



REQUEST FOR APPLICATIONS (RFA)

**Preexposure Prophylaxis (PrEP) and Postexposure
Prophylaxis (PEP) Initiation and Retention (PPIR)
Initiative**

NO. 23-10016

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CALIFORNIA DEPARTMENT OF PUBLIC HEALTH (CDPH)

OFFICE OF AIDS (OA)

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1. Funding Opportunity Description

1.1 Schedule of Events

EVENT	DATE
RFA release	01/17/2023
Kick-off webinar	01/23/2023
Deadline for submitting written questions	01/25/2023 By 5:00PM PST
Deadline to submit mandatory Letter of Intent (LOI)	01/27/2023 By 5:00PM PST
Answers to Frequently Asked Questions (FAQs)	01/30/2023
Application submission deadline	02/21/2023 By 5:00PM PST
Notice of Intent to Award released	03/17/2023 By 5:00PM PST
Appeal deadline	03/24/2023 By 5:00PM PST
Contract start date	Upon Contract Execution

1.2 Introduction

CDPH/OA is the lead agency within the state responsible for coordinating state programs, services and activities related to Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS). The PrEP and PEP Initiation and Retention Initiative (PPIR Initiative) is established through [Health and Safety Code \(HSC\) 120972.1](#), which allows for the use of AIDS Drug Assistance Program (ADAP) Rebate Funds to be allocated to Local Health Departments (LHDs) and Community Based Organizations (CBOs) to support PrEP and PEP navigation and retention coordinators and related services.

1.3 Goal

The goal of the PPIR Initiative is to support and expand PrEP and PEP navigation services for the purpose of increasing PrEP and PEP initiation and retention among individuals at perceived higher risk of new HIV infection. The OA will fund up to \$21,700,000.00 in awards over a four-year period. We are seeking proposals that utilize evidence informed approaches, increase organizational capacity, and center individuals at risk of new HIV infection that are hardly reached. The PPIR Initiative will utilize the following four strategies to accomplish this goal:

- **Promote** knowledge about PrEP/PEP among priority populations(s) and service providers
- **Engage** priority population(s) and increase PrEP/PEP accessibility
- **Navigate** priority population participants to PrEP/PEP and other necessary services
- **Retain** priority population participants in PrEP/PEP services

