



City of Austin - Austin Public Health - Solicitation HIV2018GF

Social Services for Persons Living With HIV

RFA Question and Responses - **Updated August 31, 2018**

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PROSPECTIVE APPLICANTS PLEASE NOTE THAT ADDENDUM #1 TO THE RFA, CONTAINING A REVISED FOR H-2 – THRESHOLD REVIEW CHECKLIST, HAS BEEN POSTED ON THE [RFA WEBPAGE](#).

This is the Final Questions and Responses Update.

Questions and Responses

1. Q: Can we use the RW client eligibility policy but propose changes to parts of it?

A: If an Application specifically references using the APH Ryan White Client Eligibility Policy, the policy as written must be followed in total. Per Form H-3, Page 3, *Client Eligibility Requirements*, the Application may propose an alternate client eligibility policy, and it may include some or most aspects of the APH Ryan White Client Eligibility Policy. However, in the latter case, the APH Ryan White Client Eligibility Policy should not be cited, and the full eligibility criteria policy and process should be described in the application.

2. Q: If not providing EIS services, do the service requirements mirror that of Ryan White?

A: See Form H-3, Page 1, *Introduction*: "Proposed services must meet the definitions of eligible services under Ryan White HIV/AIDS Program (RWHAP) Service Categories, as defined in the RWHAP Policy Clarification Notice #16-02. Additional limitations and restrictions on services and activities may be described in this Scope of Work document." Any limitation on scope of services from the PCN 16-02 cited on page 1 of Form H-3 are listed with allowable Service Category definitions on pp. 10-15 of Form H-3.

3. Q: Do Ryan White service category eligibility requirements apply to the GF service categories? Ex. Uninsured, under a certain % of poverty?

A: See Question 1 above and, Form H-7, *APH Standard Client Eligibility Requirements*, and Form H-3, Page 3, *Client Eligibility Requirements*: "Alternative eligibility requirements, such as those specified in APH's RWHAP Client Eligibility Policy and Procedures, may be proposed by the Applicant, but Residency and HIV status, other than the exception described above, may not be changed."

4. For non-EIS services must clients be HIV+ **and** one of the target populations listed?

a) Yes. See Form H-3, Page 3, "Client Eligibility Requirements: "All clients, other than specifically targeted populations in an Early Intervention Services program, must have documentation of positive HIV status ... Applicants must identify one or more of the following target populations to which services will be designed and provided ..." The activities and services provided under the proposed program must identify one or more of the designated target populations. Use of any awarded funding from the Application, including staff time that is not designed for and directed toward to the identified target population(s) is not allowable. An incidental opportunity to provide services to populations other than the target population is allowable.

5. Must non-EIS clients be HIV positive?



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Yes. See Form H-3, Page 3, "Client Eligibility Requirements: "All clients, other than specifically targeted populations in an Early Intervention Services program, must have documentation of positive HIV status."

6. Are 6 month & annual recertification required?

See Question 1 above, Form H-7, *APH Standard Client Eligibility Requirements*, and Form H-3, Page 3, *Client Eligibility Requirements*: "Alternative eligibility requirements, such as those specified in APH's RWHAP Client Eligibility Policy and Procedures, may be proposed by the Applicant, but Residency and HIV status, other than the exception described above, may not be changed."

7. If this would be a program expansion, could we use funds to engage a contract service provider to deliver a portion of the services?

Yes. See Form H-5, *Program Budget and Narrative*, Page 3: "Subgrantees are entities that would provide direct client services through the proposed program. If this Application includes Subgrantees, include the total budgeted amount for all Subgrantees. Other consultant/contractual services not providing direct client services must be included in General Operating Expenses. In addition, please note Form H-9, *Standard Agreement and Modifications Document*, Page 1, Section 1.2: "The Grantee shall assure that all Agreement provisions are met by any Subgrantee performing services for the Grantee," which requires APH contractors/grantees to pass through all Agreement Terms and Conditions to Subgrantees/subcontractors.

