

ADDENDUM #1

May 12, 2025

New York State Department of Health AIDS Institute

Request for Applications (RFA) Clinical Education Initiative (CEI)

Component A: Topic-Specific Centers of Excellence
Component B: Resource Center of Excellence

The following are official modifications, which are hereby incorporated into **RFA #20629**, Internal Program #23-0014 / SFS #: CEIA2025 (Component A) & CEIB2025 (Component B).

Deleted language appears in strikethrough (“~~xxx~~”) and added language appears in **red** text. The information contained in this amendment prevails over the original RFA language. **Applicants should review all documents in their entirety to ensure all amended language is incorporated into their applications.**

The following change is made to Section IV. Administrative Requirements, H. Payment & Reporting Requirements of Grant Awardees in the Request for Applications:

3. The Grantee will be required to submit the following reports to the Department at the address above or, if requested by the Department, through the Statewide Financial System:
 - A monthly narrative addressing program implementation, barriers, and accomplishments.
 - ~~Monthly client service and outcome data through the AIDS Institute Reporting System (AIRS).~~ <http://www.airsny.org/>

All payment and reporting requirements will be detailed in “Attachment D: Payment and Reporting”, of the final State of New York Contract For Grants.

The following change is made to Attachment 2: Stipend Reimbursement Guidance

Providers (Physician, Physician Assistant, or Nurse Practitioner)

Preparatory time for a presentation of 1 to 3 hours cannot exceed 4 hours @ \$125.00/hour

Honorarium for live presentation cannot exceed \$500.00

Enduring credit presentation (2-year limit) cannot exceed \$750.00

Total preparatory time allocation and honorarium cannot exceed \$1,200.00

Preceptorships

~~Honoraria for preceptorship consisting of 6—8 hours per day may be \$500 for 1-2-day preceptorship and \$1,000 for 3-5 day preceptorship.~~

The honorarium includes travel costs. The CEI Contract Manager will review and may approve a higher rate on a case-by-case basis.

The following changes are made to Attachment 3: Glossary of Teams

Target Audience: ~~Please refer to Section III. Project Narrative/Work Plan Outcomes, A. Program Model Description, Component A: Topic-Specific Centers of Excellence, and/or Component B: Resource Center of Excellence, Outcomes, 1. Target Audience in the Request for Applications for descriptions of the Target Audience.~~

Web Application or App: A web application or mobile application that provides learners with access to organized, easy to use information in the form of documents, videos and other tools via a computer or other mobile device. An important feature of an app is the ability to automatically update information without requiring the learner to take action to reinstall or update the app.

Conferences: conducted on highly focused or broad-scope topics organized by each Center of Excellence and credited as their one conference. Conferences solicit content from colleagues who are providing and sharing ideas and up to date information and can be organized as either a full day or half day conference.

Digital Health: the provision of health promotion or health care services mediated by digital technology such as mobile devices, sensors, social media, genomics, internet, health information technology, artificial intelligence, and data systems.

Distance Learning or Distance Education: a very broad term referring to any mode of delivering education or instruction to clinicians who are not physically present in a traditional setting. Distance learning provides access to learning when the source of information and the learners are separated by time and distance, or both.

~~**ECHO (Extension for Community Healthcare Outcomes):** a video conference-based “telementoring” program that brings together providers with CEI experts to build a learning community using brief didactics and case-based discussions.~~

Health Hubs: The Drug User Health Hubs are expected to improve the availability and accessibility of an array of appropriate health, mental health, and medication assisted treatment services for people who use drugs, especially but not solely injection drug users (IDUs).

Reference: <https://www.health.ny.gov/diseases/aids/consumers/prevention/>.

Narrated Slide Presentation: an educational presentation using slides or other visuals along with pre-recorded narration by the instructor. A narrated slide presentation to progress automatically or at the learner’s direction, often using software such as Microsoft PowerPoint.

Interactive On-Line Training: a formal, organized training that can be accessed 24 hours a day on the internet that is self-paced and actively engages the learner with the material. Interactive distance learning trainings supported under the initiative should not require live facilitation.

~~**Preceptorship:** intensive, in-person clinical skills training with a preceptor. Mentorship experience and education program in which practicing clinicians receive didactic sessions and in-person experiential instruction and training from HIV, STI, HCV, and drug user health experts.~~

Social Media: a form of electronic communication (e.g., websites for social networking- Facebook, Twitter, LinkedIn, Instagram, YouTube, etc.) through which users (i.e. healthcare professionals and microblogging) create online communities to share clinical information, discuss healthcare policy and practice issues, and engage, educate and interact with other health professionals and affiliated health organizations.

~~**Teleconsulting:** a form of case-based clinical consultation which uses video conferencing technology to connect an instructor/specialist with primary care providers at one or more remote sites for the purposes of collaborative decision-making in the diagnosis and treatment of the learner's patients, without requiring the presence of the patient.~~

Webcast: an educational presentation that may be live or pre-recorded in which both audio and video are accessed by the learner via the internet or materials downloaded from the internet. In many cases, the learner will use Windows Media Player, QuickTime, or another player to view and listen to the program. Examples of webcast range from live streaming of a presentation to posting a video of a previously recorded presentation.

Webinar: a live online educational presentation during which participating viewers can submit questions and comments. Webinars are generally hosted via a particular webinar platform such as Abode, Webex, Zoom, or other service. In some cases, the learner will access both audio and video via a computer and in other cases, audio may be accessed via the telephone.

Attachment 2
Stipend Reimbursement Guidance

Clinical Education Initiative (CEI) RFA
RFA #20629

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The honorarium includes travel costs. The CEI Contract Manager will review and may approve a higher rate on a case-by-case basis.

Attachment 3 Glossary of Terms

Clinical Education Initiative (CEI) RFA RFA #20629

Target Audience: Please refer to Section III. Project Narrative/Work Plan Outcomes, A. Program Model Description, Component A: Topic-Specific Centers of Excellence, and/or Component B: Resource Center of Excellence, Outcomes, 1. Target Audience in the Request for Applications for descriptions of the Target Audience.

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RFA #20629 / Internal Program #: 23-0014
SFS #s: CEIA2025 (Component A) & CEIB2025 (Component B)
SFS Event Names: RFA #20629: Clinical Education Initiative - Comp A
(Component A)
RFA #20629: Clinical Education Initiative - Comp B (Component B)

New York State Department of Health
AIDS Institute
Office of the Medical Director

Request for Applications

Clinical Education Initiative (CEI)

This is a procurement which encompasses two (2) Components:

Component A: Topic-Specific Centers of Excellence

Component B: Resource Center of Excellence

In order to apply for this Request for Applications, eligible applicants must be prequalified in the Statewide Financial System and must submit an application via the Statewide Financial System.

Applicants may submit no more than two (2) applications in response to this Request for Applications.

KEY DATES

Release Date:	April 10, 2025
Questions Due:	April 24, 2025, by 4:00 PM ET
Questions & Answers Published (on or about):	May 8, 2025
RFA Applications Due in SFS:	May 28, 2025, by 4:00 PM ET

Department of Health Contact Name & Address:

Contact Name: Beatrice Aladin, Director

Initiative Name: Clinical Education Initiative

Bureau: Office of the Medical Director, AIDS Institute

Email: CEIRFA@health.ny.gov

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I. Introduction

The New York State Department of Health (herein referred to as the Department) AIDS Institute (NYSDOH AI), Office of the Medical Director announces the availability of \$2,060,000 annually in New York State funds to provide clinical education in a variety of formats to New York State Medical Doctors (MDs), Doctors of Osteopathy (DOs), physician assistants, nurse practitioners, registered nurses, and other public health staff working in sexual health/STI clinics. The intent of the Request for Applications (RFA) is to award a total of \$2,060,000 annually across four (4) centers for a period of five (5) years.

A. Background/Intent

For over 25 years, the New York State Department of Health AIDS Institute's Clinical Education Initiative (CEI) (<https://ceitraining.org/about/>) has played a crucial role in enhancing the capabilities of healthcare providers to diagnose and provide care for individuals living with HIV, Hepatitis C, sexually transmitted infections (STIs), and drug use. The initiative has targeted a diverse clinical audience that includes Medical Doctors (MDs), Doctors of Osteopathy (DOs), physician assistants, nurse practitioners, registered nurses, and other public health staff working in sexual health/STI clinics. The program trains more than 11,000 healthcare providers annually, empowering them with the necessary knowledge and skills to deliver optimal care to their patients. The initiative's dedication to excellence is reflected in the distribution of approximately 30,000 Continuing Medical Education credits for in-person live and online trainings from October 2022 to September 2023.

Clinical Education Initiative (CEI) supports four (4) core categories of activities, including:

- **Educating:** Provide progressive HIV, Hepatitis C, sexual health, and drug user health education to clinicians, with an emphasis on improving clinical care and promoting equitable health outcomes across all populations;
- **Expanding:** Expand the healthcare provider workforce able to provide up-to-date clinical care related to HIV, Hepatitis C, sexual health, lesbian, gay, bisexual, transgender, queer and/or questioning, intersex, + (LGBTQIA+) health, and drug user health;
- **Disseminating:** Disseminate AIDS Institute clinical guidelines; and
- **Collaborating:** Foster partnerships with recognized professional associations, other clinical education providers, health systems, and other community partners to co-sponsor, promote and expand access to clinical education opportunities.

Clinical Education Initiative (CEI) provides training in various in-person and virtual formats, employs emerging social media and digital technologies, and makes available a comprehensive array of tools and resources. These resources are carefully curated to enhance provider capacity, enabling them to stay current with the latest New York State Department of Health AIDS Institute Clinical Guidelines (see www.hivguidelines.org). The initiative ensures that healthcare providers have access to standard of care in New York state with regard to the medical care, treatment and prevention, thereby upholding the highest quality of healthcare delivery and safeguarding the well-being of diverse patient populations throughout the state.

Through its longstanding commitment to clinical education, Clinical Education Initiative plays a vital role in fostering a skilled and knowledgeable healthcare workforce. By continuously enhancing the capacity of healthcare providers, the program contributes to improved patient

care, diagnosis, and positive treatment outcomes for individuals living with HIV, Hepatitis C, STI's, and drug use.

Clinical Education Initiative's impact reaches far and wide, positively shaping the landscape of healthcare by empowering clinicians with tools, knowledge, and expertise required to navigate the complexities of critical health concerns such as HIV, Hepatitis C, STIs, and substance use. Clinical Education Initiative recognizes the pressing importance of expanding the healthcare workforce, extending its influence beyond numerical growth, and delving into the core of healthcare quality. The need to broaden the ranks of Medical Doctors (MDs), Doctors of Osteopathy, nurse practitioners, physician assistants, registered nurses, and other public health staff working in sexual health/STI clinics is not just a matter of quantity, but, more significantly, one of equipping clinicians with up-to-date skills and progressive education. It is essential that clinicians are well-versed in the latest research, treatment, and best practices to ensure patients receive the highest standards of care. Clinical Education Initiative embraces the responsibility of keeping the current healthcare workforce up to date, while also actively contributing to the expansion of this workforce, ushering in a new era of healthcare that embraces accessibility, quality, and patient-centered care.

Expanding the healthcare workforce takes on paramount significance when it comes to addressing the escalating demand for healthcare services, especially in the context of treating and caring for conditions such as HIV, Hepatitis C, Sexually Transmitted Infections (STIs), MPox, substance use disorders, opioid overdose, and emerging health issues. This expansion not only bolsters accessibility to healthcare services but is instrumental in reducing patient waiting times and ensuring timely care, which is particularly critical for conditions requiring swift intervention. The growing workforce equips healthcare providers with knowledge and skills required to efficiently manage the complexities of contemporary healthcare, catering to a broader spectrum of patient needs. The workforce expansion is about making quality care more accessible and equitable, ultimately contributing to the improved health and well-being of individuals and communities.

Healthcare providers play a critical role in navigating intricate systems, policies, and care structures to ensure equitable access to quality services for all patients. It is essential for clinicians to be aware of explicit and implicit biases that can arise when treating a diverse patient population. Central to this effort is a commitment to health equity, requiring clinicians to address social determinants of health, identify and mitigate biases, and work with other members of the healthcare team and community organizations to address complex patient needs. By actively promoting inclusivity, cultural humility, and patient-centered care, clinicians can provide equitable care for all individuals and contribute to closing the gap in health disparities.

Clinical Education Initiative's primary objective is to keep clinicians up to date and expand the healthcare workforce. The Continuing Medical Education offered by Clinical Education Initiative is specifically designed to offer clinicians the opportunity to enhance their proficiency and stay current in areas of critical importance such as HIV, Hepatitis C, Sexually Transmitted Infections (STIs), and substance use disorders. By participating in Clinical Education Initiative's activities, clinicians can broaden their clinical skill set, acquire new techniques, and explore innovative approaches to patient care. In addition, Clinical Education Initiative's progressive Continuing Medical Education (CME) equips clinicians with knowledge and tools they need to be champions of positive change within their communities. Clinical Education Initiative aims to be an authoritative, credible, and innovative health information resource in HIV, Hepatitis C, sexual health, and drug user health for New York State clinical providers.

Demonstration of a Commitment to Health Equity

Health Equity is the fair and just opportunity for everyone to achieve optimal holistic health and well-being regardless of social position or other social or structural determinants of health. This requires addressing avoidable inequalities (e.g., access to affordable and high-quality food, housing, education, health care/services, and safe environments), historical and contemporary injustices (e.g., economic injustice/poverty, racism, classism, ableism, sexism, homophobia, transphobia, xenophobia, and other forms of oppression, discrimination, and/or stigma), and equally valuing different perspectives on health. Health equity acknowledges the historical and structural underpinnings of race, racism, and genocide in the United States that perpetuate many of the racial inequities that have manifested today. Because health equity can never truly be achieved without racial equity, it is important to work toward achieving both.