1.4 Award Details

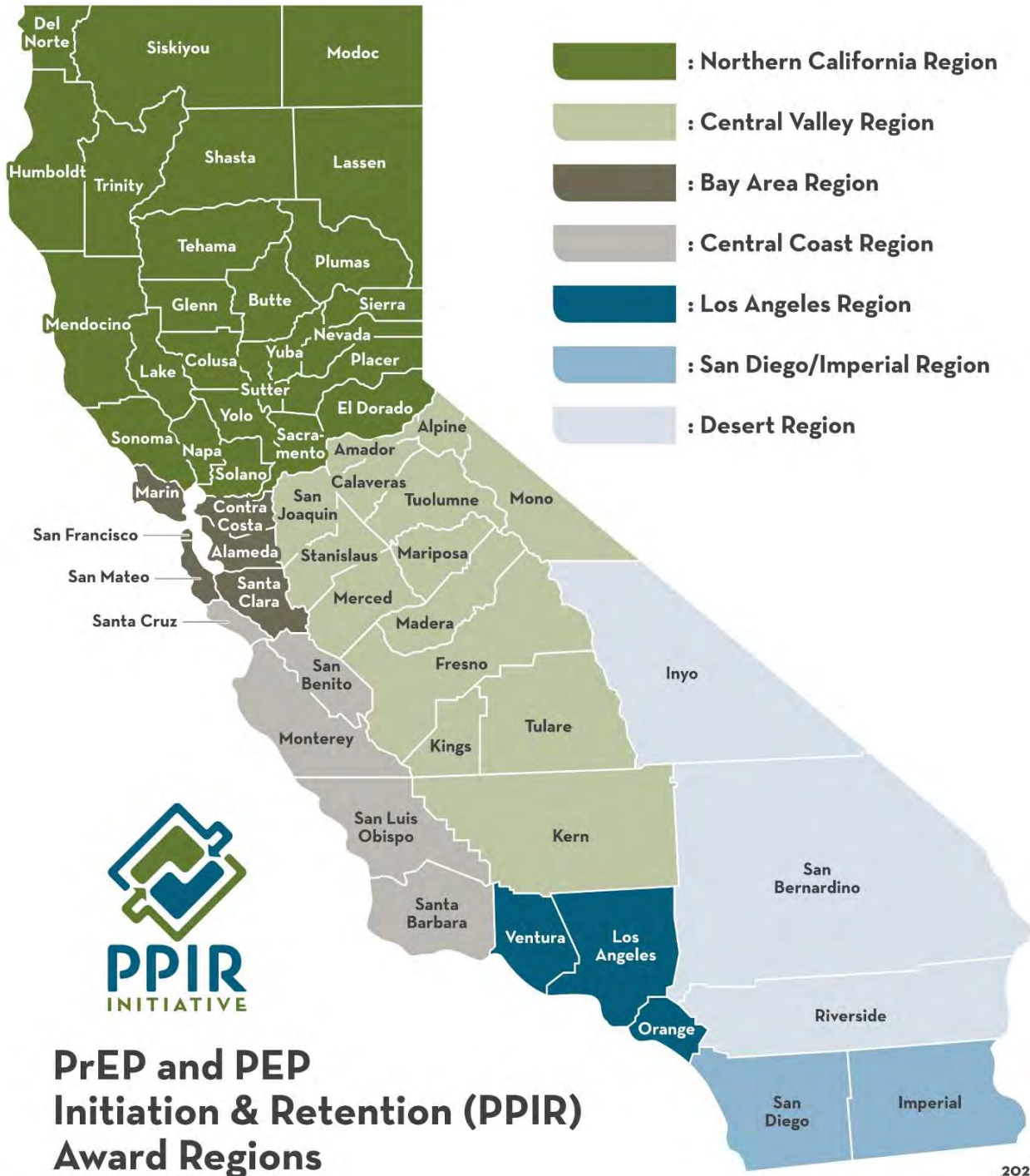
1.4.1 Award Period

The terms of the resulting contracts from this RFA will be four fiscal years (FY) in duration. The anticipated start date may vary due to the time required to finalize contracts, obtain signatures, and process the contracts between awardees and the CDPH/OA. Awardees are not authorized to begin work until the contract is finalized. Work conducted outside the effective start and end date of the contract will not be eligible for reimbursement. All funding is contingent upon availability and continuation of funds from the CDPH/OA for this purpose, as stated in California [HSC 120972.1](#). The four FY are defined as:

- FY1: July 1, 2023, to June 30, 2024
- FY2: July 1, 2024, to June 30, 2025
- FY3: July 1, 2025, to June 30, 2026
- FY4: July 1, 2026, to June 30, 2027

1.4.2 Regional Approach

This PPIR Initiative seeks to improve PrEP and PEP initiation and retention throughout California. To ensure geographic distribution of funding throughout the state, the PPIR Initiative will award four Eligible Entities (EE) in each of the following seven regions of California:



1.4.3 Award Tiers

This PPIR Initiative will have three award Tiers. Each of the seven California regions is designated one Tier 1 award, one Tier 2 award, and two Tier 3 awards. Organizations may only submit one application and must designate the Tier for which they are applying. The total number of awards for this PPIR Initiative will be 28. The award Tiers are detailed in the chart below:

Tier	Number of Awards	Total Award Amount (Over Four FY)	Estimated Yearly Award Amount
Tier 1	7 (1 per region)	\$1,200,000.00	\$300,000.00
Tier 2	7 (1 per region)	\$700,000.00	\$175,000.00
Tier 3	14 (2 per region)	\$600,000.00	\$150,000.00

Awardees may choose to budget:

- The total award accordingly over the course of FY1 – FY4, and will be required to indicate their chosen yearly budgeted amounts in the Budget Detail & Budget Justification (Attachment 2) for each year (i.e., a Tier 1 awardee may decide to budget \$150K in FY1 and \$450K in FY2, and \$300K for each FY3 and FY4); or
- The estimated annual award listed, with equal amounts for FY1 – FY4.

