



**DATE:** June 13, 2023

**TO:** Prospective Proposers

**FROM:** Daniel T. Wall, Assistant Director, OMB  
RFP Contracting Officer

**SUBJECT:** RFP No. EHE-2223, Ending the HIV Epidemic (EHE) HealthTec, Quick Connect, Housing Stability, and Mobile GO Teams Services

**RFP SUBMISSION DEADLINE:** 2:00 P.M., Wednesday, June 28, 2023

**FORMAL ADDENDUM No. 1**

This Addendum is and does become a part of the above-mentioned solicitation.

**A. REVISIONS TO RFP DOCUMENTS**

The following changes shall be incorporated in the subject solicitation as indicated below:

1. **DELETE** the phrase “**SUBMIT COMPLETE PROPOSAL TO:**” at the top of page 2, and **REPLACE** with the phrase “**SUBMIT TWO (2) COMPLETE IDENTICAL PROPOSALS (ONE ORIGINAL WITH WET SIGNATURES AND ONE COPY) TO:**”.
2. **DELETE** the third sentence “Staffing for the mobile unit must include a Physician or Advanced Practice Registered Nurse (APRN), a Community Health Worker, and a Driver / Attendant.” in Section 1.1, Services to be Funded, under Mobile GO Teams, on page 8 in the first paragraph and **REPLACE** with the sentence “Staffing for the mobile unit must include a Physician, Physician’s Assistant, or Advanced Practice Registered Nurse (APRN), a Community Health Worker, and a Driver / Attendant.”
3. Please **DISREGARD** page 17 of 71. This blank page has been left in the solicitation document and should be ignored.
4. **DELETE** the dollar amount “\$1,000,000” in the table under Section 2.7, Projected Funding Levels, Priority 4, Project Component “Mobile GO Teams”

under “Maximum Amount”, on page 18, and REPLACE it with the dollar amount “\$1,800,000”.

5. **DELETE** the third sentence “Staffing for the mobile unit must include a Physician or Advanced Practice Registered Nurse (APRN), a Community Health Worker, and a Driver / Attendant.” in Section 3.2.4, Service Category Background, under Mobile GO Teams, on page 23 and REPLACE with the sentence “Staffing for the mobile unit must include a Physician, Physician’s Assistant, or Advanced Practice Registered Nurse (APRN), a Community Health Worker, and a Driver / Attendant.”
6. **DELETE** the sentence “Hire Staff including a Physician or Advanced Practice Registered Nurse (APRN), a Community Health Worker, and a Driver / Attendant.” in Section 3.17.4, Service Category Background, under (a) Mobile Unit Acquisition and Furnishing, number 2, on page 40 and REPLACE with the sentence “Hire Staff including a Physician, Physician’s Assistant, or Advanced Practice Registered Nurse (APRN), a Community Health Worker, and a Driver / Attendant.”
7. **DELETE** the last sentence “Complete the Contractor Due Diligence Affidavit identified in Appendix D of this RFP Solicitation and include it as Attachment 13e of the Proposer RFP application.” in Section 4.17, Contents of Proposal, under letter E. Narrative, on page 50.
8. **MOVE** the last sentence “5) Describe the proposing organization’s specific policies and procedures regarding quality of care in the provision of the proposed service(s), and describe all processes established to ensure quality of services to people with HIV.” in Section 4.17, Contents of Proposal, under letter F. Narrative, on page 53, to a separate, new line below. This question is #5.

## **B. QUESTIONS AND RESPONSES**

Below are the questions received to date relative to the subject solicitation and the corresponding responses, including the questions received during the Pre-Proposal Conference. Questions may have been edited for clarity and to eliminate unnecessary repetition.

**Question 1: What is the process for applying to this funding opportunity? How should my organization determine what to apply for and how this program fits in with the work we are already doing?**

**Response:** Please see page 11, Section 1.2 “Timeline” for an overview of the RFP process. Additional information related to the process may be found starting on page 40, Section 4.0 “RESPONSE REQUIREMENTS AND RFP SUBMISSION INSTRUCTIONS FOR PROPOSERS”.

