



**Answers to Submitted Questions
Posted February 2, 2023**

- 1. Was the deadline for the letter of intent moved? On the announcement it states that the due date is 1/27/2023.**

No, it has not moved. The letter of intent (LOI) is due January 27, 2023, by 5:00 p.m.

- 2. The Application and presentation indicate that applicants must specify which Tier, however do applicants also have to specify which region?**

No, region will be determined by agency location and applicant narrative regional/local data.

- 3. Would an organization intending to provide Direct Services to clients be more favorably reviewed for this RFA?**

Refer to Attachment III Activities List and PPIRI Request for Applications (RFA) programmatic approaches to create a strong proposal.

- 4. There is reference to attachments on RFA, will those attachments be shared or available on the website?**

PPIRI RFA Attachments will be sent out to those who submit the mandatory LOI to PPIRInitiative@cdph.ca.gov by 5:00 p.m. PST on January 27, 2023.

- 5. Is there a chance that if an agency is not funded under their requested tier that they might be funded under another tier if space in that tier is available?**

No.

- 6. How current does a financial audit need to be if a 990 is not available?**

Financial audits must be dated within the last 1 year. If you do not have this, please provide a letter explaining why and a copy of your annual budget for the current fiscal year including expenses and revenues as referenced in the RFA.



7. What is the invoice turn-around time?

Payment will be made in accordance with, and within the time specified in, Government Code Chapter 4.5, commencing with Section 927. Undisputed invoices will be paid within 45 days of receipt or notification.

8. Is there any conflict with Ryan White funding?

No.

9. Can unspent money budgeted in year 1 be rolled over into the next?

No.

10. Is there an expectation that the applicant is covering an entire region or multiple counties?

No.

11. What if you don't have clinical services in place. We do mostly prevention. Can we still do this?

Yes.

12. Where do we find the format for the LOI?

Prospective eligible entities (EEs) are required to submit an LOI to the California Department of Public Health (CDPH), Office of AIDS (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 PPIRInitiative@cdph.ca.gov. EEs that fail to submit an LOI by the specified deadline are precluded from funding consideration.

13. Is there a cap to indirect cost or is this included in the attachments provided after LOI?



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.

14. Are there specific invoicing and/or admin requirements? Will staff be required to attend additional meetings?

Yes, invoice guidance will be provided to all awarded entities prior to contract execution... Additional meetings and guidance will be had throughout the life of the award.

15. Is it required to already have a navigation center (offering PrEP & PEP services) to be able to apply for this funding?

No.

16. Can you establish MOUs with medical providers or other agencies that to do telehealth? How do we deal with prescriptions? Do we need a pharmacy?

Yes, you can establish partnerships with other agencies that do telehealth.

No, you do not need an in-house pharmacy. Implementing the four PPIRI RFA strategies will provide support in navigating a client to a prescriber and pharmacy to obtain PrEP or PEP medications.

No, you do not need a pharmacy.

17. Can funding be used to maintain PrEP/PEP navigation services/staff that are at risk due to lack of dedicated/continued funding-- or is this only for expansion?

Yes. This funding can bolster current services.

18. Will a list of awardees be made available on the website?

Yes.



19. Can grantees negotiate start-up funds to be paid up-front to the grantee to minimize the financial impact of the reimbursement contract?

No.

20. Can you speak to the guidelines for subcontractors?

- See below responses, also refer to Sections F, G, and H of the budget guidance.
- Subcontractors must be licensed to work in the State of California.
- In the case of Contractor's utilization of Subcontractors to complete the contracted scope of work, Contractor shall include all Subcontractors as insured under Contractor's insurance or supply evidence of the Subcontractor's insurance to the CDPH equal to policies, coverages, and limits required of Contractor.
- Prior written authorization will be required before the Contractor enters or is reimbursed for any subcontract for services exceeding \$5,000 for any articles, supplies, equipment, or services. The Contractor shall obtain at least three complete quotations which should be submitted, or adequate justification provided for the absence of bidding.
- If a Subcontractor is approved, requests for substitution must be submitted in advance and approved by the funding program
- CDPH reserves the right to approve or disapprove the selection of subcontractors and with advance written notice, require the substitution of subcontractors and require the Contractor to terminate subcontracts entered into in support of this Agreement.
 - Upon receipt of a written notice from CDPH requiring the substitution and/or termination of a subcontract, the Contractor shall take steps to ensure the completion of any work in progress and select a replacement, if applicable, within 30 calendar days, unless a longer period is agreed to by CDPH.
- Actual subcontracts (i.e., written agreement between the Contractor and a subcontractor) exceeding \$5,000 are subject to the prior review and written approval of CDPH.
- Contractor shall maintain a copy of each subcontract entered into in support of this Agreement and shall, upon request by CDPH, make copies available for approval, inspection, or audit.
- CDPH assumes no responsibility for the payment of subcontractors used in the performance of this Agreement. Contractor accepts sole responsibility for the payment of subcontractors used in the performance of this Agreement.
- The Contractor is responsible for all performance requirements under this Agreement even though performance may be carried out through a subcontract.



