California Department of Public Health (CDPH)  
Center for Infectious Diseases  
Office of AIDS (OA), HIV Prevention Branch

HIV Pre-exposure Prophylaxis (PrEP) Navigator Services Programs  
Request for Applications (RFA)

RFA Release Date: 05/31/2019

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**HIV Pre-Exposure Prophylaxis (PrEP) Navigator Services Programs**

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<td><strong>RFA Release</strong></td>
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<td>Available on the CDPH OA Website: <a href="https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_RFA.aspx">https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OA_RFA.aspx</a></td>
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<td><strong>Answers to written questions</strong> available on OA website: <a href="https://www.cdph.ca.gov/Programs/CID/DOA/Pages/RFA-19-10218.aspx">https://www.cdph.ca.gov/Programs/CID/DOA/Pages/RFA-19-10218.aspx</a></td>
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A. Introduction

PrEP is a biomedical intervention for HIV-negative individuals demonstrated to be effective at reducing the transmission of HIV infection by over 90% when taken consistently. The Centers for Disease Control and Prevention (CDC) recommends PrEP as an evidence-based intervention to prevent HIV transmission. In March 2018, the United States Public Health Service published updated clinical practice guidelines instructing health care providers how to administer PrEP effectively.

Within the California Budget Act for Fiscal Year (FY) 2019-2020, the California Legislature appropriated ongoing PrEP Navigator Services funding for the California Department of Public Health, Center for Infectious Diseases, Office of AIDS (CDPH/OA) to establish or expand PrEP navigator services programs and access to PEP. Per the CDC guidelines, the primary priority population(s) for PrEP Navigator Services funding are non-white men who have sex with men (specifically African-American and Latinx), transgender women and men who have sex with men, and people who test positive for syphilis or gonorrhea. Agencies who have a proven record or outline a credible and complete plan for reaching youth (13 to 24) in these categories and transgender women of color will be given a higher weight during the RFA scoring process. Additional populations to consider are other populations for which local data indicate a substantial risk for acquiring HIV (HIV incidence rate of greater than 2 per 100 person-years).

The funding is to be awarded through a RFA on a competitive basis to eligible community-based organizations (CBOs) and local health jurisdictions (LHJs). Funded entities will collaborate with CDPH/OA to conduct outcome and process evaluation of navigator services.

A comprehensive, stigma-free, culturally/linguistically competent, and agency-wide approach is necessary to ensure that HIV-negative individuals from priority populations are effectively linked to and managed on PrEP. It is important that those who will most benefit have access to PrEP. Addressing client concerns, engaging PrEP prescribers, and learning how to use and enroll clients in public and private insurance and patient assistance programs that help cover PrEP-related expenses, are critical in making PrEP available to priority populations.

Clients on PrEP require follow-up (including HIV and STI testing and other related lab work). Clients need to be informed about the importance of adherence and have access to adherence assistance when needed. Being able to incorporate PrEP into their lifestyle, patient risk perception, financial costs, and concern about side effects play an important role in PrEP uptake and adherence.
PrEP navigators can assist clients and PrEP prescribers in addressing these concerns before they become barriers.

The Legislature authorized in HSC Section 131019 the CDPH, OA as the lead agency responsible for coordinating State programs, services, and activities related to HIV and AIDS.

B. Purpose
The purpose of this RFA is to identify and fund PrEP Navigator Service programs based on applicant’s capacity and ability to ensure access for and navigate priority populations to PrEP, develop protocols and strategies to engage priority populations, provide PrEP education to clients and public health detailing to prescribers and their staff, assess and refer individuals to appropriate clinical care and prevention services, and provide adherence support and service.

C. Terms and Funding
The annual amount of $1.76 million will be awarded through this RFA to establish or expand local PrEP navigation programs that service California’s priority populations identified in the RFA introduction. Upon an appropriation for this purpose in the annual California State Budget Act, OA will award PrEP Navigator Services funding based on responses to this competitive RFA. Award amounts will vary and OA will determine the final funding levels for each program based on responses to this RFA and local factors including geographic area, and HIV prevalence.