The four (4) service categories for which funding is available are described in detail beginning on page 37, Section 3.17 “Scope of Services to be Funded”. Eligible organizations must determine what they apply for, in which service category or

categories to submit a proposal, and how it fits with the work the organization is already doing.

**Question 2: What are all the documents required to submit during the application process in order to prove non-profit eligibility? Is there a revenue limit for non-profits to be eligible to apply for this funding opportunity?**

Response: Please see **page 16, Section 2.1 “Eligibility to Apply”**, the first bullet “For non-profit organizations” which states:

“An IRS letter of determination of a non-profit organization’s 501(c)(3) status dated prior to the RFP submission deadline must be included as part of the agency’s proposal submission, only if the proposer is a non-profit organization. Include this documentation as directed in Section 8.0 of this RFP document. The County, at its sole discretion, may consider any extenuating circumstances regarding the provision of required documentation if adequate justification, explanation, and supporting documentation is provided as it relates to IRS-related letters or forms, if applicable.”

Yes, the proposal submission must include an IRS letter of determination of 501(c)(3) status in the legal name of the proposing non-profit organization dated prior to the RFP submission deadline and this letter is the only item required to document non-profit status for this RFP. Also, there is no revenue limit/cap for a non-profit organization to be eligible to apply.

Additional information related to the minimum qualifications and requirements for an organization to apply can also be found within this section on page 16.

**Question 3: Will organizations funded to provide services (i.e., Subrecipients) under the project component “Mobile GO Teams” be able to retain the purchased vehicle(s) or will vehicles need to be turned over to the County?**

Response: Subject to federal approval, the purchased vehicle(s) may be retained by the Subrecipient organization.

**Question 4: How much time and effort will organizations funded to provide Mobile GO Teams services be expected to dedicate to these activities?**

Response: Proposing organizations should determine and justify in their proposal what their approach to dedicating staff time and effort toward these activities will be. The County has no minimum requirements as to how much time funded organizations should dedicate.

**Question 5: Can EHE funds be used to pay insurance premiums for a person with AIDS?**

Response: As described within the RFP solicitation document, none of the four service categories were designed to pay for insurance premiums. However, if the proposing organization believes it can make the case within their proposal that there is a legitimate need and connection between the service categories and use

of EHE funds to pay for insurance premiums, it is entitled to include such service in their proposal. It may be necessary to include additional explanation or justification in the proposal narrative.

**Question 6: How many submittals or responses to RFP No. EHE-2223 will be awarded?**

Response: The County anticipates awarding more than one applicant with grant funds under this RFP solicitation. It is possible that more than one award will be issued under each service category. All proposal submissions will be reviewed, rated, and ranked individually to determine the recommended total number and amount of award allocations.

**Question 7: Will awarded organizations be given grant funds upfront, or will they be asked to submit receipts and paid using a reimbursement method?**

Response: The County will recommend total award amounts based on an annualized project budget submitted by successful proposers. Organizations funded through this RFP solicitation will be issued payment in the form of a monthly allowance. For example, payment for services rendered during the month of March 2024 would equal to 1/12<sup>th</sup> of the total annual award, to be paid upon receipt of a corresponding approved invoice. During grant closeout at the end of the fiscal year, Subrecipients will be required to submit a Final Line Item Expenditure Report (FLIER), which is a report accounting for actual expenditures of approved budgeted line items. The FLIER will be used to determine if any overpayments were issued to the organization. The County will recoup payment through the final invoice or by way of payment issued from the organization to the County.

In addition to this, the County has provided flexibility as it relates to reimbursement and as such may consider alternate payment methodologies.