The New York State Department of Health AIDS Institute works closely with its community partners to identify and respond to current needs. The needs are wide and varied, but they center on addressing social determinants, such as socioeconomic status, education, housing, transportation, employment, cultural competence, access to healthcare services, and discrimination. The New York State Department of Health AIDS Institute is committed to ensuring our funded programs and partners are equipped with the knowledge, skills, and expertise to adequately address health and social inequities. The New York State Department of Health-issued [Health Equity Competencies for Health Care Providers](#) and [Organizational Considerations in Support of Health Equity](#) as key guidance documents regarding the provision of healthcare services. All healthcare providers are accountable to pay attention to the intersections of race and health equity. The New York State Department of Health AIDS Institute and its community partners are committed to the implementation of new and tailored approaches to address the challenges faced by our Black/Brown, Indigenous, and People of Color (BIPOC) communities. In our mission to ensure that everyone has a fair chance to experience optimal health, we are employing the following health equity principles:

- Be Explicit About the Importance of Addressing Health Equity.
- Identify and Effectively Address Racism and Racial Implicit Biases.
- Adopt a “[Health Across All Policies](#)” Approach.
- Create an Internal Organization-Wide Culture of Equity.
- Respect and Involve Communities in Health Equity Initiatives.
- Measure and Evaluate Progress in Reducing Health Disparities.

Ending Epidemics in New York State

In June 2014, New York State announced a three-point plan to end the AIDS epidemic in New York.¹ This plan provided a roadmap to significantly reduce HIV infections to a historic low by the end of 2020, with the goal of achieving the first ever decrease in HIV prevalence. The plan also aimed to improve the health of all HIV positive New Yorkers and was the first jurisdictional effort of its kind in the United States. The three points highlighted in the plan are:

1. Identify persons with HIV who remain undiagnosed and get them linked to care;
2. Link and retain persons diagnosed with HIV in health care to maximize viral suppression; and
3. Increase access to Pre-Exposure Prophylaxis (PrEP) for persons who are HIV negative.

New York State has been laying the groundwork for ending the AIDS epidemic since the

¹ https://www.health.ny.gov/diseases/aids/ending_the_epidemic/index.htm

disease emerged in the early 1980s. New York State's response to the HIV/AIDS epidemic has involved the development of comprehensive service delivery systems that evolved over time in sync with the evolution of AIDS from a terminal illness to a manageable chronic disease. This strategy enabled the state to implement new technologies as they were introduced, including new treatments, new diagnostic tests and, more recently, Pre-Exposure Prophylaxis (PrEP). By building upon each individual success and relying on a strong administrative infrastructure, the state was able to roll out innovative programs quickly to achieve the greatest impact. Ending the Epidemic in New York State is within reach, thanks to aggressive and systematic public health initiatives that have made it possible to drive down rates of new infections. The State's Ending the Epidemic (ETE) initiative was launched with visionary leadership and extensive stakeholder leadership and participation.

The Request for Applications specifically addresses these Ending the Epidemic Blueprint (BP) recommendations:

BP3: Address acute HIV

BP4: Improve referral and engagement

BP5: Continuously act to monitor and improve rates of viral suppression

BP12: Include a variety of statewide programs for distribution and increased access to Pre-Exposure Prophylaxis (PrEP) and Non-Occupational Post-Exposure Prophylaxis (nPEP)

BP15: Increase momentum in promoting the health of people who use drugs

BP19: Institute an integrated comprehensive approach to transgender health care and human rights

BP22: Access to care for residents of rural, suburban, and other areas of the state

The Ending the Epidemic Blueprint continues to guide all Ending the Epidemic efforts. The Ending the Epidemic Addendum Report is a written report that provides an overview of the past five years of New York State's Ending the Epidemic initiatives, as well as a summary of the community feedback sessions that were conducted in 2020 to assist in identifying areas of focus for Ending the Epidemic beyond 2020.

The Ending the Epidemic Blueprint and the Ending the Epidemic Addendum report are available on the New York State Department of Health's website at: www.health.ny.gov/endingtheepidemic

In November 2021, New York State released its [plan](#) to eliminate Hepatitis C as a public health problem in NYS by 2030. To achieve the goal of Hepatitis C elimination, concerted efforts are needed to ensure access to timely diagnosis, care, and treatment for all people with the Hepatitis C. New York plans to eliminate Hepatitis C by:

- Enhancing Hepatitis C prevention, testing, and linkage to care services for people who inject drugs, people who are incarcerated, men who have sex with men, and other populations disproportionately impacted by Hepatitis C infection;
- Expanding Hepatitis C screening and testing to identify people living with Hepatitis C who are unaware of their status and link them to care;
- Providing access to clinically appropriate medical care and affordable Hepatitis C treatment without restrictions and ensure the availability of necessary supportive services for all New Yorkers living with Hepatitis C;
- Enhancing NYS Hepatitis C surveillance, set and track Hepatitis C elimination targets, and make this information available to the public; and
- Addressing social determinants of health.

Other relevant resources are the National HIV/AIDS Strategy (NHAS) and the New York State Prevention Agenda. The National HIV/AIDS Strategy is a five-year plan that details principles, priorities, and actions to guide our collective national response to the HIV epidemic.² Information on the National HIV/AIDS Strategy and updates to the strategy through 2025 can be found at: <https://www.hiv.gov/federal-response/national-hiv-aids-strategy/national-hiv-aids-strategy-2022-2025>. The New York State Prevention Agenda is the blueprint for state and local action to improve the health of New Yorkers in five priority areas and to reduce health disparities for racial, ethnic, disability and low socioeconomic groups, as well as other populations who experience them.³ The New York State Prevention Agenda can be found on the following website: https://www.health.ny.gov/prevention/prevention_agenda/2019-2024/.

B. Available Funding

Up to \$2,060,000 in New York State funding is available annually to support programs funded through this Request for Applications. Funding will be allocated as stated in the chart below. Annual awards will not exceed \$2,060,000.

New York State Department of Health Center of Excellence	Award Amount	Number of Awards
Component A – Topic-Specific Center of Excellence		
HIV Primary Care and Prevention Center of Excellence	\$560,000	1
Sexual Health Center of Excellence	\$560,000	1
Hepatitis C (HCV)/Drug User Health (DUH) Center of Excellence	\$560,000	1
Component B		
Resource Center of Excellence	\$380,000	1

Applicants may submit no more than two (2) applications in response to this Request for Applications. All applications will be reviewed and evaluated competitively using an objective rating system reflective of the required items specified for each section.

For Component A, one (1) award will be made to each of the highest scoring Topic-Specific Center of Excellence. One (1) award will be made for Component B. If there is an insufficient number of acceptable applications (scoring 70 or above) received from any component or topic, the New York State Department of Health AIDS Institute reserves the right to:

- Fund an application scoring in the range of (60-69);
- Apply unawarded funding to a different Component or Topic-Specific Center; or
- Re-solicit that component or Topic-Specific Center.

The New York State Department of Health AIDS Institute reserves the right to revise the award amounts as necessary due to changes in availability of funding or New York State Department of Health AIDS Institute priorities. Should additional funding become available, the New York State Department of Health AIDS Institute may enhance awards to funded organizations.

² National HIV/AIDS Strategy

³ Prevention Agenda 2019-2024: New York State's Health Improvement Plan

Current Contractors: If a currently funded Clinical Education Initiative Center chooses to not apply for this funding, the New York State Department of Health AIDS Institute highly recommends notifying your community partners of your intent to discontinue services supported under Clinical Education Initiative. This may encourage other eligible entities to apply for this funding.

All applicants for Component A and Component B are instructed to submit **Attachment 1: Statement of Assurances** signed by the Chief Executive Officer (CEO) or Designee to certify the organization meets all criteria listed on **Attachment 1**. Applicants are instructed to upload the signed **Attachment 1** in SFS in response to Bid Factor question 1d, Program Specific Questions (PSQ)/Bid Factors– Component A or Bid Factor question 1f, Program Specific Questions (PSQ)/Bid Factors– Component B.

II. Who May Apply

A. Minimum Eligibility Requirements

All applicants must meet the following Minimum Eligibility Requirements:

Component A: Topic-Specific Centers of Excellence

HIV Primary Care and Prevention Center of Excellence (COE)

Sexual Health Center of Excellence (COE)

Hepatitis C (HCV)/Drug User Health Center of Excellence (COE)

- Applicant must be located in, and conduct business in, New York State.
- Applicant must be a not-for-profit Academic Medical Center or Community Health Center with at least five (5) years of experience in the area of clinical expertise for which they are applying.
- Applicant must demonstrate one (1) year of experience as an or working with an approved provider of credits through the Accreditation Council for Continuing Medical Education or contract with such an entity. This information should be included as a response to Bid Factor question 2d, Program Specific Questions (PSQ)/Bid Factors – Component A.
- Applicant must identify a qualified Medical Director who will serve as Principal Investigator and is prepared to dedicate 25% of their time to CEI. This information should be provided as a response to Bid Factor question 1h, Program Specific Questions (PSQ)/Bid Factors– Component A.
- Applicant must be prequalified in the New York State Statewide Financial System (SFS), if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due as specified in the “Key Dates” set forth on the Cover Page of this RFA.

Component B – Resource Center of Excellence (COE)

- Applicant must be located in, and conduct business in, New York State.
- Applicant must be a not-for-profit Academic Medical Center, university or professional educational organization, non-profit community-based organization, or a not-for-profit technology company.

- Applicant must be prequalified in the New York Statewide Financial System (SFS), if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due as specified in the “Key Dates” set forth on the Cover Page of this RFA.

III. Project Narrative/Work Plan Outcomes

A. Program Model Description

Component A: Topic-Specific Centers of Excellence

The Topic-Specific Centers of Excellence (COE) will serve as statewide Clinical Education programs addressing one of the designated clinical topics: HIV Primary Care and Prevention, Sexual Health, or Hepatitis C Virus/Drug User Health. Centers will utilize Specific/ Measurable/ Achievable/ Relevant/ Time-Bound (SMART) goals to plan, implement, and evaluate clinical education activities. The funded applicants will deliver a mix of live in-person and virtual events, including asynchronous online clinical education programs, develop brief podcasts and videos, convene an annual conference, and prepare other print and digital clinical education tools. The intended audience for the activities of the Clinical Education Initiative (CEI) include Medical Doctors (MDs), Doctors of Osteopathy (DOs), physician assistants (PAs), nurse practitioners (NPs), registered nurses (RNs), and other public health staff working in sexual health/Sexually Transmitted Infections (STI) clinics.

It is an expectation of each funded applicant to address health equity and racial justice in all programmatic activities.

Topic-Specific Centers will plan and conduct their own online education programs and work with the Resource Center in its role to register learners, award Continuing Medical Education (CME) certificates and/or credits, and archive and maintain programs on the Clinical Education Initiative (CEI) website. All Clinical Education Initiative (CEI) Centers will work collaboratively as needed to facilitate access to training and develop multimedia materials for the intended audience. Each Topic-Specific Center will work with the Resource Center to facilitate access to educational resources and drive continuous improvement in Clinical Education Initiative (CEI) online learning environment. Each Topic-Specific Center will be responsible for ensuring adequate access to clinical expertise and training in all areas of the state, including rural areas and other under-resourced areas.

Topic-Specific Centers will work with the Resource Center to establish statewide visibility and become a trusted source of clinical education in a manner that engages its target audience of clinical providers. Each Topic-Specific Center will engage in its own promotional efforts and will also collaborate with the Resource Center to promote Clinical Education Initiative (CEI) activities using various digital mediums. Topic-Specific Centers will work with statewide and regional professional organizations to sponsor and promote clinical education opportunities. All Clinical Education Initiative (CEI) Centers will work to refer learners who are not Medical Doctors (MDs), Doctors of Osteopathy (DOs), nurse practitioners (NPs), Physicians Assistants (PAs), or nurses to the appropriate AIDS Institute-supported training initiative.

Each Topic-Specific Center will be responsible for managing and supporting the process of routine approval of all relevant courses for Continuing Medical Education (CME) credits for clinicians. Continuing Medical Education credits refer to the units awarded to healthcare providers for their participation in accredited educational activities. Continuing Medical Education (CME) certificates must be awarded to learners through the CEItraining.org website’s learner interface (i.e. MyCEI). CME certificates are documents issued upon completion of CME

activity. On a limited basis, the AIDS Institute may request that certain courses include the offer of continuing education for other professions, such as pharmacists, but these will not be routinely offered. Each Topic-Specific Center will cover its cost of course approval and the awarding of individual certificates and will be expected to negotiate competitive rates for course approval and learner certificates. This will serve to maximize use of resources to support the educational programs. The cost of Continuing Medical Education (CME) course approval and learner certificates will be subject to AIDS Institute approval.

Each Topic-Specific Center will work with the Resource Center to respond to Clinical Education Initiative (CEI) hot-line calls by providing case-based educational consultation in their specific areas of clinical expertise.

Centers will carry out the performance measures for major activities, define priorities for improvement, and implement improvement strategies based on data. Centers will work with the New York State Department of Health AIDS Institute Office of Program Evaluation and Research to examine process and outcome measures. (See **Attachment 3: Clinical Education Initiative Glossary Terms**).

Staffing Structure

Each Topic-Specific Center will establish the following staffing plans to administer a large-scale statewide Clinical Education Initiative addressing the goals outlined in the Request for Applications.