The terms of the resulting contracts will be three years in duration. The anticipated project start date is July 1, 2019, but may vary due to the time required to finalize the agreements, obtain signatures, and process the agreements between awardees and CDPH. Projects will run 36 months from the start of the agreement. The awardee(s) is not authorized to begin work until the agreement is finalized. Work conducted outside the effective start and end date of the agreement will not be eligible for reimbursement.

The anticipated terms of the resulting grants will be 3 fiscal years (FY) in duration as noted below:

FY1: July 1, 2019 to June 30, 2020
FY2: July 1, 2020 to June 30, 2021
FY3: July 1, 2021 to June 30, 2022

All funding is contingent on the availability and continuation of State general funds allocated for this purpose.
D. Eligible Entities

All California LHJs and CBOs that meet RFA eligible criteria (stated below) are defined as Eligible Entities (EEs).

Eligibility Entity Criteria

1. Units of local government including, but not limited to, cities, counties, and other government bodies or special districts.

2. Public and/or private nonprofit organizations classified as 501(c)(3) tax exempt under the Internal Revenue Code.

3. Organizational capacity to fulfill RFA program and administrative requirements.

Any EEs can apply directly to OA and are encouraged to apply for this funding individually or in collaboration with other EEs in order to develop a comprehensive proposal. Collaborative applications must identify the lead EE and include Letters of Support (LOS) from the other EE(s). Examples of collaborative applications may include a joint application from two or more LHJs, a partnership between an LHJ and a CBO, or a joint application from multiple CBOs. One agency must be designated as the lead agency. The funding will be awarded to the lead agency, and the lead agency will be responsible for grant management, reporting, and invoicing.

Applicants are encouraged to develop applications appropriate to their regions, based on strong local partnerships and ability to reach specific priority population(s). The activities required to create sustainable programs may vary by setting and funding recipient. Ideal responses will demonstrate innovation as well as the ability to engage and provide stigma-free, culturally/linguistically competent services to priority populations, provide assistance to individuals allowing them to access, enroll in, and use insurance or patient assistance programs to pay for PrEP, link clients to PrEP providers, and, when needed, support adherence to PrEP and PrEP-related follow-up among participants.

E. Program Requirements and Submission Instructions

The following section includes a complete description of the RFA’s program requirements. This RFA requires applicants to meet requirements listed in this RFA and to submit all documents listed in the RFA Package Checklist (see Attachment 1). All activities and deliverables described below must be addressed in the application package of each applicant’s RFA submission.

Applicants must respond to the questions asked in the templates provided in the attachments to describe their intended PrEP navigation services program.
In addition to completing the required attached templates, awardees will be required to comply with any additional requirements specified in this RFA. Applicants must highlight their ability develop an agency-wide focus on all components specified in this RFA in order to achieve and sustain program goals.

The Work Plan (see Attachment 4) includes recommended activities that have been identified as key activities for implementing a successful and sustainable PrEP navigation program. Applicants must use the Work Plan template (see Attachment 4) to describe program goals and activities to implement or expand a comprehensive PrEP navigation program that adequately addresses the needs of their priority populations. In addition to screening and linking clients to PrEP and PEP prescribers, programs must conduct activities that support priority population engagement public health detailing, development and maintenance of a network of culturally/linguistically competent PrEP prescribers who accept program referrals, capacity to provide or refer clients to other appropriate and essential support services or clinical care and prevention services, assistance with accessing public and private insurance and patient assistance programs to pay for PrEP/PEP, and PrEP adherence support, if needed.

Applicants must illustrate the EE’s qualifications to undertake the activities specified in their work plan, as well as any prior experience performing them, if applicable. Activities that cannot be accomplished directly must be supported through strong prescriber and support service networks. If applicants intend to conduct some activities directly and accomplish others via collaboration (for example, if the EE will collaborate with other providers for HIV testing or insurance assistance for priority population(s)), these collaborations must be specifically described in Referral and Support Services Network Table (see Attachment 7) and LOS included in the attachments. Additional activities and outputs added to the Work Plan (see Attachment 4) must meet S.M.A.R.T criteria (specific, measurable, achievable, result-oriented and relevant, and time-bound, (see the SAMHSA’s Native Connections help document on creating and identifying SMART objectives: https://www.samhsa.gov/sites/default/files/nc-smart-goals-fact-sheet.pdf for more information on S.M.A.R.T. objectives). The program activities must emphasize innovative and evidence-informed approaches. The time periods/dates specified in the work plan shall correspond to the projected Budget Tables (see Attachment 9).

