

HIV PrEP & PEP Navigator Projects – RFA #25-10048

Questions & Answers

- 1. Page 5, Eligible Applicants: “Applicants may include Local Health Departments (LHDs) and community-based organizations (CBOs) in California.” The Pediatric HIV/AIDS Program at UCSF Benioff Children’s Hospital Oakland is not an LHD or a CBO. Are we eligible to apply for this funding opportunity as a 501(c)(3) hospital-based program?**

Only LHDs and CBOs in California are eligible to apply for this funding. LHDs and CBOs are encouraged to apply for this funding individually or in collaboration with other applicants. Applicants are also encouraged to develop applications based on strong local partnerships and their ability to reach their identified priority population(s). A LHD or CBO may partner with a 501(c)(3) hospital-based program; however, the LHD or CBO must be designated as the lead agency.
- 2. Can a portion of the budget be used to procure rapid HIV and/or Home HIV/STI test kits to minimize barriers to HIV testing and support PrEP awareness and uptake?**

Yes, but please keep in mind that rapid tests that do not support same day PrEP or PEP are unallowable. Also, note that if HIV rapid test kits are available through your county, you should not be applying any funding towards HIV test kits.
- 3. Will they be funding rural counties with limited number of clients? For instance, will they be funding programs that only have 70 with clients total in their county, and 7-12 PrEP referrals a year? Nevada County has a population of 102,241.**

There are no restrictions for awarding LHDs and/or CBOs within rural counties in California.
- 4. Are people experiencing homelessness and youth considered priority populations?**

The priority populations for this RFA include: [1] Men who have sex with men (MSM), transmen who have sex with men (TMSM), and/or non-binary people who have sex with men (NBPSM) who identify as Black/African American (AA), Latinx, Native Hawaiian and other Pacific Islanders (NHOPI), and/or American Indian/Alaska Natives (AI/AN), [2] Transgender women, [3] Black/AA and Latinx cisgender women, [4] People who test positive for syphilis, and [5] MSM with rectal gonorrhea or rectal chlamydia.

If serving populations other than the priority populations listed in this RFA, applicants must provide local data to describe your rationale for selecting this priority population(s) within the “Priority Population(s)” section of Attachment 7 – Application Narrative Template.
- 5. I notice that the applicants must be a CBO and / or local health jurisdiction but are there allowances for retail for-profit pharmacies?**

Only LHDs and CBOs in California are eligible to apply for this funding. LHDs and CBOs are encouraged to apply for this funding individually or in collaboration with other applicants. Applicants are also encouraged to develop applications based on strong local partnerships and their ability to reach their identified priority population(s). A LHD or CBO may partner with a retail for-profit pharmacy(ies); however, the LHD or CBO must be designated as the lead agency.

6. **We are a Medi-Cal funded, Addiction Recovery, Mental Health, Addiction Recovery and HIV Health non-profit interested in applying for this RFA. We have a question about allowable uses of the grant if awarded. In addition to the required activities for Prep and Pep enrollment, could part of our services all included harm-reduction and substance use counseling coupled with the Prep/Pep navigation. Essentially, are other activities like SUD counseling and harm reduction allowable activities under this grant.**

Yes, harm reduction services are allowable activities under this grant, and it may be a part of the required activity for providing client access to appropriate social and support services.

7. **Attachment 5 - Budget Detail. SOW Reference - what should be entered in this column?**

Do not fill out the SOW Reference column at this time. This column may be completed if the applicant is awarded.

8. **Attachment 11 – Funding Summary. Can Attachment 11 be reissued, to include a clean copy? There is a CDPH tracked correction in the header.**

Thank you for letting us know about Attachment 11. For potential applicants who submitted their LOI on March 7 or prior to March 7, an updated version of Attachment 11 was resent to you on March 7. For potential applicants who submitted their LOI after March 7, the updated version was already included in the application package that was sent to you.

