



**AIDS  
FOUNDATION  
CHICAGO**

# **2022 RW REQUEST FOR PROPOSALS BIDDERS WEBINAR** (9/9/22)

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1

## **PRESENTERS**



**Bashirat Olayanju - Vice President, Care**



**Lakethia Patterson - Director of RW Services**



**Angela Jordan - Senior Manager, Intake and Referral**

2



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2

## HOUSE KEEPING

- All questions will be responded to at the conclusion of the presentation
- AFC cannot respond to questions regarding how to respond to sections of the RFP
- Questions not addressed fully during today's webinar can be directed to Bashirat Olayanju [Bolayanju@aidschicago.org](mailto:Bolayanju@aidschicago.org)
- All responses will be posted on the AFC RFP Site on a weekly basis [aidschicago.org/rw2022](https://aidschicago.org/rw2022)
- Today's webinar will be posted and can be accessed via the below link [aidschicago.org/rw2022](https://aidschicago.org/rw2022)

3



3

## ABOUT AFC

The AIDS Foundation Chicago (AFC) was established in 1985 to coordinate the local response to the AIDS epidemic in the Chicago area.

### Vision

People living with HIV or chronic conditions will thrive, and there will be no new HIV cases.

### Mission

AFC mobilizes communities to create equity and justice for people living with and vulnerable to HIV or chronic conditions.

### Values

People First. Compassion. Accountability. Meaningful Engagement. Justice in Action. Innovation

4



4

## PROGRAM OVERVIEW

**The Health Resources and Services Administration's (HRSA) Ryan White HIV/AIDS Program provides a comprehensive system of HIV medical care, essential support services, and medications for low-income people living with HIV who are uninsured and underserved. The Program funds grants to states, cities/counties, and local community-based organizations to provide care and treatment services to people living with HIV to improve health outcomes and reduce HIV transmission among hard-to-reach populations.**

**AFC administers the RW program through partner agencies with limited services on site.**

5



5

## CONTINUED

**HRSA's Ryan White HIV/AIDS Program is divided into five Parts(A,B,C,D,F). Only 2 are included in this RFP:**

- **Part A funds medical and support services to Eligible Metropolitan Areas (EMAs) and Transitional Grant Areas (TGAs). EMAs and TGAs are counties/cities that are the most severely affected by the HIV/AIDS epidemic. The grantee is the Chicago Department of Public Health.**
- **Part B administers funds for states and territories to improve the quality, availability, and organization of HIV health care and support services. Part B also includes grants for the AIDS Drug Assistance Program (ADAP). The grantee is the Illinois Department of Public Health.**

6



6

## FUNDING PRIORITIES

- **Getting to Zero Illinois (GTZ-IL) initiative:** The GTZ-IL plan outlines strategies to increase access to and uptake of PrEP (pre-exposure prophylaxis) and increasing the number of people living with HIV who are virally suppressed (<https://gtzillinois.hiv>)
- **The treatment cascade:** A continuous care paradigm that outlines the stages of HIV medical care from initial diagnosis to achieving viral suppression while tracking individuals at each stage.
- **National HIV AIDS Strategy:** The Strategy sets bold targets for ending the HIV epidemic in the United States by 2030, including a 75% reduction in new HIV infections by 2025 and a 90% reduction by 2030.
- **Black-led & Latiné-led agencies will receive \$10,000 in one time funding to support agency operations**
- **Black-led & Latiné-led agencies serving priority populations who score below a certain threshold may be invited for an interview to provide additional information to support their proposal**

7



7

## CRITERIA FOR BLACK-LED OR LATINÉ-LED AGENCIES

- **Providing services in the Chicago EMA (including Chicago and Cook County) or state of Illinois.**
- **Executive Director is Black or Latiné/o/a/x**
- **Staff are 50% or more Black or Latiné/o/a/x**
- **Board is 50% or more Black or Latiné/o/a/x**
- **Organization has traditionally provided HIV services and/or received city, state or federal HIV funding**