Applicants must be prepared to develop a sustainability plan after awarded funding.

Use the Application Narrative template (see Attachment 5) and other noted templates to answer the questions in the follow sections.
1) **Priority Population**

   a. Define the priority population(s), as described in the RFA introduction, who will be engaged in this PrEP navigation project. If engaging both men who have sex with men and transgender women and men, describe how they will be engaged differently, specifically transgender women and men who have differing, unique needs and challenges in engagement.

   b. Why is your agency a good option for engaging these priority population(s)? How do you currently engage or plan to engage them?

      i. If your population is locally specific (not part of the defined priority populations listed in the RFA introduction), please include evidence showing that they are at substantial risk for acquiring HIV (as defined in the RFA introduction) (e.g. most recent local epidemiologic data available, a local care continuum, HIV testing data, Ryan White Services data, and/or other data demonstrating high, emerging, or disproportionate HIV incidence).

   c. Describe how participants will be screened, assessed, and referred to navigation services, including benefits navigation, PrEP navigation, and navigation to other essential support services.

   d. Include a resource inventory of services, organizations and/or businesses catering to your priority population accessible in your geographic region. List your relationships with these organizations in *Referral and Support Services Network Table* (see Attachment 7).

2) **Program Engagement**

   a. Describe innovative strategies to engage the priority population(s) defined in the RFA introduction (and/or locally specified priority populations.)

      i. Based on your current capacity, what is the estimated number of clients from each of your defined priority population(s) you anticipate referring and linking to PrEP? What data (qualitative and quantitative) are you using to make this estimate?

   b. Use the *Referral and Support Services Network Table* (see Attachment 7) to identify PrEP prescribers with demonstrated expertise and cultural/linguistic competence in working with priority population(s) to whom you will refer PrEP candidates or people on PrEP. Include LOS in the attachments, if available. Note their willingness to become a PrEP-AP enrollment site and/or network PrEP-AP clinical provider. Include the insurance policies the prescribers accept and ensure the provider set accepts a variety of insurance carriers, including Medi-Cal and PrEP-AP.
c. Describe how you will provide public health detailing to current and potential PrEP prescribers and their staff. This can include PrEP specific training and TA, but also cultural competency training around priority populations (for more information on Capacity Building Assistance, see OA's capacity building fact sheet; https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/CBA%20Fact%20Sheet.pdf).

d. Describe how your HIV and STI testing venues will develop or expand PrEP Navigation services for priority populations. Attach any LOS as necessary.

e. Up to 10% of funding is available for marketing over the life of the project; however, OA does not permit the use of PrEP Navigation Services funds to support large scale social marketing or social media campaigns or costly development of creative elements. EEs are encouraged to use and adapt previously developed materials and campaigns to reach priority populations with information around PrEP. Funds may be used to share information about PrEP on social media platforms (e.g. Facebook, Instagram, Grindr).

3) Role of the PrEP Patient Navigator

a. Describe the PrEP navigator's role in assessing client's PrEP eligibility (based on eligibility criteria defined in the PrEP Navigator RFA glossary: https://www.cdph.ca.gov/Programs/CID/DOA/Pages/RFA-19-10218.aspx) or PEP eligibility, their readiness to incorporate PrEP into their lifestyle, how/if navigators will follow up with PrEP eligible clients who are not ready to start medication at initial navigation session, implementing adherence methods (including client follow-up to determine if prescription was obtained and if PrEP was initiated.), addressing essential support services (such as, the specific adherence needs of clients with substance abuse and/or mental health disorders), referring clients to PrEP prescribers, working with clients if a prescriber decision is made to discontinue PrEP, and in screening and referring clients for intimate partner violence (IPV).

