

**New York State Department of Health
Bureau of Child and Adolescent Health
Health and Human Services for LGBT Individuals, Families and Communities
Request for Applications (RFA) #0708140918
Questions and Answers**

THE FOLLOWING MODIFICATION HAS BEEN MADE TO THE HHS-LGBT RFA:

- 1. The due date for RFA application has been extended from December 10, 2007 to December 19, 2007. All applications must be received no later than 5 P.M. on December 19, 2007.**

Program

- 1. If an applicant is currently funded by this grant, can some of the same goals and outcomes on the current workplan be used for this RFA?**

Yes, however, applicant proposals are to address outcomes and activities consistent with the current RFA. Applications for this grant will be scored only on the basis of information contained in the application, and not on goals and outcomes in an existing workplan.

- 2. What kind of documentation/data is required to demonstrate that the Board and employees are representative of the LGBT population and are also of diverse backgrounds?**

There is no specific required documentation or data format. Applicants should describe the composition of Board and staff relevant to the organization's capability to serve the intended population. Preference will be given to applicants who can demonstrate that they have a Board and staff representative of the population intended to be served in the application. Applicants can describe the Board and staff's capability to represent/serve the population as appropriate based on organizational standards. This can include the percentages of the Board that represent the LGBT community.

- 3. This grant is from NYSDOH Bureau of Child and Adolescent Health. Does this mean the grant must address needs of children and adolescents only?**

No. Please refer to the Introduction section which addresses all ages, and specifically to page 3 which states "Respondents to the RFA are not required to serve youth"

- 4. Can we offer services to adolescents under 18 without parental consent, and if so, what restrictions apply?**

Applicants are expected to be knowledgeable of and adhere to all relevant laws regarding client rights, including consent, for proposed activities.

5. Can mental health services for HIV negative youth be provided through this grant for uninsured youth or those unable to access family insurance for reasons of confidentiality?

Activities that raise awareness of and promote access to mental health services for all youth identifying as part of the LGBT population, regardless of HIV status, may be funded under this initiative. Examples of activities that raise awareness and promote access to mental health services include support groups, educational workshops, referral mechanisms, and community awareness events. Direct medical/clinical services, including those that are mental health related, will not be funded under this initiative. Please also refer to the questions and answers related to medical/clinical services below.

6. Are case management services to HIV negative youth allowable?

The intent of this RFA is to increase access to, and improve quality and appropriateness of, non HIV-related health and human services and improve health outcomes and quality of life for **all** LGBT individuals and families, regardless of HIV status. Services to groups or individuals that improve access to and increase knowledge of necessary services through education and outreach, such as sessions held to identify health and human service needs and facilitate the needs being met, are fundable through this initiative. As previously stated, direct medical/clinical services, regardless of HIV status, will not be funded through this initiative.

7. Is general demographic information about youth in the service area sufficient, or do the statistics need to be LGBTQ youth specific?

The Statement of Need section on page 13 (Component A) and page 16 (Component B) outlines expectations regarding demographics. Information should be relevant to the proposed geographic area and the LGBT population to be served. Existing gaps in service that the proposal will address should be described.

8. Is a proposal focused on removing barriers to care that transgender people face in the health care system acceptable for this RFA?

Yes, as long as the proposal is consistent with the scope of activities described in the RFA.

Medical/Clinical Services

1. The RFA states that the initiative will not fund direct clinical/medical services or direct HIV-related services including clinical/medical and support services, however page 6 of 22, Direct Services states it does. Do these Direct Services include activities that are billable to a third party, such as an insurance company?

Page 6 states “The Department will not fund services that are reimbursable through other available funding sources...”, which includes third party insurances.

2. **Is it possible to use HIV counseling and testing as a prevention tool, as opposed to a medical or clinical service?**
3. **Is it possible to allocate funds toward HIV counseling and testing activities?**
4. **Can funding from this grant be used to fund a Psychiatric Nurse Practitioner to do medical/psychiatric assessments of LGBT homeless youth or to support HIV rapid testing?**

The answer to questions 2, 3, and 4 above is no. The Department of Health will not fund services and activities through this initiative that are direct clinical/medical services including direct HIV-related services such as HIV counseling and testing. The intent of this initiative is to increase access to, and improve quality and appropriateness of non-HIV related health and human services through the promotion of full and equal access to such services and eliminating bias and discrimination based on sexual orientation and gender identity. Counseling and support aimed at improving access to and awareness of these services may be funded under this initiative.