- The Contractor shall ensure that all subcontracts for services include provision(s) requiring compliance with applicable terms and conditions specified in this Agreement and shall be the subcontractor's sole point of contact for all matters related to the performance and payment during the term of this Agreement.
- The Contractor agrees to include the following clause, relevant to record retention, in all subcontracts for services:
 - "(Subcontractor Name) agrees to maintain and preserve, until three years after termination of (Agreement Number) and final payment from CDPH to the Contractor, to permit CDPH or any duly authorized representative, to have access to, examine or audit any pertinent books, documents, papers and records related to this subcontract and to allow interviews of any employees who might reasonably have information related to such records."
- For all purchases, the Contractor and/or subcontractor must maintain copies of all paid vendor invoices, documents, bids, and other information used in vendor selection, for inspection or audit. Justifications supporting the absence of bidding (i.e., sole source purchases) shall also be maintained on file by the Contractor and/or subcontractor for inspection or audit.

21. In our County, under the Health Services Agency, the Clinics department have a Prep-AP site. The Public Health department is also under the health Services Agency. As the clinics and public health department are both under the Health Service Agency, would this qualify the Public Health department to apply for this RFA?

Yes.

22. Where will the recording be posted?

The recording is linked below and can also be accessed on the [PPIR landing page: PPRI Announcement Webinar](#)
Passcode: adY0i^At

23. Can this funding be used for new staff or existing staff? Can we hire new staff to do this work, or it must be done with existing staff?

This funding can be used for both.

24. Will there be a PDF of this webinar?

No. A recording is available on the [PPIR landing page](#)



25. Where can we get more information on how to enroll to be a PrEP Assistance Program enrollment site?

Information for enrollment workers and clinical providers can be found here:

[Information for PrEP-AP Enrollment Workers & Clinical Providers](#)

You can also email PrEP.support@cdph.ca.gov

26. Will this funding support Provider time?

Yes. Please refer to PPIRI Budget Guidance attachment.

27. Are the narrative questions provided upon submitting LOI?

Yes.

28. Can any of the funding be used for marketing of PrEP/PEP through radio and other broadcasting channels?

Yes, Strategy 1 of PPIRI is Promotion. With prior approval from OA, EEs are allowed to develop media campaigns, budgeted up to five percent of the total award.

29. Where can one find the budget guidance?

PPIRI Budget Guidance and all other RFA attachments will be sent out to those who submit the mandatory LOI to PPIRInitiative@cdph.ca.gov by 5:00 pm January 27, 2023.

30. In the LOI, do we need to specify which award amount we would like to apply for?

No.

31. What if service area overlaps regions?

PPIRI will use the county the agency is located in to determine region, regardless of proximity to other regions.

32. The RFA stated “organizations may only submit one application and must designate the Tier which they are applying”, and highest scores from each tier are selected. Does this mean applicant must select ONLY one of the three Tiers? Does this also mean only applicants within the same tier compete with each other? And would NOT be consider for the other two tiers?



Yes, applicants can select ONLY one of the three tiers.

Yes, only applicants within the same tier are competing with each other and would NOT be considered for the other two tiers.

33. May we please have a list of previous and current grantees for this program, if it is a grant that has been awarded in the past?

This is the first cycle of this award, there are no previous awardees.

34. Please provide the original Funding Opportunity Number from the appropriate federal agency, as well as the CFDA Number for this opportunity.

Not applicable to PPRI - this initiative does not involve federal funds.