4) Referral and Support Services Network

Use the Referral and Support Services Network Table (see Attachment 7) and the Application Narrative template (see Attachment 5) to describe your PrEP navigator(s)' available referral/service network (both formal and informal). Include LOS when available.
a. Describe the planned or expanded referral process/network to a PrEP navigator and/or benefits navigator. Where will clients be referred from (e.g. STI clinic, family health)? Specify in the Referral and Support Services Network Table (see Attachment 7) referral types between network members (e.g. warm or in-person handoffs). Attach LOS when available.

b. Describe the planned or expanded referral process/network between PrEP navigators and prescribers. Specify in Referral and Support Services Network Table (see Attachment 7) referral types between network members (e.g. warm or in-person handoffs). Attach LOS when available.

c. Describe any efforts or planned efforts to onboard telemedicine services.

d. Describe your current relationship with Gilead and their PrEP patient assistance program. If you do not have a relationship, describe how you will establish one.

e. Describe your plan to assist clients with benefits navigation such as enrolling into public or private insurance or to access third party payers and patient assistance programs.

f. Describe your plan to become a PrEP-AP enrollment site, or if you have prescribers on staff, your plan to become a PrEP-AP enrollment site and member of the PrEP-AP clinical provider network. Applicants should apply to become a PrEP-AP enrollment and/or clinical site by June 14, 2019 (for more information on PrEP-AP including links to enrollment site certification process see the PrEP-AP information section on ADAP’s website: https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OAadap.aspx#) to become certified by project start date. All funded applicants are required to become PrEP enrollment sites and/or clinical site if applicable.

g. Describe your capacity to assist clients in identifying and addressing barriers to accessing PrEP and/or identifying and addressing barriers to adherence to PrEP, including the ability to provide or refer for wraparound services. Please provide a list of the essential support services you have the capacity to address (either directly or through referrals), emphasizing the support service needs of your priority populations (e.g. housing services, food security, gender affirming care, psychosocial, behavioral and ancillary support services). If the capacity to address these essential support services are through relationships with other organizations, make sure these relationships are listed in the Referral and Support Services Network Table (see Attachment 7).

h. Describe your capacity to provide culturally/linguistically competent services to young gay or bisexual men and gay or bisexual men of color, particularly African-American and Latinx.
i. Describe the capacity to provide culturally/linguistically competent services to transgender individuals, particularly young transgender women and transgender women of color.

5) **PrEP Starter Packs and PEP**

To support same day PrEP protocols and to minimize barriers to PEP, a portion of year one’s budget can be used to procure PrEP and/or PEP medication starter packs, lab costs, and rapid HIV test kits (these costs need to be documented in your FY 1 Budget Tables (see Attachment 9)). After year one, PrEP and PEP starter packs and other associated costs (see Attachment 8, Budget Guidance) are anticipated to be covered through PrEP-AP and must not be included in FYs 2 or 3 budgets.

a. Describe any plan or capacity for implementing same day PrEP and if applicable, how using PrEP Navigator Services funds to purchase PrEP medication and paying for associated PrEP costs will contribute to this plan.

   A. Describe any plan or capacity for transitioning clients from PrEP starter pack to PrEP with payer assistance, if needed (e.g. Covered California, Gilead co-pay, PrEP-AP).

b. If applicable, describe how purchasing PEP medication will reduce barriers for patients to access PEP within your agency.

c. If applicable, describe how your agency will be able to pay for PrEP and PEP medication, lab costs, and HIV rapid test kits after FY 1. If you do not plan to use PrEP Navigation Services funds to purchase medication and other material costs associated with same day PrEP for FY1, please describe how you will fund these materials.