1.5 Selection Process

OA will utilize internal review teams to assess applicant capacity, proposed program quality and potential impact. Application narratives will be scored by multiple reviewers using a standard rubric and scores will be averaged. For each of the seven regions, the Tier 1 application with the highest score, the Tier 2 application with the highest score, and the two Tier 3 applications with the highest scores will be selected and awarded.

OA understands the detrimental effect of frequent turnover in PrEP and PEP navigation and retention programs, as well as the varied cost of living across the diverse regions of California. We encourage applicants to compensate PrEP and PEP navigation and retention staff funded fully or partially through this PPIR Initiative with an appropriate wage or salary so as to minimize the occurrence of turnover.

As required by California law, business entities must be in good standing and qualified to do business in California, including applicants that have concurrent or prior contract/grant relationships with the CDPH/OA. CDPH/OA will consider any prior letter

of correction, written notice of breach, or inadequate performance sent to the applicant in its scoring. Please note that OA will not preference or prioritize any applicant for funding based on prior contracts or relationships with the CDPH/OA.

1.6 Eligible Applicants

EEs are LHDs and CBOs that meet the following criteria:

1. EEs may be part of units of local government including, but not limited to, cities, counties, and other governmental bodies or special districts.
2. EEs may be a public and/or private nonprofit organizations classified as 501(c)(3) tax exempt under the Internal Revenue Code (private organization must confirm they are in good standing with the Secretary of State).
3. EEs must demonstrate that they meet the organizational capacity to fulfill RFA program and administrative requirements.

To be eligible, applicants must meet the two following conditions:

1. Provide enrollment and/or clinical services for the PrEP Assistance Program (PrEP-AP) as outlined in [HSC 120972](#). (Applicants can apply to become PrEP-AP enrollment and/or clinical provider sites within the first year of the award cycle if they are not already contracted to provide PrEP-AP services). Please note that in order to contract as a PrEP-AP site, agency staff must be issued agency emails and cannot use personal emails (i.e. gmail, yahoo, etc.) to conduct business.
2. Have the capacity to provide culturally appropriate PrEP and PEP navigation and retention services to one or more communities at risk of new HIV infection that are hardly reached.

EEs must apply directly to the CDPH/OA and are encouraged to apply for this funding individually or in collaboration with other EEs to develop a comprehensive proposal that meets all requirements. Collaborative applications must identify a lead EE and include Letters of Support (LOS) from the other EEs. Examples of collaborative applications may include a joint application from two or more LHDs, a partnership between a LHD 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 contract management, reporting, and invoicing.

2. Initiative Requirements

2.1 Priority Populations

The PPIR Initiative priority populations include communities that have a perceived risk of new HIV infection, including but not limited to:

- Black, Latinx, indigenous, and people of color
- Lesbian, gay, bisexual, queer, and questioning individuals
- Non-English-speaking individuals
- Other populations that are difficult to reach, including those with transportation or technology challenges
- People experiencing homelessness
- People involved in the carceral system
- People who use drugs
- People engaged in sex work
- Transgender and gender-nonconforming individuals
- Undocumented individuals
- Women
- Youth

Applicants will be asked to define specific priority population(s) for this PPIR Initiative and clearly justify the inclusion of these populations based on need, using available local and regional data. We recognize the lack of accurate data for certain populations and encourage the use of community-based evidence. Strong applicants will clearly demonstrate existing experience with capacity to serve and have staff representation from one or more of the priority populations listed above.

2.2 Activities

The PPIR Initiative will increase the human resources capacity of awardees to expand the range, reach, and quality of PrEP and PEP navigation and retention services. Through this contract with the CDPH/OA, awardees will (1) increase staffing for PrEP and PEP navigation and retention services, (2) fund PrEP and PEP navigation and retention activities and outreach, and (3) provide the CDPH with requested data to evaluate the results of the funded program. Applicants should use the PPIR Initiative Activities List (Attachment 3) to indicate the activities they have planned for this PPIR Initiative – the PPIR Initiative Activities List will be utilized to develop the awardees' scopes of work and the monitoring and evaluation plan for this PPIR Initiative. Examples

of services and activities that address the four PPIR Initiative strategies include:



2.2.1 Required Activities

All awardees will be required to conduct the following key PrEP and PEP initiation and retention activities:

- Onboard and train staff to conduct PrEP/PEP navigation and/or benefits enrollment activities
- Develop referral networks with PrEP/PEP prescribers who serve priority population(s)
- Develop and implement PrEP protocol to minimize barriers to PrEP access
- Develop and implement PEP protocol to minimize barriers to PEP access
- Develop and implement rapid PrEP protocol (rapid PrEP means a client can access PrEP prescription in 1-3 days)
- Screen clients for PrEP eligibility*
- Refer clients to PrEP prescribers
- Link clients to PrEP prescribers (warm handoff** recommended)
- Provide health benefits navigation and enrollment (including payer assistance program) to PrEP/PEP clients

- Follow up with clients to see if they initiated their PrEP prescription
- Follow up with clients at three months to see if they maintained their PrEP treatment regimen
- Facilitate PEP medication access for clients within 72 hours of potential HIV exposure

Applicants are encouraged to develop applications appropriate to their regions, based on strong local partnerships and their ability to reach specific priority population(s). The activities required to create sustainable programs may vary by setting and funding recipient; however, required activities must be included in the RFA proposal (either through direct or indirect services). Awardees are not required to use PPIR Initiative funds for these activities if other funding sources are available or already established.

* OA criteria for PrEP eligibility is any person over 12 years old that is not currently on PrEP, tests negative for HIV or with unknown HIV status, and who either wants PrEP or is sexually active or planning to be sexually active or injects drugs or may inject drugs in the future.

** A warm handoff is defined as a transfer that is conducted between two care providers in the presence of the client (either in person or over a telecommunication platform).

2.2.2 High Value Activities

CDPH/OA conducted a pre-implementation survey for the PPIR Initiative that identified high value activities for PrEP and PEP initiation and retention. The following activities are not required, but are encouraged for the development of a strong PPIR Initiative:

- Prescriber training/detailing*
- Pharmacist training/detailing*
- Client transportation
- Client incentives**
- Culturally competent services
- In-person promotion at community events
- Online promotion

* Public Health detailing includes all the activities necessary to onboard an agency to PrEP/PEP. This can include trainings, follow-up Technical Assistance, one-on-one peer support, etc.

**CDPH/OA allows awarded funds to be distributed as gift cards to program participants, but not cash incentives.

2.3 Required Program Approaches

CDPH/OA is committed to supporting patient-centered programs that utilize evidence informed approaches to provide PrEP, PEP, and other healthcare services. A strong application will clearly demonstrate the following approaches are utilized in the organizational setting as well as a commitment to developing staff skills and improving systems and infrastructure to advance these approaches.

- **Whole person care** – providing patient care holistically (including physical, psychological, and environmental health care), featuring regular coordination between all medical offices, as well as behavioral health and social services.
- **Safe and Secure Program Environment** – cultivating a program environment in which priority population(s) feel safe and supported, both physically and psychologically and where their differences are respected and appreciated (cultural humility).
- **Trauma-Informed Approach** – OA defines trauma-informed as an approach to administering services that acknowledges that traumas may have occurred or may be active in clients' lives, and that those traumas can manifest physically, mentally, and/or behaviorally.
- **Harm Reduction Approach** – accepting, without judgement, that people use drugs for many reasons, that risk and behaviors related to drug use occur across a spectrum, and that everyone has the capacity to make positive changes without requiring abstinence.
- **Social Networks** – leveraging social networks to enlist persons who are HIV/sexually transmitted infection (STI) positive or at higher risk of contracting HIV/STI to recruit peers in their social, sexual, and drug/alcohol using networks to seek HIV/STI testing and other services.
- **Comprehensive Sexual Health Education** – a holistic approach to provide accurate sexual health education and harm reduction strategies that helps reduce people's exposure to HIV/STIs and unintended pregnancies.