1. Medical Director: will be a NYS-licensed physician (minimum Full Time Equivalent (FTE) .25) with significant demonstrated expertise in the specific topic addressed by the center. The responsibilities of the position will include providing overall clinical leadership for the Center; oversight of the development of the program plan and clinical content of education programs; oversight of the budget; oversight of outreach, education, and evaluation activities; and reporting to the New York State Department of Health AIDS Institute. The Medical Director must attend the annual Clinical Education Initiative (CEI) in-person or virtual all-center meeting. The Medical Director will maintain active involvement in the New York State Department of Health AIDS Institute's Clinical Guidelines program by participating on the Medical Care Criteria Committee. Information about this committee can be obtained at the following link: https://www.hivguidelines.org/home/about/#tab_1_0.
2. Program Director (minimum Full Time Equivalent (FTE) .9): will have a master's degree in public health, nursing, education, or a related field. The Program Director should have experience coordinating educational programs, developing curricula, and working with clinical providers and health care organizations. The responsibilities of the position will include program outreach and promotion, coordination of program logistics, development of materials and curricula, implementation of program evaluation, and collection and reporting of program data to the New York State Department of Health AIDS Institute.
3. Program Coordinator (minimum Full Time Equivalent (FTE) 1.0): will have a bachelor's degree, or preferably a master's degree in public health or related field. The Program Coordinator supports the Program Director in organizing and managing various aspects of the Clinical Education activities. The responsibilities of the position will include supporting the Medical Director and Program Director/Manager; portfolio coordination;

stakeholder collaboration; resource management; and event planning and execution, including hosting and managing technology during virtual sessions.

4. **Faculty Subject Matter Experts:** Each Topic-Specific Center will be responsible for developing and maintaining an adequate panel of faculty/speakers with specific expertise in screening, prevention, diagnosis, and treatment related to the specific clinical topic addressed. Centers are encouraged to form relationships with a diverse faculty from throughout the state, representative of the communities most impacted by HIV, Sexually Transmitted Infections (STIs), Hepatitis C (HCV), and substance use. Centers are encouraged to recruit faculty from the various New York State Department of Health AIDS Institute Clinical Guidelines Committees. Standardized criteria should be in place to recruit and assess both clinical and teaching abilities of all faculty/speakers. Each Center should demonstrate access to an adequate number of faculty to carry out work plan deliverables. Faculty Subject Matter Experts provide expertise in screening, prevention, diagnosis, treatment, and management of co-morbidities, treatment of older adults, and other settings as needed. Faculty Subject Experts develop curricula and conduct educational sessions on a per diem basis or as a current staff member of the Center. Their fees should not include any administrative costs and/or institutional fringe benefit rates. See **Attachment 2 for Stipend Reimbursement Guidance**. The Center should demonstrate clear policies and practices for providing orientation and ongoing faculty development.
5. Administrative, clerical support, and information technology and social media staff for the program as needed.

Outcomes

1. Target Audience

Each Center will:

- a. Engage the target audience of clinical providers such as primary care clinicians, emergency department clinicians, infectious disease, urgent care clinicians, internists, family practice practitioners, obstetrician gynecologist (OB/GYN), Sexually Transmitted Infections (STI) and HIV providers. Clinical providers are defined as Medical Doctor (MDs), Doctor of Osteopathy (DOs), physician assistants (PAs), nurse practitioners (NPs), registered nurses (RNs), and other public health staff working in sexual health/STI clinics.
- b. Ensure that on an annual basis, at least 25% of all Clinical Education Initiative learners will participate in progressive (basic to more advanced) clinical education as evidenced by participation in a learning pathway or other progression in clinical training.

2. Curriculum

Each Center will:

- a. Develop curriculum based upon New York State Department of Health AIDS Institute Clinical Guidelines (<https://www.hivguidelines.org/hiv-care/>), and clinical topics that are

Continuing Medical Education (CME) eligible. The curriculum and clinical education interventions shall incorporate adult learning principles and be directed to the goals of the Clinical Education Initiative (CEI) to prepare health care providers to deliver quality health care services.

- b. Integrate newly developed or updated New York State and Federal clinical guidelines within one (1) month of the publishing of such guidelines for live programs, and within six (6) months of publishing of such guidelines for enduring materials.
- c. Educate providers on topics that include, but are not limited to, screening, testing, diagnosis, treatment, management of co-morbidities, prevention, working with older adults, supporting health equity, and racial justice in health care.
- d. Develop curriculum based on emerging topics, challenges commonly faced in clinical practice, and AIDS Institute priorities.
- e. Work with the other Centers of Excellence to promote service integration for Sexually Transmitted Infections (STIs), HIV, Hepatitis C (HCV), primary care, and drug user health, and provide technical assistance for external agencies in the development of policy and procedures related to screening, diagnosing, and managing patients.
- f. Ensure that on an annual basis and under direction from the Program Director, overall CEI program activities align with at least two (2) specific objectives outlined in NYS strategic plans relevant to their work, including: Ending the AIDS Epidemic Plan; New York State Hepatitis C Elimination Plan; the New York State Prevention Agenda; plans to combat the opioid epidemic; and align with any related future public health plans, within six (6) months of release of such plans.
- g. Provide technical assistance to improve health care providers' capacity to enhance patient self-management skills.
- h. Complete the appropriate continuing education applications for the distribution of Continuing Medical Education (CME) credits.

3. Trainings

Each Topic-Specific Center will:

- a. Deliver clinical trainings:
 - 40% will be delivered in-person, with 75% of the in-person trainings to be conducted outside of New York City.
 - 60% will be delivered online.
 - Annual training deliverables will be provided, consistently offering a minimum of 90 to 100 clinical educational and interactive courses for New York State clinicians.
 - Trainings shall feature titles specifically indicating a focus on improving clinical care in the Center's designated topic area.
- b. Ensure that a minimum of 20% of educational offerings each year have titles and include substantial content specifically referencing one of the following: promoting health equity;

improving quality of care to Black, Hispanic, Indigenous, and other communities of color; improving care for Lesbian, Gay, Bisexual, Transgender, Queer Plus (LGBTQ+) people; improving care for people who use drugs; improving health of adolescents, improving health of the aging population, and improving care for women and pregnant people.

- c. Ensure that the faculty delivering Clinical Education Initiative (CEI) trainings are reflective of the health care workforce and communities impacted by HIV with at least 25% of trainings each year having primary faculty who are Black, Hispanic, Indigenous or other people of color, or Lesbian, Gay, Bisexual, Transgender, Queer Plus (LGBTQ+) people.
- d. Provide tele-mentoring for healthcare providers via multi-digital platforms.
- e. Convene an annual statewide conference in New York State.
- f. Complete the appropriate continuing medical education applications (CME) and review continuing medical education (CME) credits annually to ensure the Clinical Education Initiative (CEI) existing curricula are up to date and new curricula acquire the appropriate accreditation.

4. Technical Assistance

Each Topic-Specific Center will:

- a. Provide consultation for inquiries relative to their topic over the Clinical Education Initiative (CEI) line. The Resource Center will provide the overall support for the Clinical Education Initiative (CEI) line and will arrange to have calls to the indicated Topic-Specific Center for response.
- b. Provide clinical experts to respond to calls Monday-Friday from 8 am - 8 pm with the capacity for expanding hours of operation in response to identified need. After 8 pm, responses to the Clinical Education Initiative (CEI) line will occur within 24 hours (or within 72 hours on the weekend) from the time the call was received.
- c. Ensure that calls related to Post Exposure Prophylaxis (PEP) and HIV maternal-fetal exposure are responded to immediately 24 hours a day, 7 days a week.
- d. Provide technical assistance to external agencies seeking guidance for development of policies and curricula.
- e. Ensure that the Program Director coordinates prompt response to all calls and the Medical Director oversees that New York State Clinical Guidelines are adhered to in response to all calls. Each Center will submit a record of all calls to the Resource Center database as part of the quarterly and annual reports.

5. Collaboration

Each Topic-Specific Center will:

- a. Work with the other Clinical Education Initiative (CEI) Centers, statewide, and regional professional organizations to sponsor and promote clinical education opportunities.

- b. Ensure that on an annual basis, at least one (1) of every ten (10) training programs include partnerships or collaborations with professional associations, health systems, other clinical education providers or community partners, and at least 25% of these collaborations should strategically position the Clinical Education Initiative (CEI) to increase its reach to:
 - providers who are from communities of color; or
 - providers working in clinical sites in health systems serving predominantly communities of color.

6. Social Media

Each Topic-Specific Center will:

- a. Create content for the Clinical Education Initiative (CEI) and provide content to the Resource Center for posting on the Clinical Education Initiative (CEI) active social media platforms (i.e. Facebook, Instagram, LinkedIn, YouTube, Conversations with Clinical Education Initiative (CEI) Podcast).
- b. Collaborate with the Resource Center to develop a robust social media strategy to disseminate various health content aligned with Clinical Education Initiative (CEI) programming goals. Aim to increase social media activity that will allow for widespread access, real-time updates, and interactive learning, with the goal of expanding the intended clinical audience.

7. Marketing and Promotion

Each Topic-Specific Center will:

- a. Review its marketing strategy plan (e.g. ads, media, publications, social media) on an annual basis to establish clear and concise messaging that will help improve the integration of education with health services and reach providers who are serving communities of color.
- b. Work with the Resource Center to establish statewide visibility and become a trusted source of clinical education.
- c. Use standardized Clinical Education Initiative (CEI) branded material on all promotional materials and at all events.
- d. Collaborate with other Clinical Education Initiative (CEI) Centers to formulate a plan to recruit and foster three (3) to five (5) new partnerships with professional associations or health care systems that can contribute to expanding clinician participation in the program. The Center will work with the Resource Center, leveraging each Center's network and resources to increase awareness and engagement among clinical providers with the aim of boosting participation in the Clinical Education program.

8. Quality Improvement

Each Topic-Specific Center will:

- a. Develop performance measures for major areas of activity, define priorities for improvement, and implement improvement strategies based on data and share this information with the New York State Department of Health AIDS Institute Office of Program, Evaluation and Research.
- b. Engage in ongoing quality improvement activities to maximize program operations, including conducting and reporting on two (2) Plan Do Study Act (PDSA) quality improvement cycles per year as part of the Clinical Education Initiative (CEI) learning community.

9. Meetings and Reports

Each Topic-Specific Center will:

- a. Attend one (1) Clinical Education Initiative (CEI) in-person or virtual all-centers meeting annually to discuss and plan programmatic activities.
- b. Participate in biennial (every other year) New York State Department of Health AIDS Institute program monitoring site visits to monitor and report on the Topic-Specific Center implementation work plan and fiscal operations.
- c. Participate in monthly Clinical Education Initiative (CEI) all-center virtual meetings to discuss emerging topics and ongoing concerns related to the overall program.
- d. Participate in New York State Department of Health AIDS Institute Clinical Education Initiative (CEI) regularly scheduled calls to provide updates about the Topic-Specific Center Work Plan activities.
- e. Submit monthly and quarterly program reports.
- f. Submit fiscal expenditure vouchers on a monthly basis.
- g. Submit an annual report to the New York State Department of Health AIDS Institute Clinical Education Initiative (CEI) Program Director within one (1) month following the close of the contract year using an AIDS Institute (AI) approved template.

10. Evaluation

Each Topic-Specific Center will:

- a. Report on a core set of data elements to be determined by the New York State Department of Health AIDS Institute that reflect their medical education activities on a quarterly basis within two (2) weeks from the close of the quarter.
- b. Work with the New York State Department of Health AIDS Institute Office of Program, Evaluation and Research to evaluate the delivery and effectiveness of clinical education activities. The evaluation will include process and outcome measures examining the effect of the activities on clinical practice and outcomes.
- c. Work with the Office of Program, Evaluation and Research to conduct at least one (1) small scale (approximately 25 health care providers) mixed method study each year to evaluate the impact of the clinical education provided on quality of clinical care and specific clinical outcomes, to be determined in conjunction with the AIDS Institute.

Component B: Resource Center of Excellence

The Resource Center of Excellence (Resource Center) will build and support the technological capacity of Clinical Education Initiative (CEI), maintaining the Learning Management System (LMS), www.ceitraining.org website, Clinical Education Initiative (CEI) apps, and play a central role in promoting CEI activities. (See **Attachment 3: Clinical Education Initiative Glossary Terms**). The Resource Center will oversee the awarding of such through the CEI LMS, in concert with the Clinical Education Initiative (CEI) Topic-Specific Centers and the New York State Department of Health AIDS Institute.

The Resource Center will serve as the custodian of the Learning Management System (LMS) and will maintain the www.ceitraining.org URL and website and other related websites as a large scale, multimedia platform that meets all New York State Department of Health security protections and has the capacity to expand. The website will serve as a portal to host a wide range of online and social media clinical education programs including but not limited to archived webinars, webcasts, interactive on-line asynchronous learning modules, podcasts, virtual case simulation, and public service announcements. The Resource Center will be responsible for developing an innovative digital platform to train the Topic Specific Centers of Excellence on how to disseminate clinical education using the most current and effective technologies. The Center will stay up to date on e-learning trends and implement innovative solutions to enhance the LMS and educational content. The Resource Center will collaborate with Topic-Specific Centers to format and optimize educational materials for the learning management system. This includes creating engaging multimedia content, assessments, and interactive elements. The Resource Center will provide technical support to users on media and virtual platforms.

The Resource Center will offer training sessions for program participants on how to navigate and utilize the Learning Management System (LMS) effectively. The Center will provide ongoing technical support, troubleshooting and guidance. The Center will collect and report on data related to user interactions with the Learning Management System (LMS). The Resource Center will provide detailed reports on the clinicians who have participated in both in-person and online CEI trainings and share this data with NYS DOH, Office of Program, Evaluation and Research (OPER). These reports will encompass various disciplines, allowing (the Office of Program, Evaluation and Research OPER) to track the diversity and inclusivity of the Clinical Education Initiative (CEI's) audience and the extent to which the target audience of providers is being reached. The Resource Center will share data that captures information about clinicians who have engaged in supplementary activities aligned with the Clinical Education Initiative (CEI) program, ensuring a holistic understanding of clinical learner's involvement. The Resource Center will provide data from the Clinical Education Initiative (CEI) line to the Office of Program, Evaluation and Research (OPER) to conduct an in-depth analysis of hotline utilization. This analysis will yield insights on the patterns and effectiveness of the Clinical Education Initiative (CEI) line's usage, which, in turn, will inform program planning and adjustment for clinicians, ensuring that the resources and support offered align closely with their evolving needs and best practices.

