

STATE OF CONNECTICUT
QUESTION AND RESPONSES FOR RFP # 2019-0901
HIV PREVENTION SERVICES

Note to Reader: Questions below are written exactly as received.

1. **DPH's RFP re: HIV Prevention (2019-0901) asks for "curricula" in Section H of proposals. Does this refer to the HIV Prevention Interventions Plan Form or to some curricula an organization creates for the project?**

Response: Applicants may include curriculum vitae (CV) and or job resumes under Appendices section of the proposal.

2. **Please describe what DPH would like applicants to include under Appendix A Curricula.**

Response: Please see response to question # 1.

3. **Please clarify page 44, H Appendices, a. Curricula. What are you asking for?**

Response: Please see response to question # 1.

4. **It states that medications will not be paid for. Will Narcan be paid for in this RFP since it is a lifesaving treatment but also a medication?**

Response: Funding under this RFP may not be used to purchase naloxone/Narcan.

5. **On page 25 the RFP indicates that DPH will pay for HIV rapid testing. Please confirm that applicants do not need to include HIV rapid tests in their budgets.**

Response: HIV testing kits will be supplied by DPH. Applicants are not required to include testing kits as part of a line item in the budget.

6. **Must we use 1 1/2 line spacing in tables and the work plan?**

Response: No line spacing is required for tables and work plan sections of the proposal.

7. May we use a font smaller than 12 point in tables including the work plan?

Response: Please use the 12 point font size detailed in the RFP.

8. Re: Format - is it 11 point or 12 point font size? Both numbers are mentioned in the RFP.

Response: Please see answer to question #7.

9. Since the interventions (OTL and some of the work with high risk populations) is in the community, is it acceptable to lease a vehicle for the intervention?

Response: Yes, if funds allow in the budget.

10. For Category 1, Option 2 – HIV Testing in Healthcare Settings: after question 10 there is a note stating “Please include a process map of clinic flow to demonstrate how HIV and HCV screening will be integrated into existing services.” May the process map of clinic flow be placed in the Appendices?

Response: Yes. Applicants may submit process maps in the Appendices sections of the proposal.

11. If allowed, we would like to submit an application for less than the floor amount listed in the RFP. Is this permissible?

Response: Yes. This is permissible.

12. Questions regarding maximum number of staff supported by funding outlined in the RFP: Page 26 states that funding for Category 1, Option 1 (HIV testing and PrEP navigation) will support a maximum of two (2) full time staff; additional part-time staff may be supported if funds allow. Are additional full-time staff supported if funds allow?

Response: Yes. Additional full-time and or part time staff may be supported if funds allow.

13. Page 29 states that Category 2 (Drug User Health Services) will support a maximum of 2 staff. Are additional staff supported if funds allow?

Response: Yes. Additional full-time and or part time staff may be supported if funds allow.

14. Can you please provide clarity on the contract term? Page 6, section 3 states the contract term is 3 years, while page 48, section IX mentions 2-year contracts.

Response: The contract term is 3 years. Section IX refers to the required DPH budget forms that are based on a 2 year budget.

15. Will DPH provide trainings for the CDC-supported HIP behavioral interventions and public health strategies to be funded under Category 3 (i.e., Healthy Love, NIA)?

Response: DPH will provide access to CDC supported interventions when available. However, agencies may need to support travel to out of state trainings when applicable for interventions in which there are very low number of staff in need of training.

16. Per page 24, are we required to discuss what steps we have taken to explore third-party reimbursement of services in our proposal?

Response: Yes. Please describe any steps taken to explore third-party reimbursement of services in the proposal.

17. Per page 26, is it preferable to include plans to incorporate Social Networking Strategy (SNS) and Couples HIV Testing and Counseling (CHTC) or to select one?

Response: Applicants may choose to incorporate one or both of these strategies as part of OTL services funded under this RFP.

18. Questions regarding Syringe Services Program (SSP) Activities listed on page 30: Do all of these SSP activities have to be completed by every contractor? For example, must each contractor provide home delivery? Our ability to provide home delivery may be limited by staff limitations at current level of funding due to client volume/current operating hours and locations of our SSP van.

Response: Yes. Applicants are required to provide all service activities. If the applicant cannot due to certain circumstances, the applicant should describe how the agency will refer to services or

partner/ contract with another entity to provide home delivery services.

19. Bullet 1: Is there a deadline for when the Community Advisory Board (CAB) needs to be implemented?

Response: Successful applicants will be required to develop CAB by June 30, 2019 (first 6 months of year 1 funding).

20. Bullet 5: How often do client records need to be fully updated?

Response: Client records must be updated within 7 seven days.

21. Is a USB drive an acceptable way to deliver the electronic copy of the proposal or should the electronic copy be emailed to the Official Contact?

Response: Yes. USB drive is acceptable.

22. On RFP page 43 applicants are asked to include an org chart in their appendix. Org charts are not listed in the Proposal Outline. May applicants place their org charts in the Appendix?

Response: Yes. Organizational Charts may be placed in the Appendices section of the proposal.

23. The Staffing and Proposed HIV Intervention Plan Forms are not listed in the Proposal Outline on RFP pages 42-44. May applicants include these forms in the Forms Section of the proposal?

Response: Yes. Staffing and Proposed HIV Intervention Plan Forms may be included in the Forms Section of the proposal.

24. Does DPH want applicants to include MOAs as an attachment, or just describe the community relationships agencies have including MOAs in place?

Response: Applicants must describe community collaboration and relationships within the proposal. Applicants that currently have MOAs in place with agencies, may submit MOAs as part of the Appendices section of the proposal.

25. When formatting the main narrative should we be following the format on page 33 or page 42.

Response: The outline on page 33 is for the review committee criteria. Please follow the Proposal Outline detailed on page 42.

26. What is the purpose of having regions?

Response: The purpose of having regions is to ensure that services are available throughout the state.

27. Do we have to pick a region and only serve that region?

Response: Applicants may propose to service more than one region. However, collaborations must be described in detail in the regions where services will take place.

28. Can we provide services located in more than one region?

Response: See response to question #24.

29. Can we provide services to individuals who live in region outside the service location region?

Response: Yes. However, collaborations must be described in detail in the regions where services will take place.

30. What is the definition of “private organization”, page 1, “private provider organization”, page 5?

Response: Private organizations or private provider organization are defined as non-state entities that are either nonprofit or proprietary corporations or partnerships.

31. You note that “successful applicants will be required to assess the acuity of clients on a regular basis, so as to engage and refer appropriately to PrEP and other HIV prevention services”. In the context of HIV testing, for example, which is often a one-time encounter, how does acuity apply?

Response: In the context of HIV Testing, level of risk is determined, then a referral (s) are made to services, for example for PrEP

Navigation for clients with higher need for support, i.e., acuity. DPH will work with successful applicants on how to screen for acuity during HIV testing and for PrEP Navigation services.

32. Within the context of the services to be funded through this RFP, in what service/program delivery do you expect acuity assessments to be completed?

Response: Acuity assessments will be a key activity under PrEP Navigation Services.

33. Do you want us to submit the agency's annual budget, financial control procedures and audited financial statements in the Appendices?

Response: Yes. Applicants may submit these documents in the Appendices section of the proposal.

34. In Category 2, you specify the funding will support a maximum of 2 staff positions for implementation of the 3 drug user health services activities, We do not see staff specifications for Categories 1 and 3. Please tell us if there are staff specifications for Categories 1 and 3.

Response: There are no staff specifications for Categories 1 and 3. Under Category 2, applicants can have more than 2 staff, such as part-time time staff, if funds allow.