Questions & Answers
Updated 04/08/2022

1. **QUESTION:** Is it possible for a short Addendum 1 to be released listing all the changes instead?

**RESPONSE:** No, it is not possible to release a “short Addendum 1.” However, the following are the corrections memorialized in Amendment 1 to the Health Resources and Services Administration (HRSA) Ending the HIV Epidemic (EHE) Initiative NOFO:

   i. Page 6, PRE-PROPOSAL CONFERENCE AND COMMUNICATION WITH THE COUNTY
      A Pre-Proposal Conference will be held at 12:00 p.m. on Monday **Tuesday**, March 15, 2022 online using WebEx. Attendance at the Pre-Proposal Conference is strongly recommended.

   ii. Page 24, EHE NOFO and Application Reference Documents
      The following reference documents shall be required should the Proposer move to the contracting phase can be found in Exhibits 14 15 through 20.

2. **QUESTION:** Will there be a livestream or recording of the session that we could access?

**RESPONSE:** Yes, to both options. 1st - the Pre-Proposal Conference will be available in real-time virtually using WebEx. Please click [NOFO](https://discover.pbcgov.org/communityservices/Pages/Ryan-White-CARE.aspx) and go to the PRE-PROPOSAL CONFERENCE AND COMMUNICATION WITH THE COUNTY section on page 6 of the for additional details; and 2nd - a Video recording of the available will be available via the web in the Ryan White Program Notice of Funding Opportunity Section at: [https://discover.pbcgov.org/communityservices/Pages/Ryan-White-CARE.aspx](https://discover.pbcgov.org/communityservices/Pages/Ryan-White-CARE.aspx)

iii. **QUESTION:** Should we budget for the full costs of HIV medications for REC patients for all first fills, or do we need to apply for other forms of medication assistance (ie patient assistance programs) prior to billing medications to this grant?

**RESPONSE:** A proposer may budget for the anticipated cost of the medication for the program. If the program intends to utilize copay assistance for this service, it is to the discretion of the proposer to determine the impact that will have on their budget.

iv. **QUESTION:** If a newly diagnosed REC patient has insurance through an HMO, and that HMO requires a referral from the primary care provider that delays entry to care, can their first visit qualify as an REC patient?
RESPONSE: Any newly diagnosed or returning client who is unable to access an introductory HIV medical appointment and medication from a private provider within 3 days is eligible to utilize rapid entry to care services. Agencies’ specific policies may vary based on program structure.

v. QUESTION: Will the County require a signed CSN form and/or Medicaid screen in PE prior to a patient receiving an REC visit?”

RESPONSE: All clients receiving EHE services will be required to have a valid Coordinated Services Network (CSN) agreement form on file and complete an EHE Enrollment through Provide. A service will not be billable to EHE unless these conditions are met. Referrals for EHE services will not be available unless these conditions are met. The EHE enrollment form consists of basic demographic information and proof of HIV status and all EHE service providers will be trained on completing it. Medicaid screenings do not need to be completed prior to receiving services, but agencies should make reasonable attempts to ensure EHE is payer of last resort.