The Resource Center will develop a wide range of online training interventions based on the curricula and materials developed by the other Topic-Specific Centers of Excellence and the AIDS Institute (AI). The Resource Center must understand the cultural background of their target population and have the willingness and skills to work with various communities. It is an expectation and requirement of the funded applicant to integrate health and racial equity into all

programmatic activities.

Staffing Structure

The Resource Center will establish the following staffing plans to administer a large-scale statewide clinical education initiative addressing the goals outlined in the Request for Applications.

1. Administrative Director/PI (minimal Full Time Equivalent (FTE) .15): Provides overall leadership for the Resource Center, including oversight of website development, production of multimedia materials, personnel, budget, and reporting to the New York State Department of Health AIDS Institute. The Administrative Director should have administrative level experience in a public health or medical field involving programmatic and fiscal oversight and should have technical knowledge of Learning Management System (LMS), web programming, multimedia programs, and reporting of the Clinical Education Initiative (CEI) digital and technical support resources and tools.
2. Program Director (minimum Full Time Equivalent (FTE): 1.0): will have a master's degree in public health or administration, nursing, education, or a related field. Provides overall leadership for the Resource Center, including oversight of website development, production of multimedia materials, personnel, budget, reporting CEI online, and digital tools data activities to the New York State Department of Health AIDS Institute. The Administrative/Program Director should have significant administrative level experience in a public health or medical field involving programmatic and fiscal oversight and should have experience overseeing web programming and multimedia programs. The Administrative/Program Director will be responsible for program and marketing outreach, coordination with the other CEI Centers, logistical support, development of digital tools and technological innovations, and should have experience coordinating educational programs as well as experience working with clinical providers and health care organizations.
3. Production Coordinator: (minimum Full Time Equivalent (FTE) .50): Handles production of webcasting and other media, as well as assists all Clinical Education Initiative (CEI) Topic-Specific Centers with preparation of educational materials for the website. The Production Coordinator should have technical expertise in web programming, social marketing, networking, and multimedia designs.
4. Social Media Coordinator (minimum Full Time Equivalent (FTE): .50): Directs the Resource Center's social media outreach campaign. Coordinates collaboration between all the Clinical Education Initiative (CEI) Topic-Specific Centers to implement a social media strategy that will expand the Clinical Education Initiative (CEI) social media presence and reach. The Social Media Coordinator should be knowledgeable in social media analyzing and strategizing and have experience with creating social media content to grow the Clinical Education Initiative (CEI) digital footprint.
5. Administrative, clerical support, and information technology and social media staff for the program as needed.

Outcomes

1. Target Audience

- a. The target audience for the Resource Center includes the Topic-Specific Centers of Excellence and the audiences listed in the HIV Primary Care and Prevention Center of Excellence, Sexual Health Center of Excellence (SHCE), and the Hepatitis C (HCV) Drug User Health (DUH) Center of Excellence. The activities of the Resource Center will be especially important for ensuring access to clinical education activities for providers in rural areas and other underserved areas.
- b. The Resource Center is responsible for working with Topic-Specific Centers to reach out to various affiliated medical organizations such as the Medical Society of the State of NY, American Medical Association, New York Chapter of the American College of Physicians, Medscape, Clinical Care Options, Coursera, etc. with the intent to expand the Clinical Education Initiative (CEI) reach.

2. Digital/Technology Resources

The Resource Center, with guidance from the New York State Department of Health AIDS Institute will:

- a. Develop one (1) digital resource annually to educate and prepare the healthcare workforce in the use of emerging social media and digital health technology tools.
- b. Develop one (1) innovative online training intervention, rooted in curricula and materials developed by the Topic-Specific Centers, to be presented bi-annually (twice per year).
- c. Ensure that on an annual basis and under direction from the Program Director, overall Clinical Education Initiative (CEI) program activities align and coordinate with at least two (2) specific objectives outlined in each of the following New York State (NYS) strategic plans: Ending the AIDS Epidemic Plan; New York State (NYS) Hepatitis C Elimination Plan; the New York State (NYS) Prevention Agenda; plans to combat the opioid epidemic; and align with any related future public health plans, within six (6) months of release of such plans.

3. Trainings

The Resource Center will:

- a. Collaborate with the Topic-Specific Centers to disseminate various multimedia educational materials targeted for use by providers and clinician educators.
- b. Be responsible for the incorporation of new multimedia tools.
- c. Work with New York State Department of Health AIDS Institute Clinical Guidelines program when posting materials related to clinical guidelines on the www.ceitraining.org website.
- d. Have the expertise needed to adapt to a changing technology and social media environment and restructure content formats and activities to create a meaningful online learning experience for participants.
- e. Ensure all online content is conducive to adult learning and in compliance with the Americans with Disability Act (ADA).
- f. Manage Continuing Medical Education Credits for the courses it develops and the tracking of these credits. It will ensure that the Learning Management System (LMS) has the functionality to award Continuing Medical Education (CME) credits from each of the Topic-Specific Centers to learners. The funded applicant will have the capacity to conduct surveys and tests required for awarding Continuing Medical Education (CME) credits and shall allow the learner to save and print documentation of completion of continuing education courses.

4. Technical Assistance

The Resource Center will:

- a. Be responsible for routing all calls linked to the Clinical Education Initiative (CEI) line and ensuring that the Clinical Education Initiative (CEI) line functions seamlessly to address clinical inquiries for HIV, Hepatitis C Virus (HCV), Sexually Transmitted Infections (STI), primary care, prevention, and drug user health.
- b. Respond to all technical issues related to the website and any online activities to improve user experience for all Clinical Education Initiative (CEI) users.
- c. Have a public-facing direct technical assistance line on the website. Responses to this line will occur within 24 hours (or within 72 hours on the weekend) from the time the call was received.
- d. Develop a communication platform (e.g. app, internal chat/messaging platform, etc.) that provides another source to connect and engage with Clinical Education Initiative (CEI) clinical experts about inquiries related to HIV, Hepatitis C Virus (HCV), Sexually Transmitted Infections (STIs), and drug user health. The platform will be used to document the various cases submitted to the Clinical Education Initiative (CEI).

5. Training Registration

The Resource Center will:

- a. Develop an online registration system that will serve as a student portal (i.e. MyCEI) to register training participants in the full range of clinical education interventions. MyCEI will facilitate easy registration by providing pre-filled forms, allow the individual to track completed education activities, and facilitate the collection of aggregate training data for reporting to the New York State Department of Health AIDS Institute. A provider contact data base will be developed in concert with the New York State Department of Health AIDS Institute and the other funded Centers and be made available to the New York State Department of Health AIDS Institute as needed and determined by the New York State Department of Health AIDS Institute.

6. Collaboration

The Resource Center will:

- a. Provide technical assistance for CEI meetings.
- b. Participate in in-person meetings in a location to be determined by the New York State Department of Health AIDS Institute, as well as web-based meetings to take place at least every other month, or as needed. The Administrative/Program Director and other staff will participate in the meetings with the New York State Department of Health AIDS Institute and key staff from other CEI Centers.
- c. Collaborate with statewide and regional professional organizations, and federally funded HIV, Sexually Transmitted Infections (STIs), Hepatitis C Virus (HCV), and drug user health training initiatives to promote CEI and disseminate CEI resources.

- d. Work with New York State Department of Health AIDS Institute's Digital Health Initiative team to support and provide guidance on social media communication and strategies.

7. Social Media

The Resource Center will:

- a. Manage all social media activities and content for CEI's initiative. The Resource Center will work with the other Topic- Specific Centers to integrate new and updated information to the CEI social media platforms (i.e. Facebook, Instagram, LinkedIn, YouTube, Conversations with CEI Podcast).
- b. Develop social media strategies to bridge the generational gap among health care professionals. Aim to increase social media activity that will allow for widespread access, real-time updates, and interactive learning with the goal of expanding the clinical target audience.

8. Marketing and Promotion

The Resource Center will:

- a. Work with the Topic-Specific Centers of Excellence to establish statewide visibility and become a trusted source of digital clinical education.
- b. Use standardized CEI-branded material on all promotional materials and at all events.
- c. Collaborate with Topic-Specific Centers annually to formulate a plan to recruit and foster three (3) to five (5) new partnerships that can contribute to expanding clinician participation in the program. The Resource Center will work with the Topic-Specific Centers, leveraging each Center's network and resources to increase awareness and engagement among clinical providers with the aim of boosting participation in the clinical education program.
- d. Create an annual digital and social media plan that includes clear goals for the Clinical Education Initiative (CEI) program and its various platforms. The goals set must increase awareness of the Clinical Education Initiative (CEI) and quantity of participant engagements on all social networking sites and other Clinical Education Initiative (CEI) media platforms. The plan should include an evaluation process and a mechanism for updating providers about new content in a timely manner.

9. Meetings and Reports

The Resource Center will:

- a. Attend one (1) in-person or virtual Clinical Education Initiative (CEI) all-center meeting annually to discuss and plan programmatic activities.
- b. Participate in biennial (every other year) New York State Department of Health AIDS Institute site visit monitoring to report on the Resource Center implementation work plan and fiscal operations.
- c. Participate in monthly Clinical Education Initiative (CEI) all-center virtual meetings to discuss emerging topics and ongoing concerns related to the overall program.

- d. Participate in New York State Department of Health AIDS Institute Clinical Education Initiative (CEI) regularly scheduled calls to provide updates about the Resource Center's work plan activities.
- e. Be responsible for submitting quarterly reports on training activities and website data, Clinical Education Initiative (CEI) line, and all activities related to the Clinical Education Initiative (CEI) platform.
- f. Submit quarterly reports to the New York State Department of Health AIDS Institute Clinical Education Initiative (CEI) Program Director demonstrating the growth and analysis of the various social media and digital technology platforms used by the Clinical Education Initiative (CEI).
- g. Submit an annual report to the New York State Department of Health AIDS Institute Clinical Education Initiative (CEI) Program Director within one (1) month following the close of the contract year using an New York State Department of Health AIDS Institute-approved template.

An Applicant may subcontract components of the Work Plan to be performed by Applicant pursuant to the terms of its Application. If known, the Applicant is expected to state in their Application the specific components to be performed through subcontracts 25% as well as the names of the subcontractors. Grantees will need to name subcontractors prior to reimbursement. Applicants should note that the lead organization (that is, the successful Applicant, as Contractor) will have overall responsibility for all Contract activities, including those performed by subcontractors and will be the primary contact for the Department. All subcontractors and subcontracts will be required to be approved by the Department.

B. Requirements for the Program

All applicants selected for funding will be required to:

1. Adhere to Health Literacy Universal Precautions (<https://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/tools/literacy-toolkit/index.html>);
2. Adhere to all objectives, tasks, and performance measures as listed in **Work Plan: Attachment 4A** for Component A and **Work Plan: Attachment 4B** for Component B;
3. Participate in a collaborative process with the New York State Department of Health AIDS Institute to assess program outcomes and provide monthly narrative reports describing the progress of the program with respect to 1) program implementation, 2) client recruitment, 3) success in meeting goals, 4) significant accomplishments achieved, and 5) barriers encountered and plans to address noted problems;
4. Address and assess the specific social and/or structural determinants of health. The unequal distribution of social and/or determinants can lead to disparities and ultimately inequities in health and health outcomes. Strategies should prioritize those populations that are most impacted negatively by social and structural determinants of health.

Please see **Attachment 5 for Health Equity Definitions and Examples** of social and structural determinants of health.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the Department, AIDS Institute, Office of the Medical Director. The Department is responsible for the requirements specified herein and for the evaluation of all Applications (refer to Section V.C. Review and Award Process).

B. Question and Answer Phase

All substantive questions by Applicants with respect to any aspect of the RFA must be submitted in writing to Beatrice Aladin, New York State Department of Health, AIDS Institute, Clinical Education Initiative, at the following email address: CEIRFA@health.ny.gov. This includes Minority and Woman Owned Business Enterprise (MWBE) Requirements questions and related forms. Refer to Section IV.K. Minority & Woman-Owned Business Enterprise Requirements. Questions of a technical nature related to formatting or other minor details related to preparation of an Application may also be addressed in writing to the email address noted above. Questions are of a technical nature if they are limited to how to prepare your Application (e.g., formatting) rather than relating to the substance of the Application.

To the degree possible, each question submitted by a potential Applicant pursuant to the terms of this RFA should cite the RFA section and paragraph to which it refers. Written questions will be accepted until the date posted on the Cover Page of this RFA.

Some helpful links for questions of a technical nature are below. Questions regarding specific opportunities or Applications should be directed to the Department contact listed on the cover of this RFA.

- On-Demand Statewide Financial System Training Videos: On-demand training focused on using the new grants management features in SFS is available by logging in to the SFS Vendor Portal and clicking the SFS Coach icon available on the homepage. Additional questions? Contact the SFS Help Desk listed below:
- Statewide Financial System Technical Support Help Desk
Phone: 1-877-737-4185 toll-free / 518-457-7737
Hours: Monday thru Friday 8am to 8pm
Email: helpdesk@sfs.ny.gov

Prospective Applicants must submit all requests for clarifications of, or exceptions or changes to, the terms, conditions or provisions of this RFA or the State of New York Contract for Grants during the Question and Answer Phase, which will end on the “Questions Due” date specified on the Cover Page of this RFA. An Applicant must clearly indicate the clarification, exception or change in the RFA or the State of New York Contract for Grants the Applicant is requesting. All questions, answers, and requests for clarification, exception or change will be published by the Department at [SFS Public Portal Homepage](#) to ensure equal access and knowledge by all prospective Applicants, on or about the date specified on the Cover Page of this RFA.

