

IOWA DEPARTMENT OF PUBLIC HEALTH

DIVISION OF BEHAVIORAL HEALTH

REQUEST FOR PROPOSAL 58813018

**INTEGRATED HIV AND VIRAL HEPATITIS
COUNSELING, TESTING, AND REFERRAL (CTR) SERVICES**

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SECTION 1 -- GENERAL AND ADMINISTRATIVE ISSUES

1.01 Purpose

The purpose of this Request for Proposal (RFP) **58813018** is to solicit proposals that will enable the Iowa Department of Public Health (IDPH) to select the most qualified applicant to provide HIV and hepatitis C counseling, testing, and referral (CTR) services; immunizations for hepatitis A and B; and referrals for supportive health services to disproportionately impacted populations and to individuals who are at high risk for infections with HIV and viral hepatitis and who do not access services at conventional health care venues, such as physicians' offices and private clinics. Applicants must use strategies to recruit or locate high-risk individuals and disproportionately impacted populations, and must provide services at locations and times that promote access for these individuals and populations with a particular emphasis on reaching men who have sex with men (MSM).

The goals of CTR services are as follows:

- To increase the number of persons at risk of infection with HIV and/or hepatitis C (HCV) who know their statuses;
- To reduce the number of new and untreated HIV and HCV infections;
- To reduced undiagnosed and late diagnosed HIV and HCV infections;
- To focus testing in the populations and geographical areas of greatest need;
- To attain a minimum of 1.0 percent positivity rate annually;
- To ensure linkage to and participation in HIV medical care and supportive services (as appropriate) for HIV-infected persons;
- To improve the health and quality of life of HIV- and HCV-infected and high-risk, uninfected persons; and
- To increase the number of adults who are immunized against hepatitis A and B.

BACKGROUND

HIV antibody counseling and testing is a critical point of entry to comprehensive HIV prevention services, medical care, and supportive services. By assessing HIV status and risks for other health issues, including viral hepatitis and STDs, counseling and testing may serve as a point of entry into the health care system. Counseling and testing encounters can also help individuals begin to make relevant behavioral changes, thereby contributing to the reduction of HIV, STD, and hepatitis transmission.

The Centers for Disease Control and Prevention (CDC) estimate that 20 percent of HIV-infected persons and 50 percent of hepatitis C-infected persons are unaware that they are infected. The individuals most at risk for these infections often do not access conventional health care services and are those that are the hardest to reach with prevention services. For these reasons, agencies are encouraged to use innovative approaches to find or recruit high-risk

individuals, such as network-based recruiting strategies¹, outreach, or other efforts to reach individuals where they gather (e.g., bars, parks, public sex environments, substance abuse treatment facilities, and other community settings).

The populations that will be supported with these funds have been identified as priorities through the community planning process, reflect departmental program priorities, and align with federal prevention priorities. Funding will be focused in areas with the greatest number of new HIV diagnoses and number of living cases of HIV/AIDS, according to the most recent five years of available data. This funding opportunity has been developed to align with the National HIV/AIDS Strategy, as well as the state Community Planning Group's (CPG) HIV Comprehensive Plan to make the greatest impact possible with the amount of funding available.

The 2010 National HIV/AIDS Strategy² laid out a plan of action with three primary goals: 1) To reduce the number of people who become infected with HIV, 2) To increase access to care and optimize health outcomes for people living with HIV, and 3) To reduce HIV-related health disparities. Along with highlighting the importance of linkage to quality HIV-related medical care for people living with HIV, the National Strategy stresses the need to intensify HIV prevention efforts in communities where HIV is most heavily concentrated.

IDPH seeks community-based organizations, non-profit agencies, or local health departments to offer HIV counseling and testing services to persons who engage in specific high-risk behaviors and to populations that have been disproportionately impacted by HIV.

Individuals at high-risk of HIV infection are defined as:

- Persons who have unprotected sex and/or share injection equipment with HIV-positive persons;
- Males who have unprotected sex with other males;
- Persons who exchange sex for money, drugs, or things they need;
- Females who have unprotected sex with bisexual males;
- Persons who have unprotected sex with an injecting drug user or someone who exchanges sex for money, drugs, or things they need;
- Persons who were diagnosed with an STD within the last year; and
- Persons who have ever shared contaminated drug injection equipment.

Disproportionately impacted populations (i.e., those populations with higher rates of HIV diagnoses) are defined as:

- African American/Black persons; and
- Hispanic/Latino(a) persons.

Because individuals at high risk for HIV are also at risk for viral hepatitis, applicants have the option to provide hepatitis C counseling and testing and/or hepatitis A and B immunizations to specific high-risk individuals as defined below.

¹ See <http://www.cdc.gov/hiv/resources/guidelines/snt/pdf/SocialNetworks.pdf>

² See <http://www.whitehouse.gov/sites/default/files/uploads/NHAS.pdf>

High-risk individuals who should be offered HCV testing include:

- Persons who have ever injected drugs;
- Injection drug users who share needles or other equipment;
- Persons who received blood, blood products, or organ transplants prior to 1992; and
- Persons ever on long-term hemodialysis.

High-risk adults who should be offered hepatitis A and B immunizations include:

- Injection and non-injection drug users;
- Men who have sex with men;
- Persons with an STD diagnosis within the past 12 months;
- HIV and/or HCV-infected persons; and
- Sexual partners of persons infected with HIV, hepatitis A (HAV), and/or hepatitis B (HBV).

1.02 Project Period/Contract Term

The project period shall be from February 15, 2013, to December 31, 2016.

IDPH expects the initial contract period to be eight and a half month term from February, 15, 2013, to December 31, 2013. IDPH shall have the option to renew the contract for up to three (3) additional one (1) year terms subject to review of the continuation application, contractor performance and compliance with the terms and conditions of the contract, availability of funds, and guidance from the Centers for Disease Control and Prevention.

The issuance of this RFP in no way constitutes a commitment by IDPH to award a contract.

1.03 Eligibility Requirements

Applicants must meet each of the following eligibility requirements for consideration.

Eligible Applicants

Agencies eligible to submit proposals in accordance with this RFP include any incorporated community-based organization, local health department, or governmental organization located in the State of Iowa with experience providing health, drug treatment, or other social services to the individuals and populations described in this application. These agencies must have the capacity to provide HIV counseling, testing, and referral services. They must also have the capacity to either provide viral hepatitis services directly, when appropriate, or to provide referrals to these services.

All applicants must provide HIV testing and counseling services and education about viral hepatitis transmission and risk factors. In addition, applicants must either provide STD testing, HCV screening, hepatitis A and B immunizations, TB skin testing, substance abuse treatment, and mental health services onsite, or they must refer clients for these services, when appropriate. Applicants may apply to provide HCV screening and/or hepatitis A and B immunizations, but applying for these services is not required.

IDPH will seek applicants that can demonstrate the capacity to meet the following criteria:

1. Focus services on high-risk individuals and/or disproportionately impacted populations through recruitment, outreach, or other strategies, with particular emphasis on reaching MSM;
2. Provide services in venues that encourage HIV testing for individuals to become aware of their HIV, HCV, and STD infection statuses;
3. Provide HIV rapid antibody testing and specimen collection for confirmatory testing.
4. Provide client-centered prevention counseling services with sensitivity to and awareness of client culture and primary language;
5. Provide the following services:
 - HIV, hepatitis, and STD education;
 - Behavioral risk assessment;
 - Pre-test counseling;
 - HIV testing, if appropriate;
 - HCV testing or referral, if appropriate;
 - Immunizations for hepatitis A and B or referral, if appropriate;
 - Post-test counseling;
 - Supported referral for HIV Partner Services;
 - Supported referral to care for clients testing positive for HIV or hepatitis;
 - On-site services or referrals for STD and TB testing, follow-up HCV testing (for HCV-antibody positive persons), substance abuse treatment, and mental health services; and
 - Free condoms to high-risk individuals and members of disproportionately impacted populations.
6. Establish and maintain relationships with area HIV care providers, and assess and document whether clients are successfully linked to care;
7. Commit to continual professional development, training, and supervision for counseling staff;
8. Endorse and integrate harm reduction approaches into service provision, including offering client-centered services that respond to each individual's level of readiness to make behavior changes;
9. Commit to participation in data collection, evaluation, training, and quality assurance activities sponsored by the Bureau of HIV, STD, and Hepatitis; and
10. Commit to assessing and improving client satisfaction.

NOTE: Applications from *individuals* proposing HIV CTR, HVC CTR, or hepatitis A and B immunization services will not be accepted.

Electronic Communication Requirements

Applicant is required to maintain and provide to IDPH, upon application, a current and valid

email account for electronic communications with IDPH.

