



**RFA #001 Ending the HIV Epidemic 2021 – AB
Official Questions and Answers**

All questions should be directed to the RFA Authorized Contact Person:
Anjelica Barrientos at aphhivresourcesadmin@austintexas.gov no later than June 30, 2021 at 12 PM CST.

Last Update by AB: July 1, 2021

Questions	Answers
Because we do not ourselves deliver medical or preventative services do we qualify to apply?	If an organization does not provide direct client services, they are still eligible to apply for this Ending the HIV Epidemic funding opportunity with the understanding that they and their subcontractor(s) will be held to the same requirements outlined in the RFA.
Page 1 of Form A and page 4 of Form D list the anticipated start date of contract to be August 31, 2021 yet page 2 of Form C lists August 1, 2021 as the start date for both grant sources. What is the anticipated start date of contract?	Anticipated start date is August 31, 2021. Form C is now updated to reflect the start date.
We are asked to provide double sided paper copies for both Envelope #1 and Envelope #2. This will not be possible if you want wet/original signatures. Does this mean that signatures do not need to be wet/original and can be copies?	Signatures do not need to be wet/original, they can be copies. We also recommend using blue ink.
Can we number all the pages of the application? If yes, can we include a Table of Contents for each envelope?	Yes, you can number application pages. Yes, you can include a Table of Contents for each envelope. Additionally, the table of contents will not count toward the total application word count.
For Form F, question 14, what type of document would you expect as it is not clear?	For quick reference: Q14: Describe your experience reaching and serving diverse communities. Demonstrate with data how your organization positively impacts the priority populations identified in Form C and other historically marginalized



	<p>communities. Documents to support this may be submitted with this application. Suggested documentation:</p> <ul style="list-style-type: none">• HIV Continuum of Care data for the priority population(s) identified in this RFA and a description of tailored strategies to reach and serve these populations;• Client demographic data;• Any data from community events/outreach such as number and demographics of clients reached/served; along with an event description such as geographic location, messaging, services/resources offered• Qualitative data, such as client testimonial(s)
<p>Questions 15 and 16 of Form F require submission of past performance reports, and monitoring reports. Although we have not previously performed services in the City of Austin, our agency has performed the same services identified in this opportunity in other areas of Texas and the United States. Are reports from other areas for these services acceptable?</p>	<p>Yes, reports from other areas for these services are acceptable.</p>
<p>Requested clarification regarding Form L (Program Staff Positions & Time) and slide 27 of the Pre-Bid PowerPoint presentation, stating that “The total in this staffing form (Form L) should match the total amount requested for the RFA”</p>	<p>Salaries should match what is listed under salaries in the budget</p>
<p>Will the PowerPoint be available after the virtual pre-bid meeting?</p>	<p>Yes, the webinar presentation will be posted to the RFA website after the meeting. It was uploaded on June 17, 2021 around 4 p.m. CST</p>
<p>If an organization is serving as a sub-contractor for one project does that dollar figure of their sub-contract reduce the</p>	<p>No, being a subcontractor for an agency will not reduce the amount of award for</p>



<p>amount of award for which they can apply independently?</p>	<p>which the subcontractor can apply for independently.</p>
<p>With reference to page 10 of the Updated Scope of Work, Section F. RFA Application Instructions -- Does Form G- Application Threshold Checklist count towards the total word count?</p>	<p>No, Form G Application Threshold Checklist does not count towards the total word count.</p>
<p>Are there any specific instructions for Form G?</p>	<p>Form G should be completed in the Word template provided, saved as a PDF, and hand delivered.</p> <p>Additionally, an email notification announcing updates to Form G was just sent out. The UPDATED Application Threshold Checklist on the RFA website was updated to include a list of documents that should be submitted as part of the application (these required documents do not count toward the final word count either).</p> <p>RFA website link: https://www.austintexas.gov/article/rfa-001-ending-hiv-epidemic-2021-0</p>
<p>I see that signatures do not need to be wet/original on the Questions & Answers posted. To clarify, does this mean that signatures can be electronic?</p>	<p>Yes, signatures can be electronic.</p>
<p>The guidance indicates that Pillar 2 will be funded from HRSA funds and Pillars 1 and 3 will be funded by CDC/DSHS funds. The total funding available for CDC/DSHS funds is \$159,322. Yet, it is anticipated that there will be 1 to 2 awards under pillar 1 and 1 to 2 awards under pillar 3. Does this mean that the average award under pillars 1 and 3 will be between \$39,831 and \$78,161? Is the maximum that can be requested under pillars 1 or 3 \$159,322? Is it unlikely that</p>	<p>The number of awards and average funding under pillars 1 and 3 will, in part, be dependent upon the number and quality of applications; keep in mind that these are the number of anticipated awards. Additionally, the minimum available funding listed in the Scope of Work is \$40,000 per year. If you are using your calculations for reference, I believe the upper average will be \$79,661 (I think you divided \$156,322 by two, rather than \$159,322). The likelihood of an agency</p>



<p>an agency would be funded above \$100,000 for pillars 1 or 3?</p>	<p>being funded above \$100,000 for pillars 1 or 3 is also dependent upon the number and quality of submitted applications.</p> <p>Yes, the maximum that can be requested under pillars 1 or 3 is \$159,322.</p>
<p>Are we required to serve partner agency clients through peer support?</p>	<p>No, you are not required to serve partner agency clients through peer support. However, "applications that propose external partnerships and service integration across the HIV Care Continuum will be prioritized" Form C Updated Scope of Work (pg. 1).</p>
<p>Are there minimum requirements for how many clients to reach in each area?</p>	<p>No, there are not minimum requirements for how many clients to reach in each area. But keep in mind that there are outcomes that will be assessed. Additionally, please note that final deliverables will be determined in the contract negotiation process.</p>
<p>Are we required to adhere to any HAB measures for peer support? If so, which ones?</p>	<p>Reporting measures will be established during the contract development and negotiation process. Measures for peer support may include the following core measures: HIV Viral Suppression, HIV Medical Visit Frequency, Annual Retention in Care, Prescription of HIV Antiretroviral Therapy.</p>