8



8

## AVAILABLE FUNDING

| Category   | Part A or B | Category   | Anticipated Number of Awards | Total Anticipated Funding |
|--|-------------|------------|------------------------------|---------------------------|
| Ambulatory Outpatient Medical Care                                       | Part B      | Core       | 5–7                          | \$250,000–\$350,000       |
| Medical Case Management (perinatal, corrections, medical benefits staff) | Part A / B  | Core       | 15–25                        | \$7M–\$7.2M               |
| Medical Nutrition Therapy  | Part B      | Core       | 1–2                          | \$10,000–\$20,000         |
| Mental Health  | Part B      | Core       | 6–8                          | \$70,000–\$90,000         |
| Oral Health Care   | Part B      | Core       | 4–6                          | \$100,000–\$200,000       |
| Substance Abuse Outpatient   | Part B      | Core       | 4–6                          | \$20,000–\$30,000         |
| Food Bank/Home Delivered Meals   | Part B      | Supportive | 4–6                          | \$150,000–\$200,000       |
| Housing  | Part B      | Supportive | 4–6                          | \$60,000–\$80,000         |
| Legal Assistance   | Part B      | Supportive | 1–2                          | \$40,000–\$60,000         |
| Non-Medical Case Management (Peer, Retention specialist)                 | Part B      | Supportive | 10–15                        | \$600,000–\$800,000       |
| Psychosocial   | Part B      | Supportive | 4–6                          | \$30,000–\$50,000         |

9



9

## KEY DATES

| Activity                 | Key Dates & Times                                |
|--------------------------|--|
| Intent to Apply          | September 16, 2022, by 4:00 p.m.                 |
| Proposal Submission Date | October 14, 2022, by 4:00 p.m.                   |
| Award Notification Date  | December 1, 2022                                 |
| Contract Start Date      | March 1, 2023 (Part A) or April 1, 2023 (Part B) |

10



10

## ELIGIBLE RESPONDENTS

- Operate a physical site and/or deliver services (with no physical site) in the Chicago Eligible Metropolitan Area, including Cook County, DeKalb and the seven collar counties: DuPage, Grundy, Kane, Kendall, Lake, McHenry and Will.
- Be governed by a board of directors.
- Be a community-based organization, community health center, hospital, health department, mental health center, substance abuse treatment center, university, nonprofit organization, or private for-profit organization\*.
- Have a functioning accounting system that is operated in accordance with generally accepted accounting principles or an agreement with a designated eligible entity that maintains such information and acts as the respondent's fiscal agent.
- Be Medicaid-certified if providing services that are Medicaid-eligible.
- Have all required licenses and certifications required by appropriate government agencies to perform the proposed services and procure all permits and pay all charges, taxes, and fees.

11



11

## CLIENT ELIGIBILITY

**Documentation of client eligibility must occur immediately upon client consent to enroll in a Ryan White program or service.**

**Eligibility documentation consists of proof of**

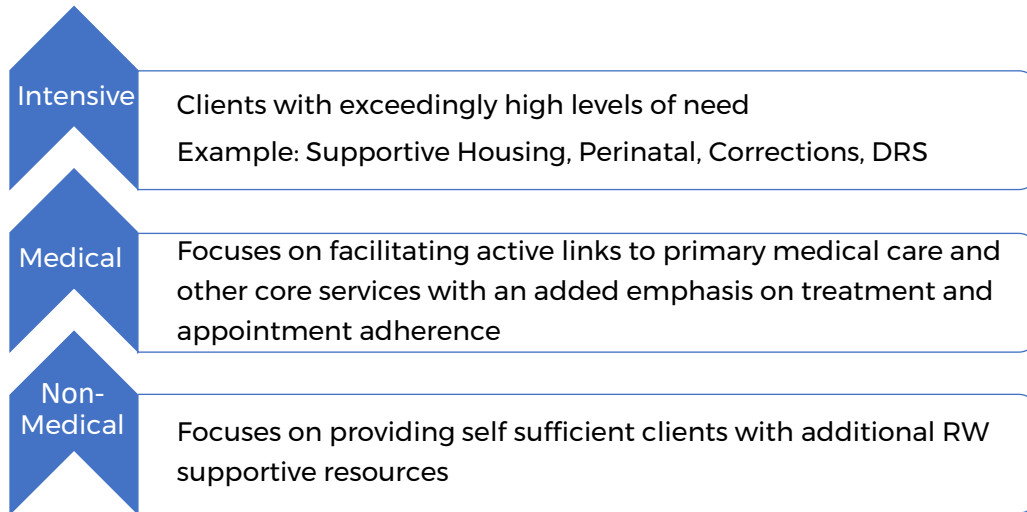
- 1) **HIV-positive serostatus (e.g., detectable lab results or physician statement),**
- 2) **proof of residence in the Chicago EMA**
- 3) **proof of income (800% of the Federal Poverty Level (FPL) or less for case management, 80% of the Area Median Income for housing, and 500% FPL or less for all other services).**