1.04 Service Delivery Area

Each site will be expected to serve all eligible Iowans.

1.05 Available Funds

NOTE: Agencies must apply for HIV CTR service funds, BUT have the option to apply for hepatitis C counseling and/or testing/hepatitis A and B immunization service funds. An agency may subcontract for the provision of hepatitis C testing/referral and/or hepatitis A and B immunizations, if the agency does not have the capacity to provide these services directly. IDPH's General Conditions require contractors to obtain approval from IDPH prior to entering into subcontracts over \$2,000 for work and services related to the contract. Contractors are required to submit proposed contracts or written agreements to IDPH for review. Subcontractors for immunization services must meet all program requirements listed for hepatitis A and B immunizations in Section 2.01.

Allocation of Funds

Funding allocations for HIV and hepatitis services are estimated based on federal and state fiscal year 2013 funding levels. All allocations and subsequent awards within the project period are estimated.

Actual total awards and individual contract funding levels may vary from that listed, or funding may be withdrawn completely, depending on availability of federal and state funding, and as directed by the CDC.

HIV CTR Funds

Funds are available to support eligible agencies in the State of Iowa to provide HIV counseling, testing, and referral services *to residents of Iowa, regardless of county of residence.*

The source of funding for HIV CTR is authorized by the Public Health Service Act through a Cooperative Agreement between the State of Iowa and CDC.

Hepatitis Funds

Funds are available to support eligible agencies in the State of Iowa to provide HCV counseling and testing and immunizations for hepatitis A and B to high-risk individuals who are *residents of Iowa, regardless of county of residence.*

The source of funding for Hepatitis is state-appropriated funds.

Estimated HIV and Hepatitis Services Funding Allocation

A total of \$45,000 is available to fund agencies to provide HIV CTR services, \$10,000 to provide HCV CTR services, and \$6,000 to provide hepatitis A and B immunizations.

Applicants must apply for HIV funds and may opt to apply for HCV funds, up to the maxima listed below. Funding is based upon the population of the county in which the agency's main testing site is located. See **Appendix II** for the 2011 estimated populations for counties in Iowa.

County Population	Expected Number of Projects to Be Funded*	HIV CTR Funds	HCV CTR Funds (Fee for Service)	Hepatitis A & B Immunizations (Fee for Service)
Greater than 250,000	1	\$25,000	\$5,000	\$3,000
120,000 – 250,000	1	\$20,000	\$5,000	\$3,000

1.06 Schedule of Events (All times and dates listed are local Iowa time.)

The following dates are set forth for informational purposes. IDPH reserves the right to change them.

EVENT	DATE
RFP Issued	November 26, 2012
Written Questions and Responses	
Round 1 Questions Due	November 30, 2012
Interim Responses Posted By:	December 7, 2012
Proposals Due	January 4, 2013
Post Notice of Intent to Award	January 25, 2013

A. RFP Issued – November 26, 2012 IDPH will post the RFP on the IDPH Web page under the *Funding Opportunities* quick link at: www.idph.state.ia.us. IDPH will send a copy of the RFP to any person or entity which requests the RFP.

B. Written Questions and Responses. Written questions related to the RFP must be submitted via email to John McMullen at John.McMullen@idph.iowa.gov no later than **November 30, 2012**.

Questions must be submitted by electronic mail. If the question or comment pertains to a specific section of the RFP, the section and page must be referenced. Oral questions will not be accepted.

IDPH will prepare written responses to all pertinent and properly submitted questions and post the written questions and responses on the IDPH Web page. IDPH's written responses will be considered part of the RFP. Written responses will be prepared and posted according the schedule of events table above.

It is the responsibility of the applicant to check the IDPH Web site periodically for written questions and responses to this RFP.

C. Proposals Due – January 4, 2013.

Proposals must be **received** by 4:00 p.m. (local Iowa time) on January 4, 2013, by the IDPH

SharePoint Service Contract Center in compliance with the following requirements:

- Email proposal documents as a single zipped file **OR** a single PDF, no larger than 20MB, to applications@idph.iowa.gov. The preferred submission is a single zipped file.
- The subject line of the email must read “RFP 58813018”. Do not include anything else in the subject line of the email.
- The single zipped file or single PDF must be named “RFP 58813018 (insert your agency name)”.
- Do not include additional information or text in the body of the email as it will not be available to IDPH staff.

Proposals submitted to IDPH in any manner other than through the IDPH SharePoint Service Contract Center (e.g. electronic mail to any other address, faxed, hand-delivered, mailed or shipped or courier-service delivered versions) will be rejected and not reviewed by IDPH. Any information submitted separately from the proposal will not be considered in the review process.

Proposals will be rejected and not reviewed by IDPH for the following reasons:

- **If the proposal is received by the IDPH SharePoint Service Contract Center after the stated due date and time.**
- **If the proposal is submitted in any manner other than by email to applications@idph.iowa.gov.**
- **If the proposal is not submitted as a single zipped file or a single PDF file.**

IDPH will notify the applicant of the rejection.

The due date and time requirements for receipt of the proposal are mandatory requirements and will not be subject to waiver as a minor deficiency. The date and time of submission of a proposal is automatically documented upon receipt by the IDPH SharePoint Service Contract Center. Applicants have the sole responsibility to ensure their emailed proposal is received by the IDPH SharePoint Service Contract Center prior to the deadline.

An electronic notification of receipt of the applicant’s email will be generated automatically. If the electronic notification is not received within ten (10) minutes of the applicant’s email, please contact the SharePoint Helpdesk at 1-866-520-8987 to confirm delivery (available prior to 4 PM on Weekdays, excluding State Holidays).

If an applicant emails the proposal multiple times, only the last submission received by IDPH SharePoint Service Contract Center prior to the stated due date and time will be accepted for review.

D. Release of Names of Applicants – January 25, 2012. The names of all applicants who submitted proposals by the deadline shall be released to all who have requested such notification via an email request to John McMullen at John.McMullen@idph.iowa.gov.

E. Notice of Intent to Award – January 25, 2012. A Notice of Intent to Award the contract(s) will be posted on the IDPH Web page www.idph.state.ia.us under *Funding Opportunities* link by 4:30 pm. Applicants are solely responsible for reviewing the Notice of Intent to Award to determine their award status.

F. Contract Negotiations and Execution of the Contract – Following the posting of the Notice of

Intent to Award, the successful applicant(s) will retrieve a contract document through the IDPH SharePoint Service Contract system. The successful applicant has ten (10) working days from date of receipt in which to negotiate and sign a contract with IDPH. If a contract has not been executed within ten (10) working days, IDPH reserves the right to cancel the award and to begin negotiations with the next highest ranked applicant or other entity deemed appropriate by IDPH. IDPH may, at its sole discretion, extend the time period for negotiations of the contract.

1.07 Inquiries

During the period following release of this RFP and until the Notice of Intent to Award is posted, applicants should contact only John McMullen in the manner provided for in section 1.06(C). Unauthorized contact regarding this RFP with other state employees may result in disqualification. In no case shall verbal communications override written communications. Only written communications are binding on IDPH.

IDPH assumes no responsibility for representations made by its officers or employees prior to the execution of a legal contract, unless such representations are specifically incorporated into the RFP or the contract.

Any verbal information provided by the applicant shall not be considered part of its proposal.

1.08 Amendments to the RFP

IDPH reserves the right to amend the RFP at any time. In the event IDPH decides to amend, add to, or delete any part of this RFP, a written amendment will be posted on the IDPH Web site. The applicant is advised to check the IDPH Web site periodically for amendments to this RFP.

1.09 Open Competition

No attempt shall be made by the applicant to induce any other person or firm to submit or not to submit a proposal for the purpose of restricting competition.

1.10 Withdrawal or Resubmission of Proposals

Proposals may be withdrawn, modified and resubmitted by an applicant at any time prior to the stated due date and time for the receipt of proposals. If an applicant emails the proposal multiple times, only the last submission received by IDPH SharePoint Service Contract Center prior to the stated due date and time will be accepted for review. **An applicant desiring to withdraw its proposal after submission shall submit notification via email to John McMullen at John.McMullen@idph.iowa.gov.**

1.11 Acceptance of Terms and Conditions

A. An applicant's submission of a proposal constitutes acceptance of the terms, conditions, criteria and requirements set forth in the RFP and operates as a waiver of any and all objections to the contents of the RFP. By submitting a proposal, an applicant agrees that it will not bring

any claim or have any cause of action against IDPH or the State of Iowa based on the terms or conditions of the RFP or the procurement process.

