC. ***The highest-scoring applications from the first tier of review are not automatically recommended for funding. Funding recommendations depend on various factors as described in [Section II.E.1.b, Programmatic Review](#).*** Additional information about the two-tier process used by the CDMRP can be found at https://cdmrp.army.mil/about/2tierRevProcess. An information paper describing the funding recommendations and review process for the ASADRP CA will be provided to the PI and posted on the CDMRP website.

All CDMRP review processes are conducted confidentially to maintain the integrity of the merit-based selection process. Panel members sign a statement declaring that application and evaluation information will not be disclosed outside the panel. Violations of confidentiality can result in the dissolving of a panel(s) and other corrective actions. In addition, personnel at the applicant or collaborating organizations are prohibited from contacting persons involved in the review and approval process to gain protected evaluation information or to influence the evaluation process. Violations of these prohibitions will result in the administrative withdrawal of the organization's application. Violations by panel members or applicants that compromise the confidentiality of the review and approval process may also result in suspension or debarment from federal awards. Furthermore, the unauthorized disclosure of confidential information of one party to another third party is a crime in accordance with 18 USC 1905.

II.E.3. Integrity and Performance Information

Prior to making an assistance agreement award where the federal share is expected to exceed the simplified acquisition threshold, as defined in 2 CFR 200.88, over the period of performance, the federal awarding agency is required to review and consider any information about the applicant that is available in the Federal Awardee Performance and Integrity Information System (FAPIIS).

An applicant organization may review FAPIIS, accessible through SAM, and submit comments to FAPIIS on any information about the organization that a federal awarding agency previously entered and is currently available in FAPIIS.

The federal awarding agency will consider any comments by the applicant, in addition to other information in the designated integrity and performance system, in making a judgment about the applicant's integrity, business ethics, and record of performance under federal awards when determining a recipient's qualification prior to award, according to the qualification standards of the Department of Defense Grant and Agreement Regulations (DoDGARs), Section 22.415.

II.E.4. Anticipated Announcement and Federal Award Dates

All application review dates and times are indicated in [Section I, Overview of the Funding Opportunity](#).

Each PI and organization will receive email notification of posting of the funding recommendation in eBRAP. Each PI will receive a peer review summary statement on the strengths and weaknesses of the application.

II.F. Federal Award Administration Information

II.F.1. Federal Award Notices

Awards supported with FY21, FY22, and FY23 funds are anticipated to be made no later than September 30, 2022. Refer to the General Application Instructions, Appendix 2, for additional award administration information.

After email notification of application review results through eBRAP, and if selected for funding, a representative from USAMRAA will contact the Business Official authorized to negotiate on behalf of the PI's organization.

Pre-Award Costs: An institution of higher education, hospital, or other non-profit organization may, at its own risk and without the government's prior approval, incur obligations and expenditures to cover costs up to 90 days before the beginning date of the initial budget period of a new award. Refer to the General Application Instructions, Section III.A.5.

Only an appointed USAMRAA Grants Officer may obligate the government to the expenditure of funds. No commitment on the part of the government should be inferred from discussions with any other individual. **The award document signed by the Grants Officer is the official authorizing document.**

Federal Government Organizations: Funding made to federal government organizations (to include intramural DOD organizations) will be executed through the Military Interdepartmental Purchase Request (MIPR) or Funding Authorization Document (FAD) process. Transfer of funds is contingent upon appropriate safety and administrative approvals. Intramural applicants and collaborators are reminded to coordinate receipt and commitment of funds through their respective Resource Manager/Task Area Manager/Comptroller or equivalent Business Official.

II.F.1.a. PI Changes and Award Transfers

Unless otherwise restricted, changes in PI will be allowed at the discretion of the Grants Officer, provided the intent of the award mechanism is met.

The organizational transfer of an award supporting a clinical trial is strongly discouraged and in most cases will not be allowed. Approval of a transfer request will be on a case-by-case basis at the discretion of the Grants Officer. An organizational transfer of an award will not be allowed in the last year of the (original) period of performance or any extension thereof.