9. **Could you also check and re-send Attachment 8? When we try opening it, we receive the following message:**

Adobe Acrobat could not open 'Attachment 8_(for LHJs only)_Taxpayer ID Form (CDPH 9083).pdf' because it is either not a supported file type or because the file has been damaged (for example, it was sent as an email attachment and wasn't correctly decoded).

Thank you for letting us know about Attachment 8. For potential applicants who submitted their LOI prior to March 11, an openable copy of Attachment 8 was resent to you on March 11. For potential applicants who submitted their LOI on March 11 and after March 11, an openable copy was already included in the application package that was sent to you.

10. **I have a question about the Letter of Support (Attachment 12). The RFA states that we must obtain a letter of support on county letterhead. Does that letter need to be separate from Attachment 12, or does completing Attachment 12 by itself satisfy the requirement? If we only need to complete Attachment 12 to satisfy the requirement, how do you suggest we incorporate county letterhead into Attachment 12?**

This is an error in the RFA and a memo with an addendum will be released. The Letter of Support does not need to be on county letterhead. Completion of Attachment 12 by itself will satisfy the requirement.

11. **With regard to Attachment 6 – Activities: If we feel that one or more of the pre-populated lines in this document does not apply to our proposed project, are we allowed to remove or alter them? Or must we respond to/complete all pre-populated lines in this document?**

On 3/13/25, the person who asked this question requested to replace this question with:
“With regard to Attachment 6 – Activities: If we feel that one or more of the pre-

populated lines in this document does not apply to our proposed project, or if it reflects something that we are not able to do, are we allowed to remove or modify them? Or must we respond to/complete all pre-populated lines in this document? We ask in part because, if we are not allowed to remove or modify some of these, we will need to expand staffing to accomplish the line items that we are concerned about.”

The application attachments provided must be used when responding to the RFA. Do not reformat any of the templates. Fill in the requested information for the activity(ies) you plan to implement. If you do not plan to implement an activity, leave columns D and H blank and select “No. Will not implement.” in column G. Do not remove or alter lines in the document. Each strategy has blank lines at the end titled “Other Proposed Activities” or “Additional Proposed Activities”. Please add additional or other activities here, rather than modifying existing prepopulated activities.

12. I am writing to express our organization’s interest in applying for the PrEP Navigation Services funding opportunity outlined in the recent RFA. Please confirm the next steps required to proceed with the application process and provide any necessary application attachments or guidance.

Prospective applicants are required to submit the LOI to CDPH/OA indicating their intent to apply in response to this RFA. The LOI must be electronically signed by an official authorized to enter into a grant agreement on behalf of the applicant. A typed signature will suffice. An example of the language for the LOI may be: “This letter confirms that [name of applying agency] intends to apply for PrEP Navigation Services funding.” Upon submitting the LOI, CDPH/OA will send the applicant all required application attachments. The LOI must be sent via e-mail to PrEPNavRFA@cdph.ca.gov. Applicants that do not submit a LOI by the specified deadline are ineligible to apply for this RFA.

13. Will the slides from the pre-application webinar be posted?

Yes, they will be posted on the RFA landing page located here: [PrEP and PEP Navigator Projects, RFA #25-10048](#)

14. Can you please clarify CDPH’s definition of linkage to PrEP? Does a referral count as linkage to PrEP, regardless of whether the client actually receives PrEP?

Linkage to PrEP is defined as attended the medical appointment. In our database, its captured by whether “Did the client attend first appointment?” is yes or no.

15. Pharmacies – 5 points

Describe your plans to strengthen or establish relationships with pharmacies to initiate and dispense PrEP and PEP to a HIV negative person without a prescription. PrEP DOES require a prescription in the United States of America so I'm not sure what you are meaning with this question

In 2019, California Senate Bill (SB) 159 authorized pharmacists to prescribe HIV pre-exposure (PrEP) and post-exposure (PEP) medications without an outside provider’s prescription in order to increase access to HIV preventative medications. In 2024, SB 339 was passed, which further expanded the provision of PrEP, increased the length of time it can be furnished, and required health insurance plans to cover services provided by the pharmacists when offering PrEP.