8. Q: The RFP does not specify if clients must be uninsured. Do they?

A: Although not explicitly stated in the RFA documents, Applicants should not propose using City funds to pay for services for which an otherwise eligible individual has insurance or other third-party coverage. The City recognizes that there are many services not covered by some or any insurance policies, but a client should be screened to see if such resources are reimbursable under any existing third-party coverage, and should be able to bill the third party for any covered services. Form H-7, *APH Standard Client Eligibility Requirements*, does not include requirements related to insurance status, and any proposed eligibility criteria related to insurance status will be evaluated as part of the overall proposed client eligibility standards and the program services and design. See Form H-3, Page 3, *Client Eligibility Requirements*: "Alternative eligibility requirements, such as those specified in APH's RWHAP Client Eligibility Policy and Procedures, may be proposed by the Applicant, but Residency and HIV status, other than the exception described above, may not be changed."

9. Q: a) Do the restrictions in RW apply to these funds in terms of how services are delivered & who is eligible?
b) And the HAB outcomes for the category?

- a) See Question 1 above and Form H-3, Page 3, *Client Eligibility Standards*: "Alternative eligibility requirements, such as those specified in APH's RWHAP Client Eligibility Policy and Procedures, may be proposed by the Applicant, but Residency and HIV status, other than the exception described above, may not be changed."
- b) See Form H-3, pp. 9-15, *Allowable Service Categories*. Standard required outcome measures are listed for each service category. Applications must reflect the exact wording and outcome percentage goal of these standard outcomes, although the numerator and denominator figures will differ from proposal to proposal.



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10. Q Is it a minimum of \$50k per service category or per grantee?

A: Because an Application (referring to the forms in Envelope #2 described in Form H-1, *Offer Form*) may contain only proposed services for one service category, and each Application must be for a minimum of \$50,000, the minimum will automatically apply to both Service Category and Grantee.

11. Q: How is the \$630,192 allocated between/across service categories – if at all?

A: There has been no designation of funds between or across service categories. Recommendations for award(s) will be based upon application scores, needs assessments, community input, other available resources for the proposed service(s), and the City's determination of the most beneficial and cost-effective proposed services for PLWH in Austin/Travis County.

12. Q: Will there be partial points given on an item?

A: No, in the sense that fractional points (e.g., 20 ½ or 20.5) will not be used. Yes, in the sense that members of the objective review panel have the charge and responsibility of scoring based on their expertise, so, for example, if a particular section has a maximum of 10 points, the reviewer may score it at any whole number from 0 to 10.

13. Q: Form H-5, Program Budget, Bullet 9. Re: Funding from all sources other than City. Do you include City General Fund? What about other grants administered through the City?

All other funding includes other City funding for the proposed program that is not part of the requested funding in this Application.

14. Q:

- a) Form H-1, Page 3, Regarding Board of Directors minutes - is "Fiscal year" the applicant's fiscal year or the City's?
- b) Are you requiring a full year's minutes or minutes from one meeting that demonstrates all the processes?

A:

- a) The Applicant's fiscal year.
- b) A full year's minutes. Note Form H-2, *Application Threshold Checklist*, Item 1: "Applicant's Board meets regularly (at least four times per year)." Therefore, the City expects four or more sets of Board minutes as part of Envelope #1, Form H-1, *Offer Form*.

15. Are these clients to be entered into ARIES?

Yes. ARIES is the AIDS Regional Information and Evaluation System, and is the required HIV client-level database system used by APH grantees and subrecipients to track services delivered, clients served, and other client-level data points on an ongoing basis.

16. Q: RW dictates how services are delivered by service category. Do these requirements apply to these funds?

See Question 9 above.

17. Can you tell me if the City HIV GF mirrors RW in all ways, including that clients must not be insured?



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See responses to questions above that provide this information.

18. Q:

We're in the process of reviewing the RFP and developing a strategy for a response and we have a few questions regarding the intent.

- a) Specifically around if a project funded under this RFP can only support target populations. For instance, if an EIS linkage coordinator staff is hired with these funds, can they only link target populations to care? Or would they be able to focus on all diagnosed persons?
- b) Additionally, for EIS, must a person complete eligibility screening prior to being counted as an EIS service – specifically as it pertains to screening.