B. IDPH reserves the right to accept or reject any exception taken by an applicant to the terms and conditions of this RFP. Should the successful applicant take exception to the terms and conditions required by IDPH, the successful applicant's exceptions may be rejected and IDPH may elect to terminate negotiations with that applicant. However, IDPH may elect to negotiate with the successful applicant regarding contract terms which do not materially alter the substantive requirements of the RFP or the contents of the applicant's proposal.

1.12 Costs of Proposal Preparation

All costs of preparing the proposal are the sole responsibility of the applicant. IDPH is not responsible for any costs incurred by the applicant which are related to the preparation or submission of the proposal or any other activities undertaken by the applicant related in any way to this RFP.

1.13 Multiple Proposals

Only one proposal will be accepted from each applicant.

1.14 Oral Presentation

Applicants may be requested to make an oral presentation of the proposal. The determination of need for presentations, the location, order, and schedule of the presentations is at the sole discretion of IDPH. If an oral presentation is required, applicants may clarify or elaborate on their proposals, but may in no way change their original proposal.

1.15 Rejection of Proposals/Cancellation of the RFP

A. IDPH reserves the right to reject, in whole or in part, any or all proposals, to advertise for new proposals, to arrange to receive or itself perform the services herein, to abandon the need for such services, and to cancel this RFP if it is in the best interests of IDPH.

B. Any proposal will be rejected outright and not evaluated for any of the following reasons:

1. The applicant fails to submit the letter of intent, if required by this RFP, by the relevant dates and times and in the manner stated in section 1.06.
2. The applicant fails to submit the proposal in sufficient time for receipt by IDPH SharePoint Service Contract Center prior to the stated due date and time or in the manner stated in section 1.06.
3. The applicant is not an eligible applicant as defined in section 1.03.

C. Any proposal may be rejected outright and not evaluated for any one of the following reasons:

1. The applicant fails to include required information or fails to include sufficient information to determine whether an RFP requirement has been satisfied.
2. The applicant fails to follow the proposal format instructions or presents information requested by this RFP in a format inconsistent with the instructions of the RFP.
3. The applicant provides misleading or inaccurate answers.
4. The applicant states that a mandatory requirement cannot be satisfied.
5. The applicant's response materially changes a mandatory requirement.
6. The applicant's response limits the right of IDPH.
7. The applicant fails to respond to IDPH's request for information, documents, or references.
8. The applicant fails to include any signature, certification, authorization, or stipulation requested by this RFP.
9. The applicant initiates unauthorized contact regarding the RFP with a state employee.

1.16 Restrictions on Gifts and Activities

Iowa Code Chapter 68B contains laws which restrict gifts which may be given or received by state employees and requires certain individuals to disclose information concerning their activities with state government. Applicants are responsible for determining the applicability of this chapter to their activities and for complying with these requirements.

In addition, Iowa Code Chapter 722 provides that it is a felony offense to bribe a public official.

1.17 Use of Subcontractors

A. The applicant is permitted to subcontract for the performance of certain services required under the contract. Subcontracts must adhere to the provisions of Section 5 of the IDPH General Conditions effective October 1, 2009 as posted on the IDPH Web page at www.idph.state.ia.us under the *Funding Opportunities* link. Planned use of subcontractors by an applicant must be clearly explained in the proposal. This information must include:

1. The name and address of the subcontractor if known;
2. The scope of work to be performed by each subcontractor;
3. Subcontractor qualifications; and
4. The estimated dollar amount of each subcontract.

B. Current individual employees of the State of Iowa may not act as subcontractors under this contract.

C. The applicant is fully responsible for all work performed by subcontractors. No subcontract into which the applicant enters into with respect to performance under the contract will, in any way, relieve the applicant of any responsibility for performance of its duties.

1.18 Reference Checks

IDPH reserves the right to contact any reference to assist in the evaluation of the proposal, to verify information contained in the proposal and to discuss the applicant's qualifications and the qualifications of any subcontractor identified in the proposal.

1.19 Criminal Background Checks

IDPH reserves the right to conduct criminal history and other background investigations into the applicant, its officers, directors, managerial and supervisory personnel, clerical or support personnel, and health care professional personnel retained by the applicant for duties related to the performance of the contract. Such information may be used in determining contract awards. The applicant shall cause all waivers to be executed by appropriate persons to effectuate the investigations.

1.20 Information from Other Sources

IDPH reserves the right to obtain and consider information from other sources concerning an applicant, including the applicant's product or services, personnel, and subcontractors, and the applicant's capability and performance under other IDPH contracts, other state contracts and contracts with private entities. IDPH may use any of this information in evaluating an applicant's proposal.

1.21 Verification of Proposal Contents

IDPH reserves the right to verify the contents of a proposal submitted by an applicant. Misleading or inaccurate responses shall result in rejection of the proposal pursuant to Section 1.15.

1.22 Bid Proposal Clarification Process

IDPH may request clarification from applicants for the purpose of resolving ambiguities or questioning information presented in the proposals. Clarifications may occur throughout the proposal evaluation process. Clarification responses shall be in writing and shall address only the information requested. Responses shall be submitted to IDPH within the time stipulated at the time of the request. An applicant will not be permitted to modify or amend its proposal if contacted by IDPH for this reason.

1.23 Waivers and Variances

IDPH reserves the right to waive or permit cure of non-material variances in the proposal's form and content providing such action is in the best interest of IDPH. In the event IDPH waives or

permits cure of nonmaterial variances, such waiver or cure will not modify the RFP requirements or excuse the applicant from full compliance with RFP specifications or other contract requirements if the applicant is awarded the contract. The determination of materiality is in the sole discretion of IDPH.

1.24 Disposition of Proposals

All proposals become the property of IDPH and shall not be returned to the applicant.

If IDPH awards funds to an applicant, the contents of all proposals will be in the public domain at the conclusion of the selection process and will be open to inspection by interested parties subject to exceptions provided in Iowa Code Chapter 22 or other provision of law.

1.25 Public Records

All information submitted by an applicant will be treated as public information following the conclusion of the selection process unless the applicant properly requests that information be treated as confidential at the time the proposal is submitted.

Any request for confidential treatment of information must be included in the transmittal letter with the applicant's proposal. In addition, the applicant must enumerate the specific grounds in Iowa Code Chapter 22 which support treatment of the material as confidential. The request for confidential treatment of information must also include the name, address, and telephone number of the person authorized by the applicant to respond to any inquiries by IDPH concerning the confidential status of the materials.

Any proposal submitted which contains confidential information must be conspicuously marked as containing confidential information and must indicate which sections of the proposal should be treated as confidential. Identification of the entire proposal as confidential shall be deemed non-responsive and shall disqualify the applicant. A Proposal containing confidential information must be emailed as a single zipped file or PDF to applications@idph.iowa.gov by 4:00 p.m. (local Iowa time) on January 4, 2013. The subject line of the email must read RFP 58813018. The single zipped file or PDF must be named "RFP 58813018 (insert your agency name) Confidential".

The applicant must submit one copy of the proposal from which the confidential information had been excised. The confidential material must be excised in such a way as to allow the public to determine the general nature of the material removed and to retain as much of the proposal as possible. A proposal from which the confidential information had been excised must be emailed as a single zipped file or PDF to applications@idph.iowa.gov by 4:00 p.m. (local time) on September 30, 2012. The subject line of the email must read RFP 58813018. The single zipped file or PDF must be named "RFP 58813018(insert your agency name)".

In the event IDPH receives a public request for RFP information marked confidential, written notice shall be given to the applicant seventy-two (72) hours prior to the release of the information to allow the applicant to seek injunctive relief pursuant to Iowa Code Section 22.8. The information marked confidential shall be treated as confidential information to the extent

such information is determined confidential under Iowa Code Chapter 22 or other provisions of law by a court of competent jurisdiction.

The applicant's failure to request confidential treatment of material pursuant to this section and the relevant law will be deemed by IDPH as a waiver of any right to confidentiality which the applicant may have had.

1.26 Copyrights

By submitting a proposal, the applicant agrees that IDPH may copy the proposal for the purpose of facilitating the evaluation of the proposal or to respond to requests for public records. By submitting the proposal, the applicant consents to such copying and warrants and represents that such copying will not violate the rights of any third party. IDPH shall have the right to use ideas or adaptations of ideas that are presented in the proposals. In the event the applicant copyrights its proposal, the department may reject the proposal as noncompliant.