16. Can staff supporting current prevention programs be included in the budget for this funding opportunity?

Yes.

17. Can you make these slides available to us through a link?

We will be sure to post the slides on the RFA website, as well as any Q&A from this presentation. Slides will be posted on the RFA landing page located here: [PrEP and PEP Navigator Projects, RFA #25-10048](#)

18. Will you share the recording/slides?

We will be sure to post the slides on the RFA website, as well as any Q&A from this presentation. Slides will be posted on the RFA landing page located here: [PrEP and PEP Navigator Projects, RFA #25-10048](#)

19. Can you please share the due date for the LOI again

LOI is due March 26, 2025, by 5 PM, Pacific Time.

20. My organization received a funding for a PrEP Navigator Project in 2016 -2019. Given that its was nearly 6 years ago, for the Demonstration Project Status section, we have made significant operational and services changes since then, above and beyond the 2016-2019 award. How should we respond to this section.

Existing and previously funded PrEP and PEP Navigator projects may apply for this funding, provided their proposal demonstrates that funds will be used to develop a new component, focus on a currently unserved priority population, and/or serve a new geographic location in their community where there are gaps in service for HIV prevention.

21. Are FQHCs eligible to apply?

Yes.

22. Will including recommended activities in a proposal increase an applicant's score?

No, including recommended activities will not increase scores.

23. What was meant by the LOS requirements do not apply if in LA County?

For those that submit a letter of intent, you will receive the forms you need to apply for this opportunity. One of those forms is a Local Health Department Letter of Support. In that Letter of Support, there is a statement that says the Local Health Department will coordinate with the applicant, if awarded, to input the eHars stateno into Local Evaluation Online (or LEO) for HIV positive clients by this project. That one statement does not apply to applicants in Los Angeles or San Francisco. However, applicants in Los Angeles or San Francisco are still required to complete this form as a requirement for this RFA. When you submit a Letter of Intent, you'll see the full language, and it will provide additional context.

24. How many LOS are required? sorry I missed some of that info

Applicants must submit a LOS form for each LHD where your project will operate.

If you're only going to operate within one local health jurisdiction, for example, then you only need to submit that one Letter of Support. If you're going to operate in multiple jurisdictions, then you'll have to submit a separate form for each.

25. Can you confirm that agencies proposing to work in LA County are exempt from the Letter of Support requirement?

Agencies in LA County are not exempt from submitting the LOS form. All applicants must submit Attachment 12 - Letter of Support.

26. San Bernardino County's legal department does not permit the health department to sign the LHJ form in this packet supplied by CDPH. San Bernardino county drafts their own letter. As a CBO, we don't have any ability to change this decision by San Bernardino county. Could you please provide guidance to CBO's in this situation? Will the document drafted and signed by San Bernardino County be accepted or are all the CBOs in this county ineligible for this grant because of this issue?

We updated the language in Attachment 12 – Letter of Support. Please have the County review the new language.

27. Are there word/character limits for each response box?

There are no word or character limits for each response, but there is a 12-page limit for the application.

28. What is CDPH definition of public health detailing

Public health detailing includes all of the activities necessary to on-board an agency to PrEP. This can include trainings, follow up technical assistance, one-on-one peer support, etc.

29. Will these slides be posted on the CDPH-OA website or sent to organizations that have submitted a LOI

We don't normally post the slides to the website, but in this case, we are going to make sure that we have the slides available posted on our website. Since that is something new, it's not written in the schedule of events. We will make sure that it's posted along with the Q&A.

30. Can medication be included in the budget?

Yes, medication purchases are an allowable expense; however, note that medication purchases that do not support same day PrEP or PEP are unallowable.

When you submit an LOI, you will receive a budget guidance document that outlines all the allowable and unallowable expenses.

31. Out of the 155 points, how many is needed to pass? Or to be approved for this application?

There is not a required number of points needed to pass or be approved for this application.

An evaluation committee convened by CDPH/OA will assign numeric scores to each responsive application that meet the format requirements and contain all the required forms and documentation. The evaluation and scores will constitute recommendations to CDPH/OA management. Final approval of awardees will be made by the CDPH/OA Division Chief.

