Eligibility Information

Q1: Who is eligible to apply?

A1: Public and nonprofit private entities, faith-based and community-based organizations, and Tribes and tribal organizations are eligible to apply. Foreign entities are not eligible for this award. NOFO, Page 7

Q2: Is an organization who is currently not a RWHAP Part C or D recipient eligible for this funding opportunity announcement?

A2: Yes. The eligibility for this award does not require applicants to be current recipients of RWHAP Parts C and D. Please refer to page 7 of the NOFO.

Q3: Can you apply to the community health worker (CHW) component/program if you don't have a Ryan White project or a CHW now but you do provide HIV services?

A3: Yes. The eligibility criteria does not require applicants to have an existing CHW component/program nor current RWHAP award.

Q4: Will cost sharing/matching be required?

A4: Cost-sharing is not required for this program. NOFO, Pages i and 7

Slide Presentation

Q5: Where can I get a copy of the slides?

A5: The slide deck and webinar recording are available now on the TargetHIV website.
Submission Information

Q6: What is the application due date?

A6: The due date for applications is February 19, 2021, at 11:59 p.m. ET. HRSA suggests submitting applications to Grants.gov at least 3 calendar days before the deadline to allow for any unforeseen circumstances.

Q7: What is the page limit?

A7: The total size of all uploaded files included in the page limit may not exceed the equivalent of 30 pages when printed by HRSA. NOFO, Pages 8 and 9

Q8: Do attachments count towards the page limit?

A8: All optional attachments count toward the 30-page limit. NOFO, Pages 8, 9, and 20

Q9: Is the Project Narrative single-spaced? Is there a required font? Can we use 10-point font for tables and footnotes?

A9: Refer to Section 4.2 Narrative and Attachment Formatting Guidelines of the SF-424.

Q10: Are there attachment templates provided in grants.gov or do we just create our own documents? Are there templates for the line item budget and the justification narrative?

A10: The instructions for the Attachments begin at the bottom of page 18 of the NOFO and continue to page 20. With the exception of Attachment 6: Maintenance of Effort (MOE) table at the top of page 20, applicants may develop their own layout and format based on the guidance under this section. For guidance on developing your line item budget and writing your budget narrative, please refer to the instructions noted in the SF-424. HRSA recommends that you convert or scan any budget documents into PDF format for submission. As stated on page 17 of the NOFO, do not submit documents in Excel spreadsheet format.

Program Information

Q11: What is the ceiling funding amount?

A11: You may apply for a ceiling amount of up to $150,000 total cost (including both direct and indirect, facilities, and administrative costs). NOFO, Pages i, 6, and 22

Q12: What is the period of performance?

A12: The period of performance is September 1, 2021 through August 31, 2022 (1 year). NOFO, Pages i and 6
Q13: Are previously funded activities allowed for award?

A13: You may propose an expansion of an activity previously supported under FY2019 or FY2020 RWHAP Part D Supplemental (HRSA-19-026; HRSA-20-068) or Part C Capacity Development funding (HRSA-19-031; HRSA-20-067). However, HRSA will not fund the same activity in FY 2021 as HRSA funded previously in FY 2019 or FY 2020. If the proposed project is an expansion of a previously funded activity, you will be required to provide a clear rationale for how the proposed activity builds upon and furthers the objectives of the previously funded HIV Care Innovation or Infrastructure Development activity. You may select only one activity under HIV Care Innovation or Infrastructure Development. NOFO, Pages 1, 6, and 7

Q14: Can the project address individuals at risk of HIV/AIDS, or should it only address those living with HIV/AIDS?

A14: No, the project cannot address those at-risk for HIV. The purpose of this program is to strengthen organizational capacity to respond to the changing health care landscape and increase access to high-quality HIV primary health care services for low-income, uninsured, and underserved people with HIV. For further details on eligibility, please see HAB Policy Clarification Notice 16-02 Ryan White HIV/AIDS Program Eligible Individuals & Allowable Uses of Funds.

Q15: Can the Capacity grant support the payment to Community Health Workers?

A15: Yes, grants funds from this NOFO may be used to support personnel salaries. Please see further guidance and instructions on this activity on NOFO pages 10-14.

Q16: Is tele-dentistry considered to be telehealth?

A16: Yes, this activity falls under the telehealth “umbrella.” For more information and links please see NOFO pages 12-13.

Q17: What are the activities under the HIV Care Innovation Category?

A17: There are four (4) activities from which to choose. If applying under this category, select only one of the four activities listed below:

1. Community Health Workers
2. Integration of HIV Primary Care with Oral Health or Behavioral Health
3. Rapid Antiretroviral Therapy (ART)
4. Transitioning Youth into Adult HIV Care

NOFO, Pages 1, 10, 11, and 12

Q18: What are the activities under the Infrastructure Development Category?

A18: There are three (3) activities from which to choose. If applying under this category, select only one of the three activities listed below:

1. Dental Equipment for Expanding Dental Service Capacity
2. Emergency Preparedness
3. Telemedicine
Q19: Could funds be used to purchase medications to start Rapid ART?

A19: 1. The goal of the Rapid ART activity is for the applicant to provide expedited ART medication, but the language in the NOFO is for the applicant’s process capacity in the provision of Rapid ART services to their targeted population.

2. As a capacity development grant, this NOFO is not intended to support the direct provision of clinical care. Rather, it supports either: (a) the costs associated with an applicant’s development and implementation of Rapid ART policies, procedures, and workflows, or: (b) the enhancement or expansion of an applicant’s existing Rapid ART policies, procedures, or workflows.

3. The use of grant funds to purchase medication is not allowable and not within the scope of the Part C Capacity NOFO.

Q20: Can we use the funding to lease or purchase computer hardware and/or software for telemedicine? Are licenses such as for Zoom allowable? Or contracts with group format providers such as Doximity? Can that go under Contractual expenses?

A20: Yes. If you select the Telemedicine activity, you must develop and acquire, through lease or purchase, computer hardware and software, audio and video equipment, computer network equipment, interactive equipment, data terminal equipment, and other equipment that furthers the objectives of the proposed telemedicine activity. NOFO, Pages 12-13

Q21: What are the review criteria for submitted applications?

A21: The RWHAP Part C Capacity Development program has six (6) review criteria: need, response, evaluative measures, impact, resources/capabilities, and support requested. NOFO, Pages 23 -26

Q22: What is required to qualify for the funding preference?

A22: See Pages 26 and 27 in the NOFO for the two qualifications for funding preference, rural areas and underserved populations.

Additional Questions?

Applicants who have additional programmatic questions or need clarification on the answers provided in this document should contact CAPT Mindy Golatt, Chief, Midwestern Branch, Division of Community HIV/AIDS Programs at (301) 443-0717 or via e-mail at mgolatt@hrsa.gov. For financial and grants management questions, applicants should contact Potie Pettway, Grants Management Specialist, at (301) 443- 1014, or via e-mail at ppettway@hrsa.gov