1.27 Appeal of Award Decision

The posting of the Notice of Intent to Award on the IDPH Web page constitutes receipt of notification of the adverse decision per 641Iowa Administrative Code Chapter 176.8(1). Applicants may appeal the adverse award decision by filing a written appeal to IDPH within 10 working days of posting of the Notice of Intent to Award in accordance with 641Iowa Administrative Code Chapter 176.8(1). Appeals shall be submitted in writing, return receipt requested, to John McMullen, Contract Administrator, Division of Administration and Professional Licensure, Iowa Department of Public Health, Lucas State Office Building, Des Moines, Iowa 50319-0075. Appeals must clearly and fully identify all issues being contested and demonstrate what procedures in the proposal were not followed. In the event of an appeal, the Department will continue working with the successful applicant pending the outcome of the appeal.

1.28 Definition of Contract

The full execution of a written contract by both parties shall constitute the making of a contract for services and no applicant shall acquire any legal or equitable rights relative to the contract until the contract has been fully executed by the successful applicant and the IDPH.

1.29 Construction of RFP

This RFP shall be construed in light of pertinent legal requirements and the laws of the State of Iowa. Changes in applicable statutes and rules may affect the award process or the resulting contract. Applicants are responsible for ascertaining the relevant legal requirements.

SECTION 2 – DESCRIPTION OF SERVICES

2.01 Description of Work and Services

Each agency shall offer targeted HIV CTR services to high-risk individuals and persons from disproportionately impacted populations as defined below. In addition, agencies may opt to provide HCV CTR services and/or immunizations for hepatitis A and B to persons at risk, as defined below. Each agency shall perform and maintain compliance with the program requirements and performance measures specific to the services for which it has applied, as described below.

High-risk individuals are defined as:

- Persons who have unprotected sex and/or share injection equipment with HIV-positive persons;
- Males who have unprotected sex with other males;
- Persons who exchange sex for money, drugs, or things they need;
- Females who have unprotected sex with bisexual males;
- Persons who have unprotected sex with an injecting drug user or someone who exchanges sex for money, drugs, or things they need;
- Persons who were diagnosed with an STD within the last year; and
- Persons who have ever shared contaminated drug injection equipment.

Disproportionately impacted populations (i.e., those populations with higher rates of HIV diagnoses) are defined as:

- African American/Black persons; and
- Hispanic/Latino (a) persons.

Because individuals at high risk for HIV are also at risk for viral hepatitis, applicants have the option to provide the following services to specific high-risk individuals:

- Hepatitis C counseling and testing; and/or
- Hepatitis A and B immunizations.

High-risk individuals who should be offered HCV testing include:

- Persons who have ever injected drugs;
- Injection drug users who share needles or other equipment;
- Persons who received blood, blood products, or organ transplants prior to 1992; and
- Persons ever on long-term hemodialysis.

High-risk adults who should be offered hepatitis A and B immunizations include:

- Injection and non-injection drug users;
- Men who have sex with men;
- Persons with an STD diagnosis within the past 12 months;
- HIV and/or HCV-infected persons; and
- Sexual partners of persons infected with HIV, hepatitis A (HAV), and/or hepatitis B (HBV).

HIV CTR Requirements

Service Delivery/Documentation

1. Provide HIV antibody testing to individuals and populations described above.
2. Ensure that HIV testing does not include individuals who are seeking HIV status verification for reasons such as immigration status, adoption, travel, job, insurance, etc.
3. Submit accurate and complete client-level testing data through EvaluationWeb within three business days of the service.

Hepatitis CTR Requirements (only if agency offers HCV testing and counseling)

Service Delivery/Documentation

1. Provide HCV antibody testing to individuals described above.
2. Develop and implement written procedures detailing how hepatitis C-antibody-positive clients will be referred for follow-up confirmatory testing to determine whether treatment is needed.
3. Submit accurate and complete client-level testing data through EvaluationWeb within three business days of the service.

Hepatitis A and B Immunization Requirements (only if agency offers hepatitis A and B immunizations)

Service Delivery/Documentation

1. Comply with the CDC recommendations for vaccine administration and for handling and storage of hepatitis A and hepatitis B vaccine. Refer to http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6002a1.htm?s_cid=rr6002a1_e or the *Epidemiology and Prevention of Vaccine-Preventable Diseases, 12th Edition*, at <http://bookstore.pfh.org>.
2. Enroll in the Vaccines for Children Program at the Iowa Department of Public Health for vaccine inventory management.
3. Conduct reminder/recall for persons who receive the first dose of hepatitis A, hepatitis B, or combination vaccine. Maintain a log of the number of reminder/recalls sent.
4. Submit accurate and complete client immunization data through EvaluationWeb within three business days of the service.
5. Submit accurate and complete immunization client data through the Immunization Registry Information System (IRIS) within two weeks of the service.

Counseling, Testing, and Referral General Requirements (all agencies)

1. Provide CTR services that are accessible to aforementioned populations using plans for targeted marketing, extended clinic hours, outreach, or a combination of these, with a particular emphasis on MSM.

2. Services must promote knowledge of HIV, viral hepatitis, and STD risks and modes of transmission to high-risk individuals and disproportionately impacted populations.
3. Obtain rapid HIV test kits from the IDPH and conventional HIV test supplies from the State Hygienic Laboratory (SHL).
4. Provide education, client-centered counseling, testing services, and referrals. Required components of individual-level interactions with clients **must** include:
 - HIV, hepatitis, and STD basic education;
 - Behavioral risk assessment;
 - HIV testing, if appropriate;
 - HCV testing or referral, if appropriate;
 - Immunizations for hepatitis A and B or referral, if appropriate;
 - Supported referral for clients testing HIV-positive for HIV Partner Services and documentation of receipt of services;
 - Supported referral to medical care for clients testing HIV-positive and documentation of the attendance of the first medical appointment;
 - On-site services or referrals for follow-up HCV testing (for HCV-antibody positive persons), STD and TB testing, substance abuse treatment, and mental health services; and
 - Provision of free condoms.
5. Submit all conventional and confirmatory HIV and HCV test samples to the SHL for processing.
6. Develop and implement written procedures detailing how clients will be referred to the following:
 - prevention services;
 - partner services;
 - medical care for HIV infection and/or STDs;
 - follow-up testing for positive hepatitis C screening tests;
 - substance abuse treatment programs;
 - mental health services; and
 - domestic violence and sexual assault interventions.
7. Develop and implement written procedures detailing how CTR referrals and linkages will be confirmed, including:
 - prevention services;
 - partner services;
 - medical care for HIV infection and/or STDs;
 - follow-up testing for positive hepatitis C screening tests;
 - substance abuse treatment programs;

- mental health services; and
- domestic violence and sexual assault interventions.

Quality Assurance Requirements

1. Ensure the use of standard IDPH HIV/HCV testing forms (i.e., Release of Information, Iowa CTR Risk Assessment Form).
2. Maintain accurate and confidential client records and data systems. Compliance with all applicable regulations of Iowa Code 141A is required.
3. Participate in data collection, evaluation, and training activities sponsored by the IDPH, Bureau of HIV, STD, and Hepatitis. IDPH reserves the right to alter the nature and quantity of its reporting, meeting, and training requirements.
4. Ensure that all clinical staff performing HIV and hepatitis prevention counseling attends IDPH's *Fundamentals of HIV Prevention Counseling* training.
5. Participate in IDPH quality assurance activities (consistent with state and federal regulations) including, but not limited to, scheduled and unscheduled site visits, and review of agency records.
6. Submit narrative progress reports quarterly or upon request through EvaluationWeb. These reports must contain detailed information that addresses the program's progress toward meeting goals and objectives.
7. Ensure data reporting system requirements are met. The IDPH uses the EvaluationWeb system for CTR reporting.

System Requirements:

EvaluationWeb 4.0 requires that computers:

- Be connected to the Internet (preferably with a high-speed connection);
- Utilize one of the following Internet browsers: Internet Explorer (version 7.0 or higher), Firefox/Mozilla (version 4.0 or higher), Google Chrome, Safari (version 5.0 or higher), or Opera 11.
- Have Adobe Macromedia Flash Player version 11.0 or higher installed; and
- Have a minimum screen resolution of 800 by 600.

NOTE: For Windows users, computers must be running Windows 7, XP, or Vista. For Macintosh users, computers must have Mac OS X version 10.6 or 10.7.

8. Submit educational materials to IDPH for review as required in 57 Federal Register 26742. In accordance with federal regulations, all materials used in HIV prevention contracts through IDPH are subject to review by the HIV Prevention Program Materials Review Committee at IDPH. Some materials may be exempt from review (e.g., event flyers/posters and materials pre-approved by the CDC). The Materials Review Coordinator shall make a decision regarding possible exemption, after discussion with an agency representative. Examples of materials that need to be submitted by agencies are written materials (e.g., pamphlets, brochures, and Web-based written

materials), pictorials (e.g., posters and similar educational materials using photographs, slides, drawings, or paintings), audiovisuals (e.g., videos), survey instruments, and educational sessions (curricula).

