

Addendum #1

July 1, 2024

New York State

Department of Health AIDS Institute

Division of HIV and Hepatitis Health Care

Bureau of Ambulatory Care Services

and

Health Research, Inc.

Request for Applications (RFA)

Advancing Health Equity through Comprehensive Community-Based HIV Ambulatory Care Services – Reissue

RFA #24-0003

The following are official modifications, which are hereby incorporated into **RFA #24-0003**:

Deleted language appears in strikethrough (“~~xxx~~”) and added language appears in **red** text. The information contained in this amendment prevails over the original Request for Applications language. Applicants should review all documents in their entirety to ensure all amended language and revised Attachments are incorporated into their applications.

The following changes are made to Section III. Project Narrative/ Work Plan Outcomes, A. Program Model Description, Component B: Family-Focused Health Care for Women, Program Description”, (page 17 of the Request for Applications):

Family-Focused Health Care for Women Staffing

Funded applicants will be required to have the following staffing. Please note that applicants are not required to have each of these positions in place to be eligible to apply:

- One or more (1.0) Full-Time Equivalent (FTE) Medical Case Manager or equivalent must have a B.A. or B.S. with at least one (1) year of HIV or other chronic-illness related field experience, or an Associate degree and three (3) years of such experience, or five (5) years of such experience.
- Employ or subcontract with a ~~youth-oriented~~ mental health provider (Psychiatrist, Psychologist, Psychiatric Nurse Practitioner, licensed clinical social worker, licensed mental health counselor) to deliver co-located services. This consultation position allows a specialist to conduct assessments, review patient charts and provide input into mental health care and treatment, provide bridge services, and facilitate referrals to higher levels of mental health care and treatment when needed. Programs may include up to 25% New York City (NYC) or 10% Rest of State (Rest of State) of one Full-Time Equivalent psychologist/psychiatrist/ psychiatric nurse practitioner employed as a mental health consultant.
- Employ or subcontract with a qualified substance use provider, experienced in the delivery of therapeutic services to women living with HIV, to deliver services co-located services. This position allows a specialist to conduct assessments, review medical records, provide clinical input into substance use care and treatment plans, provide bridge services, and facilitate referrals to higher levels of substance use care and treatment when needed.
- Employ at least one peer navigator with experience working in the field of HIV/AIDS to support medical case management activities (e.g., program promotion, treatment adherence support, co-facilitate educational workshops/groups, etc.).

Additional staff to be considered include:

- Data Entry
- Quality Improvement
- Program Manager
- Clinical Lead

The following changes are made to Attachment 19, Instructions for Completion of Budget Forms for Solicitations, Page 6 –Subcontracts/Consultant/ Indirect Costs (page 2 of Attachment 19):

Instructions for completion of Subcontracts/Consultant/Indirect Costs on page 2 of Attachment 19 Instructions for Completion of Budget Forms for Solicitations has been modified as follows:

Page 6 –Subcontracts/Consultant/ Indirect Costs

Please indicate any services for which a subcontract or consultant will be used. Include an estimated cost for these services. An indirect cost rate of up to 10% of modified total direct costs can be requested. ~~If your organization has a federally approved rate, an indirect cost rate of up to 20% of total direct costs can be requested. If your agency has a federally approved rate of less than 20%, the maximum indirect rate that can be requested is the federally approved rate.~~

Ryan White administrative and indirect costs are limited to a maximum of 10% total direct costs. See Attachment 3 - Ryan White Guidance for Part B Direct Service Subcontractors.