2.4 Examples of Program Services to be Funded

This award may be used for paying staff (full-time, part-time, etc.), employee benefits, PrEP or PEP navigation related services, and various administrative or overhead expenses, subject to approval. For example:

- Navigator to offer case management, linkage, and navigation to medication for PrEP/PEP, STI testing and treatment, healthcare, or other social services

- Benefits enrollment or benefits navigation staff to enroll clients in PrEP/PEP pharmaceutical assistance programs, PrEP-AP, and/or health insurance
- PrEP and PEP services such as same day PrEP/PEP starter packs and incentives (CDPH regulations allow for gift card incentives, but not cash incentives)
- Staff to increase capacity to offer health education, risk reduction counseling, and linkages
- Staff to provide administrative and operations support to increase the sustainability of your program
- Outreach staff to increase regional reach of your program and bring services to more rural or underserved parts of your region
- Outreach staff to develop strategy and implement outreach plan to reach marginalized people (trans individuals, indigenous populations, people of color, etc.) not currently being served by your program
- Full-time, part-time, or hourly positions for participants, and creation of opportunities for recruiting program participants
- Multiple part-time staff to focus on different areas of your work (i.e., navigation, administrative, outreach, case management, expansion)
- Initiation or expansion of telehealth and tele-navigation services available to program participants

2.5 Social Media and Marketing

Media includes social media (social networking sites), mobile applications, internet sites, social marketing campaigns/ initiatives, and videos to capture the power of storytelling. Funded agencies must adhere to the CDPH/OA's guidelines around media. Media and marketing may only account for a maximum of five percent of the annual budget each year. Any materials created must be approved by a community review panel, and available to the CDPH/OA for distribution throughout the State of California or as needed outside of the State. Media developed and available from the Centers for Disease Control and Prevention, *Let's Stop HIV Together* campaign is a good source for free, pre-developed media. The development of new media campaigns is not permitted with this funding.

3. Submission and Additional Requirements

3.1 Submission Instructions

3.1.1 Letter of Intent – Mandatory

Prospective EEs are required to submit a LOI to the 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 contractual agreement on behalf of the EE. 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 and PEP Initiation and Retention Initiative funding.”

Upon submitting the LOI, the CDPH/OA will send the EE all required application attachments. The LOI must be sent via e-mail to the address in 3.1.2 below. EEs that fail to submit a LOI by the specified deadline are precluded from funding consideration.

3.1.2 Application

Please submit your application to PPIRInitiative@cdph.ca.gov by the deadline **02/21/2023 5:00PM PST**.

Late submissions will not be considered.

- 1) Submit the following documents in the format indicate for each (***do not modify the templates in any way other than inputting your responses in the designated space, any modification will be grounds for disqualification***):
 - a) Proposal narrative labeled: “[Applicant Name] – PPIR Initiative Proposal Narrative” (Attachment 1- PPIR Initiative Proposal Narrative) (PDF)
 - b) Proposed budget labeled: “[Applicant Name] – Budget Detail & Budget Justification” (Attachment 2- Budget Detail & Budget Justification) (Excel)
 - c) Activities list labeled: “[Applicant Name] – PPIR Initiative Activities List” (Attachment 3- PPIR Initiative Activities List) (Excel)
 - d) Organization status letter: 501(c)3 determination letter, 501(c)3 determination of fiscal sponsor, or memo regarding status as a LHD (PDF or Word)
 - e) Certificate of good standing from Secretary of State **if** the EE is a private 501(c)3
 - f) Most recent audited financial statements **or** 990 filings. If your program does not have audited financials or a 990 filing, please provide a letter

explaining why, as well as a copy of your annual budget for the current fiscal year, including expenses and revenue

- g) If you are proposing a collaborative initiative, please submit LOS from each EE outlining a commitment to working together and the delineation of roles between the organizations (PDF or Word)
- h) Optional: You may submit up to three LOS from relevant partners who will aid in deepening access to PrEP and PEP for communities at risk of new HIV infection that are hardly reached
- i) Optional: Project Planning Worksheet (Attachment 5)

3.1.3 Disposition and Ownership of the Application

All materials submitted in response to this RFA will become the property of the CDPH/OA, and subject to the Public Records Act (Government Code Section 6250, et. seq.). CDPH/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, the CDPH/OA shall use its best efforts to not 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.

3.2 Award and Appeal Instructions

3.2.1 Notification of Intent to Award

Notification of the State’s intent to award contracts for this PPIR Initiative will be posted on the CDPH/OA website. Additionally, a letter will be emailed to all applicants notifying them of the status of their application.