32. We are an independent retail pharmacy, are we eligible to apply?

For this RFA, the applicant must be a LHD or CBO. That is what it specifically says in the Health and Safety Code. However, a local health department or CBO could partner with another type of organization that does not have to be a local health department or CBO.

33. Can you clarify what you mean by a previously funded PEP/PrEP program? State funded, local funded? foundation funded?

“Previously funded” means previously funded by this particular RFA, in which we’ve had 3-year cycles of this RFA since 2016. In other words, it means if you’ve received this specific funding before.

34. Can you clarify if the organization is proposing a new geographic area for PrEP/PEP services, what data should be used? Local surveillance data or internal agency data. Because if a new geographic area, there wouldn't necessarily be internal agency data regarding PrEP/PEP

If your organization is proposing to serve a new geographic area for PrEP and PEP services and internal agency data is not available, you may use local surveillance data.

35. For attachment 6: Activities List:

a. We had not seen these strategies in the RFA, where do these come from?

There are four strategies listed in Attachment 6 – Activities List, including [Strategy A] build/increase capacity to prescribe to priority population, [Strategy B] PrEP and PEP accessibility and navigation, [Strategy C] Priority population engagement, and [Strategy D] HIV/STD testing and linkage to services. These strategies are directly tied to the required and recommended activities listed in this RFA.

b. Do you have additional guidance for the subsections listed under each strategy?

The application attachments provided must be used when responding to the RFA. Fill in the requested information for the activity(ies) you plan to implement. If you do not plan to implement an activity, leave columns D and H blank and select “No. Will not implement.” in column G. Each strategy has blank lines at the end titled “Other Proposed Activities” or “Additional Proposed Activities”. Please add additional or other activities here, rather than modifying existing prepopulated activities.

c. Can we modify both the strategy and the subsections?

No, do not modify, remove, reformat, or alter lines in the document.

36. Are we required to submit LOS from other organizations of just LHDs?

The requirement is just to have the Letter of Support from the local health department where services will be provided. Organizations may submit Letters of Support from partnering organizations, but it is not required and doesn’t factor into the scoring.

37. I’m not sure if I misheard, but if our org has a PrEP/PEP program and we would like to apply to strengthen/expand the program would we NOT qualify?

For organizations that just have a PrEP and PEP program that are unrelated to this one, you can apply.

38. what are some of the allowable activities and what is not allow?

Allowable activities listed in the RFA include navigating priority population(s) to low-barrier PrEP/PEP, implementing evidence-informed strategies to engage priority population(s), providing PrEP adherence support and services, providing client access to appropriate social and support services, providing client access to benefits navigation and enrollment, providing client access to appropriate testing and treatment of sexually transmitted infections or HIV, strengthening existing or developing new PrEP and PEP navigation programs and services, mpox vaccine administration, outreach/education, and purchase of vaccines as well as developing relationships with pharmacies and providing PrEP and PEP public health detailing for partner pharmacies.

For more information, the Attachment 6 – Activities List is prefilled with specific activities that have been shown to help facilitate a sustainable PrEP navigation program that serves priority populations. Please fill in the requested information for each activity you plan to implement and add any other innovative activities that will be key to the successful and sustainable implementation of your priority population focused program.

Social media and marketing may only account for a maximum of 10% of the annual budget each year. New education or media campaigns without prior approval or in excess of 10% of the total budgeted award are not permitted with this funding.

39. Once awarded, is there a potential of rolling over unused funds?

No, we don't have the potential for rollover.

40. if we had State funding for PrEP navigation years ago, are we still eligible? how far do you go back to determine eligibility

Yes, you are still eligible.

41. Will start up funds be available?

No, startup funds will not be available.

42. Can a LHJ partner with independent pharmacies? Are tests allowable purchases?

Yes, a LHJ may partner with independent pharmacies. However, the LHJ must be designated as the lead agency.