9. Provide a Web page notice (see below) when the applicant's Web site: (1) is funded in whole or part with CDC funds and contains HIV/AIDS education information subject to the CDC Program Review guidelines, or (2) contains HIV/AIDS educational information subject to the CDC Program Review guidelines, even if the Web site itself is not funded by CDC. Examples of language for use by CDC grantees on website(s) containing HIV/AIDS content are*:
 - a. "This site contains HIV prevention messages that may not be appropriate for all audiences."
 - b. "This site contains HIV prevention messages that may not be appropriate for all audiences. If you are not seeking such information or may be offended by such materials, please exit this website."
 - c. "This site contains HIV prevention messages that may not be appropriate for all audiences. Since HIV infection is spread primarily through sexual practices or by sharing needles, prevention messages and programs may address these topics. If you are not seeking such information or may be offended by such materials, please exit this website."
 - d. "Since HIV is spread primarily through sexual practices or by sharing needles, prevention messages on this site may address these topics. HIV prevention materials funded by CDC must be approved by local program review panels. However, the materials may be considered controversial by some viewers."

* This language may be customized based on the content of the website.

NOTE: This Notice should be displayed prominently on the Web site or applicable web page(s) that are most likely to be encountered by viewers of the HIV/AIDS content. This could be the site's homepage, other high-level entry pages, portal pages most commonly used to navigate or find the HIV/AIDS-related content. An alternative to displaying the notice in its entirety on the main page is to instead display a link that reads "HIV/AIDS Content Notice," which would take the user to a separate web page displaying the HIV/AIDS content notice in its entirety.

10. All agencies must ensure that qualified staff is employed to:
 - a. Supervise administrative staff and all staff offering direct service to clients;
 - b. Provide HIV CTR services;
 - c. Enter data into EvaluationWeb; and
 - d. Perform phlebotomy for HIV confirmatory testing and HCV testing.

For agencies providing adult hepatitis A and B immunization services, additional requirements include:

- a. Complete immunization reminder/recall reports;
- b. Enter data into EvaluationWeb and IRIS; and

- c. Conduct immunization inventory management activities.

2.02 Objectives

All contractors are required to achieve the following program expectations, which will be assessed through submitted counseling and testing data:

HIV CTR

1. Demonstrate that at least 90 percent of all persons tested for HIV are high-risk individuals or members of disproportionately impacted populations, as defined in Section 1.01.
2. Demonstrate that at least 95 percent of clients tested for HIV receive their test results and a post-test counseling session.
3. Demonstrate that 100 percent of HIV-positive clients identified by the agency are notified of their test results.
4. Demonstrate that 95% of persons who receive their positive test results are referred and linked to Partner Services.
5. Demonstrate that 100 percent of HIV-positive clients are referred to follow-up medical care.
6. Demonstrate that 95 percent of HIV-positive clients attend their first medical appointment within 90 days.

Contractors providing or subcontracting for hepatitis C testing are required to achieve the following program expectations:

HCV CTR

1. Demonstrate that 100 percent of all persons tested for HCV are individuals who have engaged in behaviors that put them at risk for acquiring HCV, as defined in Section 1.01.
2. Demonstrate that 85 percent of hepatitis C clients with a positive EIA screening test are referred for follow-up (i.e., viral) testing to determine the need for treatment.
3. Demonstrate that at least 85 percent of clients tested for HCV receive their test results and a post-test counseling session.

HEPATITIS A & B IMMUNIZATIONS

1. Demonstrate that 90 percent of vaccinations administered (or referred to a provider of this service) will be to clients at risk for Hepatitis A and /or B (as defined in Section 1.01) and who have not already received a complete vaccination series.

2.03 Staffing or Personnel Requirements

1. Staff delivering any of the components funded under this RFP must have basic information about HIV/HCV infection and HIV/HCV testing including:
 - Benefits of testing;

- Behaviors that transmit HIV/HCV;
 - Information about HIV/HCV treatments;
 - How HIV/HCV can be prevented;
 - The principles and practices of harm reduction;
 - Current testing technology;
 - Procedure if client receives a positive test (e.g., provide confirmatory or subsequent testing, introduction to partner services, linkage to care);
 - Cultural awareness of issues related to race/ethnicity, sex/gender, and sexual orientation;
 - Legal and ethical considerations surrounding confidentiality and disclosure of HIV status and related medical information; and
 - A range of local service referral options, including partner services, referral to medical care for those testing HIV positive, STD testing and treatment, hepatitis C counseling and testing, viral hepatitis immunization, substance abuse treatment, domestic violence and sexual assault interventions, and mental health services.
2. Offer supervision to administrative staff and staff offering counseling, testing, and referral activities to clients as deemed appropriate by the agency.
 3. Perform phlebotomy or administer hepatitis A and B immunizations, if applicable.
 4. Report vacant positions to IDPH within 30 days. Failures to recruit, train, and retain staff with sufficient skills and professional preparation may result in loss of contract funds.

2.04 Budget

Specifications and instructions for completing CTR and Immunization Budgets and Budget Justifications can be found on **Attachments G through J**.

2.05 Required Reporting

Reports listed below, as well as the due date and method of submission, are subject to change at the sole discretion of IDPH.

As described in Section 2.01, the following reporting is required:

1. Submit accurate and complete client testing data through EvaluationWeb within three business days of the service.
2. Submit accurate and complete client immunization data through EvaluationWeb within three business days of the service.
3. Submit accurate and complete immunization client data through the Immunization Registry Information System (IRIS) within two (2) weeks of the service.
4. Submit narrative progress reports quarterly or upon request through EvaluationWeb. These reports must contain detailed information that addresses the program's progress toward meeting goals and objectives.

Program Reports

The Contractor shall prepare the following reports on templates provided by the Department in the Contractor’s SharePoint Service Contract Site.

Claim Voucher	2 Original	Monthly by the 20 th
Expenditure Report	2 Original	Monthly by the 20 th
<p>COUNSELING, TESTING & REFERRAL/ HEPATITIS IMMUNIZATION</p> <p>HIV <u>test administered</u> Client Level CTR Risk Assessment Data (via EvaluationWeb system)</p> <p><u>test NOT administered</u> Client Level CTR Risk Assessment Data (via EvaluationWeb system)</p> <p>Hepatitis C <u>test administered</u> Client Level CTR Risk Assessment Data (via EvaluationWeb system)</p> <p><u>test NOT administered</u> Client Level CTR Risk Assessment Data (via EvaluationWeb system)</p> <p>Immunizations <u>Hepatitis A & B</u> Client Level Immunization Data (via EvaluationWeb system)</p> <p>Client Level Immunization Data (via IRIS)</p> <p>2013 Rapid Testing QA Report</p> <p>2013 CTR & Hepatitis Reports Narrative Progress Reports (via EvaluationWeb system) First Quarter Second Quarter Third Quarter Fourth Quarter Year End</p>		<p>3 business days after test was administered</p> <p>Monthly, by the 10th</p> <p>3 business days after test was administered</p> <p>Monthly, by the 10th</p> <p>3 business days after immunizations was administered (EvaluationWeb)</p> <p>2 weeks after immunization was administered (IRIS)</p> <p>Monthly, by the 10th</p> <p>April 15, 2013 July 15, 2013 October 15, 2013 January 23, 2014 January 23, 2014</p>

Expense Reports:

The Contractor shall prepare a monthly expense report in the Electronic Expenditure Workbook (EEW) located in the document library.

Expense Report	Date Due
Monthly Electronic Expenditure Workbook (EEW)	Submit expenses within 45 days of month of expenditure

SECTION 3 -- PROPOSAL FORMAT AND CONTENT

These instructions prescribe the format and content of the proposal and are designed to facilitate the submission of a proposal that is easy to understand, review, and evaluate.

3.01 Technical Requirements

A. Applications must be submitted in a single zipped file or single PDF file format and emailed per the instructions outlined in section 1.05 E.

B. Applications must be typewritten and follow the format delineated herein.

Aspect	Requirement
Format	Documents must be created in MS Office Word or Excel. MS Office 97-2003 format is the minimum product accepted.
Length	There is no page limit for the narrative sections.
Font size	Applications must be in a minimum of 12 point font. A smaller font may be used for tables, figures or maps.
Margins	Must be a minimum of one inch on all sides.
Spacing	May be single- or double-spaced.
Header or Footer and Pagination	Insert a header or footer that identifies the applicant name and document page number. All pages are to be sequentially numbered (1, 2, 3...) at the bottom or top of each page, including the cover page, maps, charts, budget pages, tables, and appendices or attachments; and beginning with the cover page as number one. If applicant is submitting an audit report (if required from section 3.04), this audit appendix does not need to be included in the sequentially numbered appendices.
Signatures on Cover Page	The cover page (page 1 of Attachment A) must be complete and contain an electronic signature by an individual authorized to obligate the applicant agency.
Minority Impact Statement	The minority impact statement must be complete and contain an electronic signature by an individual authorized by the applicant agency.
Application content	Failure to adhere to prescribed instructions, technical requirements, format, or application content may result in disqualification (rejection) of the application.