6) **HIV/STI Testing**

a. Please use the Referral and Support Services Network Table (see Attachment 7) to describe collaborations with HIV and STI testing sites; including public health targeted testing sites as well as testing programs in health care settings such as emergency rooms or primary care providers.

b. Describe plans for linkage to PrEP navigation services for priority populations with HIV-negative test results, plans for responding to individuals with HIV-positive or preliminary-positive test results (e.g., linking to PEP or care), and plans for responding to individuals with a reactive test for an STI (other than HIV), including linkage to STI treatment and PrEP navigation services. Attaching LOS is encouraged.
7) **Monitoring Plan**

All funded programs must allocate at least 10% of their annual budget toward project monitoring and data entry. Monitoring and evaluation will be based on the activities specified in the *Work Plan* (see Attachment 4) and will be tracked using annual progress reports and the Office of AIDS Client Encounter Form (CEF) and, for people living with HIV, the Supplemental Client Encounter Form (SCEF). The CEF will be used to track client-level PrEP navigation services. You will be required to report activities conducted with a client during a PrEP encounter (including testing if testing is conducted, and linkage to care if PrEP client tests positive for HIV). Awarded applicants are required to enter CEF and SCEF data into OA Prevention Branch’s data monitoring and evaluation system, Local Evaluation Online (LEO). Data entry into LEO is a process that must happen continuously to avoid a backlog of forms and to be able to address any inconsistencies in a timely manner. In addition to programmatic monitoring at the state level, awardees will be expected to conduct local program monitoring.

a. Please describe your local monitoring plan.

There will be the possibility of additional data submission requirements, depending on project needs or outcome; however, OA intends to be mindful of local data burden and manage data requirements accordingly.

8) **EE Capacity**

a. Describe any experience with priority population(s) that demonstrate expertise, history, and credibility working successfully in engaging and serving the priority population(s).

b. Describe any relationships (both formal and informal) with community-based HIV and non-HIV health care providers that have a successful history of working with the priority population(s), and who have experience addressing barriers to clients accessing PrEP. Use the *Referral and Support Services Network Table* (see Attachment 7) when appropriate.

c. Describe any relationships (both formal and informal) with the state and local health departments.

d. Describe how you will implement evidence-informed programs or generate innovative strategies, or both, with at least preliminary evidence of program effectiveness for PrEP program implementation or expansion.

e. Describe EE(s) administrative systems and accountability mechanisms for grant management.

f. Describe EE(s) capacity to report data and participate in evaluation activities (including continuous data entry and semi-annual data reporting).
F. Questions and Evaluation Process

If, upon reviewing this RFA, a potential applicant has any questions regarding this RFA, discovers any problems, including any ambiguity, conflict, discrepancy, omission, or any other error, the applicant shall immediately notify OA in writing, to be delivered via e-mail, and request clarification or modification of this RFA.

All such inquiries shall identify the author, EE name, address, telephone number, and e-mail address and shall identify the subject in question, specific discrepancy, section and page number, or other information relative to describing the discrepancy or specific question.

Questions/inquiries must be received by 5:00 P.M., PDT, on Friday, June 7, 2019. Questions will be accepted via e-mail to the address below.

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<th>E-Mail Address</th>
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<tr>
<td><a href="mailto:PrEPNavRFA@cdph.ca.gov">PrEPNavRFA@cdph.ca.gov</a></td>
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All questions and responses will be posted and available on the OA website on the PrEP RFA page by 5 P.M. PDT on Tuesday, June 11, 2019. Specific inquiries determined to be unique to an applicant will receive a response via e-mail to the requestor only.

If a prospective applicant fails to notify OA of any problem or question known to an applicant by the date indicated in this section, the applicant shall submit an application at his/her own risk. Prospective applicants are reminded that applications are to be developed solely upon the information contained in this document and any written addenda issued by OA.

1. Application Evaluation Process

After the application submission deadline, OA will evaluate each application to determine the responsiveness to the RFA requirements. Applications found to be non-responsive at any stage of the evaluation, for any reason, will be rejected from further consideration. Late applications will not be reviewed.

OA may reject any or all applications and may waive any immaterial defect in any application.