Yes, rapid tests are an allowable expense, but please keep in mind that rapid tests that do not support same day PrEP or PEP are unallowable. Also, note that if HIV rapid test kits are available through your county, you should not be designating any funding towards HIV test kits.

43. is funding secured?

These funds are available depending on the annual budget. There's a statement in the RFA that speaks specifically to this: *Awardees are not authorized to begin work until the grant is finalized. Work conducted outside the effective start and end date of the grant will not be eligible for reimbursement. All funding is contingent on the availability and continuation of State general funds allocated for this purpose.*

44. This funding is through just the state, correct? Or are we depending on federal funding, too?

This funding is through the State of California.

45. I may have missed it but was there an LOI template.... sorry if you said this already.

Taking lots of notes thank you

There's no letter of intent template. You can just send us an email. There is an example of what that email could look like. Essentially, it just says that your organization intends to apply for this funding. Once we receive that email, then we follow up with all of the application package components, and we'll email those to you. From the RFA: *An example of the language for the LOI may be: "This letter confirms that [name of applying agency] intends to apply for PrEP Navigation Services funding." Upon submitting the LOI, CDPH/OA will send the applicant all required application attachments. The LOI must be sent via e-mail to PrEPNavRFA@cdph.ca.gov. Applicants that do not submit a LOI by the specified deadline are ineligible to apply for this RFA.*

46. where can we find the template?

If this is in reference to the Letter of Intent, there is no template for that. It's just an email that says your organization intends to apply. Once we receive that email, then we send you back an email with all of the RFA attachments. See question #45 for more information.

47. Will mandatory grant reporting reflect the low-barrier administration of services? We have had issues in the past of government funders asking for a lot of data about participants that, given the high risk population we serve, violates the trust that we build with our participants. Will reporting be extremely burdensome, or more along the lines of simple counts of services rendered to participants?

Our reporting for projects like this is a combination of quantitative client level data and quantitative narrative that you would provide to us to paint a picture of what your programs are like, what sort of challenges, barriers, and successes your clients may run into, and how you help them navigate those things within this project. From the RFA: *A description of both quantitative and qualitative evaluation requirements is listed below: Quantitative evaluation: awardees will enter client-level data into CDPH/OA's prevention database, Local Evaluation Online (LEO). CDPH/OA will provide the necessary data collection forms and training regarding system use. Qualitative evaluation: awardees will collaborate with CDPH/OA before program implementation, at program end, and as needed during the demonstration to 1) document current protocols, 2) document and assist with any mid-cycle changes, and 3) provide progress report summaries at appropriate intervals and at end of grant period. Projects will be required to collect and monitor client-level demographics and client services data, including established processes for data collection, entry, and routine monitoring, sufficient staffing numbers, and inter-agency agreements as needed. Projects must also have the capacity to implement the required data management, monitoring, quality control, progress reporting, and OA-led program evaluation activities for the entire grant period (i.e., staff capacity and experience, data system resources). All projects must provide qualitative narrative and will be required to attend quarterly meetings to share best practices, discuss challenges and successes.*

48. Will the Q&A be posted on the website? If so, when?

The Q&A will be posted on the website. That is scheduled to be posted by March 21 at 5 PM Pacific Time.

49. For the 10% evaluation requirement, does that have to be outside evaluation or can that be internal evaluation allocation to personnel assigned to this project?

At least 10% of the project budget must be allocated to evaluation activities, which include data collection, entry, management, monitoring, and quality control. Evaluation activities may be conducted externally and/or internally.

50. where is the Q & A going to be?

The Q&A is going to be posted on the website: [PrEP and PEP Navigator Projects, RFA #25-10048](#)

51. What is the indirect percentage?

For Local Health Jurisdictions (LHJs) applying as the applicant, the Indirect Cost Rate (ICR) the applicant submits in their budget must be the approved rate on file with CDPH (see what your [county's indirect cost rate is here on the CDPH website](#)). Applicants may allocate less than this rate but cannot exceed the rate. For non-LHJs applying as the applicant, the ICR should not surpass 25% of total personnel costs and all ICRs will be reviewed for reasonableness.