This RFA has been posted on the NYS Statewide Financial System website at: [SFS Public Portal Homepage](#) and additionally, via a link provided on the Department's public website at: <https://www.health.ny.gov/funding/>.

Questions and answers, as well as any updates, addendums to, and/or other modifications of this RFA, will be posted on these websites. All such questions and answers, updates,

addendums to, and other modifications to this RFA will be posted by the date identified on the Cover Page of this RFA under “Key Dates”.

All Questions must be received by the date and time specified on the Cover Page of this RFA, under “Key Dates”, opposite the heading “Questions Due”.

All questions submitted by email should state the RFA Title and Number set forth on the Cover Page (RFA #20629 Clinical Education Initiative) in the subject line of the email.

C. Letter of Interest

A Letter of Interest is not requested for this project.

D. Applicant Conference

An Applicant Conference will not be held for this project.

E. How to File an Application

Applications must be submitted online via the Statewide Financial System by the date and time posted on the Cover Page of this RFA under the heading “Key Dates”.

Reference materials and videos are available for Grantees applying to funding opportunities on the NYS Statewide Financial System. Please visit the Statewide Financial System website at the following web address: [SFS Public Portal Homepage](#) and click the “Search for Grant Opportunities” tile. There is also a more detailed “Statewide Financial System: Vendor User Guide” available in the documents section under Training & Guidance; For Grant Applicants located in SFS Coach. Training webinars are also provided by the Grants Management Team. Dates and times for webinar instruction can be located at the following web address: [Live Webinars | Grants Management \(ny.gov\)](#)

To submit an Application an Applicant must:

1. Log into the [Statewide Financial System Vendor Portal](#) .
2. Click the Grant Management Tile. Next, Click the Bid Event Search tile.
3. Enter the applicable search criteria in the Search Criteria Fields. Locate an opportunity; search by Funding Agency (DOH01) or enter the Grant Opportunity name into the Search by Grant Opportunity field: RFA #20629: Clinical Education Initiative - Comp A for Component A) RFA #20629: Clinical Education Initiative - Comp B (for Component B)
You can also filter search by Status such as “available” which filters to include only the bid events that are published and open for potential bid response.
4. Click on “Search” button to initiate the search.
5. Click on Event ID link to initiate a bid response.
6. Please review the Grantee User Manual found in SFS Coach for additional steps on how to respond to various types of Bid Events.

Once the Application is complete, a prospective Applicant is **strongly encouraged** to submit their Application at least **48 hours prior to the** Application’s due date and time specified on the Cover Page of this RFA. This will allow sufficient opportunity for the Applicant to obtain assistance and take corrective action should there be a technical issue with the submission process. **Failure to leave adequate time to address issues identified during this process may jeopardize an Applicant’s ability to submit their Application.** Both NYSDOH, SFS, and

Grants Management staff are available to answer an Applicant's technical questions and provide technical assistance prior to the Application due date and time. Contact information for the Grants Management Staff and SFS is available under Section IV.B. Question and Answer Phase of this RFA.

PLEASE NOTE: Although the Department and the Grants Management staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time for the submission of an Application, there is no guarantee that they will be resolved in time for the Application to be submitted on time and, therefore, considered for funding.

During the Application process, please pay particular attention to the following:

- Not-for-profit Applicants must be prequalified, if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due as specified in the "Key Dates" set forth on the Cover Page of this RFA. Be sure to maintain prequalification status between funding opportunities. **NOTE:** Three of a not-for-profit's essential financial documents - the IRS990, its Financial Statement, and its Charities Bureau filing - expire on an annual basis. If these documents are allowed to expire, the not-for-profit's prequalification status expires as well, and it will not be eligible for State grant funding until its documentation is updated and approved, and prequalified status is reinstated.
- Only individuals with the role of "Bid Response Submitter" can submit an Application on behalf of an Applicant.
- Prior to submission, the Statewide Financial System will automatically initiate a global error checking process to protect against an incomplete Application. An Applicant may need to attend to certain parts of the Application prior to being able to submit the Application successfully. An Applicant must be sure to allow time after pressing the submit button to clean up any global errors that may arise. (Vendor User Guide).
- Applicants should use numbers, letters, and underscores when naming their uploaded files. There cannot be any special characters in the uploaded file name. Also, be aware of the restriction on file size (20 MB) when uploading documents. Applicants should ensure that any attachments uploaded with their application are not "protected" or "passworded" documents.

The Applicant's Delegated Administrator is able to assign, modify, and remove roles for the applicant in SFS. Please see SFS Vendor Portal Access Reference Guide, [SFS Vendor Portal Access Reference Guide.pdf \(ny.gov\)](#), for additional information on roles. **Bid Response Initiator and Bid Response Submitter** are the **necessary roles for applying to a Bid Event in SFS**. If you are a not-for-profit you will also need Prequalification Processor for Prequalification purposes.

PLEASE NOTE: Waiting until the last several days to complete your Application online can be risky, as you may have technical questions or issues that will take time to resolve. Beginning the process of applying as soon as possible will produce the best results.

Applications will not be accepted via fax, e-mail, paper copy or hand delivery.

LATE APPLICATIONS WILL NOT BE ACCEPTED.

F. Department of Health's Reserved Rights

The Department of Health reserves the right to:

1. Reject any or all Applications received in response to this RFA.
2. Withdraw the RFA at any time, at the Department's sole discretion.
3. Make an award under the RFA in whole or in part.
4. Disqualify any Applicant whose conduct and/or Application fails to conform to the requirements of the RFA.
5. Seek clarifications and revisions of Applications, in the Department's sole discretion.
6. Use Application information obtained through site visits, management interviews, and the State's investigation of an Applicant's qualifications, experience, ability, or financial standing, and any material or information submitted by the Applicant in response to the Department's request for clarifying information in the course of evaluation and/or selection under the RFA.
7. Prior to Application opening, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available.
8. Prior to Application opening, direct Applicants to submit proposal modifications addressing subsequent RFA amendments.
9. Change any of the scheduled dates.
10. Waive any requirements that are not material.
11. Award more than one contract resulting from this RFA.
12. Negotiate with successful Applicants within the scope of the RFA in the best interests of the State.
13. Conduct contract negotiations with the next responsible Applicant, should the Department be unsuccessful in negotiating with the selected Applicant.
14. Utilize any and all ideas submitted with the Applications received, at the Department's sole discretion.
15. Unless otherwise specified in the RFA, every offer in an Applicant's Application is firm and not revocable for a period of 60 days from the Application opening.
16. Waive or modify minor irregularities in Applications received after prior notification to the Applicant.
17. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an Applicant's Application and/or to determine an Applicant's compliance with the requirements of the RFA.

18. Eliminate any term of this RFA that can be complied with by none of the Applicants.
19. Award grants based on geographic or regional considerations to serve the best interests of the State.

G. Term of Contract

Any Contract resulting from this RFA will be effective only upon approval by the New York State Office of the Comptroller.

It is expected that contracts resulting from this RFA will have the following time period:
(10/1/2025 - 9/30/2030)

Continued funding throughout this five (5)-year period is contingent upon availability of funding and state budget appropriations and the Grantee's continued satisfactory performance of its obligations under the Contract. The Department also reserves the right to revise the award amount as necessary due to changes in the availability of funding.

A sample New York State Master Contract for Grants can be found at:
[New York State Master Contract for Grants](#).

See the following Department of Health specific State of New York Contract for Grants documents in the "**Attachments Section**" of the Statewide Financial System online Application/Bid Event:

- Attachment A-1, Agency-specific Terms and Conditions (**RFA Attachment 12**);
- Attachment A-2, Program-specific Terms and Conditions (HIV/AIDS Clause) (**RFA Attachment 13**);
- Attachment E-1, AIDS Institute Policy on Personal Health Related Information (**RFA Attachment 14**);
- Attachment M, Participation by Minority Group Members and Women with Respect to State Contracts: Requirements and Procedures (**RFA Attachment 15**)

H. Payment & Reporting Requirements of Grant Awardees

1. The Department may, at its discretion, make an advance payment to a successful not-for-profit grant Applicant under this RFA (a "Grantee") in an amount not to exceed **25** percent of the annual grant provided for under the Grantee's Contract.
2. The Grantee will be required to submit invoices and required reports of expenditures based upon the terms for payment set forth in Attachment A-1 to its Grant Contract to the State's designated payment office (below) or, if requested by the Department, through the Statewide Financial System:

AIDS Institute
New York State Department of Health
Empire State Plaza
Albany, NY 12237
AIDS.Institute.Admin@health.ny.gov

A Grantee must provide complete and accurate billing invoices in order to receive payment of the grant funding provided for under the terms of its Grant Contract. Invoices submitted to the Department must contain all information and supporting documentation required by the

Contract, the Department, and the Office of the State Comptroller (OSC). Payment for invoices submitted by the Grantee shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner of Health, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with OSC's procedures and practices to authorize electronic payments. Authorization forms are available at OSC's website at: <http://www.osc.state.ny.us/epay/index.htm>, by email at: epayments@osc.state.ny.us or by telephone at 855-233-8363. Each Grantee acknowledges that it will not receive payment on any claims for reimbursement submitted under its Grant Contract if it does not comply with OSC's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

Payment of claims for reimbursement by the State (Department) shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be: Contractor will be reimbursed for actual expenses incurred as allowed in the Contract Budget and Work Plan.

3. The Grantee will be required to submit the following reports to the Department at the address above or, if requested by the Department, through the Statewide Financial System:
 - A monthly narrative addressing program implementation, barriers, and accomplishments.
 - Monthly client service and outcome data through the AIDS Institute Reporting System (AIRS). <http://www.airсны.org/>

All payment and reporting requirements will be detailed in "Attachment D: Payment and Reporting", of the final State of New York Contract For Grants.

I. Procurement Requirements

1. General Requirements

The Grantee may procure various goods and services in connection with the grant-funded project ranging from routinely purchased goods or services to those that involve substantive programmatic work. The procurement of such goods or services, however, must be conducted in an equitable and competitive manner to promote equal treatment, efficiency, and economy in grant-funded activities.

Any Grantee that is a State entity (i.e., a State agency or political subdivision of the State) must follow the same policies and procedures it uses for procurements from its general funds. All other Grantees (private companies, not-for-profit-organizations, etc.) must have a sufficient and documented procurement process that maintains records to detail the history of procurements associated with any awarded grant project. These records shall include, but are not limited to, rationale for the method of procurement (e.g., micro-purchase, small purchases, sealed bids, request for proposals, noncompetitive/sole source), the selection of a contract type, contractor selection and/or rejection, and the basis of a contract price.

The Grantee's documented procurement process must conform with any applicable federal, State and local laws and regulations. As part of the required procurement procedures, a Grantee must maintain written standards of conduct covering conflict of interest and governing the actions of its employees engaged in the selection, award, and administration of contracts. The standards of conduct must provide for disciplinary actions to be applied for violations by officers, employees or agents of the Grantee. Such standards shall provide, at a minimum, that

no employee, officer, or agent of the Grantee will participate in the selection, award, or administration of a contract supported by grant funds if a conflict of interest, real or actual, is involved. Such conflicts may arise when:

- The employee, officer, or agent, or
- Any member of such individual's immediate family, or
- Such individual's partner, or
- Any organization which employs, or is about to employ the selected contractor, has a financial or other interest in or receives or stands to receive a tangible personal benefit from a firm being considered for a contract.

The standards of conduct shall also cover organizational conflicts of interest. Organizational conflicts of interest arise where an entity is or appears to be unable to conduct an impartial procurement action due to relationships with a parent company, affiliate, or subsidiary organization.

2. Bid Protest Procedures

Any contractor, subcontractor, or aggrieved party has the right to protest actions before or after the award of a contract utilizing grant funds. The Grantee alone will be responsible, in accordance with good administrative practice and sound business judgement, for the settlement of all contractual and administrative issues arising out of procurement contract solicitations and awards.

Grantees shall have written protest procedures, which may be analogous to those set forth in Part 24 of Title 2 of the New York Codes, Rules and Regulations, in order for effective due process to be achieved. A Grantee's specific protest procedures shall be outlined in all bid requests, request for proposals, request for applications, etc. issued by or on behalf of the Grantee concerning any grant-funded projects. In summary, Grantees are responsible for handling all contract activity protests. Except in matters of direct State or possibly Federal concern (in cases involving federally funded grants), the Department will not substitute its judgement for that of the Grantee.

3. Procurement Contract Language

Any contract concerning a grant-funded project must be a written agreement between the Grantee and the third party providing specific goods and/or services. Whether with a contractor, subcontractor, consultant or vendor, the contract must as appropriate state the activities to be performed; the time schedule; the policies and requirements that apply to the contractor, subcontractor consultant or vendor, including the above procurement requirements; and any other terms and conditions of the grant and the New York State Contract for Grants.

J. Assurance of No Conflicts of Interest and/or Other Detrimental Effects

The Grantee as well as any subgrantees, contractors, subcontractors or consultants engaged by the Grantee to provide goods or services in connection with the grant-funded project shall attest that their performance of any contracted services does not and will not create a conflict of interest with nor position the Grantee to breach any other contract it currently has in force with the State of New York.

The Grantee as well as any subgrantees, contractors, subcontractors or consultants engaged by the Grantee to provide goods or services in connection with the grant-funded project shall

disclose any existing or contemplated relationship with any other person or entity, including relationships with any member, shareholder of 5% or more, parent, subsidiary, or affiliate organization, which would constitute an actual or potential conflict of interest or appearance of impropriety, relating to other clients/customers/agents of the Grantee, subgrantees, contractors, subcontractors, consultants or former officers and employees of the State and its affiliates, in connection with the providing of goods or rendering of services related to the grant-funded project. The Grantee shall have procedures in place for alerting the State of any such actual or potential conflicts as well as procedures to resolve the same.