35. On page 15 of 19 the RFA states that Attachment 5 is the Optional: Project Planning Worksheet. However, page 19 of 19 of the RFA states that the Optional Project Planning Worksheet is Attachment 4. Please advise.

Optional Planning Worksheet is Attachment 4 as it states on page 19 of 19 of the RFA. Page 15 has a mistype and is incorrect.

36. If applicants are already implementing the four strategies within the organization's other programs, for purposes of this application, can applicants focus within one or two of the strategies or must the program include all four strategies (i.e., promotion, engagement, navigation, retention)?

Applicants must include all four strategies in their proposals.

37. Are indirect/administrative costs allowable budget costs?

Yes, please refer to the PPRI Budget Guidance on indirect costs.

38. What are the specific restrictions for incentives? Are there limits to how much each gift card can be worth? – I.E each gift card can only be a max of \$25. Are there levels or specific activities clients need to complete to get a gift card? Is there a restriction on where the gift card can be purchased from? I.E. (Target, Walmart, Gas Cards).

- Incentives must support the department's mission (function and purpose) and benefit the State to not be considered gifts of public funds. Therefore,



incentives **must provide a benefit to enrolled clients**, in conformance with California Governor's [executive order dated 2-18-2011](#), which prohibits items such as keychains, shirts, mugs, etc.

- Incentives cannot be given to the general public, nor to Contract or Subcontract staff.
- Gift cards cannot be used for the purchase of alcohol, tobacco, or drug products.
- Gift cards cannot be over \$50.
- Incentives must be tracked and accounted for. When submitting invoices to CDPH, tracking logs or other substantiation must be provided as to the purchase and type of incentive. It is not necessary to notate to which specific client the incentive was provided.

39. May recipients use PPIR Initiative funding to hire or pay a stipend to a doctor in order to provide PrEP and PEP prescription services?

Yes.

40. Define SOW Reference - What should be entered here?

This does not apply to RFA applicants, only to awarded EEs and will be filled out after award is announce – leave this section blank.

41. The Budget Guidance notes, administrative cost may not exceed 10% of the allocated award amount. Please define this further. Does this include personnel not providing direct patient service (i.e., department director who oversees program, administrative grant manager)? Does this include indirect costs? Is this annual or total 4-year budget?

The 10% limitation applies to both the contractor and the subcontractor, for each contract year.

Indirect Costs are those that are not specifically related to implementing the award and are not readily identified with a specific project or organizational activity but incurred for the joint benefit of both PPIRI and other projects or activities. Overhead costs are a typical example of an indirect cost.

Administrative cost may not exceed 10% of the allocated award amount. This total should include the following, as applicable:

Retirement

OASDI

Dental Insurance

Benefit Life



Vision Care
Medicare Tax
Health Insurance
Workers Compensation
Disability Leave
Unemployment Insurance
Other Staff Benefits

Indirect cost

For local health jurisdictions (LHJs) applying as the EE, the indirect cost rate (ICR) the EE submits in their budget must be the approved rate on file with CDPH. EEs may allocate less than this rate but cannot exceed the rate.

For non-LHJs applying as the EE, the ICR should not surpass 25%. All ICRs will be reviewed for reasonableness: any ICR exceeding 25% must be accompanied with a strong justification. Approval of ICRs exceeding 25% will be done on a case-by-case basis.

42. Can we budget for incentives beyond the \$500/per year for survey incentives? Can non-survey incentive cost be included in another line item?

Yes.

43. Please define the Period of Implementation (Period 1-8). Are these 6 month increments over the four-year grant period?

Each period is a 6-month period for a total of 8 periods over the course of 4 years.

44. For Current Activities and Planned Activities (using award funds) boxes should a yes or no response be entered? Should the box be shaded? Please define the response.

Enter a YES or a NO in the cell.

45. For Current Activities and Planned Activities (using award funds) boxes can both boxes have an affirmative response? My agency currently conducts some of the activities - but we will further enhance them with PPIR funding.

Yes.

46. Is there a reason why some required activities boxes are shaded, and some are not?



No. The yellow shading was missed on a few sections. The yellow shading is only meant to highlight what the required activities are in addition to the word “required.”

47. As we budget for a Navigator position, we will cover a monthly stipend for cell phone. Would this be an allowable fringe benefit?

Yes

48. Are California State Universities eligible entities?

Yes.