An organizational transfer of an award will not be allowed in the last year of the (original) period of performance or any extension thereof.

Refer to the General Application Instructions, Appendix 2, Section B, for general information on organization or PI changes.

II.F.2. Administrative and National Policy Requirements

Applicable requirements in the DoDGARs found in 32 CFR, Chapter I, Subchapter C, and 2 CFR, Chapter XI, apply to grants and cooperative agreements resulting from this program announcement.

Refer to the General Application Instructions, Appendix 2, for general information regarding administrative requirements.

Refer to the General Application Instructions, Appendix 5, for general information regarding national policy requirements.

Refer to full text of the latest DoD R&D General Terms and Conditions; the USAMRAA General Research Terms and Conditions with Institutions of Higher Education, Hospitals, and Non-Profit Organizations: Addendum to the DoD R&D General Terms and Conditions; and the USAMRAA General Research Terms and Conditions with For-Profit Organizations for further information.

II.F.3. Reporting

Refer to the General Application Instructions, Appendix 2, Section A, for general information on reporting requirements. ***If there are technical reporting requirement delinquencies for any existing USAMRAA-sponsored awards at the applicant organization, no new awards will be issued to the applicant organization until all delinquent reports have been submitted.***

Quarterly and annual progress reports as well as a final progress report will be required.

The Award Terms and Conditions will specify if more frequent reporting is required.

Award Expiration Transition Plan: An Award Expiration Transition Plan must be submitted with the final progress report. Use the one-page template "Award Expiration Transition Plan," available on the eBRAP "Funding Opportunities & Forms" web page (https://ebrap.org/eBRAP/public/Program.htm) under the "Progress Report Formats" section. The Award Expiration Transition Plan must outline if and how the research supported by this award will progress and must include source(s) of funding, either known or pending.

Inclusion Enrollment Reporting Requirement *(only required for clinical research studies)*: Enrollment on the basis of sex/gender, race, and/or ethnicity will be required with each annual and final technical report. The suggested Inclusion Enrollment Report format is available on the "Funding Opportunities & Forms" web page (https://ebrap.org/eBRAP/public/Program.htm) in eBRAP.

Awards resulting from this program announcement will incorporate additional reporting requirements related to recipient integrity and performance matters. Recipient organizations that have federal contract, grant, and cooperative agreement awards with a cumulative total value greater than $10M are required to provide information to FAPIIS about certain civil, criminal, and administrative proceedings that reached final disposition within the most recent 5-year period and that were connected with performance of a federal award. Recipients are required to

disclose, semiannually, information about criminal, civil, and administrative proceedings as specified in the applicable Representations (see General Application Instructions, Appendix 5, Section B).

II.G. Federal Awarding Agency Contacts

II.G.1. CDMRP Help Desk

Questions related to program announcement content or submission requirements as well as questions related to the pre-application or intramural application submission through eBRAP should be directed to the CDMRP Help Desk, which is available Monday through Friday from 8:00 a.m. to 5:00 p.m. ET. Response times may vary depending upon the volume of inquiries.

  Phone: 301-682-5507

  Email: help@eBRAP.org

II.G.2. Grants.gov Contact Center

Questions related to extramural application submission through Grants.gov portal should be directed to the Grants.gov Contact Center, which is available 24 hours a day, 7 days a week (closed on U.S. federal holidays). Note that the CDMRP Help Desk is unable to provide technical assistance with Grants.gov submission.

  Phone: 800-518-4726; International 1-606-545-5035

  Email: support@grants.gov

Sign up on Grants.gov for "send me change notification emails" by following the link on the "Synopsis" page for the program announcement or by responding to the prompt provided by Grants.gov when first downloading the Grants.gov application package. If the Grants.gov application package is updated or changed, the original version of the application package may not be accepted by Grants.gov.

II.H. Other Information

II.H.1. Program Announcement and General Application Instructions Versions

Questions related to this program announcement should refer to the program name, the program announcement name, and the program announcement version code 605a. The program announcement numeric version code will match the General Application Instructions version code 605.