A:

- b) The portion/FTE (up to 100%/1.00 FTE) of a position proposed in this Application must focus and direct services specifically to the identified target population(s). Activities or time not specifically directed at the identified target population(s) would not be allowable. The incidental opportunity to provide services to populations other than the target population would be allowable.
- c) The City recognizes that some EIS activities are not appropriate for full eligibility screening” Applications that propose services in the EIS Service Category must include detail by activity/subservice as to what identification and/or eligibility processes would be employed in serving the individuals to whom services under this RFA are directed.

19. Q: Why is it unallowable to use indirect cost rate?

A: See Form H-9, *Standard Agreement and Modifications Document*, Page 5, Section 4.7.6: “...The Grantee’s accounting system must identify the specific expenditures, or portions of expenditures, against which funds under this Agreement are disbursed. Grantee must be able to produce an accounting system-generated report of exact expenses or portions of expenses charged to the City for any given time period.” The City experience is that the use of a flat indirect cost rates makes it difficult, often impossible, to identify exact expenses or portions of expense, paid by City funds. Indirect cost rate methodology will not be permitted in any future APH social service contract. A consistent cost allocation methodology under which every portion of every expense paid by City funds is tied to the City’s fund number in the Applicant’s accounting system, while not required, is an acceptable substitute for the indirect cost methodology.

20. Q: As the eligibility criteria stands for the RFP, there is no income ceiling for clients? (RW often has one)

A: In general, City social services Agreements are targeted toward lower-income individuals and families. Question 1 above, Form H-7, *APH Standard Client Eligibility Requirements*, and Form H-3, Page 3, *Client Eligibility Requirements* address client eligibility: "Alternative eligibility requirements, such as those specified in APH's RWHAP Client Eligibility Policy and Procedures, may be proposed by the Applicant, but Residency and HIV status, other than the exception described above, may not be changed." In Applications that propose use of the APH Ryan White Eligibility Policy, income specified in [Austin Transitional Grant Area Eligibility by Service Category](#) will apply. Proposed eligibility criteria related to income outside of the *APH Standard Client Eligibility Requirements*, Form H-7, will be evaluated as part of the overall proposed client eligibility standards and the program services and design.



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21. Q: I understand that an agency is discouraged from applying if they have a going concern audit or any internal control deficiencies noted. We have both of those things, but we are also working on a massive turnaround under new leadership and can explain all of it in great detail. Should we consider applying since we have a history of excellent social service contract performance with the City?

A: See Form H-3, *Instructions & Scope of Work*, Page 2, Applicant Qualifications: "Applicants must meet all threshold review requirements." Form H-2, *Application Threshold Checklist*, Numbers 6-8, contain factors, including a Going Concern Uncertainty and Significant Internal Control Deficiencies that disqualify an entity from being considered under this solicitation. Any entity that cannot respond "Yes" to all items on Form H-2, *Application Threshold Checklist*, is not eligible to participate in this solicitation.

22. Q: Target populations – specific % of UDC?

A: 100% of the unduplicated client goal must be classified as a member of the one or more of the Applicant's identified target population(s).

23. Q: Is Form 1295 needed with the application submission or only in the event of an award?

A: Completion of Form 1295 is only required in the event of an award.

24. Q: Can we expand the text boxes or delete them entirely?

A: Text boxes are utilized in the Application form for ease of review by the objective review panel and are not to be deleted. They are designed to expand within the form as additional information beyond the size of the existing box is added. Please contact the Authorized Contact Person if the text boxes on your downloaded Application form are not functioning in this way.

25. Q: Is there a word/character limit?

A: No, but Applicants are requested and encouraged to limit responses to focused information that directly answers the question. Do not include unrelated or superfluous information that has no direct bearing on the question being addressed.

26. Q: Outcomes – opportunity to insert [Agency] specific?

A: Additional proposed outcomes may be included within the response to a specific question, but should not replace the standard ones listed, nor be added in chart/table form in Part IV – Program Performance in Form H-4, *Application*.

27. Rationale why indirect cost rate not allowable, but can ask for more than 10%?

A: See Question 19 regarding Indirect Cost Rate methodology. Please note that Indirect Cost methodology and administrative costs are not the same thing, although one may contain factors of the other.

