

State of Arkansas
Arkansas Department of Health
4815 West Markham, Slot H58
Little Rock, Arkansas 72205
501-280-4573

ADDENDUM #1 - Page 1 of 6

TO: Valued Vendors
FROM: Arkansas Department of Health
DATE: September 28, 2009
SUBJECT: **RFP # DH-09-1009 HIV Prevention Project**

The following change(s) to the above-referenced Request for Proposal for Arkansas Department of Health and the Arkansas Minority Health Commission has been made as designated below:

- Change of specification(s)
- Additional specification(s)
- Change of bid opening time and date
- Cancellation of bid
- Other

***The following change to specifications is being made with this addendum:

Section: Eligible Applicants and Activities

“3. Applicants must have passed their most recent external fiscal audit and must have been audited within the past twelve months.”

shall be changed to read:

“3. Each organization must submit evidence of fiscal responsibility and any financial reporting documents available for the previous 12 month period including an external financial audit if available.”

See attached second page for questions submitted, and associated responses.

The bid opening time and date shall remain the same.

The specifications by virtue of this addendum become a permanent addition to the above-referenced Request for Proposal. **FAILURE TO RETURN THIS SIGNED ADDENDUM MAY RESULT IN REJECTION OF YOUR BID.**

BIDS WILL BE ACCEPTED UNTIL THE TIME AND DATE SPECIFIED. THE BID ENVELOPE MUST BE SEALED AND SHOULD BE PROPERLY MARKED WITH THE BID NUMBER, DATE AND HOUR OF BID OPENING AND BIDDER'S RETURN ADDRESS. IT IS NOT NECESSARY TO RETURN "NO BIDS" TO THE ARKANSAS DEPARTMENT OF HEALTH.

If you have questions, please contact the Issuing Officer at 501-280-4573.

VENDOR SIGNATURE

DATE

COMPANY

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DH-09-1009 - Questions and Answers

Q1. Do the following "REQUIRED DOCUMENTATION" attached below from page 25 of the RFA count toward the 30 page limit? (If they do, it would take a minimum of 32-34 pages and that is counting one page each for items such as Project Plan and Evaluation, Narrative Budget Justification, Description of Organization Capacity, Applicant Experience, and Description of Collaborative Relationships. If they do not count, it still is 26-28 pages minimum. It doesn't leave much room to expand on any of the narrative of the proposal, especially since it is required to be all double spaced in the text).

A1. The following documents as listed on page 19 are the only documents that count towards the 30 page limit:

- **Table of Contents**
 - **Project Abstract**
 - **Project Plan and Evaluation**
 - **Description of Organization Capacity**
 - **Current Organizational Chart**
 - **Applicant Experience**
 - **Description of Collaborative Relationships**
 - **Summary of Funding Sources**
-

Q2. Please clarify exactly which of the 27 items (each require at least one page) listed on page 19 of the RFA count toward the 30 page limit.

A2. Please see A1 above.

Q3. Please reconsider the 30 page limit if all 27 items count in the limit (referenced in Q1 & Q2 above).

A3. Please see A1 above.

Q4. Is the HIV Prevention RFA available in a WORD format instead of PDF? (We are unable to use the tables and other forms to fill in since it is in a PDF format that is non-writable).

A4. The WORD version can be found on the grants page at www.healthyarkansas.com.

Q5. Fiscal Audit - We are a faith-based org. (church) and have not been required to have annual audits performed. Will we still be able to apply for this RFA?

A5. Yes. Each organization must submit evidence of fiscal responsibility and any financial reporting documents available for the previous 12 month period including an external financial audit if available.

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Q6. Please define administrative costs.

A6. Administrative costs include travel costs, administrative/office supplies (i.e. not testing supplies or educational materials, etc.), administrative/office equipment. Personnel costs and fringe benefits are not an administrative cost.

Q7. Please specify what type of programs must have client grievance policies and procedures. We are planning a group level prevention intervention program.

A7. All programs must have client grievance policies and procedures.

Q8. Will our application be weighed less if we submit a single agency proposal, or will preference be made on a collaborative effort?

A8. Collaborative relationships are an application component worth 15 points and are described on page 24. This does not mean that each applicant must create an intervention in collaboration with another organization, it means that each applicant should show what, if any, collaborative relationships exist and what value they add to the applicant's organization and capacity.

Q9. Attachment 2 - Application Cover Sheet asks for the Program Coordinator's address. Would this be the organization's address or the individual's personal address?

A9. This should be the address at which the Program Coordinator, in his or her official capacity, would receive correspondence relating to the applicant organization and program.

Q10. Attachment 3 - Program Contact Information: It states that it is requesting program contacts in addition to those on the Application Cover Sheet. Do these individuals have to be different from those listed on the Cover Sheet?

A10. The contacts listed on Attachment 3 should be those individuals who perform those duties/roles for the applicant organization. Many organizations have individuals who perform multiple roles and, as a result, one individual may be listed for multiple roles.

Q11. Also (with reference to question #10), is the mailing address being requested the organization's or the individual's personal mailing address?

