

2026 RW RFP Frequently Asked Questions (Part 2)

Question:

For organizations without a federally negotiated indirect cost rate, OMB Uniform Guidance allows use of the 15% de minimis indirect rate. For this RFP:

- Is use of the 15% de minimis indirect rate permitted for the prime applicant portion of the contract, where applicable?

Answer: No, indirect costs are not allowable under the RFP. Programmatic operating costs, which are directly allocable to the program, are allowable.

- Separately, does AFC's \$2,500 cap on indirect costs for subcontractors still apply for this funding cycle?

Answer: Indirect costs are not allowable under the RFP. There is no cap on Programmatic Operating costs, but AFC can only provide as much support as our funding allows.

Question:

Can applicants receive awards for less than the amount they apply for in fee-for-service funding categories?

Answer: Yes, funds are allocated based on funding, which could result in a agency not getting exactly what they asked for.

Question:

Is there a minimum staff FTE to provide medical benefits case management?

Answer: With most positions they should be 100% FTE or 50% FTE.

Question:

If we are applying for ambulatory/outpatient and mental health, should you provide their licenses and certifications?

Answer: Yes, licenses and certificates should be submitted for your mental health staff.

Question:

If you have new staff that will be supported by your grant, should you submit the job descriptions and resumes of the staff.

Answer: Yes, you should submit job descriptions and resumes for all new staff.

Question:

Can you ask for an increase from our previous funding? Can you request to provide additional services if you are already providing the services.

ANSWER: Yes, you can always ask for more funds, and you can request to provide more services. Additional funding is not guaranteed.

Question:

Under this grant are services only able to be provided by a clinically licensed therapist (i.e. LCPC, LCSW, etc.), or would services qualify if provided by a non-clinically licensed staff (i.e., LSW, LPC, MSW, etc.) who is supervised and signed off by a licensed clinical provider?

Answer: A non-clinical license staff can provide services with the proper supervision/sign-off from a licensed supervisor. We would need the license for both staff persons.

Question:

For other grants we have used 1 unit of services for each 1:1 session (intake, assessment, counseling, etc.) or 1 unit for a group counseling (2 hr.) session. However, in preparation for 3rd party billing, we have been considering moving to a 15 min billing increment using an 8-minute rule. Is there a preferred method for this grant?

Answer: We do not have a preferred method.