K. Minority & Woman-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the Department recognizes its obligation to promote opportunities for maximum feasible participation of New York State-certified Minority and Women-owned Business Enterprises (MWBEs) and the employment of minority group members and women in the performance of Department contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether Minority and Women-owned Business Enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of Minority and Women-owned Business Enterprises in state procurement contracting versus the number of Minority and Women-owned Business Enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified Minority and Women-owned Business Enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that the Department establish goals for maximum feasible participation of New York State Certified Minority and Women-owned Business Enterprises ("MWBE") and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, the Department hereby establishes a goal of **30%** as follows:

- 1) For Not-for-Profit Applicants: Eligible Expenditures include any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing under a contract awarded from this solicitation.
- 2) For-Profit and Municipality Applicants: Eligible Expenditures include the value of the total amount of the Budget provided for the Work Plan in the Grant Contract entered into pursuant to this RFA.

The goal on the Eligible Expenditures portion of a Grant Contract awarded pursuant to this RFA will be 15% for Minority-Owned Business Enterprises ("MBE") participation and 15% for Women-Owned Business Enterprises ("WBE") participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified MWBE firms). A Grantee awarded a Grant Contract pursuant to this RFA must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Grant Contract and Grantee will agree under the terms of its Grant Contract that the Department may withhold payment pending receipt of the required MWBE documentation required by the Department or

the OSC. For guidance on how the Department will determine “good faith efforts,” refer to 5 NYCRR §142.8.

The directory of New York State Certified MWBEs can be viewed at: <https://ny.newnycontracts.com>. The directory is found on this page under “NYS Directory of Certified Firms” and accessed by clicking on the link entitled “Search the Directory”. Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented by a Grantee to evidence its good faith efforts to encourage MWBE participation in the performance of its obligations under its Grant Contract.

By submitting an Application, each Applicant and potential Grantee agrees to complete an MWBE Utilization plan as directed in **Attachment 6** of this RFA. The Department will review the MWBE Utilization Plan submitted by each Grantee. If a Grantee’s MWBE Utilization Plan is not accepted, the Department may issue a Notice of Deficiency. If a Notice of Deficiency is issued, Grantee agrees that it shall respond to the Notice of Deficiency within seven (7) business days of receipt. The Department may disqualify a Grantee as being **non-responsive** under the following circumstances:

- a) If a Grantee fails to submit a MWBE Utilization Plan;
- b) If a Grantee fails to submit a written remedy to a Notice of Deficiency;
- c) If a Grantee fails to submit a request for waiver (if applicable); or
- d) If the Department determines that the Grantee has failed to document good-faith efforts to meet the established MWBE participation goals for the procurement.

In addition, Grantees will be required to certify they have an acceptable Equal Employment Opportunity policy statement.

L. Vendor Identification Number

Effective January 1, 2012, in order to do business with New York State, you must have a vendor identification number. As part of the Statewide Financial System (SFS), the Office of the State Comptroller's Bureau of State Expenditures has created a centralized vendor repository called the New York State Vendor File. In the event of an award of a grant to a successful Applicant pursuant to the terms of this RFA and in order to initiate a Grant Contract with the Department, a Grantee must be registered in the New York State Vendor File and have a valid New York State Vendor ID.

If already enrolled in the Vendor File, the Applicant should include the Vendor Identification number in your organization information. If not enrolled, to request assignment of a Vendor Identification number, an Applicant should please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found on-line at:

<https://www.osc.state.ny.us/files/vendors/2017-11/vendor-form-ac3237s-fe.pdf>

Additional information concerning the New York State Vendor File can be obtained on-line at: http://www.osc.state.ny.us/vendor_management/index.htm, by contacting the SFS Help Desk at 855-233-8363 or by emailing at helpdesk@sfs.ny.gov.

M. Vendor Responsibility Questionnaire

The Department strongly encourages each Applicant to file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. The Vendor Responsibility

Questionnaire must be updated and certified every six (6) months. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at <https://www.osc.state.ny.us/state-vendors/vendrep/file-your-vendor-responsibility-questionnaire> or go directly to the VendRep system online at <https://www.osc.state.ny.us/state-vendors/vendrep/vendrep-system>.

An Applicant must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at itservicedesk@osc.ny.gov.

Applicants opting to complete online should complete and upload the Vendor Responsibility Attestation (**Attachment 7**) of the RFA. The Attestation is located under the SFS Attachments Section and once completed should be uploaded to the applicable PSQ/Bid Factor.

Applicants opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website, www.osc.state.ny.us/vendrep, and upload it with their Application in response to the applicable PSQ/Bid Factor.

N. Vendor Prequalification for Not-for-Profits

Each not-for-profit Applicant subject to prequalification is required to prequalify prior to having the ability to submit an Application in the NYS Statewide Financial System.

Pursuant to the New York State Division of Budget Bulletin H-1032, dated July 16, 2014, and revised on December 9, 2023, the new Prequalification Policy will be effective as of January 16, 2024. The updated policy requires that not-for-profit organizations register and prequalify in the SFS using the updated Prequalification Application. The updated Prequalification Application and New York State Prequalification Manual for Grantees can be found on the Grants Management website at: <https://grantsmanagement.ny.gov/get-prequalified>.

An Application cannot be submitted/received from a not-for-profit Applicant that (a) has not Registered in the NYS Statewide Financial System or (b) has not Prequalified in the Statewide Financial System by the Application's due date specified on the Cover Page of this RFA.

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The Vendor User Manual within the Statewide Financial System Website details the requirements and job aid walks users through the process.

1) Register for the Statewide Financial System

- Applicants will first need to create an account in SFS. Applicants that need to create an account should do so at the following link: <https://www.osc.ny.gov/state-vendors/portal/enroll-vendor-self-service-portal>. Any questions related to SFS accounts should be sent to the SFS Help Desk (HelpDesk@sfs.ny.gov).

If you have previously registered and do not know your Username, please email helpdesk@sfs.ny.gov. If you do not know your Password, please click the "I Forgot My Password" link from the main log-in page and follow the prompts.

2) Complete your Prequalification Application

- Log in to the Statewide Financial System.
- Applicants will first need to create an account in SFS. Applicants that need to create an account should do so at the following link: <https://www.osc.ny.gov/state-vendors/portal/enroll-vendor-self-service-portal>. Any questions related to SFS accounts should be sent to the SFS Help Desk (HelpDesk@sfs.ny.gov).
- Instructions for SFS Prequalification can be found on Page 20 of the SFS Grantee User Manual entitled, “! Grantee Processing in SFS”. This user manual is accessible to organizations with an SFS account under the SFS Coach Tile/Button in the SFS Vendor Portal. Select “Handbook: User Manual with Screenshots” from the Training Type drop down to locate the manual. If you have any problems accessing the manual please contact HelpDesk@sfs.ny.gov. Please see the section entitled, “Enter and Submit a Prequalification Application”, located on page 20 of the SFS Grantee User Manual, for complete instructions on how to complete and submit an SFS Prequalification in the NYS Statewide Financial System.
- Specific questions about the prequalification process should be referred to your primary New York State agency representative. The representative specific to the NYS Department of Health can be reached at: vendorresponsibility@health.ny.gov.

3) **Add a signatory or “Grant Contract Approver” to your account**

- In order to have your designated signatory (known in SFS as Grant Contract Approver) sign a contract and have their name appear on the contract agreement you have to add the Grant Contract Approver’s name to your SFS Vendor Profile. The Delegated Administrator for your organization can add the Signatory’s Name by following the instructions found on page 17-20 of the SFS Grantee User Manual entitled, “! Grantee Processing in SFS”. This user manual is accessible to organizations with an SFS account under the SFS Coach Tile/Button in the SFS Vendor Portal. Select “Handbook: User Manual with Screenshots” from the Training Type drop down to locate the manual. If you have any problems accessing the manual please contact HelpDesk@sfs.ny.gov.

All potential Applicants are strongly encouraged to begin Statewide Financial System Registration and Prequalification process as soon as possible in order to participate in this opportunity.

O. General Specifications

1. By submitting the "Application Form" each Applicant attests to its express authority to sign on behalf of the Applicant.
2. Grantees will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of any Contract awarded pursuant to this RFA will possess the qualifications, training, licenses, and permits as may be required within such jurisdiction.
3. Submission of an Application indicates the Applicant's acceptance of all terms and conditions contained in this RFA, including the terms and conditions of the State of New York Contract for Grants. Any exceptions the Applicant would like considered by the

Department relating to the terms and conditions of this RFA and/or State of New York Contract for Grants must have been raised during the Question and Answer Phase of this RFA (See, Section IV.B.).

4. An Applicant may be disqualified from receiving an award if such Applicant or any subsidiary, affiliate, partner, officer, agent, or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts, in the State of New York or otherwise.
5. Provisions Upon Default
 - a. The services to be performed by [the][a] successful Applicant pursuant to the terms of the Grant Contract entered into with the Department shall be at all times subject to the direction and control of the Department.
 - b. In the event that the Grantee, through any cause, fails to perform any of the terms, covenants, or promises of any Contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the Contract by giving notice in writing of the fact and date of such termination to the Grantee.
 - c. If, in the judgement of the Department, the Grantee acts in any way which is detrimental to, or does or is in any way likely to impair or prejudice, the interests of the State, the Department may terminate the Grant Contract awarded to this RFA. In such case, the Grantee may receive equitable compensation for such services as shall, in the judgement of the State Comptroller, have been satisfactorily performed by the Grantee up to the date of the termination of the Contract.

V. Completing the Application

A. Application Format/Content

Please refer to the Statewide Financial System: Vendor User Guide for assistance in applying for this procurement through the NYS Statewide Financial System. This guide is available by logging into the Statewide Financial System and searching under SFS Coach.

Please respond to each of the sections described below when completing the Statewide Financial System online Application. Your responses comprise your Application. Please respond to all items within each section. When responding to the statements and questions, be mindful that Application reviewers may not be familiar with your agency and its services. Your answers should be specific, succinct, and responsive to the statements and questions as outlined. Please be aware that the value assigned to each section described below indicates the relative weight that will be given to each section of your Application when scoring your Application.

It is each Applicant's responsibility to ensure that all materials included in its Application have been properly prepared and submitted. Applications must be submitted via the Statewide Financial System by the Application deadline date and time specified on the Cover Page of this RFA.

IMPORTANT: Any material added to a Bid Factor "Add Comments" box in SFS will not be reviewed as part of a submitted application. Applicants are instructed to use the "Response" box for narrative responses unless otherwise instructed within this RFA.

Please note there is a 2,000-character limit for each response.

Please provide any requested attachments as specified within this RFA. Applicants are instructed to upload one (1) attachment in response to any request for an attachment. If more than one (1) version of an attachment is uploaded, the final version uploaded will be the version considered for review.

See the Event Comments and Attachments link at the bottom of the Bid Event page in SFS for required attachments to be completed in response to corresponding bid factor questions, as well as informational only attachments.

Component A - Program Specific Questions (PSQ)/Bid Factors

Application Format - Component A – Topic-Specific Centers of Excellence

1. Program Abstract	Not Scored
2. Community and Agency Description	Maximum Score: 20 points
3. Health Equity	Maximum Score: 20 points
4. Program Design and Implementation	Maximum Score: 40 points
5. Budget and Justification	Maximum Score: <u>20 points</u>
6. Work Plan	Not Scored
	100 points

1. Program Abstract **Not Scored**

Applicants should provide a program abstract with the following information:

- 1a) Summarize your proposed program including all major activities your institution will undertake to meet the stated goals of this initiative.
- 1b) Describe how your program will address the goals and objectives of the specific CEI Center of Excellence for which you are applying.
- 1c) Describe how your program will work with the other Centers to achieve CEI's overall goal. What types of outcomes does your organization expect to achieve? How will success be measured?
- 1d) Applicants are instructed to complete and upload **Attachment 1: Statement of Assurances** in response to this Bid Factor question.
- 1e) Applicants are instructed to complete and upload **Attachment 6: Minority & Women-Owned Business Enterprise Forms** in response to this Bid Factor question.
- 1f) Applicants are instructed to complete and upload **Attachment 7: Vendor Responsibility Attestation** to this Bid Factor question.
- 1g) Applicants are instructed to complete and upload **Application Cover Page: Attachment 8** in response to this Bid Factor question.
- 1h) Applicant must list the name of the qualified Medical Director who will serve as Principal Investigator and who will dedicate 25% of their time to CEI in response to this Bid Factor question.

2. Community and Agency Description

Total 20 Points

- 2a) Describe why your organization is qualified to implement the proposed program model. Include both quantitative and qualitative evidence to address this question.
- 2b) Describe your understanding of the current clinical needs of the target audience, how these needs differ across the state, and how you anticipate these needs will change throughout the proposed contract.
- 2c) Describe your experience developing clinical education for healthcare providers in the specific topic(s) for which you are applying and detail your collaboration with statewide and regional professional organizations to sponsor and promote clinical education opportunities to address the specific topic(s).
- 2d) Describe your experience coordinating, processing, managing, and tracking Continuing Medical Education (CME) applications, and accrediting clinical courses for Continuing Education Credits for healthcare providers. Please provide a specific example of your program's experience with the above.
- 2e) Describe your awareness of the current clinical resources available to the target audience throughout New York State (NYS) and how you will leverage these programs to maximize benefit to New York State (NYS) healthcare providers without supplanting other resources.
- 2f) Provide your Agency Organizational Chart to show where your specific program fits within the agency and how it will support the Clinical Education Initiative (CEI) programmatic goals. The **Agency Organizational Chart** should be uploaded as **Attachment 9** in response to this Bid Factor question. The **Agency Organizational Chart** should be submitted as a .PDF document.
- 2g) Describe how the activities proposed in your application will be distinct from, and clearly in addition to, your institution's current intra and extramural clinical education activities.