A11. The address listed should be that at which the individual, in his or her official capacity, receives correspondence relating to the application organization and program.

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Q12. Also on attachment 3, please clarify Q M contact.

A12. **QM refers to Quality Manager. It is not a requirement that an organization have a Quality Manager in order to apply.**

Q13. We noticed in the information that we have to be non profit. We are registered as non-profit but we do not have 501C3 status. Can we still apply?

A13. **Each organization must be a public agency or a private, non-profit organization. As a result, each organization must show proof of either public agency status or private, non-profit status. Applicants claiming private non-profit status must include either certification from the State of Arkansas, Office of Secretary of State, or a letter from the Department of the Treasury, Internal Revenue Service (IRS), classifying the applicant administrative organization as a private, non-profit corporation.**

Q14. As long as the font, margins, and typeface are as requested, can the forms be duplicated with larger spaces? An example would be the Board Roster Form.

A14. **Yes, this is agreeable.**

Q15. As long as the font, margins, and typeface are as requested, can the forms be duplicated with larger spaces? An example would be the Board Roster Form.

A15. **Yes, this is agreeable.**

Q16. Is it okay for the E.D. to also serve as the project director or is this frowned upon?

A16. **The application should show that the project director, no matter what other roles he or she may have in the applicant organization, has both time and capacity to serve as project director. If the project director serves other roles within the organization that information should be included in the application.**

Q17. Are young community development agencies without previous HIV/AIDS programs, but with dynamic program ideas, viable candidates for funding?

A17. **Yes, all organizations meeting the criteria under the Eligible Applicants and Activities section of the RFA are eligible for funding.**

Q18. How in depth does the audit summary have to be? As a young organization, we have not had one and they are very costly. Should we receive funding, we want to ensure that our cash flow is adequate.

A18. **The audit summary should contain enough detail enough to exemplify fiscal responsibility of public and/or private funds.**

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Q19. Under the RFA's section of Eligible Applicants and Activities on page 15, number one reads, that Applicants must be an Arkansas public or private, non-profit agency. Planned Parenthood of Arkansas and Eastern Oklahoma has a non-profit 501 C(3) status which is incorporated in Oklahoma. We have two health centers in Arkansas, and Tulsa is where our home office is located. We have received funding before from the Health Department so my question is Are we eligible to apply for this grant, even though we are incorporated in Oklahoma, but have health centers in Arkansas?

A19. The application should include proof of non-profit status from the Department of the Treasury, Internal Revenue Service and that any funding received will be used for eligible activities in Arkansas.

Q20. Planned Parenthood in Arkansas has two health centers which provide HIV testing and counseling to its patients. In the RFA it states that in order to do testing and counseling the site has to be an "approved testing site." My question is: Since we do HIV testing here at Planned Parenthood, are we already an approved site, and if not, how can we get approved by January 1, 2010?

A20. An "approved testing site" is one that is recorded as having received Voluntary Counseling and Testing training and site approval by the Health Educator Supervisor through the Arkansas Department of Health HIV Prevention Program.

Q21. For newly formed organizations what would be acceptable for an independent audit considering they are usually based on a year's worth of finances? (In conjunction we do not have the cost of an independent audit in our budget.)

A21. Each organization must submit evidence of fiscal responsibility and any financial reporting documents available for the previous 12 month period including an external financial audit if available.

Q22. Is the conventional method of testing and counseling mandated for this grant?

A22. Conventional testing typically refers to HIV testing via blood draw and performing two tests: HIV enzyme immunoassay (EIA) capable of identifying HIV-1 and HIV-2 antibodies and an HIV-1 Western blot or immunofluorescence assay (IFA) used for confirmation. Conventional testing is not mandated for this grant. Conventional or rapid testing may be used but all testing must be in accordance with the "approve testing site" requirement as explained in A20.

Q23. What would be the process of having access the contact information for those people who are HIV positive and not in care?

A23. Information about individuals who are HIV positive is Protected Health Information (PHI) under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Disclosure of PHI is not allowed for this purpose.

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Q24. If we seek to continue funding under the current contract as an AMHC grantee by expanding our program, please verify the 2010 award dates as according to our records, current funding under the AMHC began April 1, 2009, hence ending the 12 month period on March 31, 2010. According to the RFA, funding for current AMHC grantees expires April 30, 2010.

A24. Current AMHC grantees may apply for funds as continuation of funds from the date of the end of their current contract (in this case March 31, 2010) through December 31, 2010 or apply for a new program starting January 1, 2010.

Q25. According to the RFA, travel expenditures during the 2010 grant cycle are limited to attendance of the National HIV Prevention Conference and CDC DEBI training. It is our understanding that the next National HIV Prevention Conference is not scheduled until year 2011. If this is correct, are we able to substitute this convention for another one?

A25. Yes, another conference may be substituted for the HIV Prevention with preapproval from Grantors.

Q26. The RFA requires a list of all funding sources. Should this list be specific to our HIV prevention initiatives or should it include all grants awarded to our organization?

A26. All funding sources received by applicant organization should be disclosed.