52. Can we use funds for staff training or paying for certifications or tuition for staff?

No, funding cannot be used for tuition or tuition reimbursement. Staff trainings and bringing in an organization to train or certify staff are allowable expenses.

53. I don't see the Q & A link?

The Q&A is not posted yet. To provide an idea of how the process goes after this RFA Kick Off meeting – that was our pre-application webinar. The next deadline is to submit any additional questions that you have about the RFA by COB March 14. We will have the answers to the written questions as well as the slides for this presentation posted to our website by March 21, 2025, at 5 PM. If you have not submitted a Letter of Intent, please do so by March 26. Submitting a Letter of Intent is required in order to be eligible to apply for this funding. Once we receive your Letter of Intent, which can be as simple as an email that indicates your organization intends to apply, we will send you back all of the forms you need to apply for this funding opportunity. The applications are going to be due on April 14, 2025. We mentioned this earlier, but the application can be no longer than 12 pages in length. So, it is a fairly shorter application than previously used, and it will be due April 14th by 5 PM Pacific Time. We will post the Notice of Intent to Award, which means who gets funded is going to be posted onto our website by May 30, 2025. We also allow a weeklong period for appeal at that time. All of this information is included in the RFA under the Tentative RFA Timeline.

54. Can funds be used to cover labs for underinsured pts?

Yes, funds can be used to cover lab costs. However, note that lab costs that do not support same day PrEP or PEP are unallowable.

55. in the narrative template on question 2 of the program and community engagement section, we are asked how we will provide public health detailing. however, this is not listed as a required activity in the RFA. Does this mean that public health detailing is a required activity?

Applicants who describe and provide public health detailing in response to question #2 of the Program and Community Engagement section of the Application Narrative Questions will be awarded points in the application scoring process. While public health detailing is encouraged, it is not required. Applicants who can demonstrate the ability to include this activity will be scored accordingly.

56. Can we use the grant for seminars for employee education

Trainings and seminars are allowable expenses. Tuition or tuition reimbursement is not an allowable expense.

57. Can a CBO that is currently receiving HRSA funding for PrEP/PEP program apply?

Yes.

58. The LOI has to be signed?

The LOI does not have to be signed with a digital signature. A typed signature will suffice. It's just an email letting us know that you intend to apply, and then we'll send you all of the application package. See question #45 for more information.

59. when will the updated Attachment 11 be made available? CDPH has left tracking edits on the current attachment.

For potential applicants who submitted their LOI on March 7 or prior to March 7, an updated version of Attachment 11 was resent to you on March 7. For potential applicants who submitted their LOI after March 7, the updated version was already included in the application package that was sent to you.

60. On the RFA it says you get additional points if you demonstrate success of reaching youth, does this include outreach or the youth using PrEP/PEP?

The RFA states that "Applicants who can demonstrate a proven record of success and outline a credible and complete plan for reaching transgender women of color and/or youth (age 13 to 24) in any of the above categories will be eligible for additional points during the RFA scoring process." Applicants will not receive additional points if they merely say that they're doing outreach to youth or getting youth on PrEP/PEP. Additional points will be awarded if the applicant specifically indicates that they are proposing to serve youth as a main priority population of focus in their application. Applicants who propose to serve youth as a main priority population of focus must demonstrate success of reaching youth (i.e. history, experience, cultural sensitivity specific to youth, etc.) and outline a credible and complete plan for reaching youth.

61. Is it allowable to place current HIV funded staff with this funding opportunity?

Yes.

62. Can the grant pay for pharmacist's billing reimbursement for individuals prescribed PEP or PrEP? For both individuals who are uninsured and for individual's whose insurance does not offer reimbursement for this service.

No, clinical care or other services that can be billed to third-party payers is unallowable.

63. Can the grant pay for the cost of labs drawn for individuals who are uninsured when receiving a PEP/PrEP prescription from a pharmacy?

Yes, funds can be used to cover lab costs. However, note that lab costs that do not support same day PrEP or PEP are unallowable.