OA’s waiver of any immaterial defect shall in no way excuse the applicant from full compliance with the grant terms if the applicant is awarded the grant.
Although personnel budgets may be submitted with unfilled positions and noted as “to be determined,” no changes in subcontractor or changes in staffing are allowed after a grant is awarded without OA approval of a formal grant amendment. Please note that submitting budgets with ‘to be determined’ positions does not exempt the applicant from providing detail on specific services to be provided by the positions listed.

a. Grounds for Rejection

Circumstances that will cause an application package to be deemed non-responsive include:

i. Applicant failed to submit a Letter of Intent by the deadline required by this RFA.
ii. The application is received after the deadline set forth in this RFA.
iii. Failure of the applicant to complete required forms and attachments as instructed in this RFA or as instructed in the attachments.
iv. Failure to meet format or procedural submission requirements.
v. Applicant provides inaccurate, false, misleading information or statements.
vi. Applicant is unwilling or unable to fully comply with proposed grant terms.
vii. Applicant supplies cost information that is conditional, incomplete, or contains any unsigned material, alterations, or irregularities.
viii. Applicant does not meet minimum qualifications set forth in this RFA.

OA may, at its sole discretion, correct any obvious mathematical or clerical errors. OA reserves the right to reject any or all applications without remedy to the applicants. There is no guarantee that a grant will be awarded after the evaluation of all applications if, in the opinion of OA, none of the applications meet California’s needs.

b. Standard Application Review Process

Applications from EEs that meet the format requirements and contain all of the required forms and documentation will be submitted to an evaluation committee assembled by OA. The committee will assign numeric scores to each responsive application. Each application will be reviewed and scored in comparison to all applications received based upon the quality and completeness of its response to California’s needs, the likelihood of maximally reducing new HIV infections by engaging priority populations on PrEP and PEP and RFA requirements. The evaluation and scores will
constitute recommendations to OA management. Final approval of awardees will be made by the OA Division Chief.

G. Instructions for RFA Submission

1. **Letter of Intent – MANDATORY – Due by 12:00 PM, Friday, June 14, 2019**

   Prospective applicants are **required** to submit the Letter of Intent to OA indicating their intent to submit an application in response to this RFA. The Letter of Intent must be signed by an official authorized to enter into a grant agreement on behalf of the EE. The Letter of Intent must be sent via e-mail to the address below. Applicants that fail to submit a Letter of Intent by the specified deadline are precluded from submitting an application for consideration.

   **E-Mail Address**

   PrEPNavRFA@cdph.ca.gov

2. **Application Submission Requirements**

   Applicants must use the provided PDF and Excel templates to complete their application. Please **do not** reformat the Excel attachments. All pages must be numbered sequentially. The size of the lettering must be at least an 11-point font. Page limits are specified in the application package below and on the templates and must be adhered to. Any pages that exceed the specified page limits will not be included in the review process.

   EEs intending to submit an application are expected to thoroughly examine the entire contents of this RFA and become fully aware of all the deliverables outlined in this RFA. Applications are to be developed solely on the material contained in this RFA and any written addendum issued by OA. The following is the order in which sections in the application **must be** submitted. A complete application package (Attachments 1-7 and 9-10), plus any additionally requested documentation) must be submitted. Please request the required attachments from the [PrEP Navigation Services funds mailbox](mailto:PrEPNavRFA@cdph.ca.gov) at PrEPNavRFA@cdph.ca.gov. A brief description of each section to be included is given below:

   a. **RFA Package Checklist (one page limit)**

      Complete the **RFA Package Checklist** (see Attachment 1). This sheet will serve as the guide to make certain that the application package is complete, and to ensure that the required documents are organized in the correct order.
Note: there may be additional documentation needed outside of this checklist, including LOSs and evidence of HIV prevalence among specific populations.

b. **Grantee General Information Table (one page limit)**
   Complete the *Grantee General Information Table* (see Attachment 2). This sheet must be signed by an official authorized to enter into a grant agreement on behalf of the EE.

c. **Executive Summary (one page limit)**
   Include a one-page *Executive Summary* (see Attachment 3) of the proposed program and how it will be integrated with the EE’s current activities.

d. **Work Plan (Excel table)**
   Use the *Work Plan* template (see Attachment 4) to document the proposed activities that will be conducted to achieve PrEP Navigator Service goals. The activities must cover the funding period, from July 1, 2019 through June 31, 2022 and must include activities reflected in the *Application Narrative* template (see Attachment 5).

