

FAQ for the General Public

- 1) Is it allowed to submit a budget request that goes over the allocated budget in a service category? **Yes, even though we follow a budget formulary in the federal grant for each service category, the program can complement federal funds with pharmaceutical rebate funds. The program takes into consideration different factors to ensure certain service categories are adequately funded to meet the service needs of the community.**
- 2) If we are applying for multiple categories, do we need to have a complete budget and work plan for each category? **Yes, each proposal must be a separate submission with a complete budget and work plan.**
- 3) Are there 'In-Kind' requirements for these service areas? **Some agencies, when doing their budgets, will list what their 'In-Kind'. It's not required. We may ask agencies when the state-wide statement of need is conducted to list their funding – whether they receive Part A funds, B, C, D, F, Private Funds, CDC Funds, or other type of funds. The program does not require a match or a maintenance of effort.**
- 4) Are administrative costs allowed and what is the percentage? **Yes, the program has a 10% administrative cap. You can find what activities are acceptable under the administrative cap in the Fiscal Monitoring Standards and the attached Policy Clarification Notice.**
- 5) Is the eligibility component now going to be under the health care supportive services, would that be the ADAP eligibility? **Yes, ADAP eligibility is now considered under the Referral to Healthcare Services.**
- 6) We're not providing any numbers of (for example) unduplicated people we'll be reaching or plan to reach or units of service? **Yes, that is correct. Just describing your methodology of how you will do the project. The detail numbers to be served and units of measure will be discussed during the negotiation period if your proposal is chosen to be funded.**
- 7) Also, my assumption is that we are not directly inputting into this guide are we literally copying these pieces out – the structure of the outline, placing it in our document, then filling everything in, is that correct? **Yes. From page 15 of the guide will be your template for your Scope of Work, project data sheet, etc. No page limit. If you want to add letters of support (these aren't required) or anything that might be of interest for us that will enhance your proposal can be include.**
- 8) Would computers be considered equipment even if they are under \$5,000? **Yes, per state rules certain things are considered equipment.**
- 9) Travel is just allowed in-state, correct? No out-of-state conferences or training? **Yes. Per HRSA, funding is restricted to providing services and travel can be used for in-state training relating to the service category you are funded under.**
- 10) What about training at Stanford would that be allowed? **That is a unique project and we may allow travel to the site and will have to justify it accordingly.**
- 11) Could evaluation or database performance management be considered Administrative cost? Or would it be more a line item personnel cost? **That is an activity that falls under the administrative cost per**

HRSA guidelines of allowable activities. Refer to Program and Fiscal Monitoring Standards for detailed information.

- 12) The Health Insurance Premium & Cost sharing Assistance (**1F on pg 5**) is not open for competitive proposals, correct? **Yes, this contract is specific to Access to Healthcare Network because they have the relationship established with health insurance carriers and the comprehensive program in place.**
- 13) For the determination of the competitive proposals, will there be a scoring matrix and a grant review committee? **Yes, we are following State Purchasing's guidelines which include a review committee, scoring, and we can provide the feedback for strengths and weaknesses. However, certain aspects of this process remains confidential and some components may not be released until all subgrants and contracts are finally executed.**
- 14) So, Health Education / Risk Reduction would be one proposal and Outreach Services would be a separate proposal? **Correct. The program's CAREWare system requires us to keep categories separate in order to track and enter client level data.**
- 15) Do the documents need to be signed in Blue or Black ink? Do you have a preference? **Blue ink would be the preference.**
- 16) Do you need agency financials? 99D or Profit/Loss statements? **No, these documents are not necessary for the proposal submission.**
- 17) On page 35 Health Education/Risk Reduction it says "Health Education/Risk Reduction services can only be delivered to individuals who are HIV positive." In the past, we've done positive individuals as well as their loved ones or partners, so does that mean we can no longer invite their partners or loved ones if they are not positive? **They are welcome to attend; however, you would only be able to count those who meet the criteria as a Ryan White client.**