II.H.2. Administrative Actions

After receipt of applications, the following administrative actions may occur:

II.H.2.a. Rejection

The following will result in administrative rejection of the application:

- Pre-application was not submitted.

- Project Narrative exceeds page limit.

- More than one application is received in which the same investigator is named as the PI. Only the first application received will be accepted; additional applications will be administratively rejected.

- Project Narrative is missing.

- Budget is missing.

II.H.2.b. Modification

- Pages exceeding the specific limits will be removed prior to review for all documents other than the Project Narrative.

- Documents not requested will be removed.

II.H.2.c. Withdrawal

The following may result in administrative withdrawal of the application:

- An FY21 ASADRP Programmatic Panel member is named as being involved in the research proposed or is found to have assisted in the pre-application or application processes including, but not limited to, concept design, application development, budget preparation, and the development of any supporting documentation. *A list of the FY21 ASADRP Programmatic Panel members can be found at https://cdmrp.army.mil/asadrp/panels/panels21.*

- The application fails to conform to this program announcement description.

- Inclusion of URLs, with the exception of links in References Cited and Publication and/or Patent Abstract sections.

- Page size is larger than 8.5 inches x 11.0 inches (approximately 21.59 cm x 27.94 cm).

- To preserve the integrity of its peer and programmatic review processes, the CDMRP discourages inclusion of any employee of its review contractors having any role in the preparation, research or other duties for submitted applications. For FY21, the identities of the peer review contractor and the programmatic review contractor may be found at the CDMRP website (https://cdmrp.army.mil/about/2tierRevProcess). Applications that include names of personnel from either of these companies may be administratively withdrawn.

- Personnel from applicant or collaborating organizations are found to have contacted persons involved in the review or approval process to gain protected evaluation information or to influence the evaluation process.

- Applications from extramural organizations, including non-DOD federal agencies, received through eBRAP may be withdrawn.

- Applications submitted by an intramural DOD organization may be withdrawn if the intramural organization cannot coordinate the use of contractual, assistance, or other appropriate agreements to provide funds to extramural collaborators.

- The PI does not meet the eligibility criteria.

II.H.2.d. Withhold

Applications that appear to involve research misconduct will be administratively withheld from further consideration pending organizational investigation. The organization will be required to provide the findings of the investigation to the USAMRAA Grants Officer for a determination of the final disposition of the application.

II.H.3. Application Submission Checklist

Application Components	Action	Completed
SF424 Research & Related Application for Federal Assistance **(extramural submissions only)**	Complete form as instructed	
Summary (Tab 1) and Application Contacts (Tab 2) **(intramural submissions only)**	Complete tabs as instructed	
Attachments	Project Narrative: Upload as Attachment 1 with file name "ProjectNarrative.pdf"	
	Supporting Documentation: Upload as Attachment 2 with file name "Support.pdf"	
	Technical Abstract: Upload as Attachment 3 with file name "TechAbs.pdf"	
	Lay Abstract: Upload as Attachment 4 with file name "LayAbs.pdf"	
	Statement of Work: Upload as Attachment 5 with file name "SOW.pdf"	
	Impact Statement: Upload as Attachment 6 with the file name "Impact.pdf"	
	Translation Plan: Upload as Attachment 7 with the file name "Translation.pdf"	
	Relevance to Military Health Statement: Upload as Attachment 8 with file name "MilRelevance.pdf"	
	Representations (extramural submissions only): Upload as Attachment 9 with file name "RequiredReps.pdf" if applicable	
	Suggested Collaborating DOD Military Facility Budget Format: Upload as Attachment 10 with file name "MFBudget.pdf" if applicable	
Research & Related Personal Data	Complete form as instructed	

Application Components	Action	Completed
Research & Related Senior/Key Person Profile (Expanded)	Attach PI Biographical Sketch (Biosketch_LastName.pdf) to the appropriate field	
	Attach PI Previous/Current/Pending Support (Support_LastName.pdf) to the appropriate field	
	Attach Biographical Sketch (Biosketch_LastName.pdf) for each senior/key person to the appropriate field	
	Attach Previous/Current/Pending (Support_LastName.pdf) for each senior/key person to the appropriate field	
Research & Related Budget **(extramural submissions only)**	Complete as instructed. Attach Budget Justification (BudgetJustification.pdf) to the appropriate field	
Budget **(intramural submissions only)**	Suggested DOD Military Budget Format, including justification	
Project/Performance Site Location(s) Form	Complete form as instructed	
Research & Related Subaward Budget Attachment(s) Form, if applicable	Complete form as instructed	