64. Can the grant pay for initial medication costs for PEP/PrEP at a pharmacy when the individual is uninsured?

Yes, medication costs are an allowable expense. However, note that medication purchases that do not support same day PrEP or PEP are unallowable.

65. Can the grant pay for a vending machines and HIV/STI self-test kits?

Vending machines may be an allowable expense but it depends on what you are vending. For example, vending food is not allowable.

Yes, HIV/STI self-test kits are an allowable expense but please keep in mind that rapid tests that do not support same day PrEP or PEP are unallowable. Also, note that if HIV rapid test kits are available through your county, you should not be applying any funding towards HIV test kits.

66. Since Federal and State funding aren't always designated by the names listed on Attachment 11 (Funding Summary). Can CDPH provide specific ALN numbers for each of these Federal funding sources so we can review our organization's SEFA report?

Please complete this form to the best of your ability. For funds that don't fall under the designated categories, please use the "other" line.

67. Could the funds be used to cover PrEP Assistance Program (PrEP-AP) enrollment?

If this question is asking whether funds could cover the cost of enrolling into PrEP-AP, then no, there is no cost for PrEP-AP enrollment; in fact, PrEP-AP pays enrollment sites per enrollment and re-enrollment. You do not need to cover the cost of enrollment with these funds. For more information, here is a link to the enrollment fee schedule: [Enrollment Site Fee Schedule](#).

If this question is asking whether funds could be used to pay PrEP Navigator/Enrollment worker salaries, then yes, the funds could be used to cover their salaries.

68. With regard to Attachment 6: In the instructions it says that if we do not plan on implementing an activity, we should clarify if we've already implemented it. If one selects the option 'No. Will not implement', it does not accurately reflect the fact that we're not implementing it because we've already implemented it; it is possible to add another column that allows us to explain our response?

Please do not add another column or modify, remove, reformat, or alter lines in the document. Selecting "No. Will not implement" is sufficient.

69. Can clinical care or other services that can be billed to third-party payers be covered for same day PEP/PrEP initiation if the individual is uninsured or the insurance is not accepted by the prescribing person?

No, clinical care or other services that can be billed to third-party payers is unallowable.

70. Are indirect costs allowed in the budget? If yes, is there a maximum amount allowed?

Yes, indirect costs are allowed in the budget.

For Local Health Jurisdictions (LHJs) applying as the applicant, the Indirect Cost Rate (ICR) the applicant submits in their budget must be the approved rate on file with CDPH (see what your [county's indirect cost rate is here on the CDPH website](#)). Applicants may allocate less than this rate but cannot exceed the rate. For non-LHJs applying as the applicant, the ICR should not surpass 25% of total personnel costs and all ICRs will be reviewed for reasonableness.

71. What is the page limit for the narrative response?

The Application Narrative Template may not exceed 12 pages, including template pages.

72. Do you have a recording of the webinars and/or Q&A's so our team can review before submitting a letter of intent?

Webinar slides and the Q&A will be posted on the RFA landing page located here: [PrEP and PEP Navigator Projects, RFA #25-10048](#)

73. I am reaching out to request a recording of the HIV PrEP and PEP Navigator Projects Pre-Application Webinar from March 11, 2025. Would it be possible to share this with our team at the Oakland LGBTQ Community Center as we prepare to submit an LOI for this funding opportunity?

Slides and the Q&A will be posted on the RFA landing page located here: [PrEP and PEP Navigator Projects, RFA #25-10048](#)

74. While it was stated on the 3/11/25 Pre-application Webinar that PrEP /PEP Navigator Project awards will not be federally funded, the uncertainty of the Trump administration's E.O., etc., has made some FQHCs concerned about the wording/or words related to diversity, equity, and inclusion used in their application responses. Will this concern be taken into account when applications are reviewed?

OA recognizes the importance of Diversity, Equity and Inclusion (DEI) policies and is not in agreement with the current Administration's stance on DEI. The Executive Orders have no bearing on state-funded demonstration projects.