5. **Please give examples of services/costs not covered, including direct clinical/medical services, as mentioned on page 5 of 22, Section B.**

Funds provided by this solicitation are to be used to create, continue or expand health and human service related activities for LGBT individuals, families, and communities and may *not* be used to supplant resources supporting existing activities currently funded by another funding source. Additionally, funds cannot be used to support direct medical/diagnostic services. Some examples are physician services, diagnostic tests, inpatient services, home care, and psychiatric treatment services.

6. **Is psychotherapy considered a “direct medical/diagnostic service”, or is it covered under the grant as a non-medical procedure?**

Psychotherapy is a direct clinical service not allowable for funding through this initiative.

Acceptable Costs

- 1) **Are costs associated with Social Worker intervention (case management) covered?**

Funds provided by this solicitation are to be used to create, continue or expand health and human service related activities for LGBT individuals, families, and communities and may *not* be used to supplant resources supporting existing activities currently funded by another funding source. As noted in the previous section, funds cannot be used to support direct medical/diagnostic services such as physician services, diagnostic tests, inpatient services, home care, and psychiatric treatment services. However, activities aimed at improving access and

awareness of services, provision of peer support, and/or enhancing referrals may be funded under this initiative.

2) Are costs associated with a clinical supervisor for peer support facilitators and programs directors covered?

Funding for supervision of grant allowable activities may be covered.

3) If we serve an adolescent or adult who did not have health insurance due to not being income eligible for Medicaid and/or could not afford low cost health insurance, may funding through this RFA be requested to provide these services in lieu of payment through a third party payer?

No. Direct clinical/medical services will not be funded through this initiative.

Fiscal

1) Is there a limit on fringe rate? We are increasing our benefits substantially this coming year to assist with staff retention.

There is no specific limit, however, if the organization has a federally approved rate it must be used. If the fringe benefit rate is unusually high, backup documentation should be included. Claims must be based on actual fringe costs.

2) What NYS travel rates should be utilized for budgeting purposes on this proposal?

NYS travel rate information is available on the Office of the State Comptroller website at <http://www.osc.state.ny.us>.

3) Is the \$175,000 funding cap inclusive of administrative/indirect costs?

Yes.

4) Please clarify the 10% administrative costs rate and any exclusions.

The RFA states (RFA Attachment 5, page 2): “..administrative costs are limited to 10% of your grant amount. These costs must be identified individually, i.e., a flat 10% cannot be applied in an administrative cost line. Indirect costs will not be allowed against NYS grant funds.”

FOR THE PURPOSES OF THIS GRANT: this means that administrative/indirect costs, APPLIED AS A PERCENTAGE, will not be allowed against grant funds. These costs must be identified in individual budget line items to be eligible for grant funding, not as a lump sum total. There are no specific exclusions.

5) Referring to Budget Narrative/Justification Form, Form 3 (Attachment 5, page 2): The following statement is not clear : “Indirect Cost is not an allowable expense against NYS funding.” Administrative costs are allowed @ 10%. What is the difference between indirect costs and Administrative costs?

Indirect costs are those costs incurred for common or joint objectives that cannot be identified readily and specifically with a particular sponsored project. An organization's indirect costs are generally captured through an indirect cost rate applied to a grant as a percentage. Indirect costs will not be allowed through this grant. Administrative costs, for the purposes of this grant, are those costs that can be readily identified or that can be allocated appropriately to a specific grant, e.g., time dedicated to a specific grant by the Executive Director, personnel office, audit related costs, payroll, various fiscal functions etc.

6) Are administrative costs limited to 10% of grant total, or 10% of total direct costs?

The RFA states (RFA Attachment 5, page 2): "...administrative costs are limited to 10% of your grant amount." The reference to 10% of direct costs under V. Completing the Application, Component A., 7. Budget, should have stated the above.