**Question 8: Will organizations funded to provide services under the “Mobile GO Teams” service category be expected to research and propose zip codes considered as “hotspots”? Will this be a directive issued by the County?**

Response: The answer is yes to both questions. A) Proposing organizations should tell the County what geographic area(s) it generally expects to serve using the mobile unit within their proposals). B) Awarded organizations will be expected to be prepared to deploy mobile units to emerging hotspots as identified by the Florida Department of Health in Miami-Dade County (FDOH-MDC) and directed by the County throughout the duration of the funded project period.

**Question 9: What is the award ceiling for the proposal?**

Response: **The award ceiling is the maximum total amount of funding that has currently been allocated to each of the four service categories.** Please see page 18 of the RFP No. EHE-2223 solicitation document, Section 2.7, Projected Funding Levels. This section states the maximum amounts available to apply for in this RFP, for the initial 3-month period (December 1, 2023 to February 29, 2024), as follows. **\*The maximum amount allocated for Mobile GO Teams has been updated within section A.3 of this document above:**

Priority #	Project Component	Maximum Amount
1	HealthTec	\$2,076,266
2	Quick Connect	\$1,875,000
3	Housing Stability Services	\$2,250,000
4	Mobile GO Teams	\$1,800,000*

**Funding for the service categories in the table directly above is contingent upon the continued appropriation of these federal funds by Congress and ongoing availability of these cooperative agreement funds to the County through federal contract awards from the Health Resources and Services Administration (HRSA).**

Furthermore, as stated in Section 3.17, page 37 of the RFP solicitation document, the County anticipates awarding the following number of contracts:

One or more proposing organizations may be selected to provide HealthTec, Quick Connect, and Housing Stability Services. Up to two proposing organization may be selected to provide Mobile GO Teams services. Recommended awards under this RFP for the Mobile GO Teams component are dependent upon the federal EHE amount awarded to Miami-Dade County in Years 4 through 5 of the cooperative agreement.

Budget, goal and objective responses to this RFP No. EHE-2223 solicitation should be based on a full 12-month budget period. Award amounts for the subsequent years of the cooperative agreement are subject to the ongoing availability of funds from the federal government. The County will work with successful applicants to proportionately adjust budgets for the subsequent years of the cooperative agreement based on the amount of available funds and any adjustments needed to the work plan.

**Question 10: Are Remote Patient Monitoring (RPM) devices considered an acceptable expense under the HealthTec project component?**

Response: Yes, RPM devices are an allowable expense under the HealthTec service category. Please see Section 3.17.1 of the RFP No. EHE-2223 document. Keep in mind, funded Subrecipients must make every effort to limit clients' personal, non-program-related use of any EHE-funded HealthTec devices (i.e., accessing the telehealth device and internet / data for non-program related use is not appropriate under this funding). Proposing organizations' response to this section of the RFP should clearly describe why the inclusion of such a device is necessary or beneficial to the client and how clients' access to the EHE-funded mobile device internet would be limited to program-specific purposes. Proposers should identify the most cost-effective solution that gives clients appropriate access to telehealth services only.

**Question 11: Despite the fact that the County can provide advance payment to Subrecipients, isn't the program reimbursed using a cost-based method? Doesn't the agency have to make purchases and submit invoices to include receipt of purchases to the County?**

Response: No. Program expenses can be reimbursed on a performance basis. Using this payment method, the Subrecipient will be reimbursed 1/12<sup>th</sup> of the contract total, subject to proration in accordance with underperformance (i.e., reduced payment based on not meeting the required goals). Payment Requests (invoices) submitted without any recorded services will not be processed for payment without the County's prior approval. In months where this occurs, the County will automatically apply a 1/12<sup>th</sup> proration for the month without services and will not take into consideration this month for purposes of the quarterly performance review. Additional terms related to payment may be reviewed under Article IX of the corresponding Professional Services Agreement, which is attached to the RFP solicitation document as Appendix H, as may be amended.

**Question 12: Does this grant have an indirect or administrative allowable amount?**

Response: Yes. The total amount of the combined indirect / administrative costs cannot exceed 10% of the total amount requested per service category. Please refer to APPENDIX B.2, Instructions for Completing Line Item Budget Form, for additional information related to the cap on these expenses.