3.2.2 Appeal Process

Any applicant who applied and was not awarded a contract for funding may file an appeal with the CDPH/OA. Appeals must state the reason, law, rule, regulation, or practice that the applicant believes has been improperly applied regarding the evaluation or selection process. There is no appeal process for applications submitted late or incomplete. Appeals shall be limited to the following grounds:

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

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

Appeals must be sent via e-mail to PPIRInitiative@cdph.ca.gov and must be received as referenced in 1.1 Schedule of Events of this RFA. The CDPH/OA Division Chief, or their designee, will then come to a decision based on the written appeal letter. The decision of the CDPH/OA Division Chief, or their designee, shall be the final remedy.

Applicants will be notified via e-mail within 15 business days of the consideration of the written appeal letter. CDPH/OA reserves the right to award the contract when it believes that all appeals have been resolved, withdrawn, or responded to the satisfaction of CDPH/OA.

3.3 Expectations & Commitments as PPIR Initiative Awardee

3.3.1 Quarterly Meetings & Learning Collaborative

Representatives from awarded EEs will attend quarterly check-in meetings in which the CDPH will provide updates and guidance, and awardees will share successes, struggles, and lessons learned. CDPH will host a PrEP Navigation Learning Collaborative with opportunities for networking, learning from other organizations, technical assistance, and training opportunities available to all PrEP and PEP navigation programs, including, but not limited to PPIR Initiative awardees. PPIR Initiative awardees will be required to participate in all sessions unless prior notice is given. Awardees will discuss implementing ideas, concepts, or practical interventions into programs during the quarterly check-in meetings.

3.3.2 Evaluation, Reporting Schedule & Reporting Tools

Evaluating the PPIR Initiative implementation and impact on program participants, enhancing the quality and breadth of existing PrEP and PEP navigation and retention services is critical to the PPIR Initiative's success and necessary to preserve the PPIR Initiative as an ongoing funded initiative. CDPH will collect data through Local Evaluation Online (LEO), a baseline report, and annual reports from awardees. Questions will seek responses to the PPIR Initiative's efforts and successes on navigation and access to PrEP, PEP, and other relevant services, centering equity, racial justice, and outreach to priority population(s). The PPIR Initiative Activities List (Attachment 3) included in the RFA package contains more detailed information about evaluation approaches for individual activities. Awardees are required to facilitate participation in and the distribution of incentives for an annual participant survey that will be developed and hosted by the CDPH/OA. The survey will be a brief questionnaire

designed to evaluate program awareness, program satisfaction, health, and health care access. The Budget Detail & Budget Justification (Attachment 2) included in the RFA package indicates the required amount of funding to be designated for participant survey incentives. Programmatic reporting will occur annually, with the schedule and details provided at the time of contracting.

3.3.3 Contract Obligations

The successful EE must enter into a contract that may incorporate, by reference, this RFA as well as the application submitted in response to this RFA. It is suggested that EEs carefully review these awardee provisions for any impact on the 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 the CDPH/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 contract purposes, terms, budgets, timelines, and related issues.

3.4 Questions About the Application and Award Process

You can submit questions through **01/25/2023 by 5:00PM PST** to PPIRInitiative@cdph.ca.gov. Responses to any submitted inquiries will be added to our Frequently Asked Questions section on the PPIR Initiative website.

3.5 Miscellaneous RFA Information

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

The award of a contract by the CDPH/OA to an entity that proposes to use subcontractors for the performance of work under the resulting funding shall not be interpreted to approve the selection of subcontractors.

Subcontractors can only be added or changed after a contract is awarded with the CDPH/OA approval of a formal contract amendment. In the event a contract is entered into, but later terminated, CDPH/OA has the option to enter into a contract with the available entity or organization having the next highest score in the evaluation process for completing the remaining work.

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

Funded awardees are not guaranteed to be funded again at the end of this award cycle and must re-apply. Previous awardees will not receive priority during the selection process for subsequent funding cycles.

3.6 Attachments

1. Attachment 1- PPIR Initiative Proposal Narrative
2. Attachment 2- Budget Detail & Budget Justification
3. Attachment 3- PPIR Initiative Activities List
4. Attachment 4- Project Planning Worksheet (Optional)