Applicants are not limited to 10% in maximum administrative cost in APH General Fund Social Service Agreements in recognition of the significant challenge of operating some successful programs with only 10% of a grant allowed for administrative costs. APH General Fund contracts are intended to provide a more flexible funding stream and to help bridge the administrative cost "gap" between resources required and resources available to operate a successful program. However, a proposed administrative cost of more than 10% should



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not affect the proposed number of unduplicated clients, outcome measure results, or calculated unit costs required in the Application, and must include an explanation of the administrative cost percentage. This is a change from previous requirement of APH HIV General Fund Social Service Agreements.

28. Q: Allocation by service category or one pool of \$?

A: See Question 11.

29. Q: Will questions submitted electronically be anonymous?

A: Yes.

30. Q: Past performance taken into consideration (# of points)?

A: Members of the objective review panel are instructed to score proposals on the content of the proposals themselves without taking into account any other information known to the reviewer but not included in the Application.

31. Q: Flash drive docs include docs with signatures?

A: Yes, the electronic copies of the documents on the USB flash drive that require signature should be signed before being scanned and copied to the flash drive. Although not required by the RFA, the City requests that Form H-4, *Application*, be provided on the flash drive in Word format. Other documents may be PDF or Word format at the Applicant's discretion, and Applicants are requested to organize the contents of the drive in a logical manner.

32. Q: In the application form (H-4), question 4.2 says "the full period totals must include unduplicated clients and services across the entire initial contract period, and are unlikely to be the sum of the four periods." We understand that clients will be served in multiple periods and that the unduplicated client total for the 42 months won't be the same as the four periods added together, but won't the units of service for the four periods be exactly the four numbers added together since a "service" is delivered on a specific date and doesn't cross periods?

A: Yes, the statement above is correct; the wording is an APH error. In Question 4.2 in Form H-4 – *Application*, the 42-month full period total for unduplicated clients is unlikely to be the four period totals added together, since many clients will be counted in multiple program periods. However, the total number of service units across the 42-month period must be exactly the total of the four periods added together.

Questions and Responses Added August 17, 2018

33. Q: Are the target populations eligibility criteria? As several important groups are omitted from this list - most notably the HIV behavioral risk group MSM (Male-to-Male sex) - if the target populations are eligibility criteria - are White MSM (who are not homeless and not MSM/IDU) technically ineligible under this RFA?

A: Target populations and eligibility criteria are two different, although related, factors under this RFA. Services could be provided to any individual that meets the Applicant's proposed eligibility criteria, regardless of whether that individual is a member of the proposed target population(s). However, the primary goal of the proposed services must be to reach members of the Applicant's designated target population(s).



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34. Q: If the target groups are eligibility criteria, is this an area where an applicant can expand the eligibility criteria, as mentioned at the RFA Pre-Proposal Conference?

A: See response to question 33 and Form H-3, Instructions & Scope of Work, *Targeted Populations*, for the list of target populations, one or more of which Applicants must identify as the primary service focus under this RFA.

35. Q: Is the goal to fund all five categories, or is it possible that one or more of the categories could end up unfunded?

A: See question 11. There is no predetermined intent to allocate funding or awards for any or all specific Service Categories.

36. Q: Who should sign as the officer or authorized representative ... on the Request for Application Offer Form (H-1) ... program manager, or ... CEO ...? And should the person who signs as the officer or authorized representative be the same as the person who signs as the Applicant Executive Director on the Application Threshold Checklist (Form H-2)?

A: See form H-1, *Offer Form*, Page 4, "The undersigned, by his/her signature, represents that he/she is submitting a binding offer and is authorized to bind the Applicant to fully comply with the solicitation document contained herein." The Applicant's Board and/or by-laws generally designate what individual(s) may legally bind the organization. The same individual identified to sign Form H-1 should sign as Executive Director on Form H-2, *Application Threshold Checklist*.

37. Q: Should Form 0805 - Non-Suspension or Debarment Certification – go in the first envelope? It's not listed in the Application Submission Requirements along with the other forms.

A: Yes, Form 0805 - *Non-Suspension or Debarment Certification*, should be included in Envelope #1. An Addendum containing a revised Form H-1, *Offer Form*, will be posted to the RFA main page (<http://www.austintexas.gov/article/solicitation-social-services-persons-living-hiv>).