12



12

## TIERED CASE MANAGEMENT SYSTEM



13



13

## CASE MANAGEMENT TIERS

- **Correction** - incarcerated within the last 6 months or scheduled for release in 120 days
- **Perinatal**- currently pregnant or has been in the last 6 months or in active family planning stage
- **Medical Case Management** - Newly diagnosed, high need, high viral load
- **Non-Medical Case Management** -( Retention Specialist; Peer Navigator;) Stable, low need and undetectable viral load

**Intake and referral team receive client calls through the Care Plus and the Resource HUB Hotline and these clients are referred to agencies as needed based on the type of case management and geography and client preference**

14



14

## CLIENT ELIGIBILITY

**Case management is the gatekeepers to all services. This means that services are billable only if documents created by a case manager (Eligibility assessment and care plan) are in place. Services to clients who have not completed a case management assessment and care plan are not eligible for reimbursement by AFC.**

**All RW service categories except case management are considered fee for service and can be considered billable with an eligibility assessment and care plan in place.(note: care plan is not required if enrolled in non-medical case management)**

**Example: If a client receives care from a dentist without a eligibility assessment and care plan documented in Provide, the reimbursement request will be rejected.**

15



15

## PROGRAM REQUIREMENTS

- **All agencies must utilize Provide Enterprise software system to capture all data**
- **Case managers must document all service activity daily or within 5 business days**
- **Case Managers must participate in at least 12 training in a program year**
- **Case management agencies ONLY must submit quarterly narrative reports regarding, utilization, trends, successes and barriers**
- **Non case management/Fee for service agencies must submit all client level billing in the Provide database monthly**
- **Ryan White is the payer of last resort.**
- **A representative must attend bi-monthly contract administrators' meetings...Case management agencies ONLY**

16



16



## HOW TO APPLY

- **Submit Intent to Apply to AFC by September 16, 2022**
  - Select the service categories you intend to provide
  - Indicate the program contact
  - <https://forms.office.com/r/diNsMEx0eS>
- **Once intent is received, AFC will make available the agency's proposal submission folder via email from SharePoint to the program contact**
- **Proposal must be uploaded by the deadline (October 14 2022)**

17



17

## PROPOSAL ORGANIZATION

- **Follow formatting guidelines**
  - Table of Contents
  - Section numbering
- **Appendix numbering – If you do not have or need to submit one or more of the sections or appendices listed, include a blank page for that appendix labeling it "Section/Appendix # Title not applicable".**
- **Spell / grammar check**
- **Narrative should be clear & concise. Avoid fluff & jargon. Spell out acronyms.**

18



18

## PROPOSAL SUBMISSION



19



19

## RFP NARRATIVE

The listing below is for all of the narrative sections to be completed. Please note that if your agency applies for multiple service categories, some narrative sections will be required to be completed for each service category you apply for.

**Agency Experience**

**Target Population Needs**

**Cultural & Linguistic Capacity & Health Equity**

**Organizational and Fiscal Capacity**

**Payer of Last Resort**

**Quality Management**

***Core and Supportive Services* (excluding case management) (if applicable)**

If applying for multiple applicable service categories, complete this section separately for each service category.

***Case Management* (Medical and Non-Medical) (if applicable)**

If applying for Case Management, complete this section separately for medical and non-medical.

20



20

## RFP NARRATIVE

|   |                   |
|---|-------------------|
| Section 2. Agency Experience (3 pgs. maximum) | Maximum Points: 6 |
|---|-------------------|

Provide narrative addressing the following:

1. Describe the agency's overall mission and service portfolio (no points)  
**Your agencies response here**
2. Describe the geographic area in which services are provided and where sites are located (no points)  
**Your agencies response here**
3. Describe the agency's experience providing care services to persons living with HIV/AIDS  
**Your agencies response here**
4. How does your agency define health equity? What steps are being taken to achieve health equity?  
**Your agencies response here**

## EXAMPLE OF NARRATIVE SUBMISSION

**Agency ACME intends to apply for Mental Health, Oral health and Medical Case Management**

**Complete sections 1-7**

**Complete section 8 twice, once for mental health and once for oral health**

**Complete section 9 once for medical case management**

21



21

## RFP APPENDICES

**List of Appendices:** Please note that if your agency applies for multiple service categories, some appendices will be required to be completed for each service category you apply for.

|                   |   |
|-------------------|---|
| <b>Appendix 1</b> | Internal Revenue Service 501(c)3  |
| <b>Appendix 2</b> | Proof of Valid registration in the system for award management, SAM.GOV   |
| <b>Appendix 3</b> | Client Demographics Template  |
| <b>Appendix 4</b> | Resumes & Job Descriptions for Key Staff; Relevant staff (new applicants only) and agency certifications and licenses (all applicants)            |
| <b>Appendix 5</b> | *Medicaid Certification (if applicable)   |
| <b>Appendix 6</b> | Budget (case management services only)<br>If applying for both Medical Case Management and Non-Medical Case Management, complete this form twice. |
| <b>Appendix 7</b> | Most recent financial statement or independent audit, OMB Circular A-133 Audit  |