75. For the Activities List in Attachment 6, are these the activities required and/or recommended for Strategies A - D?

The Attachment 6 – Activities List is prefilled with specific activities that have been shown to help facilitate a sustainable PrEP navigation program that serves priority populations. Please fill in the requested information for each activity you plan to implement and add any other innovative activities that will be key to the successful and sustainable implementation of your priority population focused program. If you do not plan to implement an activity, leave columns D and H blank and select “No. Will not implement.” in column G.

76. We are a fully formed and robust PrEP and PEP clinical program that would like to partner with another community-based agency that serves a large number of persons at high risk for HIV transmission, including transgender women and young MSM of color. We would like to work with the agency to help them create a new, fully formed, on-site PrEP program over the 3-year grant program. If we were the primary applicant, could the application still qualify for points as creating a new PrEP navigation program, or does the applicant itself have to be the agency that does not have an existing program to qualify for the extra points?

Yes, the applicant would qualify for points as creating a new PrEP navigation program.

77. On page 1 of the Application Narrative template, in the Yes/No Questions section, it indicates that 20 points will potentially be awarded for this section, and that questions 3 and 4 are unscored. Does this mean that if an applicant answers Yes to questions 1 and 2 they receive 10 points per answer, or 20 points total? Or is there another way this section is scored?

In the Yes/No Questions section, questions 1 and 2 are 10 points each for a total of 20 points. Please ensure that narrative responses are reflective of your answers to questions 1 and 2 in this section.

78. Application Narrative:

- a. On the application narrative template in the Effective Programmatic Approaches, OA states that “while you will not be scored based on how many you select, applications will receive a score for how well the selected approaches are applied throughout the narrative.” Are there a minimum number of approaches that applicants are required to include?**

There is not a specified minimum number of approaches that are required to be included.

- b. How will OA evaluate proposals that use a comprehensive set of approaches with limited descriptions compared to those that use a limited set of approaches with more comprehensive descriptions?**

Applicants will not be scored based on how many effective programmatic approaches are selected. Instead, applications will receive a score for how well the selected approaches are applied throughout the narrative. Please ensure that within your responses to each narrative question, describe how you will apply your selected approaches and how they will address the needs of your specified priority populations.

- c. Based on current awardees, which programmatic approaches are most commonly used?**

Required programmatic approaches for current awardees can be viewed in the previous RFA, located here: [Request for Applications \(RFA\) No. 22-10099: Human Immunodeficiency Virus \(HIV\) Pre-exposure Prophylaxis \(PrEP\) and Post-exposure Prophylaxis \(PEP\) Navigator Services Program](#)

79. Is Attachment 6: Activities list scored and if so, how?

Attachment 6 is required to be completed but will not be scored.

- a. For the required activities, are we required to perform all the listed activities?**

Fill in the requested information for the activity(ies) you plan to implement. If you do not plan to implement an activity, leave columns D and H blank and select “No. Will not implement.” in column G. Do not remove or alter lines in the document. Each strategy has blank lines at the end titled “Other Proposed Activities” or “Additional Proposed Activities”. Please add additional or other activities here, rather than modifying existing prepopulated activities.

b. Can we substitute activities that are similar but better tailored to our services area?

Yes, you can add activities that are not currently listed to the “additional” or “other” proposed activities lines in each strategy.

c. Can we substitute other evidence-based practices with the same overarching goal?

Yes, you can add activities that are not currently listed to the “additional” or “other” proposed activities lines in each strategy.

80. For the requirement that at least 10% of the budget be allocated to evaluation activities including data collection and entry, can we include a portion of the PrEP navigators’ time since they’ll be collecting and entering data?

Yes.

81. For social media and marketing, can we establish our own community review panel, subject to CDPH approval?

Yes.

82. we submitted some ideas for Project Empowerment last year but our program wasn’t funded (the feedback said it was because of issues with the budget). How would you feel if we submitted similar ideas for this project while we fix the budget issues?

It is unclear what ideas are being referenced from your previous Project Empowerment application. However, please ensure the budget document is completed in accordance with the budget guidance. Thank you!