7) Please define direct vs. indirect costs.

Direct costs are directly attributable to the grant and can be easily and readily identified as being funded from the grant for the purpose of implementing that grant's workplan deliverables. Indirect costs are those costs incurred for common or joint objectives that cannot be identified readily and specifically with a particular sponsored project. Indirect costs may not be charged to this grant.

8) What are "unallowable indirect" costs ? (attachment 5, page 2)

The RFA states: "Indirect costs will not be allowed against NYS grant funds." There is no reference to unallowable indirect costs.

9) Regarding Agency Administrative Support—One Time Only Expense: Does the \$60,000 cap include 10% administrative costs?

The RFA states (RFA Attachment 5, page 2): "...administrative costs are limited to 10% of your grant amount." This would include all funds requested under the RFA which includes one time only expenses.

10) Is office furniture such as tables, chairs, desks, file cabinets, etc. an acceptable expense?

Yes

11) Should the \$60K enhancement project funds be included in the budget proposal numbers?

Applicants should complete a 12 month base budget request utilizing forms included as Attachment 6. The base budget is the annual amount being requested, not inclusive of the one time only agency administrative support request. Use Form 3A One Time Only Expense to detail the planned one time expenses as defined by section 8 on page 16 (Component A) and page 19 (Component B).

12) Is there a limit on budget justification pages? If justification goes beyond the box space allowed, can a blank page be used or must an additional form be utilized?

There is no limit to budget pages when completing the forms included in Attachment 6, and these pages do not count towards the 21 page limit for the application. If the justification for particular line items exceeds the box space allowed, up to three double spaced pages of narrative can be included with the budget forms.

13) Would you want to see a portion of the Principal Investigator or the Project Director's salary on the budget?

Budget requests should relate directly to activities in the workplan. Please refer to Attachment 5: "Personnel, with the exception of consultants and per diems, contributing any part of their time to the project should be listed...". In-kind personnel contributions can also be included in the budget and listed as "Other Source" on the budget forms.

14) Is there a percentage of in-kind that is expected? If so, do we need to state where it's from?

There is no required level of in-kind support. However, if applicable, any in-kind contribution can be specified on the budget forms in the "Specify Other Source" columns.

15) Budget instructions on page 15 state "Justification for each cost should be in narrative form, not to exceed 3 double spaced pages". Does this information go on Forms 1,2, and 3 included in Attachment 6, or is the narrative in addition to the budget forms?

The budget is to be submitted using all forms in Attachment 6. If additional narrative is needed to provide justification, it can be included as well, not to exceed three double spaced pages. None of these budget pages will count towards the overall 21 page limit for the application.

16) Budget instructions on page 15 state "Ineligible items will be removed from the budget...". Please provide examples of ineligible budget items.

All budget items must be directly related to the provision of acceptable services proposed in the application and as outlined in the RFA. Costs associated with the provision of direct medical/clinical care are not acceptable. The budget may not include capital expenditures or costs associated with the acquisition of depreciable equipment such as vehicles, or mainframe computers/servers.

Miscellaneous

- 1) On page 14, Component A, Organization Capability, letters f and g, applications should address collaboration with outside organizations. Are formal linkage agreements/memoranda of understanding (MOU) recommended or required to be submitted as well? Also, would Letters of Support be appropriate to include as collaterals for the Organization Capability section?**

There is no specific requirement for MOUs, Letters of Support, or other specific documents to demonstrate collaboration or capability. Both MOUs and Letters of Support are acceptable documents for demonstrating collaboration.

- 2) Does the grant accept letters of support? If, so, where should they be attached and do they count towards the page limit?**

Please see #1. As noted in the RFA, attachments supporting organizational capability do not count toward the page limit. Attachments can be included as a section at the end of the application.

- 3) The Program Narrative section as described on pages 15 and 18 states it should not exceed 6 pages, while the Application Format described on page 20 states it should not exceed 5 pages.**

This question reflects an error in the RFA. The correct limit is as follows: The Program Narrative should not exceed 6 pages. The total application should not exceed 21 pages.