- **Agency ACME intends to apply for Mental Health, Oral health and Medical Case Management**
  - Attach appendices 1-3, 5, 7 once
  - Attach appendices 4 three times, once for mental health, once for oral health and once for medical case management
  - Attach appendices 6 once for case management

22



22

## ACCESSING RFP WORKBOOKS

- [aidschicago.org/rw2022](https://aidschicago.org/rw2022)
- **Agencies will download**
  - Ryan White RFP (pdf)
  - RFP Narrative Workbook (MS Word)
  - RFP Forms Workbook (MS Word)

23



23

## SHAREPOINT

**Submit your documents using the SharePoint access link that will be provided upon submission of your organization's Intent to Apply form.**

### How to Upload Files to SharePoint

**For step-by-step guide to upload files to SharePoint, go to:**  
<https://support.office.com/en-us/article/Instructions Upload-files-to-a-library>

**AFC encourages agencies to read the file upload instructions to access the upload link well before the proposal due date to ensure there are no technical challenges. Email [BOlayanju@aidschicago.org](mailto:BOlayanju@aidschicago.org) with technical questions.**

24



24

## SAMPLE SUBMISSION THROUGH SHAREPOINT

The screenshot illustrates the process of uploading documents to a SharePoint site. It is divided into three numbered steps:

- Step 1:** Shows the 'New' button in the top navigation bar of a SharePoint document library named 'CARERFP2019'. A folder named 'ACME' is visible in the list below.
- Step 2:** Shows the 'Upload' dropdown menu open, with 'Files' selected. This indicates the user is about to upload a new file.
- Step 3:** Shows the document library after upload. The 'ACME' folder now contains two files: 'ACME Appendices.docx' and 'ACME Narrative.docx', both uploaded 'A few seconds ago' by 'Bashirat Olayanju'.

25

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25

## FORMATTING

**Ensure that the two separate PDF files are uploaded using the naming convention below.**

**File #1: Agency Name Narrative.pdf**

**File #2: Agency Name Appendices.pdf**

**For example, agency “ACME” submits a proposal for three service categories. The agency will upload two documents to SharePoint. File names would be:**

**“ACME Narrative.pdf” and “ACME Appendices.pdf”**

26

26

## Proposal Review



27



27

## PROPOSAL REVIEW & SCORING

### Consensus Scoring Process Steps:

1. **AFC has recruited review panelists to review applications. Each application will be reviewed by 3 reviewers**
2. **Review panelists will convene to discuss each proposal**
3. **Final scores will comprise of 60% proposal, 30% health equity index, 10% past performance (new agencies automatically get 10%).**

28



28

## PROPOSAL EVALUATION DIMENSIONS

- **"0" Does Not Meet Requirements:** Response does not meet RFP requirements and includes omissions, errors, and/or defects that are unacceptable.
- **"1" Somewhat Meets Requirements:** Response meets some but not all RFP requirements. Questions are answered with minimal omissions or errors.
- **"2" Meets Requirements:** Questions are answered completely, contain descriptive details, and have no omissions.
- **"3" Excellent:** Response exceeds RFP specifications. Narrative responses clearly detail the agency's operationalized best practices and innovative or enhanced approaches.

29



29

## PROPOSAL POINTS ALLOCATION

The table below highlights the maximum score each section can obtain.

| Narrative Sections   | Possible Points |
|--|-----------------|
| Table of Contents  | 1               |
| Agency Experience  | 6               |
| Target Population Needs                                    | 9               |
| Cultural & Linguistic Capacity & Health Equity             | 18              |
| Organizational and Fiscal Capacity                         | 21              |
| Payer of Last Resort                                       | 12              |
| Quality Management   | 9               |
| * Core and Supportive Services (excluding case management) | 24              |
| * Case Management (Medical and Non-Medical)Categories      | 24              |
| <b>Total possible points per service category</b>          | <b>100</b>      |

30



30

## OTHER SUPPORT PROVIDED

- Database training and support
- Ticketing system for questions
- Policy and quality management plan support
- For brand new agencies, AFC will host monthly support sessions with each agency to ensure proper onboarding
- Over 80 trainings will be available per year through AFC on multiple topics to support case managers and other staff
  - Some trainings are mandatory for example cultural competence
- Translation services
- Medical transportation and food vouchers (through case manager ONLY)
- Other resource supports

31



31

## THANK YOU!

[aidschicago.org/rw2022](https://aidschicago.org/rw2022)

**INTENT TO APPLY DUE: FRIDAY, SEPT. 16, 2022**

**PROPOSAL DUE: FRIDAY, OCTOBER 14, 2022**

For questions, please contact Bashirat Olayanju, Vice President, Care, at [Bolayanju@aidschicago.org](mailto:Bolayanju@aidschicago.org) or 312-334-0951.