3. Health Equity

20 points

- 3a) Describe your organization's commitment to health equity and racial justice and outline concrete steps that have been taken to advance health equity and racial justice in its operations.
- 3b) Describe key faculty or staff experience providing health care services to Black, Indigenous, and people of color, and outline their experience implementing elements of the New York State Department of Health AIDS Institute Health Equity Competencies for Health Care Providers in their work with patients.
- 3c) Describe benchmarks that will be established and steps that will be taken to ensure a diverse faculty that is representative of the communities most impacted by HIV, Sexually Transmitted Infections (STI), and Hepatitis C Virus (HCV) is in place to conduct Clinical Education Initiative (CEI) activities.
- 3d) Describe steps your organization will take to support staff and faculty in exploring and mitigating implicit and explicit bias.

3e) Describe specific teaching strategies your organization will use to center health equity and racial justice in the delivery of clinical education services.

3f) Describe concrete activities your program would take to promote and advance New York State Department of Health Equity Competencies for Clinical Providers when delivering clinical education.

4. Program Design and Implementation

Total 40 Points

4a) Describe activities the program will undertake to ensure Clinical Education Initiative (CEI) activities engage the intended audience of physicians, Doctors of Osteopathy (DOs), physician assistants, nurse practitioners, registered nurses, and other public health staff working in Sexual Health/ Sexually Transmitted Infections (STIs) clinics requiring training on Sexually Transmitted Infections (STIs).

4b) Describe the program's implementation plan for providing training on the specific topic(s) for which you are applying. Indicate how you would implement online training, tele-mentoring, and other innovative training activities.

4c) Describe how the program will address training the intended audience in rural areas and other areas where healthcare providers are limited.

4d) Describe how you will respond to clinical education consultations on the Clinical Education Initiative (CEI) line, including details of how you will ensure access to an expert clinician during the times and within the timeframes outlined in this Request for Applications for the Center of Excellence for which you are applying.

4e) Describe how you will address technical assistance needs and questions from health care organizations related to New York State Department of Health AIDS Institute Clinical Guidelines and Policies.

4f) Describe how you will work to overcome anticipated barriers to engage the target audience in clinical education activities and how you will develop regional representation to establish local networks across the state to respond to the needs of healthcare providers.

4g) Describe your experience with developing training needs assessment and how you will use the information to develop and improve trainings.

4h) Provide your plan for completing applications for continuing education credits, including the cost.

4i) Describe key community partnerships required for successful implementation of clinical education. Describe how your program plans to collaborate with other Clinical Education Initiative (CEI) Centers of Excellence, the New York State Department of Health AIDS Institute affiliated medical committees, professional medical and nursing educational organizations.

4j) Describe the process for developing the curriculum, how the curriculum will be implemented in a meaningful timeframe, how the curriculum aligns with NYS and federal clinical guidelines, and the goals of Clinical Education Initiative (CEI) for the Topic- Specific Center of Excellence (COE) for which you are applying.

- 4k) What would be your program's indicators for success? How will you track and measure the program indicators? Describe any potential corrective action for indicators falling below prescribed targets.
- 4l) Describe how you will use the various Clinical Education Initiative (CEI) social media platforms or other networking sites to expand the base of clinicians able to provide services in New York State (NYS). Please provide an example of how your organization uses social media to educate and disseminate clinical information to healthcare providers, how your organization determines the effectiveness of this dissemination, and how your program will establish and increase Clinical Education Initiative (CEI) statewide visibility and become a trusted source of clinical education. Provide a plan for implementation.
- 4m) Please describe how your program will work with the AIDS Institute's Office of Program Evaluation and Research to conduct process and outcome evaluation of the program, including small scale mixed method studies to evaluate the impact of clinical education on quality of clinical care and health outcomes.
- 4n) Describe how your proposed staffing plan meets the minimum requirements described in the program model? Provide a brief description of each position's roles and responsibilities, along with job qualifications, educational background, licensures, and experience required for each position. Include the plan for initial and ongoing staff training and support. If in-kind staff are included in the proposed program, they should be included in the staffing detail.
- 4o) Provide your **Staffing Plan: Attachment 10**. Include Curriculum Vitae (CV) for the Medical Director, and Curriculum Vitae (CV) or job description including required qualifications, for the Program Director, Program Coordinator, and 1-2 Curriculum Vitae (CV) for the Faculty Subject Matter Experts as one (1) pdf no larger than 20MB. **Attachment 10** should be uploaded in response to this Bid Factor Question. Please ensure that uploaded files are not "secure" or "password protected".
- 4p) Describe how you will develop and maintain an adequate panel of Faculty Subject Matter Experts in sufficient quantity to meet all program deliverables. Include in your description: activities to recruit faculty with demonstrated expertise working with injection drug users, men who have sex with men, individuals who have multiple sex partners, older adults, and others; activities to engage and recruit ethnically diverse faculty from beyond your institution that are located throughout the state; activities to engage and recruit faculty from the New York State Department of Health AIDS Institute Clinical Guidelines Committees; and how you will provide orientation and ongoing faculty development.

5. Budgets and Justifications

Total 20 Points

Complete and submit a budget following these instructions:

- 5a) Applicants are instructed to prepare an annual budget based on the maximum award as listed for the Center of Excellence for which they are applying. The budget for year one (1), **October 1, 2025 - September 30, 2026**, must be entered into the Statewide Financial System (SFS). Entering a budget for years two (2) – five (5) is not required. Refer to **SFS Expenditure Budget Instructions: Attachment 11**. All budget lines should be calculated as whole dollar amounts. All costs should be related to the proposed activities, as described in the application narrative and work plan, and should be justified in detail. All costs should be reasonable and cost-effective. Contracts established resulting from the Request for Applications will be cost reimbursable. Once the budget in SFS is completed, Applicants are

required to also enter the total grant funds being requested in the Unit Bid Price field at the bottom of the page. The total grant funds and Unit Bid Price must match in order for the application to submit successfully.

- 5b) For staff listed in the Personal services (Salary and Fringe) section of the budget, include a breakdown of the total salary needs for staff. Indicate how the positions relate to program implementation. Applicants are instructed to include a justification for each of the requested Full Time Equivalent (FTE) and for the fringe benefits requested.
- 5c) For each item listed under Non-Personal services, describe how it is necessary for program implementation. Non-Personal services include: Contractual, Travel, Equipment, Space/Property & Utilities, Operating Expenses, and Other costs.
- 5d) Funding requests must adhere to the following guidelines:
- An indirect cost rate of up to 15% of modified total direct costs can be requested. If your organization has a federally approved rate, contractors may request up to 20% of the federally approved rate. If your organization has a federally approved rate of less than 20%, the maximum indirect rate that can be requested is the approved federally approved rate.
 - **THIS FUNDING MAY ONLY BE USED TO EXPAND EXISTING ACTIVITIES OR CREATE NEW ACTIVITIES PURSUANT TO THIS RFA. THESE FUNDS MAY NOT BE USED TO SUPPLANT FUNDS FOR CURRENTLY EXISTING STAFF ACTIVITIES.** Agencies currently funded by the New York State Department of Health AIDS Institute to provide program services in accordance with the requirements of this Request for Applications must apply for continuation of funding.
 - Any ineligible budget items will be removed from the budget prior to contracting. The budget amount requested will be reduced to reflect the removal of the ineligible items. Ineligible items are those items determined by the Department to be inadequately justified in relation to the proposed Work Plan or not fundable under existing federal guidance (Uniform Guidance).
 - All costs must be related to the provision of the Clinical Education Initiative, as well as be consistent with the scope of services, reasonable and cost effective. Justification for each cost should be submitted in narrative form. For all existing staff, the Budget narrative must delineate how the percentage of time devoted to this initiative has been determined.
 - **Faculty Subject Area Experts:** Any agreements established with faculty should be made directly with the faculty and not an institution. Fees should not include any administrative costs and/or institutional fringe benefit rates.

6. Work Plan

Not Scored

- 6a) Applicants are instructed to complete and upload **Attachment 4A: Work Plan** found in the "Attachments Section" of the Statewide Financial System (SFS) online Application/Bid Event. **Attachment 4A** should be completed according to the instructions below and uploaded in response to this Bid Factor Question. Tasks and Performance Measures proposed by the Applicant in the Work Plan should align with the proposed Program Model, program activities, and the program objectives outlined in the Request for Applications.

Instructions: For the Statewide Financial System (SFS) **Work Plan Project Summary**, Applicants are instructed to insert the Project Summary as it is listed in the **Component A Work Plan: Attachment 4A**. Any additional Project Summary entered in this area **will not** be considered or scored by reviewers of your application.

For Objectives 1 – 6, Applicants are instructed to enter a Performance Measure for each Task listed. For Objective 7, the Tasks and Performance Measures have been established and are shown in Attachment 4A. Applicants **may not** enter additional Tasks or Performance Measures for Objective 7 in the **Work Plan: Attachment 4A**. Funded applicants will be held to the Objectives, Tasks, and Performance Measures as listed in **Attachment 4A: Component A Work Plan**.

Applicants will **not** enter any Performance Measures into the **SFS Work Plan Section** at the time of application but will complete and upload **Attachment 4A** to submit this information in response to Bid Factor Question 6a. If awarded a contract, Grantees will be instructed to insert Work Plan Performance Measures in the Statewide Financial System (SFS) Work Plan for Objectives 1 - 6.

When entering Performance Measures into the Work Plan, each Performance Measure should be no more than 2,000 characters. The Statewide Financial System has character limits but does not keep a running count of these; Applicants will be responsible for ensuring that they stay within these limits. **If these limits are exceeded, it will jeopardize the Application submission.**

Component B - Program Specific Questions (PSQ)/Bid Factors

Application Format - Component B – Resource Center of Excellence

1. Program Abstract	Not Scored
2. Community and Agency Description	Maximum Score: 20 points
3. Health Equity	Maximum Score: 20 points
4. Program Design and Implementation	Maximum Score: 40 points
5. Budget and Justification	Maximum Score: <u>20 points</u>
6. Work Plan	Not Scored
	100 points

1. Program Abstract Not Scored

Applicants should provide a program abstract with the following information:

- 1a) Summarize your proposed program including all major activities your institution will undertake to meet the stated goals of this initiative.
- 1b) Describe how your program will address the goals and objectives of the Clinical Education Initiative (CEI).
- 1c) Describe how your program will work with the other Centers to achieve the Clinical Education Initiative (CEI) overall goal.
- 1d) Describe your experience working with digital platforms and social media networking sites to increase outreach and expand your program’s social media presence.
- 1e) What types of outcomes does your organization expect to achieve? How will success be measured? Please provide an example of social media measures used to help guide program activities.

- 1f) Applicants are instructed to complete and upload **Attachment 1: Statement of Assurances** in response to this Bid Factor question.
- 1g) Applicants are instructed to complete and upload **Attachment 6: Minority & Women-Owned Business Enterprise Forms** in response to this Bid Factor question.
- 1h) Applicants are instructed to complete and upload **Attachment 7: Vendor Responsibility Attestation** to this Bid Factor question.
- 1i) Applicants are instructed to complete and upload **Application Cover Page: Attachment 8** in response to this Bid Factor question.

2. Community and Agency Description

Total 20 Points

- 2a) Describe your experience establishing a large-scale Learning Management System (LMS) and addressing technological issues associated with website management, security risks, online registration system, user portals, mobile apps, etc. Include your experience using innovative technology and other social networking platforms to help bridge the generational gap. Please provide specific examples.
- 2b) Describe your experience developing online clinical education curriculum for healthcare providers. Provide examples of online content used to engage healthcare providers and how you intend on marketing and promoting clinical education digitally and traditionally.
- 2c) Describe other programs and agencies in New York State (NYS) that are relevant to your proposed program model and describe how you will leverage these programs to maximize benefit to New York State (NYS) clinical healthcare providers without supplanting other resources?
- 2d) Describe any prior grants your organization has received from the New York State Department of Health AIDS Institute that are relevant to this proposal. Include the results, successes, and challenges of implementing programmatic activities of those grants. Include information about results, successes, and challenges related to fiscal management of the grant and timeliness of submission of fiscal vouchers. OR, if your organization has not received funding from the New York State Department of Health AIDS Institute, describe any similar types of programs that your organization has undertaken in the past, including the identified results, successes, and challenges of the program in achieving those results. Include your experience in submitting program reports that indicated the program's achievements and progress.
- 2e) Provide your Agency Organizational Chart to show where your specific program fits within the agency and how it will support the Clinical Education Initiative (CEI) programmatic goals. The **Agency Organizational Chart** should be uploaded as **Attachment 9** in response to this Bid Factor question. The **Agency Organizational Chart** should be submitted as a .PDF document.

3. Health Equity

20 points

- 3a) Describe your organization's commitment to health equity and racial justice and outline concrete steps that have been taken to advance health equity and racial justice in its operations.

- 3b) Describe key faculty or staff experience providing health care services to Black, Indigenous, and people of color, and outline their experience implementing elements of the New York State Department of Health (NYSDOH)/Health Equity Competencies for Health Care providers in their work with patients.
- 3c) Describe benchmarks that will be established and steps that will be taken to ensure a diverse faculty that is representative of the communities most impacted by HIV, Sexually Transmitted Infections (STI), and Hepatitis C Virus (HCV) (HIV/STI/HCV) is in place to conduct Clinical Education Initiative (CEI) activities.
- 3d) Describe steps your organization takes to support staff and faculty in exploring and mitigating implicit and explicit bias.
- 3e) Describe specific teaching strategies your organization will use to center health equity and racial justice in the delivery of clinical education services.
- 3f) Describe concrete activities your program would take to promote and advance New York State Department of Health, Health Equity Competencies for Clinical Providers when delivering clinical education.
- 3g) Describe a specific clinical education event that your organization has offered that you believe successfully addressed health equity and/or racial justice. Explain the strategies used, what data you have to demonstrate its success, and how you would build on this success in the provision of future activities.