- 4) The Evaluation section as described on page 15 and 18 states it should not exceed 1 page; however the Application Format described on page 20 allows 2 pages.**

This question reflects an error in the RFA. The correct limit is as follows: The Evaluation should not exceed 2 pages. The total application should not exceed 21 pages.

- 5) The budget section states on page 15 it should not exceed 3 pages for narrative justification, while the Applicant format section does not provide any guideline.**

The Budget pages do not count in the overall total 21 page limit for the application. The budget is to be submitted using all forms in Attachment 6. If additional narrative is needed that does not fit in the boxes on the forms, it can be included as additional attachments, not to exceed three double spaced pages. None of these budget pages will count towards the overall 21 page limit for the application.

- 6) Will the application be available in a “fillable” format such as Word or Adobe?**

The RFA will not be made available in any other format, however, the budget, workplan, and Vendor Responsibility forms are all available in Word on the Department website: www.health.state.ny.us

- 7) What kind of subcontracts do we have to provide for our subcontractors?**

Subcontractors may use the same budget and workplan forms as provided with this RFA. Contractors must ensure their sub-contractual agreement is consistent with their contractual obligations with the Department of Health.

8) Regarding vendor responsibility, what is the difference between “prime contractor” and vendor? Can we be both?

The prime contractor is the agency the Department is contracting directly with (Lead agency). A vendor is considered any business entity seeking to do business in New York State.

9) Please list what exact attachments and in what order are to be sent in with the application. Do attachments count towards the page limit?

Required attachments are:

Attachment 4 Cover Sheet

Attachment 6 Budget Pages

Attachment 7 Workplan Implementation Worksheet

Follow the order in the Application Content section of the RFA. Attachments do not count toward the page limit.

10) One of my proposed partner agencies is also applying for this grant with a different proposal. Will this decrease my agency’s chance of receiving an award?

No. Each application will be reviewed independently.

11) If an organization proposes a service spanning multiple regions, will that application count toward one award in one region or multiple regions?

If the application is selected to receive an award, it will count for the one region where the proposed services will predominantly be provided as identified by the applicant. If an application covers more than one region, the applicant should identify on the cover sheet the one region the award is intended for. There can be only one award per lead agency application.

12) When will the awards be announced?

Award announcements are anticipated for Spring, 2008.

13) The Proposal Cover Sheet has spaces for both the “Applicant Representative” and a “Board of Directors Executive Committee Member” to sign. Do we need signatures from both individuals?

Both signatures are not a requirement for the application to be reviewed, but it is strongly recommended in order to show Board support.

14) Is there a summary of previous award winners that can be shared?

See attached list of current HHS-LGBT contractors.

Organization	City
Empire State Pride Agenda Foundation, Inc.	Albany
In Our Own Voices	Albany
Planned Parenthood Mohawk-Hudson	Schenectady
Ferre Institute, Inc.	Binghamton
SAGE/Upstate, Inc.	Syracuse
Community Pride Center.	Bronx
The Audre Lorde Project, Inc.	Brooklyn
Long Island Crisis Center	Bellmore
Long Island Gay and Lesbian Youth	Bay Shore
Community Awareness Network for a Drug-free Life & Environment, Inc. (CANDLE)	New City
The LOFT: Lesbian and Gay Community Services Center, Inc.	White Plains
Westchester Jewish Community Services	White Plains
The Hetrick-Martin Institute	New York
NYC Gay & Lesbian Anti-Violence Project	New York
Safe Horizon's Streetwork Midtown Drop-In Center	New York
New York State Black Gay Network	New York
Housing Works, Inc.	New York
Metropolitan Community Church of New York	New York
Greenwich Village Youth Council	New York
The Lesbian, Gay, Bisexual & Transgender Community Center	New York
Gay Men's Health Crisis, Inc.	New York
Senior Action in a Gay Environment as lead agency for RAAP	New York
Queens Lesbian and Gay Community Center, Inc.	Woodside
Community Health Action	Staten Island
Gay & Lesbian Youth Services of Western New York, Inc.	Buffalo
Pride Center of Western New York	Buffalo