**Email Subject Header: "2022 Ryan White RFP Questions"**

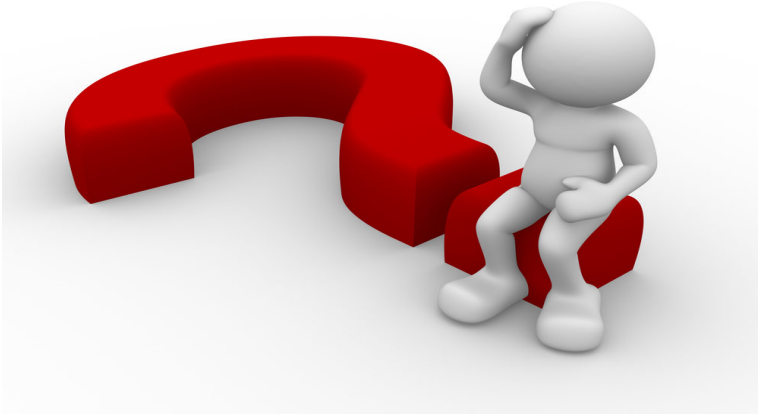
32



32



# QUESTIONS



## Ryan White CARE RFP Bidders Conference QA Section

Q: For appendix 4, do we need to include all resumes and job descriptions for current staff?

A: No, you do not. Existing agencies currently partnering with AFC do not need to upload resumes, job descriptions for current staff. Potential partners who are applying for the first time will need to.

Q: If we are asking for a new job description/position, do we need a job description for that?

A: Yes

Q: Are we committed to all the areas we submit for intent to apply?

A: No, you are not committed to applying to all that you “intent to apply” for.

Q: If we are applying for Medical Case Management and Oral Health, the budget will only reflect the Medical Case Management costs, correct?

A: Correct. This is because case management is the only category that is salary based while the rest are fee for services. In the proposal narrative in, section 8, there is a specific question on unit costs where you can enter your fees for all other categories.

Q: If I am applying as a for profit to provide specialty care, will client eligibility be provided by the referral agency?

A: Yes, absolutely. If agencies are referring to you the eligibility documents will be completed in advance. There are instances where clients may be recruited that need services but are not in case management, and they would need to be referred to Care Plus (AFC's Case Management Hot line), for a case management assignment to ensure all eligibility documents are in place.

Q: We currently only have HIV prevention services. Is this opportunity a chance to for us to begin building our HIV treatment services--currently our HIV positive numbers are very low.

A: Yes, we've had many agencies that start in the prevention field and graduate to provide treatment and care services. Most agencies we work with have both prevention and care in house. Additionally, your HIV positive case load could be built up through referrals from the CarePlus hotline at AFC.

Q: For each of the funding categories, do agencies recruit clients on their own or are they referred by AFC?

A: It will be a mixture of both.

Q: We are 99% sure of the areas we will apply in, but will there be a problem if they differ slightly between the intent to apply and the actual proposal?

A: No, it will not. The goal is to get an idea of who will apply for what. What you put in the proposal will be what is reviewed and scored.

Q: For Appendix 4. If we are currently funded, does this mean the “relevant staff (new applicants)” does not apply to our application?

A: Correct, yes, you most likely have submitted those documents to us in the past.

A: This question may have an extensive answer that is best provided in writing. What certifications and licenses do you expect to see in each service category?

Q: Case Managers are required to have a degree in a human service field. If the degree is outside a human service field, case management experience is taken into consideration. All other certifications and licenses are in line with what is needed to practice in the state of Illinois.

Q: What is the size of the eligible Ryan White population over 35 years of age in Chicago?

A: Unfortunately we do not have this data quickly available, but this info can be requested by us and we can submit a request from our data service department, but the majority of clients are 45+.

Q: Can you please reiterate when Appendix 5 is required?

A: There are services that are billable under Medicaid, and since RW is a payer of last resort, we look for agencies that are Medicaid certified, so that they can bill Medicaid and then can bill RW for any services not covered. we would need tis form for any services provided that are Medicaid billable.