**Question 13: Are the maximum allocated amounts for each of the four service categories for each contract period or for the life of the RFP?**

Response: The amounts listed **in the table under Section 2.7, Projected Funding Levels**, on page 18 of the RFP solicitation document (and also listed in this addendum under Question No. 9) are the maximum anticipated funding amounts for a 12-month period. If there are unspent dollars from a prior year, the County can request that these dollars be carried forward. That stated, the amount of funding could increase. Because Year 5 has not been awarded by the federal government, in theory, the amount of funding could also decrease. The amounts included in this table are the maximum amounts of funding available for award as of right now. These amounts are the totals that can be anticipated to be awarded for a full one-year period, commencing on March 1, 2024. Keep in mind that the initial contract period is anticipated to be 3 months, prorated based on the annualized amount awarded.

**Question 14: Please provide the original Funding Opportunity Number from the appropriate federal agency, as well as the CFDA Number for this opportunity.**

Response: The original Funding Opportunity Number for the Ending the HIV Epidemic: A Plan for America — Ryan White HIV/AIDS Program Parts A and B is: HRSA-20-078. The Assistance Listings (CFDA) Number is: 93.686.

**Question 15: Under Mobile GO Teams, is the Physician or APRN required to be located on the Mobile GO unit or can the Physician or APRN be located at a fixed-site location and use telehealth technology to connect with clients seen via the mobile clinic?**

Response: Clients to be served under this service category are anticipated to be among the hardest to reach populations (e.g., people who are experiencing homelessness or unstably housed). The proposal should explain and justify use of this approach, but also include an explanation of how onsite services could also be provided (e.g., long acting injectables administered inside the mobile unit). Please see **Section 1.1, Services to be Funded, under Mobile GO Teams, on pages 7 and 8 and Question No. 17** in this addendum below for additional information.

**Question 16: Under Mobile GO Teams, please confirm the role of Community Health Worker. Is it up to the applicant to define?**

Response: Yes. The proposing organization may identify the background, education, and skills it will require of current staff or candidates to be hired (e.g., Community Health Work) and the specific functions they will perform for the proposed project to be successful.

**Question 17: Please clarify whether the intent of the Mobile GO Teams would include a component for HIV testing. Under Mobile GO Teams, can the applicant include the costs of labs for HIV testing?**

Response: While the cost of HIV/AIDS testing is allowable, it's important to note the following:

The County is funded to provide EHE Initiative services under Pillar Two (Treat) and Pillar Four (Respond). For additional information on the four pillars of the EHE Initiative, please refer to **Section 1.1, Purpose, pages 8 and 9**. While Mobile GO Teams services are *not* intended to duplicate testing activities conducted by FDOH-MDC and should focus efforts on care and treatment, the County will reimburse funded organizations for conducting basic laboratory testing and diagnostics limited to the local Test and Treat Rapid Access (TTRA) *including* TTRA basic labs specific to blood counts, panels, viral loads, STD labs, etc. and *not including* diagnostics of ongoing care. Labs will be reimbursed per client package of tests at a rate to be predetermined by the County. The current approved rate for these tests is \$1,080.00 per client package of tests.

Please see the first sentence under **Section 1.1, Services to be Funded, under Mobile GO Teams, on pages 7 and 8**, which states the following:

“Mobile GO Teams services seek to support the activities of the Florida Department of Health (FDOH) Miami-Dade County’s (MDC) (FDOH-MDC) Disease Intervention Specialists, through a mobile response unit, by increasing the Recipient's ability to rapidly respond to HIV transmission clusters in the community using the local TTRA model; conduct outreach in high HIV incidence zip codes (also known as “hotspots”) and hardest to reach client populations (e.g., people who are experiencing homelessness or unstably housed) to provide onsite medical assessments to identify people with HIV who are not in care and link them to care and treatment; and administer the new injectable ART treatment regimens.”