C. Do not submit promotional materials. Promotional materials or items other than required by this RFP will not be considered during the review process.

D. Any information or materials submitted separately from the application will not be considered in the review process.

3.02 Proposal Content

A. Cover Page: Identifies the applicant's legal name, federal identification number, and key contact information for the project. Complete required form-**Attachment A** following these instructions:

- Applicant - Provide the legal name of the applicant entity. This must be the entity associated with the Federal Identification (ID) number per the Internal Revenue Service (IRS). If the entity operates under another name as a "d/b/a" (doing business as), please include that in the legal name. Provide the applicants federal identification number. Provide the applicant's address, telephone and FAX number as requested in the first section of Attachment A.
- Total Funds Requested – Indicate the total amount of funds requested for HIV services and hepatitis services, not to exceed the amounts outlined in section 1.05.
- Conditions/Signature – The person authorized to execute legal documents on behalf of the entity must date and insert an electronic signature to certify that the applicant is in agreement with the conditions listed.
- Key Personnel for this Proposal – Provide information for agency personnel associated with this proposal. Include the information in the table provided on page 2 of the Cover Page (Attachment A). Describe the executive, management, technical, and professional staff who would perform duties related to this project. Include the number of staff, their roles, and their expertise and experience in providing these types of services. Provide evidence for any necessary applicable professional licenses required by law by listing the license number associated with the professional personnel. Provide contact information for each of the following personnel on Attachment A:
 - Executive Director: Name, email address, and phone number – Complete and provide the name of the person who has overall responsibility and authority for administering the program in which the entity is applying for the funds.
 - Program Administrator: Name, email address, and phone number – Complete the table by providing the name of the individual with direct day-to-day responsibility for this program and the person that the department can contact concerning the applications.
 - Fiscal Director: Name, email address, and phone number – Complete the table by providing the name of the individual with overall responsibility and authority for financial management for this program.
 - Key Personnel: Names, email addresses, and phone numbers – Complete **Table 1** by providing the names of the individual(s) responsible for activities listed.

B. Minority Impact Statement: Identifies the applicant's potential impact of the project's proposed programs or policies on minority groups. Complete required form – **Attachment B** following these instructions:

- Applicants must independently complete the “Minority Impact Statement” form by checking the box that most accurately reflects the proposed project programs or policies impact on minority persons.
- Describe the rationale or evidence for your choice in a brief narrative, as well as identifying the specific minority groups in which there is a positive or negative impact (if applicable) on the checklist.
- Insert an electronic signature of a person authorized to execute legal documents on behalf of the entity and return it with the proposal.

C. Applicant Narrative: Applicant’s Background, Demonstrated Experience, Community Partnerships and Program Data. In narrative format, using **Attachment C**, applicant shall describe each of the items listed below:

1. Background & Need:

- Describe the populations currently served by the agency.
- Identify existing HIV testing, prevention, and treatment resources in the community and discuss gaps in services.
- Identify existing hepatitis testing, treatment, and immunizations resources in the community and discuss gaps in services.

2. Demonstrated Experience

- Discuss the agency’s experiences providing HIV services.
- Discuss the agency’s experiences providing hepatitis services.

3. Progress Summary: To be completed only by agencies who are currently providing or have previously provided CTR Services.

- Discuss the agency’s positivity rate over the last three years.
- Describe the agency’s protocols for and history of “linkage to care” services.
- Use data to demonstrate the agency’s progress toward annual testing and immunization goals.
- Use data to demonstrate the agency’s capacity to reach high-risk and disproportionately impacted populations.
- Address areas in need of improvement.

4. Program Data: To be completed only by applicants who have never provided HIV CTR, HCV CTR, and/or hepatitis A & B immunization services under this grant.

- Discuss the collection and entry of the agency’s current programmatic data.
- Discuss how data are used for program development and improvement.
- Describe the agency’s plans for “linkage to care” services.

5. Condom Distribution and Community Partnerships:

- Describe plans for distributing condoms to priority populations.
- Identify any established partnership relationships with the community.

D. Work Plan or Action Plan. Using the forms provided in **Attachments D and E**, applicants shall complete each of the following elements of the FY2013 Work Plan:

1. Developing Goals and Objectives (**Attachment D**).
2. Reaching Priority Populations (**Attachment E**).

E. Office Locations and Services. Identify and specify the location (s) of the applicant's offices or other facilities involved in provision of services under this proposal. Complete the Service Delivery Table (**Attachment F**), which outlines all of the agency's offices (including addresses) and the services provided.

3.03 Budget

Instructions for Completing Budget Sheets

The budget worksheets (**Attachments G through J**) are interactive Excel documents with pre-populated cells and are available electronically from the IDPH website. (See *Grants, Bids, & Proposals* at <http://www.idph.state.ia.us/>.) These worksheets must be completed and submitted with the application.

BUDGET SUMMARY (Attachment G)

The Budget Summary integrates the total costs of each proposed program (HIV CTR, HCV CTR, and/or Hepatitis A & B Immunizations) in one table. This worksheet is linked to spreadsheets for HIV CTR, HCV CTR, and Hepatitis Immunization. Cells are pre-populated. Summary sheet totals will calculate and be entered as each individual budget sheet is completed.

HIV CTR SERVICES (Attachment H)

Break down the total amount requested for each of the three major areas listed (Personnel, Non-Personnel, and Subcontracts). These are estimates of where funds will be spent.

- PERSONNEL
 - *Name, Title:* Provide the name and title for each individual employed by the agency who will work directly on the proposed project (e.g., M. Smith, RN; T. Peters, clerk; F. Gonzales, Program Director).
 - *Unit Costs & Quantities:* For each employee listed, include an approximate cost of wages. In the **Budget Justification** column, include the formula used to calculate these figures. There are three ways to do this:
 - Hourly Wage: For employees earning an hourly wage, estimate the total number of hours they will spend **working directly on the funded project** during FY2013. The Excel worksheet will automatically multiply the hourly wage entered x the number of hours identified.

Example: Jane Jackson earns \$12.50/hour.

She will spend approximately 2 hours/week on the project.
She will likely work 48 weeks in a year.
Therefore: $2 \times 48 = 96$ hours

Enter **12.50** in Unit Cost.

Enter **96** in Quantity.

Total Personnel request for Jane Jackson (12.50×96) = **\$1,200.00**

- Yearly Salary-Hourly Wage: For employees earning a yearly salary, calculate an hourly wage based on *salary* divided by (\div) estimated hours spent **working directly on the funded project**. Next, follow directions for hourly wage.

Salary-Hourly Wage

Example: Jane Jackson earns \$34,500/year.

She works 40 hours/week.

Her salary spans 48 weeks/year.

Therefore, her salary covers (40×48) = 1,920 hours.

Jane's estimated hourly wage ($34,500 \div 1,920$) = \$17.97/hr.

- Yearly Salary-FTE: For employees earning a yearly salary, calculate an FTE using the number of hours they will work directly on the project \div the number of hours considered full time. Then multiply the yearly salary \times FTE.

Salary-FTE

Example: Jane Jackson earns \$34,500/year.

A full-time work week is considered 40 hours.

Jane will spend approximately 2 hours/week **on the project**.

FTE = # of hours worked \div # of hours considered full-time.

Jane's FTE for the project ($2 \div 40$) = .05.

Enter **34,500** in the Unit Cost column.

Enter **.05** in the Quantity Column.

Total personnel estimation for Jane ($34,500 \times .05$) = **\$1,725.00**.