Q: On Form H-5, Program Budget and Narrative, would costs for psychiatric medication assistance be an allowable cost under Financial Assistance for Clients?

A: Funding or funding assistance for medication is not an allowable cost under this RFA.

38. Q: Is there a reason people experiencing mental health issues is not identified as one of the target populations? They are certainly one of the most vulnerable populations we serve in our community, along with the other identified target populations.

A: Services could be provided to any individual that meets the applicant's proposed eligibility criteria, regardless of whether that individual is a member of the proposed target population(s). However, the primary goal of the proposed services must be to reach members of the selected target population(s).

39. Q: Form 0805 was left off the Form H-1 for us to submit. Do we still submit this form with Envelope #1?

A: Yes, see Question 37.



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Questions and Responses Added August 24, 2018

40. Q: Regarding insurance requirements, we are partly covered by federal (malpractice, etc) and partly self insured (auto, D&O, etc.). Since we won't meet the actual insurance requirements in form H-8, are we eligible to apply?

A: Governmental and quasi-governmental organizations that are covered by, for example, the Federal Tort Claims Act, and/or that are self-insured for some or all required insurance coverages, are eligible to participate in this RFA as long as the coverage under any method or combination of methods meets the coverage minimums for each type of insurance in Attachment H-8, *City Insurance Requirements*. However, approval for a contract, regardless of application score or any recommendation for funding, is contingent upon the City's Risk Management Office approving the insurance alternative(s). In addition, note the requirement that all proposed Subgrantees (any entities included in Form H-4, *Program Budget and Narrative*, Line 3 ["Program Subgrantees"]), must meet all City Insurance Requirements outlined in Form H-8. The City has the final decision as to whether alternatives to traditional insurance coverage are adequate for a proposed contract.

Questions and Responses Added August 31, 2018

41. Q: For the units of service provided by HCM do they have to go into ARIES under the NMCM category or under the Housing CM category? The reason for this question is that HCM does not do a comprehensive assessment they do a housing assessment, HCM does not do a care plan they do an individualized housing plan, etc.

A: For the purposes of this RFA and any resulting recommendation for award, Housing Case Management is a City-defined subservice of Non-Medical Case Management, per Form H-3, *Applications and Scope of Work*, page 14. Therefore, Housing Case Management services must follow Standards of Care and other requirements for Non-Medical Case Management, including a comprehensive assessment of needs and service plan, of which Housing Case Management services should be a significant part. Client circumstances/acuity related to housing status may dictate that Housing Case Management is the ultimate primary focus of Non-Medical Case Management, but the Non-Medical Case Management Standards of Care must all still be observed.

42. Q: Can you please confirm that direct client assistance is different than "Financial Assistance for Clients" and that I should include our direct client assistance (rent, utilities) in the "Other" box in the budget?

A: Housing costs are only allowable as specified in Form H-3, *Instructions and Scope of Work*, in the Housing Services category:

- Short-term, medically-supported housing for recuperative care. Housing must include an individualized housing plan to guide the client's linkage to long-term housing
- End-of-Life Care medically-supported housing and essential related services provided to clients in the terminal stage of an HIV-related illness

Payment for these two allowable types of services would typically not be thought of as "rent" or "utilities," as third-party entities that provide such services are generally paid on an all-inclusive per diem basis, which includes housing, food, and required support services. **All prospective Applicants should note that housing and related costs are allowable only in the Housing Services service category.** Client financial assistance for rent, utilities, etc., are not allowable in other Service Categories. An Applicant who would propose to pay a third



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party for what is typically considered “rent” or “utilities” must apply under Housing Services and clearly demonstrate how all costs are allowable under the descriptions above.

In this RFA, direct costs paid to third parties for the allowable subservices specified above are to be included in Form H-5, *Programs Budget and Narrative* – in Line number 8, “Other,” in the Direct Assistance For Program Clients” section.

If the Applicant is the entity providing the allowable services, occupancy expenses for the Applicant’s own premises are to be considered operating expenses and are to be included in Line 2, “General Operating Expenses, on the budget form.

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