e. **Application Narrative (20 page limit)**
   Use the *Application Narrative* template (see Attachment 5) to provide a description of your program, covering the funding period, from July 1, 2019 through June 31, 2022. This section includes descriptions of your plan to carry out Section E – Program Requirements, beginning on page 5 of this RFA.

f. **Personnel Narrative (4.5 page limit)**
   Use the *Personnel Narrative* template (see Attachment 6) to answer questions regarding your staffing capacity and procedures. Describe the personnel policies and procedures that exist within your organization to assure that qualified staff are recruited, well trained and supervised. Discuss your capacity to hire/reassign staff within the first period (July 1, 2019 to Dec. 31, 2019). If you cannot hire staff within the first period, please include a hiring plan and timeline of completion. Discuss your capacity to maintain program integrity in the face of staff turnover. Use the *Budget Tables* (see Attachment 9) personnel tab and subcontractor personnel tabs to describe staff roles and how those roles will contribute to the program goals. Highlight the staff who represent your defined priority population(s) or have a history of successfully engaging that population. All staff (both funded through PrEP Navigator or in-kind funding) must be listed in the *Budget Tables* (see
Attachment 9) and justification. In-kind funding will not affect the scoring of this RFA.

Applicants must provide an EE organizational chart that indicates all staff to be assigned to this program, including the lines of authority and reporting relationships.

Applicants who plan to use specially qualified experts as consultants to meet grant requirements, aside from regular project staff, must identify these individuals with CV included, and describe the need for hiring a consultant and the specific responsibilities of the consultant.

If the project includes subcontractor(s), the applicant’s completed narrative template must describe exactly what subcontracted personnel will be working on the project and what responsibilities the subcontractor(s) will assume. In this “Personnel” response, describe exactly how the applicant will monitor the subcontractor performance. Notwithstanding the existence of any subcontractor(s), the selected applicant will be ultimately responsible for performance of all terms and conditions under the resulting grant. If subcontractor(s) have been identified by name and will be used, include a Letter of Support from each proposed subcontractor. LOS will not be counted towards the page limit.

g. Referral and Support Services Network (Excel table)
   The Referral and Support Services Network Table (see Attachment 7) must reflect the relationships and referral networks your EE currently has or plans to establish that will help facilitate the goals of this program, particularly with emphasis on those relationships that allow you to address health disparities and effectively and holistically serve priority populations.

h. Budget Tables [(Excel workbook) (no page limit)]
   Complete the provide Budget Tables (see Attachment 9) for each funding period:

   The terms of the resulting grants will be 3 FYs in duration as noted below:

   FY1: July 1, 2019 to June 30, 2020
   FY2: July 1, 2020 to June 30, 2021
   FY3: July 1, 2021 to June 30, 2022
See the **Budget Guidance** (see Attachment 8) for a description of what each line item must include. Please note that these funds may not be used to pay for clinical care or other services that can be billed to 3rd party payers.

The budget descriptions of services, and duties located in the **Budget Tables** (see Attachment 9) must explain and justify both program services funded by other funding and those, if awarded, funded by this grant. Availability of other funding will not affect the scoring of this RFA. For example, the salaries line item must list each position that is associated with this program. Include a brief explanation of each position’s major responsibilities, and the time allocation to be funded by the grant which results from this RFA. For the operating expenses category, provide a general description of expenses included in the budget line item. Proposed consultants must indicate the number of contracted hours and costs associated with hiring a consultant for the project. All subcontractor(s) shall be listed by name and address in the application. *Note: The cost of developing the application for this RFA is entirely the responsibility of the applicant and shall not be chargeable to the State of California or included in any cost elements of the application.*

### i. Additional Documentation

- **Payee Data Record:** A complete Payee Data Record, STD. 204, is required for payments to entities and will be kept on file at CDPH (see Attachment 10).
- Copy of the most recent independently audited financial report.

### 3. Application Submission Instructions

Applications must be submitted via e-mail to the address below by 12:00 P.M. PDT on Wednesday, June 19, 2019.