4. Program Design and Implementation

Total 40 Points

- 4a) Describe how you will maintain and improve the Clinical Education Initiative (CEI) Learning Management System (LMS) and on-line portal, including maintaining the www.ceitraining.org URL, providing site hosting with adequate storage to host the full range of Clinical Education Initiative (CEI) on-line content, maintaining and improving the online registration system, MYCEI user accounts, conducting learner tests and quizzes, awarding and tracking Continuing Medical Education (CMEs) within the Learning Management System (LMS), preparing training attendance reports, reports of learner demographics, and other reports as directed by the New York State Department of Health AIDS Institute.
- 4b) Describe how your program will assess and address digital security risks (threat assessment, vulnerability assessment, and asset identification, etc.). Provide a security plan that addresses risk assessment, contingency planning, security, testing, and evaluation that meets or exceeds industry standards. Include the activities your organization would undertake to ensure site functionality and reliability.
- 4c) Describe how you will address technical assistance needs and questions related to the website and any online activities, cultural and linguistic appropriateness to improve user experience for all Clinical Education Initiative (CEI) users, including learners and other Clinical Education Initiative (CEI) Centers of Excellence.
- 4d) Describe how your organization will collaborate with statewide and regional professional organizations to sponsor and promote clinical education opportunities. Please provide an example of your program's experience with collaborating with other statewide and regional professional organizations.

- 4e) Describe how you will work with the other Centers of Excellence to conduct needs assessments of the program to identify training topics, formats, locations, and other aspects of clinical education needs.
- 4f) Describe how you will manage a clinical phone line that supports the other Centers, which provides responses to clinical calls from New York State (NYS) providers. Please provide details.
- 4g) Describe the process for developing online, interactive, asynchronous trainings, including: the software to be used; the number of on-line asynchronous trainings to be developed annually; how the program will access the needed Subject Matter Experts (SMEs); the level of interactivity of the training; and how the curriculum will be implemented in a meaningful timeframe.
- 4h) Provide a plan detailing how your program will market and promote the Clinical Education Initiative (CEI) program to healthcare providers. Explain how the program will share and implement the marketing and promotional plan with the other Centers of Excellence.
- 4i) Describe how your program will use the various social media platforms to expand the base of providers in New York State (NYS). Include in your description how the program will establish and increase the Clinical Education Initiative (CEI) statewide visibility and become a trusted source of clinical education. Please provide an example.
- 4j) Describe the Resource Center of Excellence staffing plan you would employ to administer this large scale statewide clinical education. How does your proposed staffing plan meet the minimum requirements described in the program model? Provide a brief description of each position's roles and responsibilities, along with job qualifications, educational background, licensures, and experience required for each position. Include the plan for initial and ongoing staff training and support. If using any subcontractors, include a description of the role of the subcontractor and their expertise. If in-kind staff are included in the proposed program, they should be included in the staffing detail.
- 4k) Provide your **Staffing Plan: Attachment 10**. Include Curriculum Vitae (CVs) for the Administrative Director, Program Director, Production Coordinator, and Social Media Coordinator as one (1) pdf no larger than 20MB. **Attachment 10** should be uploaded in response to this Bid Factor Question. Please ensure that uploaded files are not "secure" or "password protected".
- 4l) Describe how you will collaborate with the New York State Department of Health AIDS Institute, other Centers of Excellence, and the New York State Department of Health AIDS Institute Office of Program Evaluation and Research to evaluate Clinical Education Initiative (CEI) activities, including conducting small scale, mixed methods studies to evaluate the impact of clinical education provided on clinical care and specific clinical outcomes.
- 4m) Describe how the program will engage in ongoing quality improvement activities to maximize program operations, including conducting quarterly Plan-Do-Study-Act (PDSAs) as part of the evaluate Clinical Education Initiative (CEI) learning community.

5. Budgets and Justifications

Total 20 Points

Complete and submit a budget following these instructions:

- 5a) Applicants are instructed to prepare an annual budget based on the maximum award as listed for the Resource Center of Excellence (Component B). The budget for year one (1), **October 1, 2025 – September 30, 2026**, must be entered into the Statewide Financial System (SFS). Entering a budget for years two (2) – five (5) is not required. Refer to **SFS Expenditure Budget Instructions: Attachment 11**. All budget lines should be calculated as whole dollar amounts. All costs should be related to the proposed activities, as described in the application narrative and work plan, and should be justified in detail. All costs should be reasonable and cost-effective. Contracts established resulting from the Request for Applications will be cost reimbursable. Once the budget in SFS is completed, Applicants are required to also enter the total grant funds being requested in the Unit Bid Price field at the bottom of the page. The total grant funds and Unit Bid Price must match in order for the application to submit successfully.
- 5b) For staff listed in the Personal services (Salary and Fringe) section of the budget, include a breakdown of the total salary needs for staff. Indicate how the positions relate to program implementation. Applicants are instructed to include a justification for each of the requested Full Time Equivalent (FTE) and for the fringe benefits requested.
- 5c) For each item listed under Non-Personal services, describe how it is necessary for program implementation. Non-Personal services include: Contractual, Travel, Equipment, Space/Property & Utilities, Operating Expenses, and Other costs.
- 5d) Funding requests must adhere to the following guidelines:
- An indirect cost rate of up to 15% of modified total direct costs can be requested. If your organization has a federally approved rate, contractors may request up to 20% of the federally approved rate. If your organization has a federally approved rate of less than 20%, the maximum indirect rate that can be requested is the approved federally approved rate.
 - **THIS FUNDING MAY ONLY BE USED TO EXPAND EXISTING ACTIVITIES OR CREATE NEW ACTIVITIES PURSUANT TO THIS RFA. THESE FUNDS MAY NOT BE USED TO SUPPLANT FUNDS FOR CURRENTLY EXISTING STAFF ACTIVITIES.** Agencies currently funded by the New York State Department of Health AIDS Institute to provide program services in accordance with the requirements of this Request for Applications must apply for continuation of funding.
 - Any ineligible budget items will be removed from the budget prior to contracting. The budget amount requested will be reduced to reflect the removal of the ineligible items. Ineligible items are those items determined by the Department to be inadequately justified in relation to the proposed Work Plan or not fundable under existing federal guidance (Uniform Guidance).
 - All costs must be related to the provision of the Clinical Education Initiative, as well as be consistent with the scope of services, reasonable and cost effective. Justification for each cost should be submitted in narrative form. For all existing staff, the Budget narrative must delineate how the percentage of time devoted to this initiative has been determined.

6. Work Plan

Not Scored

- 6a) Applicants are instructed to complete and upload **Attachment 4B: Work Plan** found in the “Attachments Section” of the Statewide Financial System (SFS) online Application/Bid Event. **Attachment 4B** should be completed according to the instructions below and uploaded in response to this Bid Factor Question. Tasks and Performance Measures

proposed by the Applicant in the Work Plan should align with the proposed Program Model, program activities, and the program objectives outlined in the Request for Applications.

Instructions: For the Statewide Financial System (SFS) **Work Plan Project Summary**, Applicants are instructed to insert the Project Summary as it is listed in the **Work Plan – Attachment 4B**. Any additional Project Summary entered in this area **will not** be considered or scored by reviewers of your application.

For Objectives 1 – 4, applicants are instructed to enter a Performance Measure for each Task listed. For Objective 5, applicants will be held to the Tasks and Performance Measures as shown in Attachment 4B. Applicants **may not** enter additional Tasks or Performance Measures for Objective 5 in the **Work Plan: Attachment 4B**. Funded applicants will be held to the Objectives, Tasks, and Performance Measures as listed in **Attachment 4B: Component B Work Plan**.

Applicants will **not** enter any Performance Measures into the **SFS Work Plan Section** at the time of application but will complete and upload **Attachment 4B** to submit this information in response to Bid Factor Question 6a. If awarded a contract, Grantees will be instructed to insert Work Plan Performance Measures in the Statewide Financial System (SFS) Work Plan for Objectives 1 - 4.

When entering Performance Measures into the Work Plan, each Performance Measure should be no more than 2,000 characters. The Statewide Financial System has character limits but does not keep a running count of these; Applicants will be responsible for ensuring that they stay within these limits. **If these limits are exceeded, it will jeopardize the Application submission.**

B. Freedom of Information Law

All applications may be disclosed or used by the Department to the extent permitted by law. The Department may disclose an Application to any person for the purpose of assisting in evaluating the Application or for any other lawful purpose. All Applications will become State agency records, which will be available to the public in accordance with the Freedom of Information Law (FOIL). **Any portion of the Application that an Applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the general rule regarding the availability to the public of State agency records under the provisions of the Freedom of Information Law, must be clearly and specifically designated in the Application.** If the Department agrees with the Applicant's claim regarding the proprietary nature of any portion of an Application, the designated portion of the Application will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

C. Review & Award Process

An Application which meets the Minimum Eligibility Requirements will be reviewed and evaluated competitively by the Department, AIDS Institute. An Application that does not meet the minimum criteria (PASS/FAIL) will not be evaluated. An Application that does not provide all required information will be omitted from consideration.

In the event of a tie score, the applicant with the highest score for Section 3 – Health Equity – will receive the award. Should there still be a tie score, the applicant with the highest score in

Section 4. Program Design and Implementation will receive the award.

Applications with minor issues (for example, an Application missing information that is not essential to timely review and would not impact review scores) **may** be processed and evaluated, at the discretion of the State, but any issues with an Application which are identified by the Department **must** be resolved prior to time of award. An Application with unresolved issues at the time award recommendations are made will be determined to be non-responsive and will be disqualified.

If changes in funding amounts are necessary for this initiative or if additional funding becomes available, funding will be modified and awarded in the same manner as outlined in the award process described above.

New York State Department of Health AIDS Institute reserves the right to revise the award amounts as necessary due to changes in the availability of funding. If changes in funding amounts are necessary for this initiative, funding will be modified and awarded in the same manner as outlined in the award process described above. New York State Department of Health AIDS Institute reserves the right to review and rescind all subcontracts.

Applicants will be deemed to fall into one of three categories: 1) not approved, 2) not funded due to limited resources, and 3) approved and funded. Not funded Applications may be awarded should additional funds become available.

Once awards have been made pursuant to the terms of this RFA, an Applicant may request a debriefing of their own Application (whether their Application was funded or not funded). The debriefing will be limited only to the strengths and weaknesses of the Application submitted by the Applicant requesting a debriefing and will not include any discussion of ANY OTHER Applications. Requests for a debriefing must be received by the Department, AIDS Institute no later than fifteen (15) Calendar Days from date of the award or non-award announcement to the Applicant requesting a debriefing.

To request a debriefing, please send an email to Beatrice Aladin at CEIRFA@health.ny.gov. In the subject line, please write: *Debriefing Request - Clinical Education Initiative*.

Unsuccessful Applicants who wish to protest the award(s) resulting from this RFA on legal and/or factual grounds, should follow the protest procedures established by the Office of the State Comptroller (OSC). These procedures can be found on the OSC website at <http://www.osc.state.ny.us/agencies/guide/MyWebHelp>. (Section XI. 17.)

VI. Attachments

- Please note that ALL Attachments to this RFA are accessed under the “**Attachments Section**” of the Statewide Financial System online Application/Bid Event and are not included in the RFA document. In order to access the online Application/Bid Event and other required documents such as the Attachments, a prospective Applicant must be registered and logged into the NYS Statewide Financial System. Attachments that are requested to be uploaded as part of an Application/Bid Event response will be requested in individual corresponding Bid Factors (See Section V.A., “Program Specific Questions (PSQ)/Bid Factors”).
- **ALL applicants are instructed to verify each required attachment that has been uploaded to the application.** To check attachments, Applicants are instructed to click

"View" in the SFS application for each uploaded attachment to ensure that the attachment and all of its applicable information/data is viewable in its final format.

- **PDF Attachments** – due to system constraints, PDF attachments cannot be uploaded with annotations, editable fields, or JAVA/active controls. Please submit PDFs that are read- only.

Attachment 1: Statement of Assurances*

Attachment 2: Stipend Reimbursement Guidance – Component A only**

Attachment 3: Clinical Education Initiative Glossary**

Attachment 4A: Component A Work Plan**

Attachment 4B: Component B Work Plan**

Attachment 5: Health Equity Definitions and Examples**

Attachment 6: Minority & Women-Owned Business Enterprise Forms*

Attachment 7: Vendor Responsibility Attestation*

Attachment 8: Application Cover Page*

Attachment 9: Agency Organizational Chart*

Attachment 10: Staffing Plan*

Attachment 11: Statewide Financial System (SFS) Expenditure Budget Instructions**

Attachment 12: Attachment A-1: Agency-specific Terms and Conditions**

Attachment 13: Attachment A-2: Program-specific Terms and Conditions (HIV/AIDS Clause)**

Attachment 14: Attachment E-1: AIDS Institute Policy on Personal Health Related Information**

Attachment 15: Attachment M: Participation by Minority Group Members and Women with Respect to State Contracts: Requirements and Procedures**

*These attachments **must** be uploaded as part of your agency's Statewide Financial System (SFS) online Application in response to corresponding Bid Factor questions. Forms to be completed are located in the "**Attachments Section**" of the Statewide Financial System online Application/Bid Event.

These attachments do not need to be completed and are for Applicant information only. These Attachments may be accessed in the "Attachments Section**" of the Statewide Financial System online Application/Bid Event.