- Total Salaries: The figures listed in the Total Cost column will automatically create a sum in *Total Salaries*.
 - Employee Benefits/Fringe: This is a calculated percentage of employee wages and may include FICA, retirement, insurance, workers compensation, etc. In the **Budget Justification** column describe how the Unit Costs and Quantities for this item were estimated.
 - Total Salaries and Benefits: The figures listed in *Total Salaries* and *Employee Benefits/Fringe* will automatically calculate into this cell.
- NON-PERSONNEL

- Training & Travel: Training may include registration fees to attend outside training or the costs of materials to provide in-house staff training. **Be sure to include estimations for one IDPH-sponsored, two-day training in Des Moines.** Travel may include transportation to and from training, outreach events, and particular efforts to address accessibility of services. These costs may be calculated based on limits established by the Iowa Department of Administrative Services, State Accounting Enterprise:
 - Mileage reimbursement
 - Mileage reimbursement rate (e.g., \$0.39/mile)
 - Estimate total miles traveled (e.g., 40 miles)
 - Multiply reimbursement rate x total miles ($0.39 \times 40 = \$15.60$)
 - Do this for all travel and enter the sum.
 - Per diem
 - Estimated per diem expenses (include lodging). The state allows \$83.00 plus tax per night for lodging. The allowable food expenses are breakfast - \$8.00; lunch - \$12.00; and dinner - \$23.00.
 - Consider number of days and meals required
2 days of travel; 1 night of lodging
 - 1 night lodging = \$83
 - 1 breakfast, 2 lunches, & 1 dinner = \$55
 - Per diem figure = $(\$83 + \$55) = \$138$
 - Do this for all travel and enter the sum.
 - Training and Travel *Unit Cost*
 - Add total estimates for training costs + total estimated travel costs and enter this number in the *Unit Cost* column. This number will automatically populate into the *Total Cost* cell.
 - Enter the details regarding training and travel in the **Budget Justification** column. (What training will be attended/ provided? How many individuals will participate? What does travel include and to what purpose?) Include specific calculations.
- Supplies: Estimate the costs of supplies expected. This may include printing costs, administrative materials, procedure manuals, and other supply costs. **Each agency must include a budget allowance for condom distribution.** Enter the specific supplies purchased and their individual costs in the **Budget Justification** column.
- Total Non-Personnel Costs will automatically be calculated.

- SUBCONTRACTS

Contractual/subcontracts:

The applicant is permitted to subcontract for the performance of certain services. Refer to Section 1.17 of RFP #58813005 and Section 5 of the IDPH General Conditions for subcontract provisions and requirements. If services performed for any activities outlined in this RFP are to be subcontracted, the applicant must include a description of subcontractor,

scope of work to be performed by each subcontractor, subcontractor qualifications, and estimated dollar amount of each subcontract.

NOTE: Expenses to be paid to a subcontractor must be outlined in an agreement, contract or MOU/MOA. If the contract will be >\$2000, it must be reviewed and approved by IDPH prior to execution.

- Enter the names of each Subcontractor in the cells provided.
- Personnel: Using the same principles as indicated in the original Personnel section, calculate costs of subcontracted personnel for each agency.
- Training and Travel & Supplies: Use the same methods as listed in the original Non-Personnel section.
- For each area, describe details of calculations in the **Budget Justification** column.
- Total Subcontracts will automatically be calculated.
- SUBTOTAL
 - Total figures from each section will automatically calculate.
- ADMINISTRATIVE COSTS OR FEDERALLY APPROVED INDIRECT RATE

If the applicant plans to charge administrative or indirect costs, this must be identified in the application. If the applicant charges indirect costs, a copy of the current, signed federally approved indirect cost rate agreement must be submitted with the application materials.

 - The agency may charge an indirect rate in accordance with a federally approved Indirect Cost Rate Agreement. **The agreement MUST be attached.** IDPH reserves the right to negotiate the application of the Indirect Rate per individual contract.
 - In the absence of a federally approved Indirect Cost Rate Agreement, the agency may charge an Administrative Cost not to exceed a maximum rate of 15% of the total contractual amount.
 - Administrative costs are those that are incurred for common or joint objectives, and therefore cannot be identified readily and specifically with a sponsored program, but are nevertheless necessary to the operations of the organization. For example, the costs of operating and maintaining facilities, depreciation and administrative salaries are generally treated as indirect costs.
 - The contractor shall maintain documentation to support the administrative cost allocation. IDPH reserves the right to request the documentation at any time.
 - Briefly describe the methods of calculation in the **Budget Justification** column.
- GRAND TOTAL

- The *Subtotal* and any *Indirect Costs* will automatically be calculated into a Grand Total.

HCV CTR (Attachment I) and HEPATITIS A & B IMMUNIZATIONS (Attachment J)

Hepatitis funds will be allocated based upon the hepatitis services delivered (i.e., an applicant will be reimbursed for each HCV test or immunization administered). The reimbursement schedule is as follows:

- HCV test - \$35
- Hepatitis A and B vaccine - \$20/dose; \$60 series.

The HCV CTR and Hepatitis A and B Immunizations budgets shall include the following elements (if applicable):

- Estimated number of HCV tests administered
- Estimated number of Hepatitis A and B vaccines doses administered
- Other
 - Supplies
Supplies (directly related to planning, organizing, and conducting of hepatitis services described in this RFP) may include testing and vaccine supplies, phone, postage, copying, and printing.

3.04 Business Organization Information

A Business Organization Form must be fully completed and up-to-date within the contractor's SharePoint Service Contract site.

If the applicant is a current contractor with IDPH and already has access to the IDPH Service Contract SharePoint system, then the applicant is responsible to verify the information included in the Business Organization form is **current and uploaded** in their respective Business Organization folder within their SharePoint Service Contract site. If any updates are needed to the Business Organization Form or supporting information, the applicant must complete these prior to proposal submission. **Applicant shall provide a statement in the proposal that the Business Organization form has been reviewed and is accurate.**

If the applicant is a **new** potential contractor with IDPH and does not currently have access to the IDPH Service Contract SharePoint system, then the Business Organization Form (**Attachment L**) and any supporting information required in this section shall be electronically attached in a PDF as a Business Organization Appendix to the proposal being submitted.

Follow these instructions to complete the Business Organization Form (**Attachment L**) as necessary:

Item	Field	Description
	Agency Name	Provide the name of the agency applying.
	Date	Provide the date the form is completed.
Structure		Identify and describe the legal structure of the applicant. (e.g., corporation, 501(c)3, county government).
	Evidence of authorization to do business in Iowa	Check the type of organization of the applicant agency. If the agency marks "Other"; then the applicant must be currently registered with the Iowa Secretary of State's office to do business in Iowa or agrees to register if applicant is awarded a contract.
Organization History	History	Provide a brief history of the agency.
	Mission Statement	Include the agency's mission statement.
	Vision Statement	Include the agency's vision statement.
Table of Organization	Is there a <u>current</u> table of organization uploaded in the SharePoint Business Organization document library?	In "no", include a table of organization for the applicant agency as part of the proposal appendices.
Disclosure of Litigation	Is there any litigation, administrative, or regulatory proceedings pending or threatened against your agency or subcontractor?	Answer "no" or "yes" as to whether the applicant has any pending or threatened litigation, administrative or regulatory proceedings or similar matters which could affect the applicant's ability to perform required services. If "yes", list and summarize any pending or threatened litigation, administrative, or regulatory proceedings or similar matters which could affect the applicant's ability to perform required services.
Disclosure of Contract Default	Has your agency or a subcontractor defaulted on a contract?	Answer "no" or "yes" as to whether the applicant or any subcontractor identified within the proposal has defaulted on a contract within the preceding three years. If "yes", list all applicable contracts and subcontracts, including the name(s) of a contact person and phone number for the other party(s) holding the contract defaulted upon, and provide a brief description of the

		incident(s). Add rows if needed.
Disclosure of Contract Termination	Has your agency or subcontractor terminated a contract?	<p>Answer “no” or “yes” as to whether the applicant or any subcontractor identified within the proposal has terminated a contract with another party prior to its full term within the preceding three years.</p> <p>If “yes”, list all applicable contracts and subcontracts, the name(s) of a contact person and phone number for the other party(s) holding the contract that was terminated, and provide a brief description of the incident. Add rows if needed.</p>
	Has your agency or a subcontractor had a contract terminated?	<p>Answer “no” or “yes” as to whether the applicant or any subcontractor identified within the proposal has had a contract terminated by another party prior to its full term within the preceding three years.</p> <p>If “yes”, list all applicable contracts and subcontracts, the name(s) of a contact person and phone number for the other party(s) that terminated the contract, and provide a brief description of the incident. Add rows if needed.</p>
Audited financial statement	<p>1. Does the agency currently hold a contract with IDPH?</p> <p>2. Has the agency submitted audit reports (or operating statement if non-profit organization) to IDPH for the preceding three year period?</p>	<p>Check “yes” or “no” regarding whether the applicant agency currently holds a contract with IDPH. If “yes”, go to #2. If “no”, go to #3.</p> <p>Check “yes” or “no” regarding whether the applicant agency has previously submitted audit reports (or operating statement if applicant is nonprofit corporation) for the preceding three year period.</p> <p>If “yes”, no additional information is needed. Any applicant agency that currently holds a contract with the department and has previously submitted a current audit report need not submit a copy with this proposal.</p> <p>If “no”, go to #3.</p>

	<p>3. Does the agency need to submit an audited financial statement with this proposal?</p>	<p>If the agency responds “no” to either #1 or #2, then yes, the agency must provide an audited financial statement for the preceding three year period within the proposal appendices.</p> <p>Nonprofit corporations whose previous funding level has not required an audited financial statement must submit a year-end operating statement and balance sheet for the preceding three year period and a current operating statement in lieu thereof.</p>
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3.05 Litigation or Investigation

The applicant shall list and summarize pending or threatened litigation, administrative, or regulatory proceedings or similar matters which could affect the ability of the applicant to perform the required services. Failure to disclose such matters may result in rejection of the proposal or in termination of any subsequent contract. This is a continuing disclosure requirement. Any such matter commencing after submission of a proposal must be disclosed in a timely manner in a written statement to the IDPH.