**E-Mail Address**

<table>
<thead>
<tr>
<th>E-Mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="mailto:PrEPNavRFA@cdph.ca.gov">PrEPNavRFA@cdph.ca.gov</a></td>
</tr>
</tbody>
</table>

### 4. Notification of Intent to Award

Notification of the State’s intent to award grants for the HIV Prevention PrEP Navigator Services funding will be posted online at OA’s Website on the PrEP RFA page by Wednesday, June 26, 2019, that identifies the awardee(s). Additionally, a letter will be e-mailed to all applicants notifying them as to the status of their application.
5. **Disposition and Ownership of the Application**

All materials submitted in response to this RFA will become the property of OA and, as such, are subject to the Public Records Act (Government Code Section 6250, et. seq.) OA shall have the right to use all ideas or adaptations of the ideas contained in any application received. The selection or rejection of an application will not affect this right. Within the constraints of applicable law, OA shall use its best efforts not to publicly release any information contained in the applications which may be privileged under Evidence Code 1040 (Privileged Official Record) and 1060 (Privileged Trade Secret) and which is clearly marked “Confidential” or information that is protected under the Information Practices Act.

6. **Grant Award Appeal Procedures**

Applicants who are not funded may file an appeal with OA. Appeals must state the reason, law, rule, regulation, or practice that the applicant believes has been improperly applied in regard to the evaluation or selection process. There is no appeal process for applications that are submitted late or are incomplete.

Appeals shall be limited to the following grounds:

a. OA failed to correctly apply the application review process, the format requirements or evaluating the applications as specified in the RFA.

b. OA failed to follow the methods for evaluating and scoring the applications as specified in the RFA.

Appeals must be sent by email to the [PrEP Navigator Services fund email address](PrEPNavRFA@cdph.ca.gov) at PrEPNavRFA@cdph.ca.gov and received by **12:00 P.M. PDT on Friday, June 28, 2019.** The Division Chief of OA, or her designee, will then come to a decision based on the written appeal letter. The decision of the Chief of OA, or her designee, shall be the final remedy. Appellants will be notified by e-mail within 15 days of the consideration of the written appeal letter. OA reserves the right to award the grant when it believes that all appeals have been resolved, withdrawn, or responded to the satisfaction of OA.

7. **Miscellaneous RFA Information**

The issuance of this RFA does not constitute a commitment by OA to award grants. OA reserves the right to reject any or all applications or to cancel this RFA if it is in the best interest of OA to do so.

The award of a grant by OA to an entity that proposes to use subcontractors for the performance of work under the resulting grant shall not be interpreted to approve the selection of subcontractors.
Subcontractors can only be added or changed after a grant is awarded with OA approval of a formal grant amendment. In the event a grant is entered into, but later terminated, OA has the option to enter into a grant with the available entity or organization having the next highest score in the evaluation process and so on for completing the remaining grant work.

In the case of any inconsistency or conflict between the provisions of the resulting grant, this RFA, addenda to this RFA, and an applicant’s response, such inconsistencies or conflicts will be resolved by first giving precedence to the grant, then to this RFA, any addenda, and last to the applicant’s response. OA reserves the right, after grant award, to amend the resulting grant as needed throughout the term of the grant to best meet the needs of all parties.

8. **Grant Obligations**

The successful applicant must enter into a grant that may incorporate, by reference, this RFA as well as the applicant’s response to this RFA, program description, detailed budget, and standard State grant provisions.

It is suggested that applicants carefully review these grant provisions for any impact on your application and/or to determine if the EE will be able to comply with the stated terms and conditions, as little or no deviation from their contents will be allowed.

Individual meetings with OA and each selected awardee shall take place within 60 days after release of the Notice of Intent to Award. The purpose of the meetings will be to assure a common understanding of grant purposes, terms, budgets, timelines and related issues.
H. Attachments

The starred (*) attachments are not available online and need to be requested from the PrEP Navigator Services fund email address: PrEPNavRFA@cdph.ca.gov.

1. RFA Package Checklist*
2. Grantee General Information Table*
3. Executive Summary*
4. Work Plan*
5. Application Narrative*
6. Personnel Narrative*
7. Referral and Support Services Network Table*
8. Budget Guidance*
9. Budget Tables*
10. Payee Data Record (STD. 204)