**Question 18: Under Section F, Narrative- Service Experience - Past and current experience (questions 1 and 2) can an applicant include experience and funding sources from other Florida markets and states in which a similar project to Mobile GO Teams is currently provided or are these questions specific to Miami-Dade service area?**

Response: The applicant may describe in as much detail as it sees fit, its background and experience in providing the services locally or in other Florida markets as long as it does not exceed the 10-page limitation, as stated within the corresponding instructions on page 50 of the RFP solicitation document.

**Question 19: Please confirm that funded organization can work with individuals that are HIV-positive and undocumented. With the new Florida law enacted relating to undocumented persons, will this law have an impact on a provider who proposes to work with undocumented individuals who are HIV-positive under RFP No. EHE-2223?**

Response: As stated under **Section 1.1, Purpose, page 9** for the EHE Initiative, the only requirement for determining eligibility for service provision is that the individual has a documented HIV diagnosis; there is no requirement that individuals meet RWHAP eligibility requirements. There is no requirement that individuals must be documented in order to receive EHE Initiative services under federal law.

No, this new Florida law should not impact the provision of these services to undocumented clients.

**Question 20: Please provide clarification regarding client eligibility for HealthTec. If clients are under the 400% Federal Poverty Level (FPL) and live in Miami-Dade County, they would qualify for the Ryan White Program (RWP). Is the intent of EHE HealthTec specifically for the initial engagement or linkage of clients into care? Or is it to use telemedicine to promote access to care for an already captive population under RWP?**

Response: Both approaches are allowable. As stated under **Section 1.1, Purpose, page 9** for the EHE Initiative, the only requirement for determining eligibility for service provision is that the individual has a documented HIV diagnosis; there is no requirement that individuals meet RWHAP eligibility requirements. Additionally, and as stated under Section 3.10, Client Health Outcome Measures and SMART Objectives, page 29, the desired project outcomes for HealthTec include:

1. Improved access to medical care, medical case management, mental health counseling, substance use disorder services, prescription drugs, and other services as appropriate.
2. Easier access to Part A enrollment without need for transportation to appointment, childcare; and to remove barriers related to fear of disclosure and stigma.
3. Simplified follow-up care.
4. Reduced barriers to treatment adherence.
5. Improved treatment adherence leading to improved viral suppression.



**Question 21: My organization needs capacity building, guidance, and advice. Are we able to schedule a conference call or correspond via email regarding this RFP?**

Response: Unfortunately, a conference call is not permissible. However, you may submit your questions via email to [HIV-AIDS@miamidade.gov](mailto:HIV-AIDS@miamidade.gov) and note the following:

As stated in Section 1.2, Timeline, page 11, the deadline for receipt of written questions related to this RFP is June 16, 2023. Please be advised that pursuant to Section 2-11.1(t) of the Code of Miami-Dade County, as amended, a “Cone of Silence” is in effect at this time as indicated on page 14, Section 1.6 “Cone of Silence” which restricts private communication. All communications related to the subject RFP must comply with the specific instructions found on page 41, Section 4.2 “Designated Contact Person and Technical Assistance” including a copy to the Clerk of the Board, at [Clerk.Board@miamidade.gov](mailto:Clerk.Board@miamidade.gov) (copied) and “RFP No. EHE-2223” in the subject line of the email.

**Question 22: Per page 23 of the RFP solicitation document under Mobile GO Teams, the subrecipient will be required to administer the new injectable ART treatment regimen. Please confirm whether the applicant may include the cost of the injectable ART treatment for either clients with no insurance/payer source or clients with insurance that does not cover the injectable.**

Response: The applicant may include the cost of injectable ART treatment for clients in either or both situations. The breakdown of costs for clients in each category should be included within the budget and explained in the budget narrative justification.

**All terms, covenants and conditions of the subject solicitation and any addenda issued thereto shall apply, except to the extent herein amended.**

Miami-Dade County,

Daniel T. Wall  
Assistant Director  
RFP Contracting Officer

c: Clerk of the Board