3.06 Proposal Checklist

Applicant is not required to submit a checklist with the proposal. Refer to **Attachment K** for the list of items which must be included in the proposal.

SECTION 4 – PROPOSAL REVIEW PROCESS AND CRITERIA

4.01 Overview of Review Process

Review/evaluation of proposals submitted under this RFP will be conducted in three phases.

Phase I -- Technical Review: The first phase will involve a preliminary review by the IDPH staff of an applicant's compliance with the mandatory requirements, including technical requirements (section 3.01) and proposal content (section 3.02), for submitted proposals. Proposals which fail to satisfy technical requirements or proposal content may be eliminated from the proposal review. These proposals may be rejected and will not be returned to the applicant. IDPH will notify the applicant of a rejection that occurs during Phase I of the review process. The IDPH reserves the right to waive minor variances at the sole discretion of the IDPH.

Phase II – Review Committee: Proposals determined to be compliant with technical requirements and proposal content will be accepted for the second phase of evaluation, which shall be completed by a review committee or committees established by the IDPH. The membership of the review committee(s) shall be determined by the bureau chief with input and oversight from the respective division director. The review committee(s) shall evaluate proposals in accordance with a point system. Each committee member will review the proposals and the evaluation criteria outlined in this chapter and assign a point total for each criterion. If an applicant is requested to make an oral presentation of the proposal pursuant to RFP Section 1.14, the committee members may consider the oral presentation of the applicant in determining the points awarded.

The total score awarded by each committee member will be averaged to arrive at the final score (rounded to the nearest whole number) for each proposal and the proposals will then be ranked based on the average of the evaluation scores. IDPH staff may solicit additional input and recommendations from the review committee(s).

In the event competitive proposals receive an equal number of points, two division directors and the respective bureau chief administering the program may conduct a second review utilizing the same scoring process.

Phase III -- IDPH Review and Award: The third phase will be a final review. The IDPH will consider the submitted proposals and the review committee's scores and recommendations.

The IDPH may also consider geographical distribution, budget information, any information received pursuant to Sections 1.18 - 1.22 of the RFP, and any other information received pursuant to the procurement process. IDPH reserves the right not to award the contract to the applicant with the highest point average.

4.02 Scoring of Proposals

A maximum of **100** points may be awarded to each proposal. A minimum average score of **60** or greater is required for the proposal to be considered for funding. Proposals scoring less than the minimum average score will be rejected.

Accepted proposals will be evaluated using a point-based review tool (See **Appendix IV**).

Points will be assigned for each item listed as follows:

- 5 Applicant's responses exceeded the minimum SCORE 3 expectations in 3 or more areas defined in the scoring tool.
- 4 Applicant's responses exceeded the minimum SCORE 3 expectations in 1-2 areas defined in the scoring tool.
- 3 Applicant's responses met the minimum SCORE 3 expectations—no more and no less—defined in the scoring tool.
- 2 Applicant's responses fell short of the minimum SCORE 3 expectations in 1-2 areas defined in the scoring tool.
- 1 Applicant's responses fell short of the minimum SCORE 3 expectations in 3 or more areas defined in the scoring tool.
- 0 The applicant did not respond to a required question or section.

The maximum points to be awarded for each proposal section are as follows:

Proposal Component	Weight	Potential Maximum Score
Cover Page	--	REQUIRED
Key Personnel	--	REQUIRED
Minority Impact Statement	--	REQUIRED
Applicant Narrative (Background & Demonstrated Experience)	8	40
Goals & Objectives	4	20
Reaching Priority Populations	6	30
Service Delivery Table	--	REQUIRED
Budget & Budget Justification Narrative	2	10
W-9 Form (for new contractors)	--	REQUIRED
Business Organization Form or Statement	--	REQUIRED
Litigation or Investigation Disclosure	--	REQUIRED
Proposal Checklist	--	REQUIRED
		100

SECTION 5 – CONTRACT

5.01 Conditions

Any contract awarded by the IDPH shall include specific contract provisions and the IDPH General Conditions effective October 1, 2009 as posted on the IDPH Web page www.idph.state.ia.us under *Funding Opportunities link*. Refer to **Appendix I** for the Draft Contract Template. The Draft Contract Template included is for reference only and is subject to change at the sole discretion of IDPH.

The contract terms contained in the general conditions are not intended to be a complete listing of all contract terms, but are provided only to enable applicants to better evaluate the costs associated with the RFP and the potential resulting contract. Applicants should plan to include such terms in any contract awarded as a result of the RFP. All costs associated with complying with these requirements should be included in the proposal. If the contract exceeds \$ 500,000, or if the contract together with other contracts awarded to the Contractor by the IDPH exceeds \$500,000 in the aggregate, the Contractor shall be required to comply with the provisions of Iowa Code chapter 8F.

IDPH requires Contractors to link with the local board of health when providing services supported by IDPH funding. In particular, Contractors are expected to assist the local board of health in carrying out the three core functions of public health as defined in 641 IAC 77.3 (137): assessment, policy development and assurance. Examples of linking with the board of health include, but are not limited to:

- Provide environmental and/or health data to the local board of health for the purposes of, and provide assistance in, assessing and analyzing the health status of the community.
- Submit reports to the local board of health on the effectiveness, accessibility, and quality of services provided.
- Include the local board of health in establishing policies and plans associated with the services provided. This can be accomplished by establishing a liaison between the contractor and the board of health or by attending regular meetings of the board of health.
- Educate the local board of health about the services provided and work with the board to identify target populations in need of the services provided.
- Be active in the Community Health Needs Assessment and Health Improvement Plan process.
- Provide the board of health expert input on the services provided and how those services relate to; the health priorities of the community and health improvement plans to address those priorities.

The contractor is expected to provide documentation of linkage efforts if requested by IDPH.

Results of the review process or changes in federal or state law may require additions or changes in final contract conditions requirements.

5.02 Incorporation of Documents

The RFP, any amendments and written responses to applicant questions, and the proposal submitted in response to the RFP form a part of the contract. The parties are obligated to perform all services described in the RFP and proposal unless the contract specifically directs otherwise.

5.03 Order of Priority

In the event of a conflict between the contract, the RFP and the proposal, the conflict shall be resolved according to the following priorities, ranked in descending order:

1. the Contract;
2. the RFP;
3. the Proposal.

5.04 Contractual Payments

The IDPH provides contractual payments on the basis of reimbursement of expenses in accordance with Iowa Code 8A.514. In the event the contractor lacks sufficient working capital to provide the services of the contract, an advance not to exceed one month's value of the contractual amount may be provided by the IDPH. One-third (1/3) of this advance will be deducted from eligible reimbursement of expenses for the 7th, 8th and 9th months of service.

SECTION 6 – APPENDICES

Appendices are posted in a separate file on the IDPH Web page under *Funding Opportunities* link: www.idph.state.ia.us.

- Appendix I Draft Contract Template
- Appendix II Annual Estimates of the Population for Counties of Iowa: July 1, 2011
- Appendix III Technical Review Tool
- Appendix IV Draft Scoring Tool

SECTION 7 – ATTACHMENTS

Attachments are posted in a separate file on the IDPH Web page under *Funding Opportunities: www.idph.state.ia.us*. Applicants must download these forms and include them in the proposal as outlined in Section 3 of this RFP.

- Attachment A Cover Page and Key Personnel
- Attachment B Minority Impact Statement
- Attachment C Applicant Narrative
- Attachment D Developing Goals and Objectives
- Attachment E Reaching Priority Populations
- Attachment F Service Delivery Table
- Attachments G to J Budget- Excel Worksheets
- Attachment K Proposal Checklist
- Attachment L Business Organization Form