APPENDIX 1: ACRONYM LIST

ACOS/R&D	Associate Chief of Staff for Research and Development
ACURO	Animal Care and Use Review Office
ASADRP	Alcohol and Substance Abuse Disorders Research Program
ASUD	Alcohol and Substance Use Disorders
CDE	Common Data Element
CDMRP	Congressionally Directed Medical Research Programs
CEC	Consortium Executive Committee
CFR	Code of Federal Regulations
CMC	Consortium Management Core
CSC	Consortium Steering Committee
DOD	Department of Defense
DoDGARs	Department of Defense Grant and Agreement Regulations
DUNS	Data Universal Numbering System
eBRAP	Electronic Biomedical Research Application Portal
EC	Ethics Committee
ET	Eastern Time
FAD	Funding Authorization Document
FAPIIS	Federal Awardee Performance and Integrity Information System
FDA	U.S. Food and Drug Administration
FITBIR	Federal Interagency TBI Research
FY	Fiscal Year
GOR	Grants Officer's Representative
HRPO	Human Research Protection Office
IACUC	Institutional Animal Care and Use Committee
IPR	In-Progress Review
IRB	Institutional Review Board
LAR	Legally Authorized Representative
LOI	Letter of Intent
M	Million
MIPR	Military Interdepartmental Purchase Request
NIAAA	National Institute of Alcohol Abuse and Alcoholism
NIDA	National Institute of Drug Abuse
NIH	National Institutes of Health
NINDS	National Institute of Neurological Disorders and Stroke
ORCID	Open Researcher and Contributor ID, Inc.

ORP	Office of Research Protections
PI	Principal Investigator
SAM	System for Award Management
SOW	Statement of Work
STEM	Science, Technology, Engineering, and/or Mathematics
TBI	Traumatic Brain Injury
UEI	Unique Entity Identifier
URL	Uniform Resource Locator
USAMRAA	U.S. Army Medical Research Acquisition Activity
USAMRDC	U.S. Army Medical Research and Development Command
USC	United States Code
VA	Department of Veterans Affairs

APPENDIX 2: POTENTIAL RESOURCES

Air Force Research Laboratory
https://www.wpafb.af.mil/afrl

U.S. Army Futures Command
https://armyfuturescommand.com/

U.S. Army Research Institute for Behavioral and Social Sciences
https://ari.altess.army.mil/

U.S. Army Resilience Directorate
https://www.armyresilience.army.mil/

Congressionally Directed Medical Research Programs
https://cdmrp.army.mil

Defense Advanced Research Projects Agency
https://www.darpa.mil/

Defense Technical Information Center
https://discover.dtic.mil/

Military Operational Medicine Research Program
https://momrp.amedd.army.mil/

Naval Health Research Center
https://www.med.navy.mil/sites/nmrc/nhrc

Naval Medical Research Center
https://www.med.navy.mil/sites/nmrc

Navy and Marine Corps Public Health Center
https://www.med.navy.mil/sites/nmcphc

Office of Naval Research
https://www.onr.navy.mil/

U.S. Army Aeromedical Research Laboratory
https://www.usaarl.army.mil/

U.S. Army Medical Research and Development Command
https://mrdc.amedd.army.mil/

U.S. Army Research Institute of Environmental Medicine
https://www.usariem.army.mil/

U.S. Army Research Laboratory
https://www.arl.army.mil/

U.S. Department of Veterans Affairs, Office of Research and Development
https://www.research.va.gov

U.S. Food and Drug Administration
https://www.fda.gov

U.S. Naval Research Laboratory
https://www.nrl.navy.mil

Walter Reed Army Institute of Research
https://www.wrair.army.mil/